



**Testimony Regarding Senate Bill 629**  
**Oregon Senate Committee on Health Care**  
**May 3, 2021**

Chair Prusak, Vice Chairs Salinas and Hayden, and members of the House Committee on Healthcare. My name is Jessica Adams, I am the Director of Regulatory Affairs at TelePharm. I am also a pharmacist. I am writing in support of Senate Bill 629 -- which would allow for telepharmacy at a remote dispensing pharmacy location. Telepharmacy refers to the delivery of pharmacy services through the use of technology to patients at a distance. In short, telepharmacy increases pharmacy resources in underserved areas, offering convenient dispensing for patients in both urban and rural settings.

A pharmacist is a critical member of a comprehensive health care team. Patients visit their pharmacist far more frequently than any other healthcare provider. Making pharmacists more accessible results in significant improvements to an individual's health and the health of entire communities; especially those that lack a pharmacist. People living in medically underserved areas, both rural and urban, face many barriers to obtaining comprehensive medical care, and desire more convenient access to their health care services. Telepharmacy is a proven model to provide care that is both safe and effective.

How does telepharmacy work? Telepharmacy is utilized at a remote dispensing pharmacy, which is a brick and mortar pharmacy location just like a traditional pharmacy. With telepharmacy at a remote dispensing pharmacy there is no change in roles or scope of practice. A pharmacist still provides the same services they do at a traditional pharmacy, they just perform them from a distance. For example, if an independent pharmacist opens a remote dispensing pharmacy in Elgin, Oregon, the patient enters a brick and mortar store which looks like a traditional pharmacy, the only difference is the pharmacist is supervising the remote dispensing pharmacy and pharmacy technician from another location through the aid of audio and visual technology. The patient drops off their prescription with a technician who enters the data in the computer system which a pharmacist checks remotely. The technician then fills the prescription, in the same manner as is done in a traditional pharmacy, and the pharmacist then checks to make sure the prescription is filled correctly. Before the patient can go home with the prescription, they have a secure, HIPAA-compliant face-to-face consultation with a pharmacist via audio/visual technology. In fact, a patient can walk into the remote dispensing pharmacy at any time and talk to the pharmacist with questions, just like in a traditional pharmacy.

This legislation in no way requires a pharmacy to open as a remote dispensing pharmacy. Rather, similar to the 25 other states which safely allow this model, this legislation gives a pharmacist the ABILITY to utilize telepharmacy and open a remote dispensing pharmacy to improve access to pharmacy care services. With the option of telepharmacy, the pharmacist who has patients 10 miles away, who drive into town or take multiple modes of public transportation, would now be able to provide patients with the same level of care in a more convenient setting. Telepharmacy provides the ability to restore or establish pharmacy services, offering patients in underserved communities access to the professional care they would otherwise not receive.

Thank you for the opportunity to comment in support of SB 629, I welcome any questions that the committee may have.