

Date of Hearing: April 7, 2026

ASSEMBLY COMMITTEE ON BUSINESS AND PROFESSIONS

Marc Berman, Chair

AB 1587 (Ta) – As Amended March 18, 2026

SUBJECT: Prescription drug refills: prescriber notifications.

SUMMARY: Clarifies that a pharmacist who is dispensing an emergency refill of a medication to a patient is only required to inform the patient’s prescriber if a prescriber is identified.

EXISTING LAW:

- 1) Establishes the Pharmacy Law. (Business and Professions Code (BPC) §§ 4000 *et seq.*)
- 2) Establishes the California State Board of Pharmacy (BOP) to administer and enforce the Pharmacy Law. (BPC § 4001)
- 3) Provides that protection of the public shall be the highest priority for the BOP in exercising its licensing, regulatory, and disciplinary functions. (BPC § 4001.1)
- 4) Authorizes the BOP to adopt rules and regulations as may be necessary for the protection of the public. (BPC § 4005)
- 5) Defines “pharmacist” as a natural person to whom a license has been issued by the BOP which is required for any person to manufacture, compound, furnish, sell, or dispense a dangerous drug or dangerous device, or to dispense or compound a prescription; allows a pharmacist to authorize the initiation of a prescription consistent with the accepted standard of care. (BPC § 4036; § 4051)
- 6) Declares pharmacist practice to be a dynamic, patient-oriented health service that applies a scientific body of knowledge to improve and promote patient health by means of patient-care activities to optimize appropriate drug use, drug-related therapy, disease management and prevention, and communication for clinical and consultative purposes and that pharmacist practice is continually evolving to include more sophisticated and comprehensive patient care activities. (BPC § 4050)
- 7) Authorizes a pharmacist to perform specified functions and provide specified services as part of their scope of practice. (BPC § 4052)
- 8) Authorizes a pharmacist to refill a prescription for a dangerous drug or dangerous device without the prescriber’s authorization if the prescriber is unavailable to authorize the refill and if, in the pharmacist’s professional judgment, failure to refill the prescription might interrupt the patient’s ongoing care and have a significant adverse effect on the patient’s well-being, subject to additional requirements. (BPC § 4064)
- 9) Requires records of manufacture and of sale, acquisition, receipt, shipment, or disposition of dangerous drugs or dangerous devices to be at all times during business hours open to inspection by authorized officers of the law, and preserved for at least three years from the date of making. (BPC § 4081)

THIS BILL:

Clarifies that a pharmacist is only required to inform the prescriber within a reasonable period of time of any refills dispensed pursuant to the law authorizing emergency refills if a prescriber is identified.

FISCAL EFFECT: Unknown; this bill is keyed fiscal by the Legislative Counsel.

COMMENTS:

Purpose. This bill is sponsored by the author. According to the author:

Delays in care should not place patients in a position where they need to ration life-saving medication as they seek continued care. AB 1587 ensures that patients who undergo a transition between doctors or insurance coverage can have a previously established prescription refilled by the pharmacist. This bill will buy precious time for patients whose lives rely on this medication.

Background.

California State Board of Pharmacy. The BOP is the regulatory body within the Department of Consumer Affairs responsible for overseeing the practice of pharmacy in California. The BOP is currently estimated to regulate over 50,700 pharmacists, 1,300 advanced practice pharmacists, 4,400 intern pharmacists, and 65,700 pharmacy technicians across a total of 32 licensing programs. In addition to regulating professionals, the BOP oversees and licenses pharmacies, clinics, wholesalers, third-party logistic providers, and automated drug delivery systems.

Emergency Refill Authority. The Pharmacy Law generally prohibits a pharmacist from refilling a prescription for a dangerous drug or device except upon authorization of the prescriber. This authorization may be given orally or at the time of giving the original prescription. When no refills were authorized at the time the prescription was written, a refill may be subsequently requested by the patient or the pharmacist on behalf of the patient.

Notwithstanding these requirements and restrictions, the Pharmacy Law has long provided for a drug or device to be refilled by a pharmacist if the prescriber is unavailable to authorize the refill and if, in the pharmacist's professional judgment, failure to refill the prescription could result in harm to the patient. Historically, a pharmacist was required to make efforts to contact the patient's prescriber, refill only an amount of the prescription sufficient to maintain the patient until the prescriber can be contacted, and make specified disclosures to the patient. This authority was broadened in 1997 through BOP's sunset bill, SB 1349 (Committee on Business and Professions), to expand the conditions allowing for an emergency refill and remove refill amount limit and patient disclosure requirements.

In 2025, language was included in the BOP's most sunset bill to transition provisions of the Pharmacy Law establishing a pharmacist's scope of practice to a standard of care model for specified patient care services. This language was the result of a recommendations made to the Legislature by the BOP's Standard of Care Ad Hoc Committee following seven workgroup convenings of interested stakeholders. Under the new model, pharmacists were provided greater authority to utilize their professional judgment in making patient care decisions, rather than having to follow more prescriptive rules in the delivery of specifically identified services.

One of the changes made in the BOP's most recent sunset bill was to the existing emergency refill law. Specifically, AB 1503 (Berman) repealed the requirement that a pharmacist make every reasonable effort to contact the prescriber prior to refilling a prescription without a prescriber's authorization. The bill also repealed the requirement that the pharmacist make an appropriate record, including the basis for proceeding with an emergency refill. Under current law, a pharmacist would still be required to subsequently inform the prescriber within a reasonable period of time of any refills dispensed.

This bill would add greater clarity to the current emergency refill authority by providing that a pharmacist is only required to inform the prescriber of any refills dispensed if a prescriber is identified. The author argues that many vulnerable patients, especially those experiencing homelessness, can lose access to their physician and have difficulty finding a new one, often due to network limitations and a paucity of providers in the state's Medi-Cal program. This bill is intended to ensure that those patients who do not currently have a prescriber are still able to have their urgently needed medications refilled by pharmacists.

Prior Related Legislation. AB 1503 (Berman), Chapter 196, Statutes of 2025 extended the sunset date for the BOP and made various changes in response to issues raised during the BOP's sunset review oversight process, including changes to the authority for pharmacists to dispense an emergency refill.

AB 1349 (Committee on Business and Professions), Chapter 549, Statutes of 1997 extended the sunset date for the BOP and made extensive technical revisions, including changes to the authority for pharmacists to dispense an emergency refill.

ARGUMENTS IN SUPPORT:

The *California Pharmacists Association* supports this bill, writing: "Even short delays in therapy for conditions such as cardiovascular disease, diabetes, or epilepsy can result in significant harm, including hospitalization or worse. This bill ensures that pharmacists can use their clinical training to prevent these dangerous gaps in care. Additionally, clarifying that pharmacists and pharmacies are not subject to liability when acting in good faith under these circumstances provides necessary protection for providers making time-sensitive clinical decisions in the best interest of their patients. The bill's adjustment to prescriber notification requirements is also reasonable, recognizing that in some cases a prescriber may not be readily identifiable."

ARGUMENTS IN OPPOSITION:

None on file.

REGISTERED SUPPORT:

Biocom California
California Senior Legislature
California Pharmacists Association
Universities Allied for Essential Medicines
Five individuals

REGISTERED OPPOSITION:

None on file

Analysis Prepared by: Robert Sumner / B. & P. / (916) 319-3301