

TESTIMONY IN SUPPORT OF HOUSE BILL 2082

BY

Jim BACKES, PHARM.D.

Good morning Chair Landwehr and members of the House Health and Human Service Committee. My name is Jim Backes and I am a Professor and Associate Dean for the University of Kansas School of Pharmacy (KU SOP) - and more importantly an actively practicing pharmacist. I am here on behalf of the KU SOP and urge you to support House Bill 2082. As you know, HB 2082 would allow pharmacists to administer medications pursuant to a prescription order.

There are three major points that I am hoping to make today include:

1. Pharmacists are fully trained and well-equipped to administer medications.
2. The state of Kansas and the University of Kansas School of Pharmacy are losing talent because of the limited scope of practice allowed in our great state.
3. Most importantly, allowing pharmacists to administer medications is simply the right thing to do for the patient.

*Background information - University of Kansas School of Pharmacy.* To support my points, I would like to tell you about the KU SOP and my role as a clinical pharmacist practicing at the University of Kansas Medical Center Atherosclerosis and LDL-Apheresis Center - better known as the "KUMC Cholesterol Clinic". First, the KU SOP is the only pharmacy school in the state - dating back to 1885. Our current enrollment includes approximately 600 pharmacy students across our 4-year curriculum with graduating classes of ~150 students each year. These are exceptionally well-trained students that complete at least 2 years of pre-pharmacy school prerequisites, with many having 4-year degrees prior to enrolling in pharmacy school. Approximately 35% of our graduates seek an additional 1-2 years of postgraduate training after receiving a Pharm.D. from KU. Altogether, our graduates have a minimum of 6 years of training while some have as many as 10+ years. Our graduates are well represented throughout the

state as we have at least one alumna in 95 of the 105 counties in the state of Kansas. I would argue we would have more, however, not all counties have a pharmacy.

1. Pharmacists are fully trained and well-equipped to administer medications. House Bill 2082 is consistent with the mission of the KU SOP regarding improving the health of Kansans. Additionally, our students and pharmacists throughout the state are well-equipped and trained to administer medications. Some of the most challenging medications to administer are injectables. However, pharmacists can provide injectable immunizations and have been doing so for nearly 2 decades. To help with this matter, the KU SOP has provided a nationally recognized immunization certificate program since 2001. This same program has been a standard in our curriculum for several years, ensuring all graduates are certified upon graduation. In total, nearly 3000 pharmacists and pharmacy students have been certified in the past 18 years. Not only are students certified, but they also routinely practice administering injectable immunizations at various healthcare events throughout the state as part of the School of Pharmacy's outreach efforts.

I personally am in my 28th year of practicing as a pharmacist. My role for the past 21 years has been at the KUMC Cholesterol Clinic. A few years ago, the Food and Drug Administration (FDA) approved new "breakthrough" injectable cholesterol medications that can be self-administered by the patient. Of course, prior to the patient self-administering the injectable medication, considerable education is required. One day while providing education to a new patient, it dawned on me that despite my training and many years as a practicing pharmacist, I cannot administer the medication for them, even though the patient requested I do so. This seems counter-intuitive that pharmacists can provide the necessary patient training for administration, but cannot actually administer a medication the FDA has deemed to be appropriate for a patient to administer themselves.

2. The state of Kansas and the University of Kansas School of Pharmacy are losing talent because of the limited scope of practice allowed in our great state. As mentioned earlier, approximately one-third of our graduates continue with an additional 1-2 years of postgraduate

training after they obtain their Pharm.D. Commonly these students are high achievers, as postgraduate training is very competitive. Unfortunately, nearly 70% of last year's class that sought residency training did so outside of the state. A common theme noted among this talented group was that there are more opportunities in states with broader scopes of practice. This too has negatively impacted faculty with the KU SOP. Former colleagues expressed frustration because "pharmacy in Kansas is in the dark ages" - and typically, these individuals will seek employment at a university outside of Kansas. A recent conversation with one of these colleagues, now employed with a different midwestern university, indicated that he can now practice at a higher level and his state just approved provider status for pharmacists.

*3. Most importantly, allowing pharmacists to administer medications is simply the right thing to do for the patient.* I have personally observed the benefits of medication therapy since my professional training began in 1988. I have also witnessed the adverse outcomes when patients go without their medication or are administered inappropriately. Presently, too many barriers are in place that limit patients from receiving the right medication and the right dose, with proper administration. HB 2082 will be a step forward and reduce such barriers, allowing for patients to experience improved overall health. In pharmacies throughout Kansas, more patients will properly receive the inhaled medication from a "tricky" inhaler ensuring better breathing, patients will more likely receive the much-needed injectable contraceptive to prevent unwanted pregnancies, or the injectable anti-psychotic to maintain mood stabilization and prevent hospitalizations.

For these reasons, I ask Chair Landwehr and members of the House Health and Human Service Committee to support HB 2082. I appreciate the time and opportunity to testify on this critical patient issue. Please let me know if you have any questions or comments.