

Chairman Huffman, Vice Chair Johnson, Ranking Member Antonio, and members of the Senate Health Committee, thank you for the opportunity to provide my personal opponent testimony on House Bill 73.

My name is Jessica Mason, and I am a Patient Care Pharmacist in Columbus, OH. I have been a pharmacist for eleven years and have provided care to patients in both the community and hospital setting. I currently work for a hospital system where I split my time between actively taking care of patients and coordinating operations of the pharmacy department. Providing excellent and compassionate patient care has always been a top priority in my practice, with safety and evidence-based medicine being a focal point. Pharmacists play an important role in patient care teams and do much more than place pills in a bottle and slap a label on it. We are patient advocates and serve as the final check for safety and appropriate prescribing before a medication is dispensed to a patient. I am writing to express my concerns regarding House Bill 73 as I believe it will harm the Ohio patients whom I care for by undermining the role of pharmacists in patient safety.

Being in practice for over a decade, I have regularly reviewed a plethora of clinically appropriate off-label prescribing, as it is already a regular occurrence in the practice of medicine. I have no opposition to evidence-based prescribing of medications off-label. House Bill 73 will do nothing to expand patient access to off label prescribing as it is already a common practice. House Bill 73 will effectively strip pharmacists of their role as patient safety advocates and subsequently remove patient protections by requiring pharmacists to dispense any prescription for any reason, medically sound or not and regardless of it would cause patient harm. It is a pharmacist's job to verify the risk versus benefit of dispensing any medication to a patient, including those being used off label, to ensure they will be safe and effective for the purpose being prescribed. This is the foundation of pharmacy practice and what is instilled in us on day one of our pharmacy education. I have several concerns with House Bill 73, but they begin with it blatantly disregarding the practice of safe medicine and requiring pharmacists to dispense medications that we recognize as harmful to patients. For example, if this bill were to pass, my colleagues and I would be forced fill prescriptions that could cause further renal impairment in patients who are already renally impaired or dispense medications that lower the seizure threshold and potentially cause seizures in patients with a history of epilepsy. We would be required to fill prescriptions we know negatively interacts with other medications a patient is taking which could dramatically increase the risk of side effects or eliminate the benefit of taking them altogether. These are just a few examples of numerous ways this bill will cause patient harm. Pharmacists are the drug experts. We spend 6-8 years earning our Doctor of Pharmacy degree and often go on to complete 1-2 years of a post-doctorate residency program. We know the mechanisms behind how drugs work in the body, we know how they are metabolized and eliminated, and we are taught to analyze how they could interact with other medications. Physicians and nurses routinely rely on pharmacists for their drug knowledge because we receive far more education on medications than they do. House Bill 73 would completely undermine the expertise of pharmacists and essentially make our position obsolete. During our education, we take the Oath of a Pharmacist. Within this oath it states, "I will apply my knowledge, experience, and skills to the best of my ability to assure optimal outcomes for all patients." Pharmacists will not be able to uphold this oath if House Bill 73 is passed as it handcuffs our ability to do so. I cannot even imagine how gut wrenching it would be to be forced to choose between upholding the law or keeping patients safe

from a prescription I know will harm them. House Bill 73 proponents are perpetrating the lie that this bill provides patient access to medications that might help them, but these medications are currently readily available via off-label prescribing and dispensing without such a bill in place. What House Bill 73 truly does is remove protections in place that are keeping patients safe from irresponsible and inappropriate prescribing of off-label prescriptions. It inhibits pharmacists from putting patient safety at the forefront of our practice by preventing us from refusing to dispense medications on the grounds of scientific-based objections. Passing House Bill 73 would be a gross injustice to the citizens of Ohio as it removes the last line of defense for patients and, if passed, will undoubtedly lead to many cases of patient harm.

I appreciate the opportunity to give this written testimony in opposition to House Bill 73 and thank you for your time in carefully considering the very real threat that it poses to the safety of Ohio patients.

Sincerely,

Jessica Mason, PharmD, RPh