
To: Sodergren, Anne@DCA
Subject: RE: Expansion of remote processing to other pharmacy settings

From: Youhana Marc <youhanamarc@gmail.com>
Sent: Thursday, October 12, 2023 6:25 PM
To: Sodergren, Anne@DCA <Anne.Sodergren@dca.ca.gov>
Subject: Expansion of remote processing to other pharmacy settings

Dear Board Members of the Licensing Committee,

We are a group of specialty pharmacists that work for one of the big companies. With the recent AB 1557 signing permanently into law by Governor Gavin Newsom on 9/1/2023, We are requesting please that during the next remote processing discussion, that the committee also include other aspects of pharmacy, including Specialty Pharmacy.

Since the return to office, we have witnessed how this change has negatively affected not only my colleagues, but also the patients that we serve: The pharmacists who have had to quit have been replaced not by another CA-licensed pharmacist, but rather by out-of-state pharmacists who are able to work remotely.

Our concern would also be that more CA pharmacists would have an incentive to move out of state so that they can work remotely. This is also concerning especially for the up-and-coming new graduates from pharmacy schools. Increased occurrences of contracting Covid-19 and other illnesses, resulting in more callouts, being short-staffed, and consequently negatively impacting the delivery of optimal care of our patients. Working remotely can dramatically reduce the chances of these incidences.

Specialty Pharmacists (specifically Front End) duties include non-patient-facing, phone handling, data processing, and no medication handling. The three years of remotely processing have demonstrated the benefits primarily to our patients (e.g. faster turnaround time for emergency orders with the elimination of time spent commuting on-site to access the computer system).

Why the California board of pharmacy allow and trust out of state pharmacists and technicians who are not licensed or reside in California to remotely process California patients, while not allowing California licensed and trained pharmacists and technicians to do so. Is the California Board of pharmacy discriminating against its own pharmacists and technicians?.

There should not be any excuse of safeguards or concerns about patients' privacy for many reasons.

1. We have been working from home for 3 years without any HIPPA concerns or breaching issues. We use the same computer but in a different location, what is the difference?
2. All the other California State agencies who works also with patients' information work remotely with no problems, why then pharmacists are singled out.
3. The rest of the US states allow remote processing without any concerns, does this mean that the rest of the US are not respecting patients' HIPPA issues.

We love California for its progressive values and embracing technology for the better care of our patients, but by not approving remote processing for pharmacists especially specialty pharmacists, it seems that we are moving backwards not forward. The only people suffering in this process are the California licensed pharmacists and technicians and the

California patients, but the corporations are simply replacing our pharmacists with pharmacists from other states who are not paying taxes here but serving the profits of corporations because they are getting paid less.

We are convinced that with the ever-changing technology of telehealth and AI, it is inevitable that new legislation will be written to reflect those changes. We would like to request that the Specialty Pharmacy to be allowed to do remote processing like health care facilities since both do the same job and allow one and not the other doesn't make sense or seems fair.

Thanks ,