California State Board of Pharmacy
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Business, Consumer Services and Housing Agency
Department of Consumer Affairs
Gavin Newsom, Governor

California State Board of Pharmacy
Department of Consumer Affairs
Public Board Meeting Minutes

Date: March 6, 2025

Location: OBSERVATION AND PUBLIC COMMENT IN PERSON:
California Department of Consumer Affairs
1747 N. Market Blvd, Room 186
Sacramento, CA 95834

PUBLIC PARTICIPATION AND COMMENT FROM A REMOTE LOCATION: WebEx

Board Members Present:
Seung Oh, PharmD, Licensee Member, President
Trevor Chandler, Public Member, Treasurer
Renee Barker, PharmD, Licensee Member
Jeff Hughes, Public Member
Kartikeya "KK" Jha, RPh, Licensee Member
Jason "J." Newell, MSW, Public Member
Satinder Sandhu, PharmD, Licensee Member
Maria Serpa, PharmD, Licensee Member
Nicole Thibeau, PharmD, Licensee Member (via WebEx)

Board Members Not Present:
Jessica Crowley, PharmD, Licensee Member, Vice President
Indira Cameron-Banks, Public Member

Staff Present:
Anne Sodergren, Executive Officer
Julie Ansel, Deputy Executive Officer
Lori Martinez, Chief of Legislation, Policy, and Public Affairs
Corinne Gartner, DCA Staff Counsel
Shelley Ganaway, DCA Staff Counsel
Norine Marks, DCA Staff Counsel
Jennifer Robbins, DCA Regulations Counsel
Sara Jurrens, Public Information Officer
Debbie Damoth, Executive Specialist Manager

I. Call to Order, Establishment of Quorum, and General Announcements (Including Possible Notifications, Actions, and Disclosures Pursuant to Government Code section 11123.2(j))

President Oh called the Board meeting to order at approximately 9:00 a.m. Dr. Oh reminded all individuals present that the Board is a consumer protection agency charged with administering and enforcing Pharmacy Law. Where protection of the public is inconsistent with other interests sought to be promoted, the protection of the public shall be paramount.

Roll call was taken. The following Board members were physically present in Sacramento: Trevor Chandler, Public Member; Renee Barker, PharmD, Licensee Member; Jeff Hughes, Public Member; KK Jha, RPh, Licensee Member; J. Newell, MSW, Public Member; Satinder Sandhu, PharmD, Licensee Member; Maria Serpa, PharmD, Licensee Member; and Seung Oh, PharmD, Licensee Member. Nicole Thibeau, PharmD, Licensee Member, participated via WebEx. Dr. Thibeau disclosed that no persons over 18 years old were present in the room with them as they participated in the meeting remotely via WebEx. A quorum was established.

II. Discussion and Possible Action Related to Proposed Regulations, Title 16, California Code of Regulations, Repeal of Sections 1708.3, 1708.4, 1735 et seq., and 1751 et seq. and Addition of Sections 1735 et seq., 1736 et seq., 1737 et seq., and 1738 et seq. Related to Compounded Drug Preparations, Hazardous Drugs, and Radiopharmaceuticals, Including Review of Comments Received During the 15-Day Comment Period to the Third Modified Text

President Oh advised a history of the rulemaking was detailed in the meeting materials and included in the Initial Statement of Reasons. Dr. Oh reminded members during the February 2025 Board meeting, the Board voted to further amend the proposed regulation text based on comments received. Consistent with delegated authority, Members Serpa and Barker reviewed comments received and worked with staff to provide recommendations for the Board's consideration today. Dr. Oh thanked Dr. Serpa, Dr. Barker, and Board staff for their expertise, support, and leadership navigating through this very complex area of pharmacy practice. Dr. Oh then asked Dr. Serpa to review the recommended changes.

Dr. Serpa thanked President Oh for the opportunity to assist the Board to navigate through the comments received during the recent 15-day written comment period

for the third modified text, which closed on February 21, 2025. Dr. Serpa noted there were fewer comments received during this 15-day public comment period, and many of the comments received had already been considered by the Board on several occasions.

Dr. Serpa thanked stakeholders who submitted comments. The comments continue to demonstrate that for some, the regulations may go too far, and for others, the regulations do not go far enough to protect consumers. Comments were received from several new organizations for the first time during this comment period who expressed concerns the proposed regulations allow too many opportunities to compound medications.

