

March 3, 2026

The Honorable Susan Donovan, Chair, House Committee on Health and Human Services
Via email to: HouseHealthandHumanServices@rilegislature.gov

Re: House Bills 7424, 7534, and 7536, business and professions/insurance (pharmacists)

Dear Chairwoman Donovan and Members of the Committee:

On behalf of Blue Cross & Blue Shield of Rhode Island (Blue Cross), I am writing to share concerns with this package of bills relating to pharmacists. We recognize the intent to expand pharmacists' practices. Blue Cross supports – and has funded – “team-based care” including pharmacists within larger medical practices. However, we respectfully raise several concerns.

We consolidated our comments on these bills into one letter as they share many common issues. This also highlights the need for a strategic approach to address the role pharmacists and pharmacies can serve in providing access to high quality, affordable healthcare.

Blue Cross would welcome the chance to participate in such a broad stakeholder dialogue around the important role of pharmacies and pharmacists. However, absent that strategic planning, this group of bills risks fracturing the healthcare delivery system, complicating coverage and confusing patients.

The care delivered in medical practices differs from the care at pharmacies. Careful consideration should be given to patient care before adding to the authority and workload of pharmacists, especially at pharmacies. Pharmacists (many of whom are already over-extended) would be asked to have detailed, confidential conversations about a patient's medical history, discuss drug side effects and interactions, and administer medications.

Collaboration among pharmacists and other practitioners is important for care and coverage. The collaborative practice agreement aligns care delivery with the pharmacist's area of specialization. Collaboration is important too from a coverage perspective, ensuring that patients and insurers are not billed for similar services – and conversely that another provider does not provide a service for which no payment is received (see in HB 7536, the provision that carriers are not required to pay for duplicative services).

A strategic conversation with also help address questions relating to contracting and credentialing, application of benefits such as the collection of cost sharing, and network adequacy. For those reasons, Blue Cross supports the formation of study commission bringing together interested parties to work to further care in Rhode Island. Connecticut enacted similar legislation last year, providing important information and data to guide their policy development.

Sincerely,



Richard Glucksman, Assistant General Counsel