



State Senator Mark Romanchuk  
Senate Bill 230 Sponsor Testimony  
Ohio Senate Health Committee  
November 12, 2025

Chairman Huffman, Vice Chair Johnson, Ranking Member Liston, and Committee Members thank you for the opportunity to provide sponsor testimony on Senate Bill 230.

Senate Bill 230 focuses on putting patients first. It will offer busy Ohioans a convenient option to receive treatment for flu, COVID-19, strep, or RSV in their own neighborhoods, during evenings, weekends, and holidays, without waiting for a doctor's appointment. This approach will save time and help prevent the unnecessary spread of illnesses. It will provide sick Ohioans with peace of mind, allowing them to safely return to work and other activities. It continues our state's ongoing efforts to expand access to timely, high-quality care, where there is lack of primary care shortages especially in underserved communities and rural parts of the state allowing our constituents who do not have a primary care physician or access to one, to get treatment. It's a commonsense solution for healthcare access.

This bill acknowledges that pharmacists are among the most accessible healthcare professionals in Ohio. It builds upon lessons learned during the COVID-19 pandemic, when pharmacists played a crucial role in testing, vaccination, and treatment delivery. We previously passed similar legislation, Senate Bill 144, in the 135th General Assembly. This legislation adopted language from the federal PREP (Public Readiness and Emergency Preparedness) Act, allowing Ohio families to access the full range of childhood vaccines at pharmacies. This provision was part of federal law for three years during the pandemic until it expired on May 11, 2023, following the end of the Public Health Emergency. During that time, pharmacies were on the front lines of the states and the nation's vaccine response, administering over 14 million vaccines to Ohioans, including 756,000 to children, in just 2.5 years. These numbers clearly demonstrate the need for more healthcare providers and show that our constituents used this access.

Under Senate Bill 230, pharmacists will be authorized, pursuant to a statewide written protocol established by the State Board of Pharmacy, to conduct screenings, order and administer laboratory tests, evaluate results, and provide treatment for:

- Influenza
- Strep throat
- COVID-19
- Respiratory syncytial virus (RSV)
- Other respiratory conditions, as determined by rule.

This authority is carefully structured. Pharmacists will operate under protocols adopted in rule by the Board of Pharmacy, ensuring consistency and safety statewide. The bill specifically references Clinical Laboratory Improvement Amendments (CLIA)-waived tests, the same standard used in other states and federal programs to limit testing to safe, rapid diagnostic tools that can be used in a pharmacy setting.

Pharmacists can delegate only technical or administrative tasks—such as collecting samples or recording results—to pharmacy interns or technicians under direct supervision. The pharmacist will remain responsible for all clinical decision-making.

Respiratory illnesses, particularly influenza, RSV, and COVID-19, are among the most common reasons for outpatient visits and lost work or school days. In many communities, pharmacists are the only readily accessible healthcare providers.

Allowing pharmacists to test and treat these conditions will help:

- Reduce congestion in emergency rooms and urgent care facilities.
- Speed up diagnosis and treatment.
- Improve adherence and follow-up.
- Enhance overall public health responsiveness, especially in rural and medically underserved areas.

This bill mirrors successful models adopted in more than 20 other states, which have empowered pharmacists to provide similar test-and-treat services safely and effectively.

Senate Bill 230 also ensures that health insurers and Medicaid will reimburse pharmacist-provided healthcare services in the same manner as equivalent services provided by other qualified healthcare professionals.

Importantly, this change does not create new covered services; it simply allows existing coverage to apply when a pharmacist provides the service. Without this parity, many pharmacies, particularly independent ones, cannot sustainably offer these clinical services, even when patients need them the most.

It is essential to emphasize that this legislation does not replace or compete with physicians or advanced practice providers. Instead, it integrates pharmacists as partners in Ohio's healthcare delivery system. Pharmacists will continue to refer patients for further

evaluation, when necessary, just as they do under current immunization and collaborative practice agreements.

Senate Bill 230 represents a practical, evidence-based expansion of care that will:

- Improve Ohioans' access to prompt treatment.
- Reduce strain on the healthcare system.
- Modernize pharmacy practice in alignment with national standards.
- Reinforce the role of pharmacists as frontline healthcare providers.

Finally, the State of Ohio has expressed support for the concept of this bill in its recently submitted application for Rural Health Transformation Program funding, which was authorized by the federal One Big Beautiful Bill Act. The Rural Health Transformation Program fund is meant to strengthen healthcare access, quality, and outcomes in rural communities. CMS intends to give preference to states that utilize every avenue to support rural health outcomes by allowing healthcare providers like pharmacists to practice near the top of their profession. As a part of the state's proposal there is a commitment to pursuing legislative change to permit point-of-care, test-based. This bill aligns with the goals of the Rural Health Transformation Program and will help strengthen access to high quality, timely health care across Ohio.

Chairman Huffman, Vice Chair Johnson, Ranking Member Liston, and Senate Health Committee members. Thank you for the opportunity to provide testimony on Senate Bill 230 and I would be happy to answer any questions the committee may have.