Dr. Serpa advised as the recommended proposed fourth modified text demonstrates, specific comments and recommendations were very helpful to the Board as it considers modifications to the proposed text based specifically on comments received. Dr. Serpa thanked Dr. Barker for sharing her expertise and time working with staff to help develop recommendations for the Board's consideration today.

Dr. Serpa provided an overview of the process used to develop the regulations, noting that some comments appear to continue to suggest that the Board has not engaged in a transparent process in the development and promulgation of the regulations.

Dr. Serpa noted when reviewing the comments, consideration and reflection of the Board's consumer protection mandate was at the forefront of the assessment and recommendation. Dr. Serpa noted there were recommendations to make changes in three areas based on comments received during the most recent 15-day comment period to the third modified text.

- Section 1736.1(b)(2) and (b)(3) related to immediate use provisions were clarified based on a comment received requesting clarification on when reporting to the Board was required.
- Changes are recommended to the regulatory provisions related to sterile compounding using Category 1 bulk drug substances. Specifically, section 1736.9(e) is changed, 1736.9(f) is added, 1736.17(a)(2)(C) is changed, and 1736.17(a)(2)(E) and (F) are removed. The proposed text in subdivision (e) of section 1736.9 was taken directly from the USP Chapter requiring that, in addition to the certificate of analysis (COA) required in subdivision (d), all active pharmaceutical ingredients (API) and other components need to be evaluated for suitability in the sterile compounded preparation. The proposed

text in subdivision (f) of section 1736.9 provides the legal pathway to compound using 503A Category 1 bulk drug substances, and specifies that a facility's standard operating procedures (SOPs) must establish the process to determine the quality of the APIs, which was again consistent with the requirements in USP Chapter 797. Dr. Serpa noted the significant change in approach in the related proposed regulation text in section 1736.17 regarding SOPs. The SOPs must include the methods used to determine and approve components, including components that are 503A Category 1 bulk drug substances; however, the methods required to be in compliance with specified USP Chapters were no longer listed. Dr. Serpa reminded members while specific details were no longer included in the proposed regulations, USP Chapter 797 requires that, along with a COA that includes specifications, test results are required to show all components including those substances on the Category 1 bulks list, meets expected quality. Dr. Serpa referenced meeting materials identified as Addendum 1 to address the comments received and responses to explain this further.

- Section 1737.7, subdivision (a) related to the provisions for using gloves. The proposed changes to the regulation text directly reflect the language found in USP.

Dr. Serpa summarized the approach in promulgating these regulations was to clarify and make more specific the requirements of state and federal law, federal guidance, and the national standards. While repetition of federal law and USP in the proposed regulations was generally avoided, there were some exceptions where provisions of the national standards were restated as a direct result of public comment that asked for clarification and where it appeared that there was a general unfamiliarity with the USP standards. When this was done, the USP standard was repeated to underscore the requirements of the USP chapter or to ensure there was a comprehensive understanding of the requirement.

Members were provided the opportunity to comment.

Dr. Barker believed the most recent changes add clarification and still addressed the mandate for consumer safety.

Dr. Oh thanked Dr. Serpa, Dr. Barker, Executive Officer Sodergren and staff who worked on this text.

Motion: 1. Accept the Board staff recommended responses to comments to the third modified text received during the 15-day comment period as the responses of the Board as presented.
2. Approve the recommended fourth modified text dated 2.28.2025 for a 15-day comment period, delegating authority to the executive officer to make technical and nonsubstantive changes before the text is released.
3. Additionally, should additional comments be received during the comment period, delegate to Members Serpa and Barker authority to review the comments with staff to offer recommendations to the Board for consideration at a future meeting.

M/S: Serpa/Barker

Members were provided the opportunity to comment; however, no comments were made.

Members of the public in Sacramento were provided the opportunity to comment.

Members heard comments from representatives of Pacific Compounding Pharmacy and Volunteer Fire Foundation. Comments included appreciation for the substantial changes; recommended text was not substantiated by evidence that will cause improved patient safety; appreciation of the transparency of the process but didn't meet the intent of the rulemaking process; concern for fewer compounding pharmacies; and unavailability of glutathione from 503A pharmacies.

Members also heard comments from individuals including a fire fighter and a compounding pharmacist. Comments included personal accounts of using glutathione and availability for fire fighters and general public; and several areas of regulations that were ambiguous.

Members of the public participating via WebEx were provided the opportunity to comment.

