

# **PharmaCare Testimony.pdf**

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Position: FAV



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March 12, 2024

The Honorable Pamela Beidle, Chair  
Senate Finance Committee  
3 East Miller Senate Office Building  
Annapolis, Maryland 21401

Dear Chair Beidle and Members of the Senate Finance Committee:

I am writing to express the unqualified support of the PharmaCare Network, an independent pharmacy serving rural western Maryland and the surrounding communities, for Senate Bill 786: Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland.

The Pharmacare Network is an independent pharmacy composed of 7 retail pharmacies, a Long-Term Care and Home Infusion Pharmacy and Home Medical Department. We have been a pillar in our community for almost 48 years and have provided quality customer service and healthcare to our community. In desiring to help our neighboring communities provide quality healthcare, the PharmaCare Network purchased an independent pharmacy in the heart of Grantsville in rural Garrett County, Maryland in August 2013.

A year later, in July 2014, we purchased another independent pharmacy in rural Allegany County, in the town of Lonaconing. We successfully ran both pharmacies until July 2020 and October 2023, respectively. Unfortunately, due to declining populations and increasing staff costs, we had to make the painful decision to close those operations. With it, these core services are no longer available to the residents, in addition to the community losing a mainstay. Residents now had to drive several miles to the nearest pharmacy, which for many has been a hardship as many residents walked to these pharmacies due to transportation issues.

This is unfortunately, one of many stories of rural and urban communities who are faced with transportation and access issues. Telepharmacy, as is the case with health deserts, could assist in ensuring that residents get the services that they need in their local communities. By allowing pharmacists to oversee the filling of prescriptions and provide patient interaction via telephonic and digital connection, places like the Grantsville and Georges Creek Pharmacies could have remained open. Additionally, this would allow these locations to continue and expand



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services, such as immunization days during the flu and pneumonia season by providing on-site pharmacists to participate in clinics at the pharmacy.

Telepharmacy can have a unique impact for rural communities. Just as the Maryland General Assembly several years ago led in providing telemedicine services to those underserved communities that desperately need it, this committee can, once again, begin the work to expand critical medical access.

In short, we believe this bill provides a pivotal first step in providing access to Maryland's patients in both rural and urban settings. For this, we respectfully request a favorable consideration of this bill.

Sincerely,

Keith Pirolozzi, Pharm.D  
The PharmaCare Network

# **SB786 RMC Support.pdf**

Uploaded by: Charlotte Davis

Position: FAV



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*Susan O'Neill, Chair*

*Charlotte Davis, Executive Director*

Testimony in Support of  
Senate Bill 786 – Task Force on Access to Pharmacy Services and the  
Impact of Telepharmacy in Maryland  
Senate Finance Committee  
March 12, 2024

**The Rural Maryland Council supports Senate Bill 786 – Task Force on Access to Pharmacy Services and the Impact of Tele-pharmacy in Maryland.** The bill aims to establish the Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland. This task force will analyze access to pharmacy services and identify barriers to pharmacy services and telepharmacy. The Task Force is required to submit an interim report by May 1, 2025, and a final report by December 1, 2025, of its findings and recommendations on methods to increase access to pharmacy services and the use of telepharmacy in the State to the Governor and certain committees of the General Assembly.

According to a study published by the Center for Disease Control in 2020, rural populations across the United States are both decreasing and growing older. This shift has led to the closure of local businesses in many small rural towns, including pharmacies that dispense medications to older adults. In fact, 16% of rural independent pharmacies had closed during the previous 16 years as of 2018. Community pharmacies play a crucial role by dispensing 90% of medications in the United States. When pharmacies close, it disrupts medication access and negatively affects medication adherence, which can lead to greater disease progression and create a substantial financial burden on the healthcare system.

In October 2023, pharmacist workers went on strike due to poor work conditions and unprecedented closures of major brick and mortar pharmacies such as CVS, Walgreens, and Rite Aid. This strike had a significant impact on the communities where these pharmacies operate, as medications are a crucial component of quality of life.

Telepharmacy is a solution that can help restore access to pharmacy services for patients residing in pharmacy deserts. This practice brings crucial health services back to rural areas and supports local healthcare while complementing neighborhood clinics. With telepharmacy, a pharmacy technician fills prescriptions under the remote supervision of a pharmacist. The pharmacist is also available to counsel patients via a live video feed.

