

Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio and members of the Senate Health Committee, I am Dr. Eric Geyer, a pharmacist from Brecksville, Ohio.

I am providing testimony today in opposition to House Bill 73, as it is currently before you. Pharmacists, and the knowledge we bring to the healthcare team, are key to excellent patient care. Our years of schooling and practice as the medication experts help augment the care provided by other professionals. For most decades we have been among the most, if not the most, trusted professions in the USA. This trust comes from our abilities to make recommendations to patients and other providers, to help catch mistakes, issues or concerns and as a last line of defense to help protect and serve our patients. The verbiage in House Bill 73, can strip us of our professional clinical decision-making abilities that we have been entrusted with since the dawn of our profession and part of what has made us so trusted to the public at large. As a long-term care supervising pharmacist who serves roughly 2000 patients on any given day, being able to practice at the top of my education is vital to helping ensure some of the most frail and vulnerable Ohioans have the best possible care and are protected. House Bill 73 undermines my abilities to do that by using my education and experience in the practice and science of pharmacy and serving them as a last line of defense for their health.

Personally, I have refused to fill prescriptions in the past. I have done this when I have information that it is being used inappropriately or know from my pharmacy training that it could harm the patient. While House Bill 73 does work to make some concessions for this, the use of the phrase "a pharmacist shall dispense" will put some pharmacists in situations where they are forced to take an action that they know harm may be brought to a patient. The use of the phrase "a pharmacist shall dispense" also may open a can of worms that could be unforeseen today and result in harm to Ohioans. Under the current law, a prescriber could prescribe massive doses of gabapentin, a known drug of abuse that is tracked by OARRS, and the pharmacist could be forced to dispense it. This not only could put the patient at harm, but potentially the license of the pharmacy and its ability to order the medication from its wholesaler thus preventing others from getting a needed medication that may help with the pains from diabetic neuropathy. A similar issue could happen with pseudoephedrine, which is a main ingredient in making methamphetamines. These are just two examples where House Bill 73 could have bigger ramifications than it is intended to, without discussing larger more controversial political topics, and why pharmacists must be allowed to use their professional discretion, as they are today.

Thank you, Chairman Huffman and members of the committee for allowing me to submit written testimony in opposition to House Bill 73

Eric K. Geyer, PharmD, RPh, BCMTMS, AAHIVP