

Attachment 2

**Board staff-prepared summarized
comments with recommended
comment responses**

#	Section	Commenter	Comment	Staff Recommendations
1	General	Jared Sewall, BCPG, PharmD CA BOP # 73123	<p>Good Morning,</p> <p>I wanted to provide comment on the proposal above.</p> <p>As a practicing pharmacist of 11 years (where does the time go) and healthcare for over 15 years, I have seen the practice of Pharmacy change very rapidly.</p> <p>I am in support of the Board's decision and proposed text on Remote Processing, in particular the exclusions of direct "eyes on product" from being within scope of Remote Processing.</p> <p>I have worked at various hospital and healthcare systems that utilized Remote Processing, and this exclusion has always been present and an item staff (and patients) have expressed should be left in person.</p> <p>The remote processing of these non-excluded items with organizations utilizing Policies/Procedures has been paramount to the success of such programs. They allow greater flexibility and better patient care overall.</p> <p>Thank you, Jared Sewall, BCPG, PharmD CA BOP # 73123</p>	<p>Board staff thank the commenter for their comment in support of the regulation.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
2	General	David Pham	Hi BOP, Regarding current proposal on Remote Processing :	Board staff thank the commenter for their comment.

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			<p>1. The current text does not mention if pharmacy tech can or cannot assist with the remote pharmacist during remote processing. Can you please clarify this?</p> <p>a. I can imagine a scenario where a pharmacy tech can remotely log into the system to help type up e-orders from electronic e-order queue (select the right NDC, match prescription to pt profile in system, match directions, ect [sic]). After the work done by the pharmacy tech, it goes to the remote pharmacist who will verify the orders. Please check if this setup is authorized under the proposed remote processing.</p> <p>Regards, David Pham</p>	<p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action. Additionally, this comment was previously considered by the Board and responded to during the prior comment period. Board staff respectfully remind the commenter that the Board has determined remote work by pharmacy technicians exceeds the scope of this proposed regulation.</p>
3	General	Jeremy Siehnel PharmD	<p>Dear California Board of Pharmacy,</p> <p>Every day, California's pharmacists ensure safe, accurate, and timely care for our patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality</p>	

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			<p>Our profession is already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing.</p> <p>Remote processing prioritizes our employers' bottom lines over our patients. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, Jeremy Siehnel PharmD</p>	<p>Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
4	General	<p>Kristen Wright, PharmD, MHA, Director, Regulatory Operations CAPSULE</p>	<p>Hello,</p> <p>I would like to comment on this bill proposal to see if the Board could address whether technicians licensed in CA, supervised by a CA-licensed pharmacist, could process remotely.</p> <p>Thank you, Kristen</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action. Additionally, this comment was previously considered by the Board and responded to during the prior</p>

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5	General	Srideep Chatterjee Pharmacist II - PIC Kern Valley State Prison	<p>RE: Support for Proposed Section 1717.11 – Remote Processing of Prescriptions</p> <p>To the Members of the Board: I am writing to formally support the proposed addition of Section 1717.11 to Title 16 of the California Code of Regulations, concerning the remote processing of prescriptions. I strongly urge the Board to ensure this regulation explicitly encompasses all pharmacy facilities within the California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS).</p> <p>The pharmacies within the CDCR/CCHCS system play a vital role in protecting California consumers by ensuring the safe and timely delivery of medications to a unique and vulnerable patient population. Authorizing remote processing for these facilities is critical for the following reasons: Pandemic Preparedness & Continuity of Care: As evidenced by the COVID-19 pandemic, the ability to shift to remote verification is essential for maintaining</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed the comment and do not recommend any changes to the proposed text based on the comments received.</p> <p>Board staff note that several provisions in pharmacy law exempt California Department of Corrections and Rehabilitation (CDCR) due to the unique nature of pharmacy services provided in facilities operated by CDCR. Pharmacy law establishes distinct license types for facilities operated under CDCR, including for example, correctional</p>

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			<p>uninterrupted pharmacy services during public health emergencies. This flexibility prevents service destabilization when on-site staffing is compromised.</p> <p>Operational Efficiency: Remote processing allows California-licensed pharmacists to perform nondiscretionary tasks and medication order reviews from secure, remote locations, maximizing the efficiency of our statewide pharmacy network.</p> <p>Staff Retention & Work-Life Balance: Providing staff with the flexibility of remote work is a modern necessity that improves employee safety and morale. In a competitive healthcare landscape, this flexibility is a key factor in attracting and rewarding the quality staff needed to meet our constitutional mandate for adequate medical care.</p> <p>Public Safety & Security: The proposed regulation includes robust requirements for secure electronic access, confidentiality (HIPAA), and Board inspection of remote workspaces. These safeguards ensure that remote processing in a correctional environment would maintain the highest standards of security and consumer protection.</p> <p>Expanding these provisions to include all CDCR/CCHCS facilities will bolster California's healthcare infrastructure and ensure our pharmacists can continue their essential work with the flexibility required in today's professional environment.</p> <p>Thank you for your consideration of these comments. Sincerely, Respectfully,</p>	<p>pharmacies and correctional clinics that may operate under different provisions of pharmacy law. For example, CCR section 1717.5 (c) related to automatic refills was requested by CDCR and approved by the Board to allow for an exemption. Similarly, an exemption is also found in CCR section 1708.5, which was amended to include the exemption of a licensed correctional pharmacy dispensing only to CDCR patients.</p>