Members heard comments from representatives of Alliance for Pharmacy Compounding, Kaiser Permanente, FlavoRx, stopthebop.org; CMA, gotlongcovid.org; and Sutter Health. Comments included appreciation for the changes; encouraged the Board to delay moving forward; concern for enforcement actions against pharmacies compounding APIs; imposition of unnecessary restrictions on immediate use compounding exceeding federal and USP standards that do not improve patient

safety; lack of evidence to support changes; encouraged deleting current compounding regulations and only to use USP; progress made on the flavoring issue; want the exemption for all flavoring; relief of some of the restrictions removed; request to withdraw the rulemaking package; requested clarification regulations do not include physicians; regulations go beyond USP and will prohibit ability to take care of patients; appreciation to the Board for the opportunity to comment.

Members also heard comments from individuals including Cloverdale Councilmember, fire fighters/first responders and their families, Lyme disease patient, physician, mother, patient allergic to COVID vaccines, pharmacist, acupuncturist, naturopath doctors, and patient with grand mal seizures. Comments included requested staying with current regulation; concern for lack of access for chronic illness patients; personal account of glutathione benefits; remove barriers for glutathione; concern for access to patients; inability to get self-administered glutathione for fire fighters; IV access was better than medication taken orally; concern for access to treatment for people with chronic illnesses and fire fighters; withdraw rulemaking; concern for essentially a copy and immediate use language; concern for affordability and accessibly of glutathione.

The Board took a break from 10:46 a.m. – 11:02 a.m. Roll call was taken. The following Board members were physically present in Sacramento: Trevor Chandler, Public Member; Renee Barker, PharmD, Licensee Member; Jeff Hughes, Public Member; KK Jha, RPh, Licensee Member; J. Newell, MSW, Public Member; Satinder Sandhu, PharmD, Licensee Member; Maria Serpa, PharmD, Licensee Member; and Seung Oh, PharmD, Licensee Member. Nicole Thibeau, PharmD, Licensee Member participated via WebEx. A quorum was established.

The public comment period on the motion resumed. The Board heard a comment from a nurse impacted by the Altadena fire concerned about the access to glutathione.

President Oh commented that while he was comfortable with the previous approach of outlining required testing for Category 1 bulk drug substances, he was more comfortable with relying on the professional and clinical judgment of pharmacists.

DCA Counsel Gartner offered some clarifying comments to members. She noted public comments were made indicating Category 1 bulk drug substances including methylcobalamin and glutathione were safe and effective treatments. Ms. Gartner reminded members methylcobalamin and glutathione have not been found by the FDA to be safe or effective, rather, these substances are still under evaluation by the FDA. To the extent that public comment suggested methylcobalamin and glutathione were FDA approved or authorized, that was not the case. The FDA's

approach was that they have articulated an interim policy pursuant to which methylcobalamin and glutathione, which otherwise could not be used in compounding, could be used, and the FDA will exercise enforcement discretion with respect to that compounding as long as certain conditions were met.

As some commenters called methylcobalamin and glutathione vitamins or nutrients as opposed to drugs, Ms. Gartner clarified that under federal law, these substances are considered bulk drug substances which was the same as an active pharmaceutical ingredient. Ms. Gartner also noted that public comment suggested 503B outsourcing facilities can only produce office stock and can't distribute pursuant to individual prescriptions, and she clarified that under the law outsourcing facilities do have the option of compounding drug products pursuant to prescriptions for individual patients.

Finally, Ms. Gartner addressed comments about overreach by the Board as far as regulating physicians, *etc.*, reminding members that there were limits on who the Board can regulate. Pursuant to Business and Professions Code section 4170(c), the Medical Board of California and other healing arts boards are specifically charged with the enforcement of pharmacy law with respect to their respective licensees.

Members were provided the opportunity to comment.

Members discussed concerns about access and cost to the patient which was related to approval by FDA. Some members were concerned about the flavoring access and availability. USP clarified that flavoring was compounding and the Board couldn't change what USP determined regarding flavoring.

Members also discussed public comments that expressed concerns about enforcement by inspectors. Ms. Sodergren explained with the shift to a standard of care enforcement model, the Board was embracing a less prescriptive approach, based on pharmacists using their professional judgment based on best practices. Ms. Sodergren provided patient consultation as an area where pharmacy law currently uses this model. Ms. Sodergren provided an overview of the investigative process used by inspectors during pharmacy inspections noting the individual inspector wouldn't make the determination whether or not there was enforcement action taken.