Maryland's rural communities can benefit from access to a pharmacist, leading to increased clinical interventions, improved medication adherence rates, and overall better health outcomes.

The Rural Maryland Council respectfully requests your favorable support of Senate Bill 786.

The Rural Maryland Council (RMC) is an independent state agency governed by a nonpartisan, 40-member board that consists of inclusive representation from the federal, state, regional, county, and municipal governments, as well as the for-profit and nonprofit sectors. We bring together federal, state, county, and municipal government officials as well as representatives of the for-profit and nonprofit sectors to identify challenges unique to rural communities and to craft public policy, programmatic or regulatory solutions.

*“A Collective Voice for Rural Maryland”*

**ACSCAN\_FAV\_SB786.pdf**

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Position: FAV



# Memorandum In Support of SB 786

## Senator McKay

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Senate Finance Committee

March 13, 2024

American Cancer Society Cancer Action Network is the nonprofit nonpartisan advocacy affiliate of the American Cancer Society. ACS CAN empowers cancer patients, survivors, their families and other experts on the disease, amplifying their voices and public policy matters that are relevant to the cancer community at all levels of government. We support evidence-based policy and legislative solutions designed to eliminate cancer as a major health problem. On behalf of our constituents, many of whom have been personally affected by cancer, we stand in strong support of SB 786.

SB 786 would establish a “Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland” to analyze access to pharmacy services and identify barriers to pharmacy services and telepharmacy. It would also require the Task Force to submit an interim report, and final report by December 1, 2025 reporting out its findings and recommendations on methods to increase access to pharmacy services and the use of telepharmacy in the State to the Governor and the Senate Finance Committee and the House Health and Government Operations Committee of the General Assembly.

Cancer patients and survivors often face significant obstacles to accessing necessary treatment including prescription medications, particularly for patients who live in rural areas. Access to essential medications should be made as frictionless as possible, so that patients can focus on healing, not stressing about transportation needs and distance to pharmacies.

It is especially concerning given the recent revelation that Maryland is losing pharmacies within the State, creating pharmacy deserts particularly in rural areas. SB 786 is an important first step towards identifying the gaps and opportunities to make better access to prescription medications a reality for patients across our state.

ACS CAN thanks the Chair and committee for the opportunity to testify and urges a favorable report of SB 786.

# **SB786.pdf**

Uploaded by: Mike McKay

Position: FAV



**MIKE MCKAY**  
*Legislative District 1*  
Garrett, Allegany, and Washington Counties



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Judicial Proceedings Committee  
Executive Nominations Committee

**THE SENATE OF MARYLAND**  
**ANNAPOLIS, MARYLAND 21401**

Senate Bill 786 – Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in  
Maryland

March 8, 2024

Dear Chair Beidle, Vice Chair Klausmeier, and Members of the Committee

The purpose of Senate Bill 786 – Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland, is to establish a task force that will analyze the access to pharmacy services and identify barriers in receiving the services and telepharmacy. The task force is to submit a report in 2025 on its findings and recommendations.

I believe that pharmaceutical services are essential to all Marylanders and this will be a great addition to health services in Maryland. I thank you all for your time and ask for a favorable report.

Sincerely,

A handwritten signature in black ink that reads "Mike McKay".

Senator Mike McKay

Representing the Appalachia Region of Maryland

Serving Garrett, Allegany, and Washington Counties

# **SB0786 Testimony.pdf**

Uploaded by: Sarah Paul

Position: FAV



## **Statement of Maryland Rural Health Association (MRHA)**

To the Senate Finance Committee

Chair: Senator Pamela Beidle

March 12, 2024

### ***Senate Bill 0786: Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland***

#### **POSITION: SUPPORT**

*Chair Beidle, Vice Chair Klausmeier, and members of the committee, the Maryland Rural Health Association (MRHA) is in SUPPORT of Senate Bill 0786: Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland.*

*Pharmacies play an essential role in the deliverance of quality healthcare for all members of our communities, especially for Maryland's rural residents. Pharmacies and their offered services bridge the gap between initiation of care and compliance while tackling multifaceted disparities. Such disparities include but are not limited to geographical location, lack of public transportation, race/ethnicity, and low income. Acting as an interceptor between the physician and patient, pharmacists are able to provide basic health education and offer support to the patient to ensure treatment compliance. This saves time and prevents undue stress for patients as they do not need to make an appointment with the doctor's office but simply visit the pharmacist at their earliest convenience.*