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			<p>Srideep Chatterjee Pharmacist II - PIC Kern Valley State Prison 3000 West Cecil Ave.</p> <p>[Note: A copy of the Board's modified text was provided with the comment highlighting in red "Modified Regulation Text" and "(c) This section does not apply to facilities of the California Department of Corrections and Rehabilitation."]</p>	
6	(c)	Brant Rego Pharmacist 51434	<p>Dear Debbie Darmoth [sic], Could you please provide the rationale for the addition of Section C (highlighted) in the attached document? While we have detailed justifications for all other proposed changes, we lack documentation regarding Section C. It appears the California Department of Corrections and Rehabilitation (CDCR) requested this addition without providing a supporting reason for us to review so we may comment.</p> <p>[Note: A copy of the Board's modified text was provided with the comment highlighting in yellow "(c) This section does not apply to facilities of the California Department of Corrections and Rehabilitation."]</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed the comment and do not recommend any changes to the proposed text based on the comments received.</p> <p>Board staff note that several provisions in pharmacy law exempt California Department of Corrections and Rehabilitation (CDCR) due to the unique nature of pharmacy services provided in facilities operated by CDCR. Pharmacy law establishes distinct license types for facilities operated</p>

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				<p>under CDCR, including for example, correctional pharmacies and correctional clinics that may operate under different provisions of pharmacy law. For example, CCR section 1717.5 (c) related to automatic refills was requested by CDCR and approved by the Board to allow for an exemption. Similarly, an exemption is also found in CCR section 1708.5, which was amended to include the exemption of a licensed correctional pharmacy dispensing only to CDCR patients.</p>
7	General	Dustin Stankiewicz	<p>Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, us patients are put at risk.</p> <p>Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections,</p>

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			<p>Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, Dustin Stankiewicz Ps. I also work 40-60hrs a week and take meds, using my pharmacist in my store to access my meds at work makes it easier. Please no remote pharmacist please. I already do remote with my dr and I see the services decline each visit and gets harder and harder to see him in person when they just use online.</p>	<p>support, or recommendations directed towards the modified text in this specific regulatory action.</p>
8	General	Nicolas G. Tomsio	<p>Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, us patients are put at risk. Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing. Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services. Sincerely, Nicolas G. Tomsio</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>

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9	(a)(2)	Shelly Larson, Pharm D. CalVet Veterans Home of California Yountville Pharmacy Services Manager	<p>I would like to make a comment on the proposed modification to text in 1717.11, Attn. to Debbie Damoth</p> <p>The language in this text implies and infers that the pharmacist is employed or contracted with the facility, but it doesn't expressly state that this is a requirement.</p> <p>There is this language: ". The pharmacy and pharmacist enter a written agreement under which the pharmacist agrees to perform remote processing and designates a specific location or locations to perform such processing. (3) The written agreement (including modifications) required in (a)(2) of this section shall be maintained, for at least three years following the pharmacist's employment,"</p> <p>But again, these highlighted areas infer employment it doesn't expressly state it is a requirement.</p> <p>In our organization I have encountered this situation, where our HQ has attempted to hire a pharmacist to work at one of our SNF's as a consultant and allow them access to our pharmacy database to do remote data entry from the SNF, which is not part of our licensed facility and has no PIC oversight. The pharmacist is an employee of the SNF, not the pharmacy.</p>	<p>Board staff thank the commenter for their comment.</p> <p>The Board staff have considered the comment and do not recommend any changes to the text in response thereto. The language of subsections (a)(2) and (a)(3) sufficiently establish that the written agreement must be between a pharmacy and pharmacist, and the retention requirement of such agreement is based on the pharmacist's employment.</p>

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			<p>I have prohibited this, but it has been a fight. I feel there needs to be language that specifically states the pharmacist must be employed by the licensed facility.</p> <p>This could be included in (a) as follows: (a) A pharmacist located and licensed in the state may perform remote processing of prescriptions, from a location outside of a licensed facility that employs the pharmacist, under the following conditions:</p> <p>Thank you, Shelly Larson, Pharm D. Pharmacy Services Manager</p>	
10	General	Mario Arzate	<p>Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, us patients are put at risk.</p> <p>Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing.</p> <p>Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>

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			Sincerely, [Mario Arzate] Sent from my iPhone	
11-1	General	Isaac O.	<p>Subject: Comment on Proposed Regulation 16 CCR §1717.11 – Remote Processing To the California State Board of Pharmacy, I am writing to provide comments on the proposed addition of Section 1717.11 regarding remote processing.</p> <p>While I am discouraged by remote processing due to concerns around privacy, reduced patient access, and potential erosion of trust in the healthcare system, I would like to provide several specific comments for consideration regarding patient safety, accountability, and operational transparency:</p> <p>1. Lack of Real-Time Communication Requirements The proposed regulation does not explicitly require that a pharmacist performing remote processing be readily and directly accessible to the pharmacy staff. Remote pharmacists may be performing critical clinical functions, including drug utilization review and approval of prescriptions, yet there is no requirement ensuring that an on-site pharmacist can immediately communicate with them.</p> <p>In practice, this creates a significant patient safety risk. Clinical decisions often require context that may only be available at the pharmacy level, and the inability to promptly clarify or challenge a decision could result in inappropriate dispensing, particularly in situations</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>

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			<p>involving controlled substances or complex drug therapy issues. Examples include:</p> <ul style="list-style-type: none"> - A remote pharmacist approving a controlled substance refill without awareness of early refill patterns, or other concerns known to the pharmacy - Overriding or not fully addressing significant drug utilization review alerts (e.g., drug interactions, duplicate therapies) without full clinical context - Entering or verifying prescriptions with incorrect directions, quantity, or drug selection, where clarification is needed before dispensing <p>In each of these situations, the on-site pharmacist must have the ability to immediately contact the remote pharmacist to clarify, intervene, or prevent a potential error from reaching the patient. The regulation should require a real-time communication mechanism (e.g., direct phone line AND secure messaging system) and establish expectations for timely responsiveness.</p>	
11-2	(a)(6)	Isaac O.	<p>2. Lack of Transparency of Remote Pharmacist Activity The proposal requires recordkeeping of remote pharmacist activities but does not ensure realtime visibility of who is actively performing remote processing. Pharmacy staff may be unaware that a remote pharmacist is reviewing or approving prescriptions at a given time. For purposes of accountability, workflow coordination, and patient safety, pharmacies should</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed the comment and do not recommend any changes to the proposed text based on the comments received.</p>

