



Myths About Independent Community Pharmacy

- # 1. Myth: "There are few independent community pharmacies remaining."

Independent community pharmacies make up 40% of all community-based pharmacies. Of approximately 5,600 outpatient pharmacies in California, there are 2,400 independent community pharmacies. While people see chain drug stores (CVS, Rite Aid, etc.) on almost every suburban street corner, independent community pharmacies service millions of urban and rural Californians.

- #2. Myth: "If independent community pharmacies go away, the chain drug stores will service specialty patients."

Independent community pharmacies care for the vast majority of high-touch specialty patients, particularly those with HIV/AIDS, mental health disorders, homeless, and long term care patients. Independent community pharmacies provide specialized packaging, delivery to home-bound and homeless patients, and welcome disadvantaged patients into their practices to receive specialty medication treatments that chain drug stores simply do not provide. The chain drug store model is based on low levels of patient complexity/time and high volume prescription distribution.

- #3. Myth: "Community safety net prescribers and clinics will find other pharmacies to refer patients if independent community pharmacies cease to exist or stop taking Medi-Cal patients."

Independent community pharmacies represent a critical safety net hub for prescribers, clinics, and social service agencies to refer the most vulnerable patients. If independent community pharmacies are forced to close or stop serving Medi-Cal patients, there will be a tremendous negative ripple effect among prescribers, clinics and social service agencies that rely on the high-touch, patient-focused care that independent community pharmacies provide. There are no other pharmacy providers who will serve these vulnerable populations.