Office of Senate Floor Analyses

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CONSENT

Bill No: AB 529 Author: Ahrens (D) Introduced: 2/11/25

Vote: 21

SENATE BUS., PROF. & ECON. DEV. COMMITTEE: 8-0, 6/9/25

AYES: Ashby, Choi, Archuleta, Arreguín, Grayson, Niello, Strickland, Umberg

NO VOTE RECORDED: Menjivar, Smallwood-Cuevas, Weber Pierson

SENATE APPROPRIATIONS COMMITTEE: Senate Rule 28.8

ASSEMBLY FLOOR: 76-0, 5/1/25 (Consent) - See last page for vote

SUBJECT: Pharmacy: declared state of emergency

SOURCE: Author

DIGEST: This bill authorizes the Board of Pharmacy (Board or BOP) to waive the Pharmacy Law for up to 120 days, rather than 90 days, following the end of a declared emergency.

ANALYSIS:

Existing law:

- 1) Establishes the Pharmacy Law. (Business and Professions Code (BPC) §§ 4000 et seq.)
- 2) Establishes the Board to administer and enforce the Pharmacy Law. (BPC § 4001)
- 3) Authorizes the Board to take various actions in a declared federal, state, or local emergency, including waiving any provisions of the Pharmacy Law or Board regulations if, in the Board's opinion, the waiver will aid in the protection of public health or the provision of patient care. Authorizes the Board to elect to

continue to waive application of any provision of the Pharmacy Law for 90 days following the termination of the declared emergency if, in the Board's opinion, the continued waiver will aid in the protection of the public health or in the provision of patient care (BPC § 4062)

4) Exempts health care practitioners licensed in another state from licensure in California if they provide health care during a state of emergency upon the request of the Director the Emergency Medical Services Authority. (BPC § 900)

This bill authorizes the Board to waive the Pharmacy Law for up to 120 days, rather than 90 days, following the end of a declared emergency.

Background

Regulatory programs within the jurisdiction of the Department of Consumer Affairs (DCA) issue about 3.5 million licenses, certificates, and approvals to individuals and businesses in over 250 categories.

Within the DCA are 38 entities, including 26 boards, eight bureaus, two committees, one program, and one commission (hereafter "boards" unless otherwise noted). Collectively, these boards regulate more than 100 types of businesses and 200 different industries and professions. As regulators, these boards perform two primary functions:

- Licensing—which entails ensuring only those who meet minimum standards are issued a license to practice, and
- Enforcement—which entails investigation of alleged violations of laws and/or regulations and taking disciplinary action, when appropriate.

DCA boards are semiautonomous regulatory bodies with the authority to set their own priorities and policies and take disciplinary action on their licensees. DCA has direct control and authority over bureaus.

On March 30, 2020, the Governor issued Executive Order N-39-20 authorizing the Director of DCA to waive any statutory or regulatory professional licensing relating to healing arts during the duration of the COVID-19 pandemic

Pharmacy Law expressly authorizes the Board to waive provisions of Pharmacy Law during a state of emergency if, in the Board's opinion, the waiver will aid in the protection of public health or the provision of patient care.

As noted in its 2020 Sunset Oversight Review Supplemental Report, during the initial phase of the pandemic, the Board itself reviewed and approved broad and site-specific waivers but also, to allow more flexibility in responding to waiver requests, the Board delegated authority to the Board's President to review and make final determination on waiver approvals. The Board's president was authorized grant a waiver for 90 days, and had the authority to extend waivers for two additional 90-day periods, as appropriate.

Between March 2020 and November 2020, the Board granted approximately 300 site-specific waivers along with 21 broad waivers, which typically included conditions for use and recordkeeping requirements to demonstrate compliance with the conditions. In addition, one broad waiver provided authority for the Board to reinstate a license under specified conditions or extend an intern license that would have otherwise expired. As of July 1, 2020, the Board had extended 692 intern licenses and reinstated 194 licenses.

In addition to the Board's actions during the COVID-19 pandemic, the Board frequently uses its authority to waive provisions of law during natural disasters. For example, during devastating wildfires such as the Tubbs Fire in 2017, the Camp Fire in 2018, and the Dixie Fire in 2021, the Board issued waivers allowing pharmacists to provide emergency refills, temporary relocation of pharmacies, and mobile pharmacy operations. Similar waivers have been granted during large earthquakes, severe storms and floods, and prolonged power outages.

While the Pharmacy Law only allows these waivers to be granted during a declared emergency, the Board is given discretion to maintain a waiver following the termination of the emergency for up to 90 days "if, in the Board's opinion, the continued waiver will aid in the protection of the public health or in the provision of patient care." This bill would extend that authority to allow waivers to remain in effect for up to 120 days following the termination of a declared emergency. The author contends that this flexibility has been thoroughly justified throughout the various emergencies that California has faced in recent years, ranging from the COVID-19 pandemic to the catastrophic wildfires that have struck Southern California and other regions of the state over the past year.

FISCAL EFFECT: Appropriation: No Fiscal Com.: Yes Local: No

SUPPORT: (Verified 7/1/25)

California State Board of Pharmacy
Health Net and its Affiliated Companies
Health Officers Association of California
Mental Health America of California

OPPOSITION: (Verified 7/1/25)

None received

ARGUMENTS IN SUPPORT: The Board that "its authority to waive provisions of Pharmacy Law and its regulations is vital to aid in the protection of public health and ensure the continued provisions of patient care during declared emergencies."

HealthNet notes that the extended authority in this bill will allow more time for residents to access care and medications.

According to the Health Officers Association of California, the added flexibility in this bill "ensures that regulatory relief can better match the realities on the ground when health systems, providers and patients are still experiencing the impacts of an emergency – even after the formal declaration has ended."

Mental Health America of California states that the extended timeframe in this bill expands access to care and medications as communities transition from crisis intervention to rehabilitation.

ASSEMBLY FLOOR: 76-0, 5/1/25

AYES: Addis, Aguiar-Curry, Ahrens, Alanis, Alvarez, Arambula, Avila Farías, Bains, Bauer-Kahan, Bennett, Berman, Boerner, Bonta, Bryan, Calderon, Caloza, Carrillo, Castillo, Connolly, Davies, DeMaio, Dixon, Elhawary, Ellis, Flora, Fong, Gabriel, Gallagher, Garcia, Gipson, Jeff Gonzalez, Mark González, Hadwick, Haney, Harabedian, Hart, Hoover, Irwin, Jackson, Kalra, Krell, Lackey, Lee, Lowenthal, Macedo, Muratsuchi, Nguyen, Ortega, Pacheco, Patel, Patterson, Pellerin, Petrie-Norris, Quirk-Silva, Ramos, Ransom, Celeste Rodriguez, Michelle Rodriguez, Rogers, Blanca Rubio, Sanchez, Schiavo, Schultz, Sharp-Collins, Solache, Soria, Stefani, Ta, Tangipa, Valencia, Wallis, Ward, Wicks, Wilson, Zbur, Rivas

NO VOTE RECORDED: Chen, McKinnor, Papan

Prepared by: Sarah Mason / B., P. & E.D. / 7/2/25 16:24:54

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