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			<p>be required to maintain and display a real-time log or dashboard identifying all pharmacists currently engaged in remote processing and their activities. This would align operational awareness with the shared responsibility for patient care. Giving the Pharmacist on site a way to know that somebody currently has remote access to the pharmacy.</p>	<p>Board staff reviewed the comments and interpret this comment to be applicable to modified text being added to subsection(a)(6). The addition of text added to subsection (a)(6) clarifies the record must meet the same standards for records identified in Business and Professions Code sections 4081 and 4105. The modified text does not address real time visibility of pharmacist activities. The regulation sets forth the minimum requirements for remote processing of prescriptions. Nothing in the proposed regulation prohibits the use of a real time visibility methods. Board staff do not recommend any changes to the proposed text based on the comments received.</p>
11-3	General	Isaac O.	<p>3. Accountability and Identification of Remote Pharmacists Current California pharmacy practice emphasizes clear identification of pharmacists working</p>	<p>Board staff thank the commenter for their comment.</p>

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			<p>in a licensed pharmacy, including public posting of licenses. The proposed regulation does not address how remote pharmacists will be identified to either staff or patients.</p> <p>There should be a requirement for accessible identification of all pharmacists (on-site and remote) involved in prescription processing. This would improve transparency and maintain consistency with existing expectations around professional accountability.</p>	<p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
11-4	General	Isaac O.	<p>4. Pharmacy-Level Control Over Remote Processing</p> <p>The proposed regulation appropriately places responsibility on the pharmacist-in-charge or staff to define allowable remote duties through policies and procedures. However, it does not address whether a pharmacy has the ability to dynamically enable or disable remote processing based on real-time conditions. Allowing the pharmacy to suspend remote processing when necessary (e.g., workflow concerns, safety issues, or system limitations) would provide an additional safeguard and reinforce the authority of the pharmacist-in-charge and staff in maintaining safe operations.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>

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11-5	General	Isaac O.	<p>5. Impact on Staffing and Practical Authority of the Pharmacist-in-Charge</p> <p>While the Board of Pharmacy has taken steps to empower the pharmacist-in-charge (PIC) with authority over staffing decisions, in practice, this authority has not meaningfully changed operations. PICs often still require approval from corporate management or supervisors, limiting their ability to make real-time staffing adjustments based on patient care needs. Especially as pharmacies close and more workload falls on fewer pharmacists.</p> <p>The introduction of remote processing may further exacerbate this issue. Reduced floater by shifting pharmacist workload off-site, there is a risk that fewer pharmacists and staff will be physically present in the pharmacy. This could reduce patient access to direct pharmacist interaction, increase workload on remaining on-site staff, and create additional safety risks.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
11-6	General	Isaac O.	<p>6. Need for Direct Engagement with Practicing Pharmacists</p> <p>The Board should take a more proactive approach in soliciting feedback from pharmacists who are actively practicing, including staff pharmacists, floaters, and pharmacists-in-charge.</p> <p>Relying primarily on general announcements or passive outreach through email will not capture the perspectives of those most directly impacted by these regulations.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment</p>

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			<p>To ensure that policies are informed by real-world practice, the Board should directly engage pharmacists through targeted outreach. Input from those working in day-to-day pharmacy operations is critical to identifying safety risks, workflow challenges, and unintended consequences that may not be apparent at a policy level.</p> <p>---</p> <p>Thank you for your consideration. Sincerely, Isaac O</p>	<p>period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p> <p>Board staff respectfully direct the commenter to the Initial Statement of Reasons for the regulation demonstrating the Board's full compliance with the Administrative Procedure Act.</p>
12		Andrew Sarkis pharmacist I kern valley state prison	<p>RE: Support for Proposed Section 1717.11 – Remote Processing of Prescriptions</p> <p><i>To the Members of the Board:</i> <i>I am writing to formally support the proposed addition of Section 1717.11 to Title 16 of the California Code of Regulations, concerning the remote processing of prescriptions.</i> <i>I strongly urge the Board to ensure this regulation explicitly encompasses all pharmacy facilities within the California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS).</i> <i>The pharmacies within the CDCR/CCHCS system play a vital role in protecting California consumers by ensuring the safe and timely delivery of medications to a unique</i></p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed the comment and do not recommend any changes to the proposed text based on the comments received.</p> <p>Board staff note that several provisions in pharmacy law exempt California Department of Corrections and Rehabilitation (CDCR)</p>

