

The Oregon State Pharmacy Coalition recommends the adoption of the -1 Amendments. These provisions will help to bolster the relationships already in place today between physician and pharmacist. By amending the following items into HB 2028, the House Health Care Committee can ensure maximum cost savings and patient care through comprehensive, collaborative Clinical Pharmacy Services.

Proposed -1 Amendments to HB 2028:

- By limiting participation from "prescribers" in this bill to "physicians" only, we are ensuring that the first steps of this legislation are well-measured and can become a model for broader implementation should other practitioners be interested down the road.
- By specifying that CCO's be added to as eligible participants in collaborative agreements this bill is able to serve patients in the medical assistance programs. This population is the crux of the issue when it comes to improving access through clinical pharmacy services. This provision puts HB 2028 squarely in line with the mission of bending the cost-curve in health care.
- In order to best do the above we are ensuring that for the purposes of this bill a pharmacist is considered a primary care provider for the purposes of this statute particularly.
- Deleting "but not limited to" on page 5, line 11, to the protocols that the public would benefit from having established; now examining specifically smoking cessation and travel vaccinations in statute.
- Changing the name of the Commission created by OHA and overseen by the Board of Pharmacy is simply to establish their ability to examine and craft as necessary public health protocols beyond immunizations. *We are willing to assign the 2 additional un-assigned seats to the primary care sector, as this will help to inform the protocols that are issued by OHA.*