

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

My name is Mate Soric, and I am a Clinical Pharmacist and Professor at Northeast Ohio Medical University. I have practiced pharmacy in both inpatient and outpatient settings since receiving my license in 2009. I am writing to express my concern that House Bill 73 will harm the Ohio patients whom I care for.

I agree that it is incredibly important to ensure that patients have access to medications that can help them; however, House Bill 73 creates legal infrastructure for our most vulnerable patients to be exploited by dangerous prescribing. There is a clear difference between appropriate off-label medication use and inappropriate prescribing, and House Bill 73 fails to draw a difference between these two entities. House Bill 73 opens the door for providers outside of a patient's treatment team to mislead vulnerable patients, earn their trust, and then force hospitals to entertain temporary privileges for these providers. This allows these providers to go around a patient's treatment team, prescribe medicines that are inappropriate and/or dangerous in terms of dose or risk of side effects, and force a pharmacist to dispense these medicines. Nothing would stop these outside providers from prescribing chemotherapy to treat a bloodstream infection, using experimental medication cocktails without any scientific support, or using doses of medicines that turn them into toxins. House Bill 73 would turn patients into research guinea pigs for prescribers who want to perform research upon them, without going through the appropriate channels set in place since the Nuremburg code was established in 1948.

I would like to emphasize that I have no opposition to off-label medication use, because clinically appropriate off-label prescribing already occurs with an extremely high frequency. House Bill 73 does not expand access to off label prescribing because it is already a widely utilized practice, what House Bill 73 does is remove patient protections by requiring pharmacists to dispense any prescription for an off-label use of a medication that we receive, even when it would harm our patient. I support and endorse the principled use of off-label medications for my patients, and I dispense them in situations where the potential benefits of such use outweigh the associated risks. My concerns with House Bill 73 begin with its moving past the safe use of off-label medications and requiring pharmacists to dispense medications that we recognize would lead to patient harm. For example, if this bill were to pass, I would be required to fill a prescription that causes seizures, even in a patient who has a history of epilepsy. I would be required to fill a prescription that interacts with the other medications that they take daily, which could dramatically increase their risk of side effects or may eliminate the benefit that they are receiving from their other medicines altogether. Since most medications for children and for pregnant patients are considered "off-label" I would not be able to keep these vulnerable patient populations safe from prescriptions that would put them in harm's way. I cannot begin to imagine how I would feel, if forced to decide between upholding the law or keeping one of my pediatric patients safe from a prescription that I know will harm them. House Bill 73, however, would make this nightmare a reality.

Thank you for the opportunity to provide this written testimony in opposition to House Bill 73 and for your time considering the threat that it poses to Ohio patients.

Sincerely,

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