



June 13, 2013

RE: Senate Bill 95 (Remote Dispensing)

Dear Chairman Steve Huffman, Vice Chairman Johnson, Ranking Member Antonio, and Members of the Senate Health Committee:

On behalf of the Ohio Pharmacist Association (OPA) and the Independent Pharmacy Cooperative (IPC), we would like to thank you for the opportunity to provide comments on Senate Bill 95, pertaining to ability to allow remote dispensing pharmacies in the State of Ohio. We look forward to working with members of the legislature to ensure that Ohioans have access to their medications, as well as the services that can be provided by community pharmacies. While the legislation is a great place to begin, we believe that additional language should be included to ensure that we are truly providing access to patients. Below is a list of items that we believe should be included in the Senate Bill 95.

1. Allow pharmacists to mail prescriptions to their patients.

While Ohio does allow for the mailing of prescriptions, many contracts have a provision that do not allow pharmacists to mail prescriptions to their patients. Too often we hear from patients who are burdened with driving an hour or more one way to obtain their monthly medications. Adding this provision would provide meaningful access to many Ohioans.

2. An existing outpatient pharmacy outside of the 10-mile provision of 4729.554(2)(a) but no more than 15 miles shall have a right of first refusal to service such area under the bill for a period of 60 days after a request is received by the board of pharmacy to register a remote tele pharmacy location.

This allows an existing provider to utilize the law within their own service area and customer base. Because these are provider deserts by definition, an outpatient pharmacy servicing the existing shortage area could be driven out of the market from competition and make the problem worse. Under the bill, there are approximately 15 such areas with a 10-mile radius and the majority are in Appalachian areas. These areas are low population and high Medicaid so new entrants with a legislative advantage could cause store closures and more Ohio pharmacy deserts. We are just asking for a 60-day window for existing stressed

market participants to utilize the law in serving their existing customers before outside interests enter the space.

- 3. Allow the Board of Pharmacy, in consultation with the Ohio State Medical Board, to add additional long-acting injectables to the list of LAI's that can be administered by a pharmacist.**

Section 4729.45 of the Ohio Revised Code specifies the long acting injectables that can be prescribed by a physician and administered by a pharmacist. Allowing the Board of Pharmacy to adopt a rule to update the list, as reflected in HB 80 of the 135th General Assembly Regular session will expediate the process when a new LAI becomes available.

- 4. Add language to ensure that FQHC and FQHC look-alike entities participation in tele pharmacy services are limited to pharmacies attached to their facility properties.**

To protect the existing network of Ohio pharmacies and ensure that a telepharmacy program does not exacerbate Ohio's pharmacy deserts, add language to ensure that FQHC and FQHC look-alike entities participation in telepharmacy services are limited to pharmacies attached to their facility properties.

OPA and IPC look forward to continuing to work with the bill sponsors and the Senate Health Committee to develop a tele pharmacy bill that expands access to pharmacy services in Ohio while ensuring that it does not erode services provided currently by existing Ohio community based local pharmacies and contains important patient safety protections.

Sincerely,

David Burke, R.Ph., MBA
Executive Director
Ohio Pharmacists Association

Sincerely,

Mark Kinney, R.Ph.
Executive Vice-President
Independent Pharmacy Cooperative