

April 27, 2021

Mr. Greg Lippe  
President, California Board of Pharmacy  
2720 Gateway Oaks Dr, Ste 100  
Sacramento, CA 9583

**Subject: SB 362 (Newman) – Community pharmacies: quotas**

Dear Mr. Lippe:

The California Pharmacists Association (CPhA), and the United Food and Commercial Workers Western States Council (UFCW) are pleased to co-sponsor SB 362 (Newman) and respectfully request the Board of Pharmacy take a "Support" position. This bill will help protect patient safety by prohibiting the use of arbitrary business quotas that interfere with the professional judgment of pharmacists.

The California Pharmacists Association (CPhA) was founded in 1869 and is the largest state association representing pharmacists. CPhA represents pharmacists, technicians and student pharmacists from all practice settings. These practice settings include community pharmacy (both independent owners and employees working in chain drug stores), hospitals & health-systems, and specialty practices such as compounding, managed care, and long term care. The United Food and Commercial Workers Western States Council (UFCW) represent 180,000 members which include several thousand pharmacist and pharmacy technician members.

Pharmacists who work for large corporate-owned chain pharmacies are routinely forced to meet corporate benchmarks based on business metrics, that create working conditions undermining their professional judgment and ability to provide quality care to their patients.

These benchmarks are akin to sales quotas. Examples of this include requiring pharmacists to:

- Enroll 40 percent of patients into automatic refill programs.
- Fill a certain number of prescriptions per hour.
- Vaccinate an arbitrary and specific number of patients in a week.

Pharmacists are one of the few licensed healthcare providers who can be directly employed by large corporations, primarily large chain pharmacies. Subsequently, these employee pharmacists often find themselves in the unique position of being forced to meet profit-driven, corporate-imposed performance quotas. Failing to meet these quotas result in various negative consequences, such as non-advancement, decreased hours, and even termination. These mandates have nothing to do with the practice of pharmacy and inhibit the professional and clinical judgement of pharmacists.

Pharmacists are healthcare providers who are often the first healthcare access point for patients. As such, they play a critical role in the delivery of care. Under current law, pharmacists help patients access a number of preventative health care services without physician intervention including immunizations, smoking cessation products, naloxone (opioid overdose reversal medication), travel medications and birth control and initiating and providing Pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP).

A recent survey of pharmacists working in the corporate-owned chain setting revealed the following information:

- Over 90 percent of respondents said they worked under the shadow of quotas with no relief from those quotas as they related to prescriptions and vaccines. For example, one pharmacist was required to fill between 240 to 300 prescriptions per work day, give 20 COVID-19 vaccines per day, give 10 shingles vaccines per day, and give over 1,000 flu shots per season.
- 85 percent of pharmacists surveyed indicated their “workload [was] too high.”

While the role of pharmacists has changed significantly over the years to reflect their advanced education and training, the business model of corporate-owned pharmacies increasingly focuses on profits and less on patient care.

Investigations have shown that corporate interference has resulted in patient harm. Pharmacists, physicians, and patient advocacy groups are becoming increasingly concerned about the corporate mandates being placed on pharmacists.

*“The American Psychiatric Association is particularly concerned about CVS, America’s eighth-largest company, which it says routinely ignores doctors’ explicit instructions to dispense limited amounts of medication to mental health patients. The pharmacy’s practice of providing three-month supplies may inadvertently lead more patients to attempt suicide by overdosing, the association said.” - Jan. 31, 2020 New York Times article*

SB 362 ensures that pharmacies have the necessary discretion to determine the sufficient time and care to fill each prescription safely and properly or provide the other critical services for which they are licensed. Moreover, the author and co-sponsors have committed to delete the bill’s provisions regarding pharmacy licensure suspension and revocation in favor of negotiating with the opposition and correlating penalties to those newly proposed in this Board’s sunset review legislation.

For these reasons, we urge you to take a “Support” position on SB 362. The public needs protection from employment pressures driven by quarterly earnings and not patient well-being.

Please don’t hesitate to contact us if you have any questions or need additional information.

Respectfully,



Danny Martinez  
Director of Regulatory Affairs and Policy Development  
California Pharmacists Association



Amber Baur  
Executive Director  
UFCW Western States Council