Dear Chairman Lou Blessing, Vice-Chair Bill Reineke, Ranking Member Kathleen Clyde and Honorable Members of the Ohio House Government Accountability & Oversight Committee,

I am providing written testimony in support of SB 265 which in part would formally recognize pharmacists as providers in Ohio law.

For years the Pharmacist has been recognized as a trusted accessible member of the healthcare team but legally has not been recognized as a “healthcare provider.” When reading the current code that omits pharmacists but recognizes dieticians, dental assistants, and dental hygienists as a provider, it makes little sense noting that we see pharmacists are available in our communities and neighborhoods every day. Your community pharmacist provides flu shots, assists patients in selecting appropriate over-the-counter cough and pain medications, and helps patients to understand the medications that have been prescribed by other providers. These services happen EVERY day, oftentimes long after other providers have closed.

Pharmacists are highly educated members of the healthcare team with Registered Pharmacists graduating after an intensive 5-year program and the current Doctor of Pharmacy requiring a 6-8-year curriculum of study. Pharmacists are educated to know and understand a medication’s therapeutic actions, potential side effects, possible interactions with other medications, food or environmental factors. The pharmacist is taught to look for the need to make potential dosage adjustments based on a person’s kidney or liver functions to name a few.

As a community pharmacist, I have practiced in both urban and rural retail settings. I was often the only person my patients felt they could turn to when needing medical advice or suggestions for their care. The relationship built with those individuals developed trust, and oftentimes, conversations were more open and frank without the hurried appointment schedule that patients often encounter in other settings.

While the country has been working to understand the opioids crisis, the pharmacist has been the gatekeeper working with their patients to navigate new regulations while still providing necessary therapy. The pharmacist is training family members how to administer Narcan. Pharmacists were recently given the authority to administer opioid antagonists used for treatment of drug addiction and administered in a long-acting or extended-release form as part of a practice relationship with a physician. It becomes quite obvious pharmacists are integral partners in providing care for patients and should be recognized for their contributions.

The passage of SB 265 will allow pharmacists to be reimbursed by health insuring corporations for providing services such as managing drug therapy and administering immunizations. The pharmacist has been providing these services for years; it is time they be recognized for it and compensated as such.

Thank you for hearing testimony regarding SB 265. Please do not hesitate to contact me with any questions.
Sincerely,

Julie L Ehemann, RPh
Commissioner
Shelby County