

2 March 2026

[submitted electronically via: [HouseHealthandHumanServices@rilegislature.gov](mailto:HouseHealthandHumanServices@rilegislature.gov)]

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

**RE: SUPPORT – H7934 and H7625 – AN ACTS RELATING TO PHARMACIES AND COVERAGE FOR VACCINATIONS**

Dear Chair Donovan and Members of the Committee:

My name is Todd Brothers, PharmD, BCCCP, BCPS. I am a Clinical Associate Professor at the University of Rhode Island College of Pharmacy and a practicing critical care pharmacist in Rhode Island. I am writing in strong support of House Bills 7934 and 7625.

Together, these two bills strengthen Rhode Island's immunization infrastructure by both expanding pharmacist authorities to administer routine, scheduled, and recommended immunizations to individuals ages three through eighteen under existing consent and reporting safeguards (H7934) and ensuring comprehensive insurance coverage for vaccinations recommended by the Rhode Island Department of Health without cost-sharing (H7625).

H7934 modernizes Rhode Island law by aligning pharmacist immunization authority with current public health recommendations. Pharmacists already safely administer influenza and COVID-19 vaccines to pediatric patients under structured reporting and notification requirements. Expanding this authority to include routine and ACIP-recommended immunizations improves access, particularly for working families who rely on evening and weekend pharmacy hours. Importantly, the bill maintains parental consent requirements, electronic reporting to the immunization registry, and good-faith notification to primary care providers, preserving care coordination and public health oversight.

H7625 complements this effort by removing financial barriers to recommended vaccinations. By requiring coverage without cost-sharing across commercial insurance, Medicaid, managed care organizations, and state employee plans, this legislation ensures equitable access to preventive services. Vaccines are among the most cost-effective healthcare interventions available. Eliminating out-of-pocket costs improves uptake, reduces disparities, and prevents avoidable disease outbreaks.

From a clinical standpoint, increasing vaccine accessibility through community pharmacies has been shown to improve immunization rates, particularly in underserved and rural communities. Pharmacists are among the most accessible healthcare professionals in the state. Integrating expanded authority with guaranteed coverage ensures that access is not only geographically convenient but also financially feasible. These bills are thoughtfully structured. H7934 preserves reporting to RICAIR and primary care providers to maintain continuity of care.

H7625 aligns coverage with RIDOH recommendations and federal parameters while maintaining regulatory oversight. Together, they represent a coordinated strategy to improve vaccination rates, reduce preventable illness, and strengthen public health preparedness. As a clinician who routinely cares for critically ill patients, I have seen firsthand the consequences of vaccine-preventable diseases. Preventive policy is not only sound public health practice, it is essential healthcare system stewardship.

For these reasons, I respectfully urge the Committee to support House Bills 7934 and 7625.

Thank you for your consideration and your continued commitment to protecting the health of Rhode Island residents.

Respectfully submitted,



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