



# MASSACHUSETTS MEDICAL SOCIETY

*Every physician matters, each patient counts.*

**TESTIMONY IN OPPOSITION TO H.4066,  
AN ACT RELATIVE TO PHARMACISTS AS HEALTHCARE PROVIDERS  
BEFORE THE JOINT COMMITTEE ON FINANCIAL SERVICES  
SEPTEMBER 12, 2023**

The Massachusetts Medical Society is a professional association of over 25,000 physicians, residents, and medical students across all clinical disciplines, organizations, and practice settings. The Medical Society is committed to advocating on behalf of patients, to give them a better health care system, and on behalf of physicians, to help them provide the best care possible. **The MMS would like to be recorded in opposition to H.4066, *An Act relative to pharmacists as healthcare providers***, which inappropriately expands pharmacists' scope of practice to include testing and providing treatment for influenza, streptococcal infections, COVID-19 and HIV.

This proposal removes critical supervisory requirements that work toward patient safety and protection by promoting the highest quality and safety of care for all patients in the Commonwealth. Physician-led team-based care empowers health care professionals to perform the full range of medical interventions that they are trained to perform, maximizing the full educational capacity of each team member to effectively provide quality patient care. The extensive medical education, required medical residencies, and frequent post-residency fellowships that physicians undertake provide them with unique expertise and qualifications to manage health care teams. This bill would place pharmacists in a position of diagnosing illness and prescribing treatment, without the benefit of the substantial education and residency training that enables physicians to identify and manage complex cases.

Pharmacists are well-trained as medication experts within an interprofessional team; however, their training in patient care is limited. Most of the Doctor of Pharmacy (PharmD) curricula across the country consists of instruction in applied sciences and therapeutics. Residency training is not required, and the overwhelming majority of pharmacists working in the community setting have not undergone residency training. Additionally, their limited “practice experiences” training is not focused on providing medical care to patients. The bill goes a step further, by empowering the board of pharmacy alone, to determine “any other



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health condition” for which it may authorize pharmacists to test, screen, and treat with absolutely no safeguards regarding whether pharmacists are educationally prepared and for which competence has been achieved and maintained. Diagnosing infection and illness goes beyond administering a test or screening, it requires an understanding of the symptoms and potential alternative diagnoses in the case of a false positive or false negative.

Adoption of this measure could lead to misdiagnosis and overtreatment. This is particularly concerning in the case of pediatric medicine, where the overtreatment of children with antibiotics for strep throat or a respiratory illness can result in increased resistance to antibiotics for life. A development that could prove serious later in life when confronting a serious illness or infection requiring the use of antibiotics. There is also the potential for conflicts of interest, where the prescriber and seller of the pharmaceuticals are one and the same person. Patient safety must remain centered in the provision of care.

Based on the considerations mentioned above, the Medical Society would like to be recorded in opposition to H.4066, *An Act relative to pharmacists as healthcare providers*. The Medical Society is concerned that this proposal, aimed at providing pharmacists with the ability to diagnose and prescribe treatment for certain illnesses will unnecessarily distance physicians from patients. The legislature, in fulfilling its duty to protect patients of the Commonwealth, has diligently established a thoughtful, patient-focused framework of policies and statutory requirements that apply to physicians in light of their ability to independently provide medical care and oversee the care provided by other health care providers. This bill would jeopardize the effects of these patient-centered protections and could result in a vastly varying quality of patient care.

For those reasons, the Medical Society respectfully requests that the committee report out unfavorably regarding H.4066, *An Act relative to pharmacists as healthcare providers*. We thank you for your consideration of our comments and look forward to providing any further input that may assist you in your deliberations.