

San Francisco Department of Public Health

Daniel Tsai Director of Health

May 8, 2025

Dear California Board of Pharmacy:

We are requesting your support in informing San Francisco pharmacists about the city's new buprenorphine stocking ordinance. Drug overdoses remain a public health crisis in San Francisco, where the overdose death rate far exceeds other large counties in California. Nearly 80% of these deaths involve fentanyl. Despite the life-saving effectiveness of methadone and buprenorphine, too few people with opioid use disorder receive either of these medications.

On July 23rd, 2024, in an effort to ensure medication availability when and where it is needed, the San Francisco Board of Supervisors passed an amendment to the San Francisco Health Code (Article 48, Section 4804) requiring retail pharmacies in the city to stock buprenorphine. Specifically, the ordinance applies to all retail pharmacies that dispense controlled substances and requires them to maintain a supply of buprenorphine sufficient to fill all active prescriptions and at least two additional prescriptions for buprenorphine. The full text of the amendment is available online at the website listed on page two of this letter.

Buprenorphine is a key piece of the City's overdose prevention efforts. As you know, buprenorphine is an FDA-approved medication for the treatment of opioid use disorder (OUD). It alleviates opioid withdrawal symptoms, decreases cravings and reduces the risk of dying by 50%. Despite its efficacy, studies have found that relatively few pharmacies stock this medication with the national average of pharmacies stocking buprenorphine being 57.9% and California 46.8% (Weiner et al., 2023). Same-day access is critical for treatment of OUD. Any delay is a missed opportunity to get someone started or maintained on this lifesaving treatment.

We conducted calls before and after the ordinance passed and found that there has been no significant increase in buprenorphine stocking with only 30% of pharmacies meeting the requirements of the ordinance (Ide, 2025). We have shared the ordinance through a Dear Colleague letter through mail and fax to pharmacies in San Francisco. Recognizing you are pharmacists' main source of information relating to pharmacy laws and regulations in the state, we are asking if you can help us disseminate information about the ordinance to San Francisco pharmacists through one of the trusted communication channels you have such as the e-mail list, the Script or the annual law and ethics continuing education.

We appreciate your consideration of our request and your partnership to ensure that people in San Francisco can obtain buprenorphine at their pharmacy. This will help save lives.

Please reach out to David.e.smith@sfdph.org with any questions regarding the requirements of the legislation.

-- DocuSigned by:

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References

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Weiner, S. G., Qato, D. M., Faust, J. S., & Clear, B. (2023). Pharmacy Availability of Buprenorphine for Opioid Use Disorder Treatment in the US. JAMA network open, 6(5), e2316089. https://doi.org/10.1001/jamanetworkopen.2023.16089

Section 4804: Buprenorphine Stocking Requirement (San Francisco Ordinance 206-24)

The full text of the amendment is available at the following link: https://sfgov.legistar.com/View.ashx?M=F&ID=13206816&GUID=5EA7A96B-0BB9-4EAA-97C9-26C540983FF4

- Quantity: Each Retail Pharmacy that stocks Controlled Substances shall maintain a
 pharmaceutical stock of Buprenorphine sufficient to fill all active existing prescriptions for
 Buprenorphine for patients of the retail pharmacy and at least two additional prescriptions of
 Buprenorphine.
 - a. The following constitutes a "prescription for buprenorphine": sufficient Buprenorphine tablets or film or both to provide a patient with 24 milligrams per day for one week.
- 2. **Grace period**: if the entirety of the retail pharmacy's stock of Buprenorphine is dispensed, pharmacies may demonstrate their compliance with Section 4804 (a) if they can demonstrate that:
 - No more than three days had elapsed since the Retail Pharmacy maintained a
 pharmaceutical stock of Buprenorphine sufficient to fill at least two additional
 prescriptions for Buprenorphine; and
 - b. During the three-day grace period:
 - i. The retail pharmacy had ordered replacement stock and was waiting for the supplier or wholesaler to fill the order, or
 - ii. The retail pharmacy had requested the supplier or wholesaler increase the retail pharmacy's allotment of controlled substances and, once the supplier or wholesaler approved the increase, ordered replacement stock within three days of approval, or
 - iii. The retail pharmacy had requested the supplier or wholesaler increase the retail pharmacy's allotment of controlled substances and the supplier or wholesaler denied the request.

Buprenorphine Stocking Legislation – Frequently Asked Questions

1. Who does this law apply to?

Retail pharmacies in the City and County of San Francisco that stock and dispense Controlled Substances.

2. When will this law go into effect?

This legislation will go into effect on September 1st, 2024.

3. Why is the City requiring pharmacies to stock buprenorphine?

In 2023, San Francisco experienced its highest annual number of fatal overdoses with 810 deaths. Buprenorphine is one of the most effective medications for treating opioid use disorder, including addiction to fentanyl, yet fewer than half of pharmacies in San Francisco stock it. This ordinance affirms the City's commitment to making this life-saving medication reliably and predictably available, when and where people need it.

4. What resources are available to my pharmacy in case we have questions about how to implement the legislation?

The Department of Public Health is offering technical assistance to pharmacies interested in receiving support to implement this policy. If you are interested in additional information or technical assistance, please email overdoseprevention@sfdph.org.

5. What if my pharmacy had the required amount of buprenorphine but then dispensed it? Will we be deemed out of compliance?

No. As described in the attached, there is a grace period defined in Section 4804. We recognize this could occur, and if so, pharmacies will need to show that the required amount of buprenorphine (at a minimum) has been ordered to remain in compliance with the law.

6. What is the evidence of efficacy of buprenorphine?

Buprenorphine reduces the risk of fatal overdose by up to 50%, making it one of the most effective treatment options for opioid use disorder (OUD). Furthermore, patients maintained on doses of 24mg of buprenorphine daily were significantly more likely to stay in treatment compared to patients on a maintenance dose of 16mg daily.

7. How does buprenorphine treat opioid use disorder?

Buprenorphine an FDA-approved medication for opioid use disorder which, unlike methadone, can be prescribed in outpatient settings and dispensed from retail pharmacies. It is a partial opioid agonist that safely and effectively reduces opioid cravings, opioid withdrawal symptoms and the risk of overdose. It is most often taken daily but can now also be administered via long-acting injections.

8. Why is same-day access to buprenorphine important?

Ensuring that patients with a prescription for buprenorphine can fill it the day they receive it is important in reducing overdose fatalities. One study showed that 1 out of every 20 individuals treated for a nonfatal overdose die within 1 year, and of those, 5% die within 2 days of their

nonfatal overdose. The window for intervention is often therefore very small, making it necessary to provide immediate access to effective treatment such as buprenorphine.

¹ National Academies of Sciences, Engineering, and Medicine; Health and Medicine Division; Board on Health Sciences Policy; Committee on Medication-Assisted Treatment for Opioid Use Disorder; Mancher M, Leshner AI, editors. Medications for Opioid Use Disorder Save Lives. Washington (DC): National Academies Press (US); 2019 Mar 30. Available from: https://www.ncbi.nlm.nih.gov/books/NBK538936/ doi: 10.17226/25310

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Weiner SG, Baker O, Bernson D, Schuur JD. One-Year Mortality of Patients After Emergency Department Treatment for Nonfatal Opioid Overdose. Ann Emerg Med. 2020 Jan;75(1):13-17. doi: 10.1016/j.annemergmed.2019.04.020. Epub 2019 Jun 20. PMID: 31229387; PMCID: PMC6920606.