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			<p>and vulnerable patient population. Authorizing remote processing for these facilities is critical for the following reasons:</p> <p>Pandemic Preparedness & Continuity of Care: As evidenced by the COVID-19 pandemic, the ability to shift to remote verification is essential for maintaining uninterrupted pharmacy services during public health emergencies. This flexibility prevents service destabilization when on-site staffing is compromised.</p> <p>Operational Efficiency: Remote processing allows California-licensed pharmacists to perform nondiscretionary tasks and medication order reviews from secure, remote locations, maximizing the efficiency of our statewide pharmacy network.</p> <p>Staff Retention & Work-Life Balance: Providing staff with the flexibility of remote work is a modern necessity that improves employee safety and morale. In a competitive healthcare landscape, this flexibility is a key factor in attracting and rewarding the quality staff needed to meet our constitutional mandate for adequate medical care.</p> <p>Public Safety & Security: The proposed regulation includes robust requirements for secure electronic access, confidentiality (HIPAA), and Board inspection of remote workspaces. These safeguards ensure that remote processing in a correctional environment would maintain the highest standards of security and consumer protection.</p> <p>Expanding these provisions to include all CDCR/CCHCS facilities will bolster California's healthcare infrastructure and ensure our pharmacists can continue their essential</p>	<p>due to the unique nature of pharmacy services provided in facilities operated by CDCR. Pharmacy law establishes distinct license types for facilities operated under CDCR, including for example, correctional pharmacies and correctional clinics that may operate under different provisions of pharmacy law. For example, CCR section 1717.5 (c) related to automatic refills was requested by CDCR and approved by the Board to allow for an exemption. Similarly, an exemption is also found in CCR section 1708.5, which was amended to include the exemption of a licensed correctional pharmacy dispensing only to CDCR patients.</p>

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			<p>work with the flexibility required in today's professional environment.</p> <p>Thank you for your consideration of these comments.</p> <p>Sincerely, andrew sarkis pharmacist I kern valley state prison 661-721-6300 ext. 5819 andrew.sarkis@cdcr.ca.gov</p> <p>[Note: A copy of the Board's modified text was provided with the comment highlighting in red "Modified Regulation Text" and "(c) This section does not apply to facilities of the California Department of Corrections and Rehabilitation."]</p>	
13	General	Vineet Gupta, Pharmacist I Kern Valley State Prison	<p>RE: Support for Proposed Section 1717.11 – Remote Processing of Prescriptions</p> <p><i>To the Members of the Board:</i></p> <p><i>I am writing to formally support the proposed addition of Section 1717.11 to Title 16 of the California Code of Regulations, concerning the remote processing of prescriptions.</i></p> <p><i>I strongly urge the Board to ensure this regulation explicitly encompasses all pharmacy facilities within the California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS).</i></p> <p><i>The pharmacies within the CDCR/CCHCS system play a vital role in protecting California consumers by ensuring the safe and timely delivery of medications to a unique</i></p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed the comment and do not recommend any changes to the proposed text based on the comments received.</p> <p>Board staff note that several provisions in pharmacy law exempt California Department of Corrections and Rehabilitation (CDCR)</p>

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14	General	Robert Yang, PharmD Pharmacist I Kern Valley State Prison	<p>RE: Support for Proposed Section 1717.11 – Remote Processing of Prescriptions</p> <p><i>To the Members of the Board:</i></p> <p><i>I am writing to formally support the proposed addition of Section 1717.11 to Title 16 of the California Code of Regulations, concerning the remote processing of prescriptions.</i></p> <p><i>I strongly urge the Board to ensure this regulation explicitly encompasses all pharmacy facilities within the California Department of Corrections and Rehabilitation (CDCR) and California Correctional Health Care Services (CCHCS).</i></p> <p><i>The pharmacies within the CDCR/CCHCS system play a vital role in protecting California consumers by ensuring the safe and timely delivery of medications to a unique and vulnerable patient population. Authorizing remote processing for these facilities is critical for the following reasons:</i></p> <p>Pandemic Preparedness & Continuity of Care: <i>As evidenced by the COVID-19 pandemic, the ability to shift to remote verification is essential for maintaining uninterrupted pharmacy services during public health emergencies. This flexibility prevents service destabilization when on-site staffing is compromised.</i></p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed the comment and do not recommend any changes to the proposed text based on the comments received.</p> <p>Board staff note that several provisions in pharmacy law exempt California Department of Corrections and Rehabilitation (CDCR) due to the unique nature of pharmacy services provided in facilities operated by CDCR. Pharmacy law establishes distinct license types for facilities operated under CDCR, including for example, correctional pharmacies and correctional</p>

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15	General	Gianna Fletcher	<p>Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, us patients are put at risk. Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing. Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services. Warmly, Gianna Fletcher</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
16	General	Saba Waheed	<p>Dear California Board of Pharmacy, I am concerned about moving prescription processing offsite. I have a relationship with my pharmacist and rely on them to ensure safe, accurate, and timely care for patients. The focus should be to ensure safe conditions and adequate staffing. Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing. Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or</p>

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17	General	Amber Parrish(Baur) Executive Director UFCW Western States Council	<p>UFCW Western States Council represents pharmacists, pharmacy technicians and pharmacy staff throughout California. Every day, California's pharmacists, our UFCW members, ensure safe, accurate, and timely care for pharmacy patients.</p> <p>But pharmacists are already stretched to the limit. They manage long lines and nonstop phone calls and ensure prescriptions are filled accurately and on time. Even with growing demands, pharmacists continue to put patient care first. But they're doing so without the staff that is needed to provide safe, high-quality care. Patients are therefore at risk. The solution to these critical staffing shortages is strengthening pharmacist staffing, not remote processing. Remote processing prioritizes our employers' bottom lines over patients. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, Executive Director</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
18	General	Todd Shinohara, PharmD Pharmacy Services Manager	<p>Does this change in regulation include/apply to Pharmacy Technicians? at https://pharmacy.ca.gov/laws_regs/pending_regs.shtml</p>	

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		Policy and Compliance Executive Division CalVet		Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action. Additionally, this comment was previously considered by the Board and responded to during the prior comment period. Board staff respectfully remind the commenter that the Board has determined remote work by pharmacy technicians exceeds the scope of this proposed regulation.
19	General	Tracy Carson	Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, us patients are put at risk. Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing.	Board staff thank the commenter for their comment. Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment

