

[submitted electronically via: HouseHealthandHumanServices@rilegislature.gov on 3/18/2025]

The Honorable Susan R. Donovan
Chair, House Committee on Health and Human Services
State House
82 Smith Street Providence, RI 02903

18 March 2025

RE: SUPPORT for H5633 (McGaw), AN ACT RELATING TO BUSINESSES AND PROFESSIONS -- PHARMACIES {LC1849/1} and SUPPORT for H5855 (McGaw) - AN ACT RELATING TO FOOD AND DRUGS -- RHODE ISLAND FOOD, DRUGS, AND COSMETICS ACT {LC1847/1}

Dear Chair and Members of the House Committee on Health and Human Services:

As a pharmacist, public health advocate, and professor, I am writing to support bills H5633 and H5855 in the House Committee on Health and Human Services in my personal capacity.

H5633 allows a pharmacist to dispense a one-time refill for non-controlled medications for continuation of therapy to patients to mitigate the consequences of interrupted therapy on the patient.

One of the many consequences of our primary care provider crisis is longer delays for patients and pharmacists to contact providers to authorize refills and to schedule visits to evaluate medication therapies. This patient-centered bill will help relieve some pressure on these providers by permitting pharmacists to exercise their professional judgment on which medications to refill to prevent patient harm.

Pharmacists received extensive training in their PharmD programs on the importance of adherence to therapy and ways to motivate patients to take their medications as directed to prevent the consequences of stopping or interrupting treatment. This bill appropriately limits refills only to circumstances when the lack of therapy is a greater risk to the patient than continuation of their chronic, non-controlled medications. It strengthens the therapeutic triad of patient, pharmacist, and provider through reasonable limits to refill frequency (one time), duration (100 days), and notification of the refill to the provider.

H5855 amends the types of less expensive generic products which pharmacists may prescribe to include "devices and supplies" and "therapeutically equivalent products" and would require the director to provide a list of therapeutically equivalent products.

This bill also optimizes the training and professional expertise of pharmacists to promote seamless, uninterrupted medication management of chronic diseases, with the added benefit of assuring that patients can also continuously self-manage their conditions without interruptions in their access to devices and supplies, like those used to manage diabetes. This bill also contains adequate and reasonable safeguards for providers (substitutions are documented), patients (they must consent to receive the equivalent product), and pharmacists (they access a public list created by the health department with input from nurses, physicians, and pharmacists). **No patient should leave the pharmacy empty handed because they couldn't afford their medications, devices, or supplies.**

I urge you to put your full support into these bills to help maintain the health of all Rhode Islanders.

Sincerely,

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