*The shortage of providers has impacted all aspects of our healthcare system, and pharmacists are no different. In rural areas specifically, if there is a shortage of operating pharmacies, it results in longer commutes in efforts to find one in service. With the emergence of telepharmacy, it has proven beneficial to residents across various communities as it improves access to care. Offering services ranging from medication reconciliation to patient education, telepharmacy increases quality and access to care for all residents. According to Dr. Charles Peterson, a leader in the North Dakota Telepharmacy Project, he has found that improved medication adherence, reduced medication errors, lower burden on the hospital systems, and improved patient outcomes are only a few of the benefits telepharmacy has offered to his rural communities. It has also brought in \$26.5 million in economic development to the local rural economy including adding 80-100 new jobs (North Dakota State University, 2023). This program is one of several around the country who all have reported similar results. To better serve our communities, assessing the current barriers in pharmacy access is essential to catering to the individualized needs of our Maryland rural communities.*

*After seeing the success that the implementation of telepharmacy has improved the health of rural communities around the nation, the Maryland Rural Health Association is in favor of SB0786 as it would increase access to healthcare in underserved communities, reduce hospitalizations, and potentially create jobs for rural residents.*

*On behalf of the Maryland Rural Health Association,  
Jonathan Dayton, MS, NREMT, CNE, Executive Director  
[jdayton@mdruralhealth.org](mailto:jdayton@mdruralhealth.org)*

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Uploaded by: Jason Caplan

Position: UNF



## DEPARTMENT OF HEALTH

Wes Moore, Governor · Aruna Miller, Lt. Governor · Laura Herrera Scott, M.D., M.P.H., Secretary

March 13, 2024

The Honorable Pamela Beidle  
Chair, Finance Committee  
3 East, Miller Senate Office Building  
Annapolis, MD 21401-1991

### **RE: Senate Bill 786 – Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland – Letter of Concern**

Dear Chair Beidle and Committee Members:

The Maryland Department of Health (Department) respectfully submits this letter of concern for Senate Bill 786 – Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland.

SB 786 establishes the Task Force on Access to Pharmacy Services and the Impact of Telepharmacy in Maryland to analyze access to pharmacy services, and identify barriers to pharmacy services and telepharmacy. The Task Force will study barriers to accessing pharmacy services for all residents of the State with a focus on rural communities, and identify barriers to pharmacists providing pharmacy services and telepharmacy in areas of the State where a significant number of residents travel more than 10 miles to obtain needed medications. The bill also requires the Task Force to report its findings and recommendations on methods to increase access to pharmacy services, and the use of telepharmacy in the State.

The Department supports the intent of this bill to better understand barriers to pharmacy services and access. When implemented effectively, telepharmacy has shown to decrease pharmacy deserts and increase access to pharmacy services, especially for individuals in medically underserved areas or populations (MUA/P).<sup>1</sup> However, a more concerning shortcoming of telepharmacy services that should be considered is the decrease in interaction between provider and patients due to the existence of physical distance.<sup>2</sup>

SB 786 requires the Deputy Secretary of Public Health Services or the Secretary's Designee to co-chair the Task Force, and the Department to jointly staff the Task Force. The Department is concerned that Public Health Services does not house the requisite resources and expertise on telepharmacy services to effectively co-chair the Task Force, which may impact the Task Force's

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<sup>1</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC10425826/>

<sup>2</sup> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC6681067/#:~:text=A%20decreased%20human%20interaction%20between,tel,epharmacy%20%5B6%2C7%5D.>

ability to efficiently perform its duties. As a result, the Department respectfully recommends that these responsibilities be assigned to a more suitable entity with extensive work on telepharmacy services. This will ensure an effective and successful implementation. As currently drafted and because of the need to hire additional experts in these fields, the Department anticipates SB786 would have a fiscal impact at an estimated cost of \$103,793 for fiscal year (FY) 2025 and \$88,802 for FY 2026 to cover staffing and other operational costs.

If you have any further questions, please contact Sarah Case-Herron, Director, Office of Governmental Affairs at [sarah.case-herron@maryland.gov](mailto:sarah.case-herron@maryland.gov).

Sincerely,

A handwritten signature in blue ink, appearing to read 'LH Scott', is positioned above the typed name.

Laura Herrera Scott, M.D., M.P.H.  
Secretary