



May 1, 2024

[submitted electronically via: HouseFinance@rilegislature.gov]

The Honorable Marvin L. Abney
Chair, House Committee
82 Smith St.
Providence, RI 02903

RE: H7273 (Casimiro) – RELATING TO INSURANCE -- ACCIDENT AND SICKNESS
INSURANCE POLICIES -- **SUPPORT**

Dear Chair Abney, First Vice Chair Slater, Second Vice Chair Marszalkowski and members of the House Finance Committee:

My name is Matt Olivier, and I am the proud owner of Matt's Local Pharmacy, serving the local Aquidneck Island community in Middletown Rhode Island. I am submitting this letter to state my **support** of H7273 (Casimiro), including pharmacists in a health network's list of a participating medical providers, and provide payment for the services we already provide. **The bill also has an identical companion in the Senate, S2601 (DiPalma).**

As the owner of an independent pharmacy, I clearly recognize the impact that our services, provided by our pharmacists, have on our local community. Our patients utilize our pharmacy for a variety of purposes, and we pride ourselves on our consistent availability to our patients. **Pharmacists stand at the forefront of patient care access to healthcare and are adequately educated to provide services other than simply filling and selling prescriptions.** For example, at my pharmacy, we are equipped to provide chronic disease management for conditions like diabetes, heart failure, and COPD. Specifically for our patients with lung conditions, like COPD, we can fill a gap in care, as on Aquidneck Island there are **no pulmonology specialists available.** Services such as these will do nothing but support physicians, advanced practice nurses, and physicians assistants, and allow for better patient care through interprofessional collaboration and utilization of our drug-expertise.¹

Community pharmacies primarily provide services to patients with chronic conditions who utilize over 80% of healthcare resources annually.² Economically, H7273 will offer incentives

1. CareSource Launches Pharmacist Provider Status Pilot. Published August 4, 2020. Available at <https://www.caresource.com/newsroom/press-releases/caresource-launches-pharmacist-provider-status-pilot/>
2. Holman HR. The Relation of the Chronic Disease Epidemic to the Health Care Crisis. ACR Open Rheumatol. 2020 Mar; 2(3): 167-73. doi: 10.1002/acr2.11114 <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC7077778/#:~:text=In%20the%20last%2020%20years,of%20health%20care%20costs%203.>

for pharmacies to offer further billable services to their patients – an investment in preventive medicine as opposed to curative medicine – which can reduce healthcare costs.¹

Additionally, despite our prospective contributions to the health and wellness of our patients, we are forced to operate at a loss by Pharmacy Benefit Managers (PBM's) and are not properly reimbursed for our services owing to a lack of recognition by health insurers. This financial strain limits the resources pharmacists utilize for patients and dissuades pharmacists from offering services within our capabilities.

H7273 would align Rhode Island with states including California, Colorado, Idaho, Kentucky, Minnesota, Maryland, Nevada, Ohio and others which increase patient access to healthcare services provided by pharmacists.

In closing, pharmacists are the medication experts, accessible in a 24/7 fashion, who yield improved public health and healthy equity throughout our Rhode Island communities. Covering the valuable health care services pharmacists provide, similar to Rhode Island's recognition of many other health care providers will contribute to a reduction in hospital admissions, decreasing overall healthcare expenditures, and would aid in keeping my local community healthier.

Sincerely,

Matt

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Owner of Matt's Local Pharmacy
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Jason Cambra, PharmD Candidate 2024
The University of Rhode Island, College of Pharmacy

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