Members discussed the concern of compounding pharmacies closing. It was noted that nationally business practices changed over time and pharmacies in general were closing. Additionally, USP changed guidance effective November 1, 2023, where some pharmacies made business decisions to no longer compound.

Members discussed the importance of comments received by the Board. Distinction was made that anything injected or inhaled must be sterile and if it was not sterile, it can cause harm to the patient.

Support: 7 Oppose: 2 Abstain: 0 Not Present: 2

Board Member	Vote
Barker	Support
Cameron-Banks	Not Present
Chandler	Support
Crowley	Not Present
Hughes	Oppose
Jha	Support
Newell	Support
Oh	Support
Sandhu	Support
Serpa	Support
Thibeau	Oppose

III. Discussion and Possible Action Related to Proposed Amendment to California Code of Regulations, Title 16, Section 1708.2 Related to Discontinuance of Business, Including Review of Comments Received During the 15-Day Comment Period

President Oh recalled that in April 2024, the Board approved proposed regulation text to amend section 1708.2. The 45-day comment period began November 15, 2024, and concluded December 30, 2024. A subsequent 15-day comment period began on February 10, 2025, and ended February 25, 2025. Dr. Oh noted that the meeting materials included the proposed text released for the 15-day comment period, comments received, staff prepared responses to comments, and staff recommended modifications to the proposed text. Dr. Oh confirmed that members had the opportunity to review the information, and noted that he agreed with the staff recommendations, including recommendations to the proposed modified text.

Members were provided the opportunity to comment. A member asked if the proposed exemption under subdivision (b)(6) applied only to correctional facilities or if it included pharmacies in health care systems. It was clarified that correctional pharmacies dispensing only to patients of the California Department of Corrections and Rehabilitation are exempt from the statutory requirement being implemented in the regulation, so they will be exempt from the regulation's requirements. Members discussed that specialty and home health care pharmacies typically were licensed separately so the exemption wouldn't apply to them.

Motion: Accept the Board staff's recommended comment response and modified text, and notice the second modified text for a second 15-day comment period. Additionally, if no adverse comments are received during the second 15-day comment period, authorize the executive officer to take all steps necessary to complete the rulemaking and adopt the proposed regulations at section 1708.2 as noticed. Further, delegate to the executive officer the authority to make technical or non-substantive changes as may be required by the Control agencies to complete the rulemaking file.

Department of Consumer Affairs Title 16. Board of Pharmacy

Second Modified Regulation Text Discontinuance of Business

Proposed changes made to the current regulation language are shown by ~~strikethrough~~ for deleted language and underline for added language.

Modified changes made to the proposed regulation language are shown by ~~double~~ ~~strikethrough~~ for deleted language and double underline for added language.

Second modified changes made to the proposed regulation language are shown by ~~*italicized double strikethrough*~~ for deleted language and *italicized double underline* for added language.

Amend section 1708.2 of Article 2 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

(a) Any permit holder shall contact the ~~b~~Board prior to transferring or selling any dangerous drugs, devices, or hypodermics inventory as a result of termination of business or bankruptcy proceedings (individually or collectively referred to as a "closure") and shall follow official instructions given by the ~~b~~Board applicable to the transaction.

(b) In addition to the requirements in (a), a pharmacy that shall cease operations due to a closure (cessation or substantial cessation) shall complete the following:

(1) At least ~~30~~ 45 days in advance of the closure, provide written notice to patients that have received a prescription within the last year, in a form in which the pharmacy regularly communicates or advertises to its patients. At a minimum, this notice shall include:

(A) the name of the patient and if one exists and is known to the pharmacy, the name of the legal representative of the patient,

(B) the name and physical address of the pharmacy closure,

(C) the name of the pharmacy where patient records will be transferred and maintained, and

(D) information on how to request a prescription transfer prior to closure of the pharmacy.

(2) Reverse all prescriptions for which reimbursement was sought but the prescriptions are not picked up by patients,
(3) Provide the Board with a copy of the notice specified in subsection (b)(1), and
(4) The owner shall be responsible for compliance with the requirements of this section. The owner, the pharmacist-in-charge, if available, shall certify compliance with the requirements in this section. In the event the pharmacist-in- charge is no longer available, the owner must certify the compliance, along with a pharmacist retained to perform these functions.
(5) Post a written notice of the closure with the planned closure date in a conspicuous location at the pharmacy's entrance.
(6) A general acute care hospital pharmacy that is owned by a health facility as defined in Section 1250 of the Health and Safety Code, and meets the requirements of Business and Professions Code section 22949.92(a)(1)(B)(iii), *and a licensed correctional pharmacy dispensing only to patients of the California Department of Corrections and Rehabilitation*, shall be exempt from the requirements of subdivision (b).