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			<p>Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, Tracy Cason Sent from my iPhone</p>	<p>period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
20	General	Cipra Nemeth	<p>Dear California Board of Pharmacy,</p> <p>Every day, California's pharmacists ensure safe, accurate, and timely care for patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, us patients are put at risk. Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing.</p> <p>Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services. In many places the pharmacist is the first line of healthcare for the community who trust them to stay safe and healthy.</p> <p>Sincerely, Cipra Nemeth</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>

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21	General	Shiva Kumar	<p>Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, us patients are put at risk. Pharmacists are already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing. Remote processing prioritizes the employers' bottom lines over patients' health and safety. Patients deserve access to pharmacists for phone calls, counseling, and clinical services. Sincerely, Shiva Kumar</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
22	General	David Salazar, PharmD	<p>Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for our patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, our patients are put at risk. Our profession is already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing. Remote processing prioritizes our employers' bottom lines over our patients. Patients</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed</p>

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			<p>deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, David Salazar, PharmD Sent from my iPhone</p>	<p>towards the modified text in this specific regulatory action.</p>
23	General	Janet M	<p>Dear California Board of Pharmacy,</p> <p>Every day, California's pharmacists ensure safe, accurate, and timely care for our patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, our patients are put at risk.</p> <p>Our profession is already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing.</p> <p>Remote processing prioritizes our employers' bottom lines over our patients. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, Janet M Sent from my iPhone</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
24	General	Euphemia Anyaeche	<p>Dear California Board of Pharmacy,</p> <p>Every day, California's pharmacists ensure safe, accurate, and timely care for our patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, our patients are put at risk.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this</p>

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			<p>Our profession is already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing.</p> <p>Remote processing prioritizes our employers' bottom lines over our patients. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, Euphemia Anyaeché</p>	<p>comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
25	(c)	<p>Brant Rego R.Ph. Pharmacist California Correctional Health Care Services License #51434</p>	<p>Here's your final version with a sharp executive summary added—this is exactly how attorneys structure high-impact regulatory comments so Board members can grasp your position in 30 seconds before reading the full argument.</p> <p>TO: California Board of Pharmacy % Debbie Damoth Re: Opposition to Proposed §1717.11(c) – CDCR/CCHCS Exemption</p> <p>Executive Summary The proposed addition of §1717.11(c), excluding CDCR/CCHCS facilities from remote processing, is unsupported, inconsistent, and legally vulnerable. The justification provided relies on standard pharmacist duties that exist in all pharmacy settings, not unique correctional risks. The regulation already prohibits the very functions cited as concerns (e.g., dispensing and final verification).</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed this comment and do not recommend a change based on the comment. On March 18, 2026 the Board agreed and voted to accept the comment requesting to exempt California Department of Corrections and Rehabilitation (CDCR) from Beth C. Spiegel, Pharm.D., J.D. Pharmacy Services Manager – Regulatory Compliance Officer California Correctional Health Care Services to add the</p>

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			<p>The Board's own findings confirm that remote processing was successfully and safely implemented during COVID-19, including in institutional settings.</p> <p>The exemption creates an arbitrary distinction between similarly regulated pharmacies without evidence. As drafted, subsection (c) fails the requirements of the Administrative Procedure Act (APA) and exposes the regulation to a credible legal challenge. For these reasons, subsection §1717.11(c) should be removed in its entirety.</p> <p>Dear Members of the Board, I respectfully submit this comment in opposition to the addition of subsection §1717.11(c) to the proposed remote processing regulation, which would exclude facilities of the California Department of Corrections and Rehabilitation (CDCR) from participation.</p> <p>The proposed exemption is unsupported by the rulemaking record, inconsistent with the Board's stated purpose, and legally vulnerable under the Administrative Procedure Act (APA).</p> <p>1. The CDCR Exemption Is Not Based on Unique Practice Conditions</p> <p>The justification provided by CCHCS/CDCR relies on pharmacist responsibilities such as: Preparing and dispensing medications Managing controlled substances Maintaining inventory and recordkeeping Conducting inspections and quality assurance</p>	<p>exemption of the section for CDCR including California Correctional Health Care Services (CCHCS).</p> <p>The rationale for the request from Dr. Spiegel and the Board agreed was that staff pharmacists within CDCR and CCHCS are responsible for performing the order verification function covered by §1717.11. Dr. Spiegel noted the pharmacists are also responsible for preparing and dispensing medications, ensuring proper handling and record keeping of drugs, dangerous devices, and dispensing and management of DEA controlled substances in accordance with federal and state code and regulations. Essential functions for pharmacists at CDCR and CCHCS include final product check on medications dispensed to patients, and clinics, maintaining inventory</p>

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			<p>Performing final product verification These responsibilities are not unique to correctional pharmacy practice. They are standard across: Hospital pharmacies Health systems Retail and institutional settings If these duties justify exclusion, then logically all pharmacy settings would require exclusion, which directly contradicts the purpose of §1717.11.</p> <p>2. The Exemption Conflicts with the Board’s Own Findings The Board's Initial Statement of Reasons acknowledges that: Remote processing was successfully implemented during COVID-19 It ensured continuity of care It supported safe and effective pharmacy operations These findings were not limited to any single practice setting and demonstrate that remote processing can be implemented safely under appropriate safeguards. There is no evidence in the rulemaking record demonstrating that CDCR facilities are unable to meet these same standards.</p> <p>3. The Regulation Already Addresses CDCR’s Concerns The proposed regulation explicitly excludes: Final product verification Supervision of personnel Dispensing of drugs These limitations directly address the concerns raised by CDCR regarding: Physical handling of medications</p>	<p>management and quality assurance systems, inspections of Automated Drug Dispensing Cabinets and Licensed Correctional Clinics and ensuring adequate and effective control of drugs. Dr. Spiegel added all staff involved in the verification of new orders and the final product verification are located within the physical pharmacy operations. The ability to ensure patient care across all facets of physical dangerous drug furnishing, prescription dispensing, DEA controlled substances dispensing and oversight requires the physical presence of staff onsite.</p> <p>As stated in the ISOR “the Board determined it best to establish remote processing requirements through regulations that would allow pharmacies and PICs to determine the specific duties that could be performed</p>

