



February 21, 2024

[submitted electronically via: wpetersen@azleg.gov]

The Honorable Warren Petersen
President
Arizona Senate
205 1700 W. Washington St.
Phoenix, AZ 85007

Dear President Petersen, Majority Leader Borrelli, Minority Leader Epstein, and members of Senate leadership:

The American Pharmacists Association (APhA) appreciates the opportunity to provide our support for [Senate Bill \(SB\) 1085](#) (Senator Shope). SB1085 makes several updates to better align the role of the pharmacist with their extensive education and training.

APhA is the largest association of pharmacists in the United States advancing the entire pharmacy profession. APhA represents pharmacists in all practice settings, including community pharmacies, hospitals, long-term care facilities, specialty pharmacies, community health centers, physician offices, ambulatory clinics, managed care organizations, hospice settings, and government facilities. Our members strive to improve medication use, advance patient care, and enhance public health. In Arizona, there are 7,730 licensed pharmacists and 11,540 pharmacy technicians. APhA represents the pharmacists, student pharmacists, and pharmacy technicians that practice in numerous settings and provide care to many of your constituents. As the voice of pharmacy, APhA leads the profession and equips members for their role as the medication expert in team-based, patient-centered care. APhA inspires, innovates, and creates opportunities for members and pharmacists worldwide to optimize medication use and health for all.

SB1085 better aligns the pharmacists' role with their education and training by allowing pharmacists to order laboratory tests and furnish medications via a statewide written protocol approved by the Arizona State Board of Pharmacy, in consultation with the Arizona Medical Board, to facilitate access to care for their patients. Conditions that pharmacists will test and treat for include influenza, group A streptococcus pharyngitis, COVID-19, and other conditions identified by the Department of Health Services.

SB1085 aligns Arizona with a growing number of states increasing patient access to test, treat, prevent, and refer services provided by pharmacists. Eleven states allow pharmacists to test and treat for influenza, streptococcal infections, and/or COVID-19 via prescriptive authority, statewide protocol, or other means.¹ Twelve additional states allow pharmacists to test and treat for conditions via collaborative practice

¹ Arkansas, Colorado, Delaware, Idaho, Illinois, Iowa, Kansas, Michigan, Minnesota, New Mexico, Virginia

agreements or prescriber protocols for multiple patients that do not require a past prescriber-patient relationship.²

As one of the most accessible and trusted health care providers in their communities, pharmacists have a significant role to contribute in initiating access to preventative medications and providing culturally competent and culturally sensitive care. Nearly 90% of the U.S. population lives within five miles of a community pharmacy and this high level of accessibility allows pharmacists to serve in a unique role as another access point for acute preventative services. Patient access to pharmacist-provided care has been proven to address health inequities while reducing hospital admissions, increasing medication adherence, and decreasing overall healthcare expenditures which saves millions of lives and billions of dollars.^{3,4,5}

For these reasons, APhA respectfully requests your “AYE” vote on SB1085. If you have any questions or require additional information, please don’t hesitate to contact E. Michael Murphy, PharmD, MBA, APhA Advisor for State Government Affairs by email at mmurphy@aphanet.org.

Sincerely,



Michael Baxter
Vice President, Federal and State Legislative Affairs

cc: Senator Sonny Borrelli, Majority Leader
Senator Sine Kerr, Majority Whip
Senator Thomas “T.J.” Shope, President Pro Tempore
Senator Denise “Mitzi” Epstein, Minority Leader
Senator Juan Mendez, Assistant Minority Leader
Senator Eva Burch, Minority Whip
Senator Lela Alston, Minority Caucus Chair

² Alabama, California, Florida, Kentucky, Minnesota, Nebraska, South Dakota, Tennessee, Utah, Washington, Wisconsin, and Wyoming

³ Grabenstein JD. Essential services: Quantifying the contributions of America’s pharmacists in COVID-19 clinical interventions. *J Am Pharm Assoc* (2003). 2022 Nov-Dec;62(6):1929-1945.e1. doi: 10.1016/j.japh.2022.08.010. Epub 2022 Aug 18.

⁴ Giberson S, Yoder S, Lee MP. Improving Patient and Health System Outcomes through Advanced Pharmacy Practice. A Report to the U.S. Surgeon General. Office of the Chief Pharmacist. U.S. Public Health Service. Dec 2011. Available at: https://www.accp.com/docs/positions/misc/improving_patient_and_health_system_outcomes.pdf

⁵ Murphy EM, Rodis, JR, Mann HJ. Three ways to advocate for the economic value of the pharmacist in health care. *Journal of the American Pharmacists Association*. August 2020. Available at: <https://www.sciencedirect.com/science/article/abs/pii/S1544319120303927>