

March 3, 2022

The Honorable Shane E. Pendergrass  
Chair, Health and Government Operations Committee  
Room 241  
House Office Building  
Annapolis, Maryland 21401

### **Support for House Bill 1219 – Pharmacists - Status as Health Care Providers and Reimbursement**

Chair Pendergrass and Members of the Health and Government Operations Committee,

We thank you for the opportunity to submit testimony on **House Bill 1219**, a bill that recognizes pharmacists as health care providers and increases patient access to their pharmacist by allowing them to receive reimbursement for the services they provide. We **support** this bill as it will ensure patients have more time with their most accessible health care professional and better aligns the role of the pharmacist with their extensive education and training.

Within the next 10 years, the U.S. could see a shortage of over 55,000 primary care physicians.<sup>1</sup> In Maryland there are 47 areas that are designated as health professional shortage areas.<sup>2</sup> There are thousands of pharmacists in Maryland who are ready to provide valuable healthcare services to these communities that have limited access to care.<sup>3</sup> By realigning financial incentives and reimbursing pharmacists for their services similar to other health care professionals there will be greater access to the vital health care services pharmacists provide.

To the benefit of this realignment substantial published literature documents the significant improvement to patient outcomes<sup>4</sup> and reduction in health care expenditures<sup>5</sup> when pharmacists are more optimally leveraged. Compilation of studies have found themes in these cost savings, including “decreased total health expenditures, decreased unnecessary care (e.g., fewer hospitalizations, emergency department [ED] visits, and physician visits), and decreased societal costs (e.g., missed or nonproductive workdays).”<sup>5</sup> The adoption of House Bill 1219 would result in Maryland joining other states, such as, Ohio, Colorado, California, and Wisconsin as national leaders in empowering the pharmacist to better provide valuable services to their communities. In states where such legislation has already been implemented, we are observing health plans, notably Medicaid Managed Care Organizations recognizing the value of the pharmacist and investing in the services they provide.

As you may be aware, many of our community pharmacies, especially those in rural communities<sup>6</sup>, are closing as a result of the current unsustainable reimbursement model in the drug supply chain. This often hits Mom-and-Pop independent pharmacies the hardest and can cause the elimination of a needed healthcare professional and cornerstone of our communities. The reimbursement of services provided by pharmacists opens up additional revenue opportunities for these pharmacists to maintain their practice and the provision of valuable services to our communities.

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<sup>1</sup> Association of American Medical Colleges. 2019 UPDATE The Complexities Of Physician Supply And Demand Projections From 2017 To 2032. Available at: [https://aamcblack.global.ssl.fastly.net/production/media/filer\\_public/31/13/3113ee5c-a038-4c16-89af-294a69826650/2019\\_update\\_-\\_the\\_complexities\\_of\\_physician\\_supply\\_and\\_demand\\_-\\_projections\\_from\\_2017-2032.pdf](https://aamcblack.global.ssl.fastly.net/production/media/filer_public/31/13/3113ee5c-a038-4c16-89af-294a69826650/2019_update_-_the_complexities_of_physician_supply_and_demand_-_projections_from_2017-2032.pdf)

<sup>2</sup> Kaiser Family Foundation. Primary Care Health Professional Shortage Areas (HPSAs). Timeframe: as of September 30, 2019. Available at: <https://www.kff.org/other/stateindicator/primary-care-health-professional-shortage-areas/areashpsas/?currentTimeframe=0&sortModel=%7B%22collid%22:%22Location%22,%22sort%22:%22asc%22%7D>.

<sup>3</sup> Bureau of Labor Statistics. Occupational Employment Statistics Query System. Available at: <https://data.bls.gov/oes/#/home>.

<sup>4</sup> Giberson S, Yoder S, Lee MP. Improving Patient and Health System Outcomes through Advanced Pharmacy Practice. A Report to the U.S. Surgeon General. Office of the Chief Pharmacist. U.S. Public Health Service. Dec 2011. Available at: [https://www.accp.com/docs/positions/misc/improving\\_patient\\_and\\_health\\_system\\_outcomes.pdf](https://www.accp.com/docs/positions/misc/improving_patient_and_health_system_outcomes.pdf)

<sup>5</sup> Murphy EM, Rodis, JR, Mann HJ. Three ways to advocate for the economic value of the pharmacist in health care. Journal of the American Pharmacists Association. August 2020. Available at: <https://www.sciencedirect.com/science/article/abs/pii/S1544319120303927>

<sup>6</sup> Hawryluk M. Large parts of rural America are becoming drugstore deserts. These small towns found an escape. *The Washington Post*. Published December 15, 2021. Available at <https://www.washingtonpost.com/business/2021/12/03/drugstore-deserts-rural-america/>

House Bill 1219 will ensure more patients have greater access to health care services provided by pharmacists while supporting the sustainability of local pharmacies in our communities. Over 90% of Americans live within five miles of a community pharmacy,<sup>7</sup> and more than any other segment of the pharmacy industry, independent community pharmacies are often located in underserved rural and urban areas. The adoption of this important legislation will ensure that citizens across the state of Maryland are able to receive vital health care services provided by their pharmacist.

APhA, NCPA, and NASPA strongly support the Maryland Pharmacists Association in their advocacy for this bill. We appreciate the bill's sponsor, Delegate Bhandari, for their attention to this important issue and urge approval from this committee.

Sincerely,  
American Pharmacists Association  
National Alliance of State Pharmacy Associations  
National Community Pharmacy Association

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<sup>7</sup> NCPDP Pharmacy File, ArcGIS Census Tract File, NACDS Economics Department.