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			<p>Controlled substance dispensing On-site operational oversight Because these functions must remain onsite by definition, the justification for excluding CDCR is duplicative and legally insufficient.</p> <p>4. The Exemption Undermines Workforce Stability and Patient Care</p> <p>The Board received substantial public comment supporting remote processing as a tool to:</p> <ul style="list-style-type: none"> Improve staffing flexibility Reduce pharmacist burnout Enhance timely access to medications <p>Excluding CDCR:</p> <ul style="list-style-type: none"> Creates an unjustified two-tier regulatory framework Exacerbates recruitment and retention challenges in correctional healthcare Limits access to modern pharmacy practice in a high-need patient population <p>5. The CDCR Exemption Is Legally Vulnerable Under the Administrative Procedure Act</p> <p>Under California law, a regulation is invalid unless it is:</p> <p>Necessary Reasonably related to the purpose of the statute Supported by substantial evidence</p> <p>(Gov. Code §§ 11349(a), 11350(b)(1); see also <i>California Hotel & Motel Assn. v. Industrial Welfare Com.</i>) Subsection §1717.11(c) fails each of these requirements.</p> <p>A. Not Necessary</p> <p><i>The APA requires that regulations be “reasonably necessary.” Courts have made clear that</i></p>	<p>through remote processing, based on the structure and needs of the pharmacy.” In this situation, the correctional pharmacies are operated under the purview of CDCR, who has requested an exemption from the proposed regulations.</p> <p>Board staff respectfully direct the commenter to the Initial Statement of Reasons for the regulation demonstrating the Board’s full compliance with the Administrative Procedure Act.</p>

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			<p>necessity must be supported by evidence—not general assumptions. <i>(Western States Petroleum Assn. v. Board of Equalization)</i> Here, the CDCR exemption is based solely on general pharmacist duties that: Exist in all pharmacy settings, and Are already excluded from remote processing under subsection (b) No evidence demonstrates that CDCR presents unique risks requiring exclusion.</p> <p>B. Not Reasonably Related to the Regulation’s Purpose A regulation must bear a reasonable relationship to its objective. <i>(Yamaha Corp. of America v. State Bd. of Equalization)</i> The purpose of §1717.11 is to expand safe remote processing and improve care delivery Excluding CDCR: Undermines workforce flexibility Restricts operational improvements Contradicts the regulation’s intent Courts have invalidated agency actions that conflict with their stated purpose. <i>(See Armistead v. State Personnel Bd.*)</i></p> <p>C. Not Supported by Substantial Evidence The APA requires substantial evidence in the rulemaking record. <i>(Morning Star Co. v. State Bd. of Equalization)</i> The only support for subsection (c) is a comment letter asserting operational concerns However:</p>	

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			<p>No data or risk analysis is provided No evidence shows remote processing is unsafe in correctional settings The Board's own findings confirm successful implementation during COVID-19 This does not meet the substantial evidence standard.</p> <p>D. Arbitrary and Capricious Distinction Regulations are invalid where similarly situated entities are treated differently without justification. <i>(American Coatings Assn. v. South Coast Air Quality Management Dist.)</i> CDCR pharmacies: Operate under the same licensure framework Are subject to the same Board oversight Perform the same core pharmacist functions Yet they are uniquely excluded without evidence-based justification. This constitutes arbitrary and capricious rulemaking.</p> <p>E. Improper Reliance on Policy Preference Rather Than Evidence Courts have emphasized that agency decisions must be grounded in evidence, not speculation: “An agency’s action must be supported by evidence in the record and may not be based on unsubstantiated assumptions.” <i>(Western States Petroleum Assn., supra)</i> The CDCR exemption reflects a policy preference—not an evidence-based necessity.</p> <p>6. CDCR Successfully Utilized Remote Processing in Practice During the COVID-19 public health emergency:</p>	

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			<p>Remote processing was widely implemented Pharmacists performed verification and clinical functions remotely Patient care continuity was maintained There is no evidence of increased risk, error, or regulatory failure in correctional settings during this period.</p> <p>Conclusion and Request For the reasons outlined above, I respectfully request that the Board:</p> <p>Remove subsection §1717.11(c) in its entirety The proposed exemption: Is unsupported by evidence Conflicts with the regulation's purpose Is duplicative of existing safeguards Creates arbitrary and legally vulnerable distinctions</p> <p>Adoption of subsection (c) in its current form would expose the regulation to a credible legal challenge under Government Code §11350. Removing this subsection will ensure the regulation remains: Legally defensible Operationally consistent Aligned with modern pharmacy practice and patient care needs Respectfully submitted, Brant Rego R.Ph. Pharmacist, California Correctional Health Care Services License #51434</p>	

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26	General	Alexander Chung, Pharm.D.	<p>Dear California Board of Pharmacy, Every day, California's pharmacists ensure safe, accurate, and timely care for our patients. All the while being tasked with filling more prescriptions, taking on more responsibilities, and facing more pressure. Without the staff that is needed to provide safe, high-quality care, our patients are put at risk. Our profession is already facing critical staffing shortages, and the solution is strengthening pharmacist staffing, not remote processing. Remote processing prioritizes our employers' bottom lines over our patients. Patients deserve access to pharmacists for phone calls, counseling, and clinical services.</p> <p>Sincerely, Alexander Chung Pharm.D.</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>
27-1	General	<p>Loriann De Martini, Pharm.D., MPH, BCGP Chief Executive Officer California Society of Health-System Pharmacists (CSHP)</p>	<p>Subject: Comments on Proposed Regulation §1717.11 – Remote Processing</p> <p>Dear President Oh and Members of the Board, On behalf of the California Society of Health System Pharmacists (CSHP), which represents pharmacists practicing in hospitals, health systems, clinics, and integrated care environments across the state, we appreciate the opportunity to provide feedback on the Board's proposed regulation §1717.11 regarding remote processing. CSHP supports the concept of remote processing and recognizes its potential to modernize</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or</p>

