



# Oregon

Tina Kotek, Governor

## Oregon Board of Pharmacy

800 NE Oregon St., Suite 150

Portland, OR, 97232

Phone: 971-673-0001

Fax: 971-673-0002

[pharmacy.board@bop.oregon.gov](mailto:pharmacy.board@bop.oregon.gov)

[www.oregon.gov/pharmacy](http://www.oregon.gov/pharmacy)

### Testimony in Support for House Bill 3045 – April 15, 2025

Chair Patterson, Vice-Chair Hayden and Members of the Senate Committee on Health Care,

For the record, my name is Gary Runyon, Executive Director of the Oregon Board of Pharmacy, and I would like to provide testimony in support of House Bill 3045. This bill addresses the Board of Pharmacy's current lack of authority to require that a licensee undergo a mental, physical, chemical dependency or competency evaluation when the board has objectively reasonable grounds to believe that the person is or may be unable to practice pharmacy with reasonable skill and safety. Several similarly situated Boards, including but not limited to the Oregon Medical Board, Nursing Board, Physical Therapy Board, Medical Imaging Board and Veterinary Board, have this authority.

The option to require standardized evaluations will enable the board to obtain and review comprehensive and objective assessments generated from approved, independent third-party evaluators, improving the board's ability to make informed, data-driven decisions to adequately support its licensees while simultaneously upholding its statutory obligation to promote and protect the public health, safety and welfare.

Without this authority, the board may only request evaluations. When an individual does not comply, the board may be forced to make decisions that could have a lifelong impact without complete data. This will invariably lead to an increase in two unfavorable eventualities: licensees that should not be practicing might continue to, and licensees that might be able to continue practicing will be prohibited from it. In either scenario, all involved parties lose.

While there are no payment protections for the initial evaluation, neither are there payment protections for individuals who might lose their practice privileges if the board chose to exercise overly cautious action in protecting patients when these external assessments are unavailable. The cost of an entire year of monitoring is around 1 week's salary, before taxes, based on current data I've obtained. Additionally, there is no reason to believe that licensees would routinely or necessarily be barred from work pending the initial evaluation, nor would any investigatory information be made public, so the likelihood of "retaliatory complaints," as described, would arguably be no higher than with any other type of complaint the board routinely evaluates.

I went to the APhA Substance Use Disorder Institute last summer and heard countless stories from pharmacists whose ONLY saving grace was mandatory entry into programs like HPSP; in some instances, it saved their career/marriage/family, and in others, it saved their lives. It was a very profound experience that forever changed the way I approach conversations like these.

You may hear a lot of concern today about cost, but Chair Patterson, Vice-Chair Hayden, and members of the committee, I assure you that substance use disorder and mental health disorders always demand a cost. In this case, we can choose who pays that price, whether the practitioner in the form

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of evaluation, treatment and monitoring, the profession of pharmacy in the form of eroded public trust if we fail to ensure their safety, or the patients themselves that we've all devoted our lives and careers to serving, who may be harmed when we could've intervened but did not.

**Thank you,**

**Gary Runyon, Pharm.D., R.Ph.**

Executive Director

Oregon Board of Pharmacy

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