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Proponent Testimony, SB 265

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I am writing in support of SB 265 which would support health-insurers to cover pharmacist-provided benefits. I have not only had the privilege of working with a clinical pharmacist, but a clinical pharmacist was also an integral part of my residency training program. Who is a better person to teach residents about medications, than a medication expert?

The chronic disease epidemic is on the rise, and as primary care providers we have the challenge of there not being enough of us in addition to not enough time to properly address chronic conditions, especially diabetes. In the 15 minutes I have to see patients, I cannot possibly uncover all the medication adherence issues, and barriers to treatment in addition to addressing the patient's most pressing concerns.

In our office, a clinical pharmacist works through collaborative practice to treat various chronic conditions, she has her own schedule, and has the authority through our collaborative practice agreement, to manage medications, and order laboratory tests, but the one thing that she can't do without working in the walls of our office is bill for her services. Lately patients have been coming to our office to establish with our practice because they want to see her to manage their diabetes. SB 265 would recognize her as a provider just as our colleagues and the patients in our office already do and allow her to bill for services under her own NPI number. This would not allow a pharmacist to prescribe without a supervising physician but would allow for a more streamlined billing process.

This change would also allow pharmacists outside of physician-based clinics to collaborative with the health-care team and be reimbursed for cognitive services. The profession of pharmacy is not the same as it once was, pharmacists are given clinical training, often seek post-graduate residency training opportunities, and now are valued as not only medication experts but experts in the management of chronic disease. They also have the scope of practice to provide these services, but at this time have no mechanism to be paid under the current insurance model.

By passing SB 265, you are allowing more patients access to patient care services provided by a pharmacist, which has been proven in the literature to decrease health-care costs and improve disease processes and quality of care. Please join me in supporting better care for our patients by engaging our full health-care team.

Sincerely,

Edward P. Clack, DO

Physician

Western Medicine, Inc