Date

The Honorable [Representative Full Name]

N.C. House of Representatives

Raleigh, NC

Dear Representative [Representative Last Name]:

My name is \_\_\_\_\_\_\_\_\_, and I am a constituent and a pharmacist in \_\_\_\_\_\_\_, NC. I am

currently employed at \_\_\_\_\_\_\_\_\_\_\_, located in/at \_\_\_\_\_\_\_\_\_. I am writing today to request

that you support **House Bill 862 “Improving Access to Patient Care”** introduced by Representative Sasser.

This bill is an important priority for pharmacists in our state and would serve to expand

patient access to health care through physician-pharmacist collaborative practice.

In my practice, I focus on helping patients manage their medications to ensure safe and effective treatment regimens, to minimize costs, and to assure medication treatment goals are being achieved. Daily, I consult physicians and other healthcare providers in the care that I provide.

Note: Be specific about your position and feel free to use your own words to describe how

the legislation will affect you and/or your ability to provide patient care.

North Carolina was one of the first states in the nation to enact collaborative practice authority (CPA) for physicians and pharmacists.  During the past two decades patient care needs and delivery of medication and disease state management has advanced considerably. Today, our state’s CPA now ranks as one of the most restrictive, imposing extensive barriers and outdated limits on these practice relationships.

What is collaborative practice authority? This is when a physician and pharmacist enter into a written agreement by which the physician delegates certain medical acts to the pharmacist for the care of their patients. As an example, a physician could delegate the authority to start, stop or change a medication for any of that physician’s patients for a specified condition or disease state.

H862 does NOT expand or change pharmacist scope of practice. Instead, it

streamlines the process by which physicians and pharmacists engage in collaborative

agreements, making the steps to enter into collaborative agreements easier. The bill also enables physician assistants and nurse practitioners to also participate in a physician-pharmacist collaborative agreement; and the bill calls for fewer fees and seeks to shift to a registry versus a regulatory committee approval process.

This bill would more easily facilitate collaborative care, particularly in rural areas, where patients need greater access to clinical services to better manage disease states such as high blood pressure and diabetes.

Again, collaborative practice authority already exists in our state, but our collaborative practice statute is out dated. The vast majority of collaborative practice occurs in large health systems in urban areas of our state. Many communities, and patient populations, all across our state could benefit from the passage of H862, which is designed to more easily facilitate care.

I believe that this legislation is needed to help improve patient access to much needed healthcare services. **I ask for your support of H862**. Please reach out to me if you have any questions about my patient care practice or this bill.

Thank you for your consideration of this legislation to improve access to care for patients in

our district and in the state of North Carolina.

Sincerely,

Your name, address, and contact information