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The Honorable Melissa Murray
Chair, Senate Committee on Health and Human Services
Rhode Island State House
82 Smith Street
Providence, RI 02903

Re: S2866 and S2386 – An Act Relating to Insurance – Accident and Sickness Insurance Policies

Submitted electronically via: slegislation@rilegislature.gov

Dear Chair Murray and Esteemed Members of the Committee,

As a practicing physician in Rhode Island, I am writing to express my strong support for **Senate Bill 2866** and **Senate Bill 2386**. Every day, my colleagues and I see the direct impact of our state's provider shortage: longer wait times, rising patient acuity, and a healthcare system stretched to its breaking point. These bills represent a critical opportunity to modernize our care delivery model by fully integrating clinical pharmacists into the patient care team.

S 2866: Collaborative Practice as a Force Multiplier

In the current landscape, physicians are often the sole point of contact for complex medication management, which creates significant bottlenecks in care. S 2866 modernizes collaborative practice agreements, allowing pharmacists to take a more active role in managing drug therapies. For my patients with chronic diseases like hypertension or diabetes, having a pharmacist empowered to adjust medications between office visits ensures they stay within their clinical targets. This does not replace the physician; rather, it acts as a force multiplier, allowing me to focus on diagnosis and acute care while knowing my patients are receiving expert chronic care management in tandem.

S 2386: Stabilizing the Healthcare Infrastructure

We cannot expect our healthcare infrastructure to expand without a sustainable financial foundation. S 2386 is vital because it ensures that the clinical services pharmacists provide are appropriately reimbursed. Currently, many practices and health systems are hesitant to utilize clinical pharmacists to their full potential because there is no clear path for reimbursement. By mandating fair reimbursement, this bill allows physicians to build robust, multidisciplinary teams that are financially viable, ultimately leading to better patient outcomes and reduced long-term costs for the state.

The physician shortage in Rhode Island is a systemic issue that cannot be solved overnight. However, we have an immediate opportunity to improve access by utilizing our available, highly trained clinical pharmacists. I urge the Committee to support S 2866 and S 2386. By passing these bills, you are supporting Rhode Island's physicians in our mission to provide timely, safe, and effective care to every patient in our state.

Regards,

Sarah Riedo, MD