

6th April, 2024

Dear Chairman Huffman, Vice Chairman Johnson, Ranking Member Antonio, and members of the Senate Health Committee,

My name is Grace Havens, and I am the current PGY1 Community-Based Pharmacy Resident with the Ohio State University College of Pharmacy and Equitas Health. I am a fully licensed pharmacist in both the state of Ohio and the state of Pennsylvania. I received my Doctorate of Pharmacy (PharmD) degree from the University of Pittsburgh School of Pharmacy in 2023, after which I chose to spend my first post-graduate year taking care of the LGBTQ+ community in Columbus, Ohio with Equitas Health & Equitas Health Pharmacy. In my position, I am fortunate to work with a wide variety of providers in both our community pharmacies and community health centers.

I am writing to report my opposition to House Bill 73, also known as the "Dave and Angie Patient and Health Provider Protection Act". As a practicing pharmacist who both sees patients as a provider in our community health centers and works in our community pharmacies dispensing medications to patients, I am deeply concerned with the implications of HB73 should it be passed into law. Section 4729.01 of the Ohio Revised Code states that the "practice of pharmacy" means providing pharmacist care requiring specialized knowledge, judgment, and skill derived from the principles of biological, chemical, behavioral, social, pharmaceutical, and clinical sciences. "Pharmacist care" as used in section 4729.01(B) (above) includes:

- Interpreting prescriptions, counseling individuals with regard to their drug therapy, recommending drug therapy related devices, and assisting in the selection of drugs and appliances for treatment of common diseases and injuries and providing instruction in the proper use of the drugs and appliances,
- Performing drug regimen reviews with individuals by discussing all of the drugs that the individual is taking and explaining the interactions of the drugs
- Performing drug utilization reviews with licensed health professionals authorized to prescribe drugs when the pharmacist determines that an individual with a prescription has a drug regimen that warrants additional discussion with the prescriber
- Advising an individual and the health care professionals treating an individual with regard to the individual's drug therapy.

According to HB73, a medical provider would be able to prescribe any medication for any indication (off-label prescribing) without needing to obtain any testing results, specific diagnosis, or exposure screening. In addition, HB73 states that a pharmacist shall dispense, and a hospital or inpatient facility shall allow the dispensing of, an off-label drug to a patient if a prescriber has issued for the patient a prescription for the drug as described in section 3792.06(B) unless they have an ethical, moral, or religious belief that prevents them from dispensing the prescription, or the patient has a documented allergy/contraindication to the medication. As a pharmacist who operates under the definition of the practice of pharmacy and pharmacist care in section 4729.01 of the Ohio Revised Code, I am deeply concerned. It is my duty as a pharmacist to question

medications that are prescribed to my patients and advise providers appropriately while also involving the patient in their own healthcare. This is something I take great pride in, as I also see my own patients as a provider in our community health centers. I see the value in the connection between pharmacists and medical providers, because I live it *every single day* in my current position. We are able to collaborate quickly and effectively and provide the highest level of patient care because of the relationships that we have. HB73 diminishes the commitment pharmacists and providers have taken to provide patient care with integrity, honesty, evidence, and compassion. I worry for my patient's safety without the ability to question what kind of medical care is being provided for them. As a pharmacist, I am highly trained in prescription and over the counter medication knowledge and pride myself in being a medication expert for both my patients and the providers I work with. I am in absolute opposition to House Bill 73 and I hope my testimony has allowed you to see why.

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

Most respectfully,

Grace Havens, PharmD

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