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			<p>pharmacy practice, improve patient care, and expand access to pharmacy services.</p> <p>While we share the Board's commitment to patient safety and responsible pharmacy practice, we have concerns about aspects of the regulation as currently written. We respectfully offer the following comments and recommendations for your consideration, with the goal of ensuring that the regulation is both practical and aligned with the realities of modern pharmacy operations.</p>	<p>recommendations directed towards the modified text in this specific regulatory action.</p>
27-2	(a)(2)	<p>Loriann De Martini, Pharm.D., MPH, BCGP Chief Executive Officer California Society of Health-System Pharmacists (CSHP)</p>	<p>§1717.11(a)(2): Designated Locations</p> <p>Requiring pharmacists to designate specific locations for remote processing presents practical challenges in today's flexible work environment. Modern technology, such as virtual private networks (VPNs), already ensures secure access to patient information regardless of physical location. As such, enforcing this requirement would be difficult and may not add meaningful value to pharmacy practice.</p> <p>We understand the Board's intent to ensure accountability and patient safety, but this requirement imposes unnecessary administrative burdens without addressing the demonstrated problem(s). During the March 26 Full Board meeting, the Executive Officer confirmed that no inspections of remote work locations were performed during the COVID-19 waiver period, and no issues related to remote work locations were identified. This suggests that requiring designated locations may not be necessary.</p> <p>Flexibility is increasingly important in the modern workplace. Health professionals across disciplines are</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff reviewed the comments and do not recommend any changes to the proposed text based on the comments received.</p> <p>The Board identified the need for a location to be identified so that the pharmacy allowing remote processing has an accurate record of where remote processing is being conducted to ensure Health Insurance Portability and Accountability Act (HIPAA) compliance. The pharmacy</p>

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			<p>trusted to maintain the privacy and security of health records, and pharmacists should be held to the same standard of professionalism without excessive regulation.</p> <p>Recommended Amendment to Regulation: Delete: (2) <i>The pharmacy and pharmacist enter a written agreement under which the pharmacist agrees to perform remote processing and designates a specific location or locations to perform such processing.</i></p> <p>Replace with: (2) <i>The employer keeps a written agreement on file under which the pharmacist agrees to perform remote processing.</i></p>	<p>and the Board of Pharmacy must be aware of the location where the remote processing is occurring in the event an investigation and root cause analysis is required. The potential burden of adding the address for the remote processing location to an already-required written agreement is negligible. No pharmacist can engage in remote processing under this regulation without a written agreement in place with the pharmacy. If the pharmacy deems the addition of the address for the remote processing too burdensome, the pharmacy does not have to engage in remote processing. The regulation sets forth the minimum requirements for remote processing, but the Board is not mandating remote processing.</p>

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27-3	(a)(3)	<p>Loriann De Martini, Pharm.D., MPH, BCGP Chief Executive Officer California Society of Health-System Pharmacists (CSHP)</p>	<p>§1717.11(a)(3): Cost of Contract Management The requirement for written agreements between individual pharmacies and pharmacists performing remote processing could create unintended administrative challenges, particularly for organizations with central processing centers or staffing pools. For example, if a pharmacist provides remote processing for 25 pharmacies, each pharmacy would need to update its records during onboarding, termination, and for up to three years post-employment. This level of recordkeeping is resource-intensive and becomes increasingly complex with staff turnover.</p> <p>Additionally, organizations often rely on legal professionals to draft and review agreements, which adds to the administrative and financial burden. While these costs may seem minimal, they can add up significantly over time, creating challenges for pharmacies already working to manage other regulatory obligations.</p> <p>We also question the necessity of requiring agreements to be retained for three years beyond employment. Most healthcare professionals are not subject to such requirements. Prescription records already provide a clear audit trail of pharmacist activities, which should be sufficient for investigations.</p> <p>Recommended Amendment to Regulation: Delete: (3) The written agreement (including modifications) required in (a)(2) of this section shall be maintained for at least three years following the pharmacist's employment, in a readily retrievable</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p>

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			<i>format, and shall be available for inspection by the Board.</i>	
27-4	(c)	Loriann De Martini, Pharm.D., MPH, BCGP Chief Executive Officer California Society of Health-System Pharmacists (CSHP)	§1717.11(c): Clarification on Business and Professions Code (BPC) §4071.1 During the March 18, 2026 Full Board meeting, Board Member Serpa sought clarification from legal counsel on how BPC §4071.1, which governs electronic prescription entry into a pharmacy or hospital computer, interacts with the proposed regulation. Legal counsel confirmed that BPC §4071.1 operates separately and applies specifically to hospital and institutional settings.	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action.</p> <p>The Board believes this comment specifically refers subsection (d) of BPC 4071.1, which establishes separate authority related to verification of medication orders.</p>