NOTE: Authority cited: Section 4005, Business and Professions Code. Reference: Sections 4080, 4081, 4113, 4332, ~~and~~ 4333, 22949.92, and 22949.92.1, Business and Professions Code; and Section 11205, Health and Safety Code.

M/S: Thibeau/Newell

Members of the public participating in Sacramento and via WebEx were provided the opportunity to comment; however, no comments were made.

Support: 9 Oppose: 0 Abstain: 0 Not Present: 2

Board Member	Vote
Barker	Support
Cameron-Banks	Not Present
Chandler	Support
Crowley	Not Present
Hughes	Support
Jha	Support
Newell	Support
Oh	Support
Sandhu	Support
Serpa	Support
Thibeau	Support

IV. Discussion and Possible Action Related to Proposed Amendment to California Code of Regulations, Title 16, Section 1711 Related to Quality Assurance Programs, Including Review of Comments Received During the Second 15-Day Comment Period

President Oh advised that in January 2023, the Board approved proposed regulation text to amend section 1711. Dr. Oh recalled that the Board's Medication Error Reduction and Workforce Committee took a deep dive into the issue of medication errors. Through this work, one of the action items identified was the need to update the Board's quality assurance (QA) regulations that have largely remained unchanged for two decades. The Board's 45-day comment period closed on September 23, 2024. During the November 6-7, 2024 Board meeting, following consideration of the comments received, the Board voted to further modify the proposed text and initiate a 15-day comment period. In response to comments received during the first 15-day comment period, the Board determined additional changes were appropriate. The second 15-day comment period began January 27, 2025, and ended February 11, 2025. As the meeting materials note, comments were again received.

Dr. Oh ensured that members received the updated recommended responses to comments that were posted on the Board's website earlier that week. He noted that he believed the updated responses would remove some of the confusion that could occur, and that many of the comments received relate to current regulation requirements and appear to suggest that pharmacies represented by the commenter may not be compliant with current legal requirements. Dr. Oh added if accurate, he believed this was troubling. He continued that based on his reading of the comments, it appeared some commenters may be conflating the Board's quality assurance requirements with the medication error reporting requirements established in Business and Professions Code section 4113.1. Dr. Oh noted that the meeting materials included the proposed text released for the second 15-day comment period, comments received, and staff prepared responses to comments. Dr. Oh confirmed that members had the opportunity to review the information. Dr. Oh concluded his introductory remarks by stating that upon review, he agreed with the staff recommended response.

Members were provided the opportunity to comment. Members discussed the value of having a QA program that requires a systematic review of medication errors. Discussion continued about the current QA regulation's purpose to advance error prevention by analyzing, individually and *collectively*, investigative and other pertinent data collected in response to a medication error to assess the cause(s) and any contributing factors such as system or process failures. Members noted most of the regulation is about reporting

individual errors, and the Board needs to further encourage the collective system review approach, potentially by requiring periodic system review. Members discussed the benefits and drawbacks of a minimum requirement versus a prescriptive requirement while also considering the pharmacist-in-charge's workload. Ms. Sodergren advised staff can develop a couple different possible language additions for the Board to consider. Members Jha and Serpa were designated as members to work with Board staff to develop possible options for language to incorporate the Board's discussion.

Motion: Defer a decision on the quality assurance program regulations, including responses to comments received during the second 15-day comment period between January 27, 2025 and February 11, 2025., and delegate to Members Jha and Serpa to work with Board staff to develop additional language specifically related to the quality assurance program and its requirements for consideration at a future meeting.

M/S: Chandler/Jha

Members of the public participating in Sacramento were provided the opportunity to comment. The Board heard a comment requesting that vaccine administration and VAERS reporting be included in the QA program.

Members of the public participating via WebEx were then provided the opportunity to comment. A representative of Kaiser commented that further expanding the QA regulation requirements to include systematic review of errors would place additional burdens on the pharmacist-in-charge. The commenter noted that the Board was moving to a standard of care model and the regulation already tipped toward being overly prescriptive, which is the opposite of a standard of care approach. A pharmacist provided a personal account of his experience with quality assurance programs. The pharmacist thought entities should be required to look at their errors qualitatively, quantitatively, and system wide. A medication safety officer at an academic medical center commented in support but noted community and institutional pharmacies have requirements to report errors and further regulation seemed redundant.