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27-5	General	<p data-bbox="443 212 619 475">Loriann De Martini, Pharm.D., MPH, BCGP Chief Executive Officer California Society of Health-System Pharmacists (CSHP)</p>	<p data-bbox="667 212 1371 245">Modern Expectations for Workplace Flexibility</p> <p data-bbox="667 250 1465 553">The proposed regulation, as currently written, may inadvertently limit the benefits of remote work by imposing requirements that are inconsistent with modern workforce practices. Requiring designated locations and excessive documentation could discourage the adoption of remote processing and undermine efforts to support a flexible, efficient pharmacy workforce.</p> <p data-bbox="667 558 1528 906">We recommend setting clear professional expectations for pharmacists to maintain privacy and security of health records, rather than relying on prescriptive regulatory requirements. Trusting pharmacists to act within the scope of their licenses is consistent with the standards applied to other healthcare professionals and aligns with the principles of modern workforce management and standards of care pharmacist practice model.</p> <p data-bbox="667 911 842 943">Conclusion</p> <p data-bbox="667 948 1528 1414">CSHP appreciates the Board's efforts to establish standards for remote processing and supports its commitment to patient safety and responsible pharmacy practice. However, we believe the proposed regulation can be refined to better reflect the realities of modern pharmacy operations and align with the legislative intent to expand remote work capabilities. We respectfully urge the Board to consider our recommended amendments, which aim to reduce unnecessary administrative burdens, support workplace flexibility, and maintain the high standards of care expected from California pharmacists.</p>	<p data-bbox="1562 212 1885 321">Board staff thank the commenter for their comment.</p> <p data-bbox="1562 363 2011 553">Board staff reviewed the comments and do not recommend any changes to the proposed text based on the comments received.</p>

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			Thank you for your time and consideration. CSHP remains committed to collaborating with the Board to enhance pharmacy practice and improve patient care in California.	
28	General	Jennifer Willcut, CVS Specialty	Hello, Please consider including front-end pharmacy technicians in section 1717.11. Technicians enter and process prescriptions while working side-by-side daily with pharmacists. Technicians also contact doctor's offices to obtain new prescriptions and prescription clarifications. Just as the pharmacists mentioned in Section 1717.11, front-end pharmacy technicians are not involved in filling, packaging, or dispensing of any drugs. For 3 years during the COVID pandemic, technicians worked from home following HIPAA guidelines and standard operating procedures. Thank you, Jennifer Willcut CVS Specialty HAE/Lyso/SCD Pharmacy Technician II	Board staff thank the commenter for their comment. Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action. Additionally, this comment was previously considered by the Board and responded to during the prior comment period. Board staff respectfully remind the commenter that the Board has determined remote work by pharmacy technicians

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29	General	Jessica Hernandez	<p>Hello, Please consider including front-end pharmacy technicians in section 1717.11. Technicians enter and process prescriptions while working side-by-side daily with pharmacists.</p> <p>Technicians also contact doctor's offices to obtain new prescriptions and prescription clarifications. Just as the pharmacists mentioned in Section 1717.11, front-end pharmacy technicians are not involved in filling, packaging, or dispensing of any drugs. For 3 years during the COVID pandemic, technicians worked from home following HIPAA guidelines and standard operating procedures.</p> <p>Thank You, Jessica Hernandez COE SCD TECH CVS Specialty</p>	<p>exceeds the scope of this proposed regulation.</p> <p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action. Additionally, this comment was previously considered by the Board and responded to during the prior comment period. Board staff respectfully remind the commenter that the Board has determined remote work by pharmacy technicians exceeds the scope of this proposed regulation.</p>

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30	General	Rob Geddes, PharmD, MBA Executive Director, Pharmacy Advocacy and Regulatory Affairs CVS Health	<p>Re: Proposed Rules 1717.11 Remote Processing of Prescriptions</p> <p>On behalf of CVS Health, I want to express our appreciation and support for the proposed regulation addressing Remote Processing of Prescriptions and reaffirm our commitment to providing high-quality, accessible healthcare. Our pharmacists and technicians are integral to supporting community health, and we are dedicated to ensuring patients have reliable access to vital medications at our pharmacy locations across the state. We commend the Board for recognizing the evolving practice of pharmacy and for establishing a clear regulatory framework that allows licensed pharmacists to perform remote processing activities while maintaining appropriate safeguards for patient safety, confidentiality, and regulatory oversight.</p> <p>The proposed requirements related to written agreements, security and HIPAA compliance, pharmacist-in-charge approval, and recordkeeping demonstrate a thoughtful and balanced approach to modernizing pharmacy practice. Overall, we are supportive of this rule and believe it will enhance operational flexibility, promote efficient use of pharmacist expertise, and support continuity of care – particularly in settings facing workforce or geographical challenges.</p> <p>We respectfully request the Board consider, either in this rulemaking or in future revisions, allowing for remote final product verification under defined and controlled circumstances. While we understand the current</p>	<p>Board staff thank the commenter for their comment.</p> <p>Board staff have reviewed this comment and do not recommend a change. Board staff note that this comment is outside the scope of this comment period, as the comment does not involve objections, support, or recommendations directed towards the modified text in this specific regulatory action. Additionally, this comment was previously considered by the Board and responded to during the prior comment period. Board staff respectfully remind the commenter that the Board has determined remote work by pharmacy technicians exceeds the scope of this proposed regulation.</p>

#	Section	Commenter	Comment	Staff Recommendations
			<p>exclusion of final product verification from the definition of remote processing in subsection (b), we believe there may be opportunities to safely permit this function using validated technology, robust policies and procedures, and appropriate accountability measures. Many pharmacy operations already rely on advanced imaging, barcode verification, and audit trails that can support accurate and compliant final verification workflow. Allowing remote final product verification, when supported by these safeguards, could support timely patient care without compromising safety or oversight.</p> <p>Additionally, we encourage the Board to consider whether the requirement that a pharmacist be physically located within the state to perform remote processing activities is necessary to meet the intended patient safety and oversight objectives. Provided the pharmacist remains appropriately licensed in California, subject to Board jurisdiction, and fully compliant with all applicable state laws and regulations, permitting remote processing from out-of-state locations could further expand support to California located pharmacies.</p>	