Support: 9 Oppose: 0 Abstain: 0 Not Present: 2

Board Member	Vote
Barker	Support
Cameron-Banks	Not Present
Chandler	Support
Crowley	Not Present
Hughes	Support
Jha	Support
Newell	Support
Oh	Support
Sandhu	Support
Serpa	Support
Thibeau	Support

The Board took a lunch break from 12:35 p.m. to 1:30 p.m. Roll call was taken. The following Board members were physically present in Sacramento: Trevor Chandler, Public Member; Renee Barker, PharmD, Licensee Member; Jeff Hughes, Public Member; KK Jha, RPh, Licensee Member; J. Newell, MSW, Public Member; Satinder Sandhu, PharmD, Licensee Member; Maria Serpa, PharmD, Licensee Member; and Seung Oh, PharmD, Licensee Member. Nicole Thibeau, PharmD, Licensee Member, participated via WebEx. A quorum was established.

V. Discussion and Possible Action Related to Proposed Addition of Section 1700 Related to Digital Signatures to California Code of Regulations, Title 16, Including Review of Comments Received During the 45-Day Comment Period

President Oh recalled the Board approved proposed regulation text on April 24, 2024, to add section 1700 to title 16 of the California Code of Regulations, to establish provisions for digital signatures consistent with the provisions established in Government Code section 16.5. Dr. Oh noted the Board's 45-day comment period closed on February 3, 2025. The Board received one comment stating support for the Board's proposal. Dr. Oh referenced meeting materials that included the proposed regulation text released for the 45-day comment period and the comment received. Dr. Oh confirmed members reviewed the information.

Members were provided the opportunity to comment; however, no comments were made.

Motion: Adopt the regulation text as noticed on December 20, 2024. Authorize the executive officer to take all steps necessary to complete the rulemaking. Further, delegate to the executive officer the authority to make technical or non-substantive changes as may be required by the Control agencies to complete the rulemaking file.

Department of Consumer Affairs
Title 16. Board of Pharmacy

Proposed Regulation Text

Digital Signatures

Legend: Added Text is indicated with an underline.

Add section 1700 to Article 1 of Division 17 of Title 16 of the California Code of Regulations to read as follows:

§ 1700. Digital Signatures

Consistent with the authority established in Government Code Section 16.5, in any written communication, application or other document in which a signature is required or used, the Board shall accept digital signatures that meet the requirements set forth in the California Code of Regulations, Title 2, section 22003(a).

NOTE: Authority Cited: Section 16.5, Government Code. Reference: Section 16.5, Government Code.

M/S: Newell/Sandhu

Members of the public in Sacramento and participating via WebEx were provided the opportunity to comment; however, no comments were made.

Support: 9 Oppose: 0 Abstain: 0 Not Present: 2

Board Member	Vote
Barker	Support
Cameron-Banks	Not Present
Chandler	Support
Crowley	Not Present
Hughes	Support
Jha	Support
Newell	Support
Oh	Support
Sandhu	Support
Serpa	Support
Thibeau	Support

VI. Recognition and Celebration of Pharmacists Licensed in California for 40 Years

President Oh advised the Board's recognition of pharmacists licensed in California for over 40 years was posted on the Board's website and pharmacists were provided with a certificate when they reach this significant milestone. President Oh invited pharmacists licensed for 40 years or more to identify themselves and be recognized by the Board; however, there were no pharmacists licensed for 40 years present. President Oh thanked all pharmacists who worked in pharmacy serving the consumers of California.

VII. Public Comments on Items Not on the Agenda/Agenda Items for Future Meetings

Members of the public participating from Sacramento were provided the opportunity to comment.

The Board heard comments from a member of the public concerned about the impact of COVID-19 vaccines being administered in California pharmacies.

The Board heard comments from a member of the public concerned that his comments about the COVID-19 vaccines was deferred to the federal government.

Members of the public participating via WebEx were provided the opportunity to comment; however, no comments were made.

Members expressed interest in looking into and having discussions about maintaining access to drugs being banned at the federal level.

VIII. Closed Session Matters

Open session concluded at approximately 1:47 p.m. The Board convened in closed session at approximately 2:02 p.m. and ended closed session at 3:30 p.m.

IX. Reconvene in Open Session to Adjourn for the Day

The Board reconvened into open session and adjourned the meeting at 3:30 p.m.