

School of Pharmacy

222 SE 8th Avenue, Suite 451
Hillsboro, OR 97123

Phone: 503-352-7283

Fax: 503-352-7270

March 13, 2017

RE: HB 2373

Chair Greenlick and House Health Care Committee Members,

We write this letter in support of HB 2373. Oregon currently has over four million residents as of 2015, 36% of whom live in rural communities. In 2010 there were 7 rural counties in the state of Oregon having only nine registered physicians, with some as few as zero and many of these counties are the largest in Oregon in terms of square miles. This level of disparity is significant, considering that the two largest counties in terms of population, Multnomah County and Washington County, have over 1000 registered physicians each. With this scarcity of physicians, organizations and communities are looking to the next generation of health care provider to close this gap, and reduce the healthcare disparities these residents are faced with.

The next generation provider model will include pharmacists working in an intraprofessional collaborative with physicians, physician assistants, and nurse practitioners. With the establishment of collaborative practice agreements, pharmacists in these communities can work alongside other healthcare professionals to manage chronic disease states, educate patients, evaluate the safety, appropriateness and effectiveness of medication regimens, and improve medication adherence. These activities are in addition to continuing to serve on the front-line of patient care in the many community pharmacy settings located throughout the state, which are struggling to fill long-term positions. The provision of these valuable services can be increased immensely with the addition of highly trained and passionate pharmacists within these areas, ultimately closing the healthcare gap, balancing health inequity, and improving patient outcomes.

However the incentives to move to these rural and underserved areas are almost non-existent today. There once was a time when working in a rural area meant you could possibly receive a signing bonus or some loan forgiveness; very enticing for a young pharmacist entering the field with a great deal of debt. The national average student loan debt for a graduate pharmacist entering the field today is around \$123,000 or higher, with loan interest rates at times greater than 7%. This can seem almost insurmountable to a recent grad and place many dreams of owning a home or building a family on hold.

Offering more incentives for pharmacists to expand and enter these underserved locations will not only improve patient care throughout our wonderful state, but also improve the education we will be able to provide our future pharmacists. With more pharmacists in rural settings, schools of pharmacy in the state will have greater opportunity to place students for training during their rotational experiences. This will encourage the provision of first hand knowledge of what it takes to care for these often diverse and complex patients and build an interest in continuing to provide care in the area after graduation.

Pacific University School of Pharmacy realizes the need to create pharmacists with rural and underserved specialty. We recently developed curriculum to provide a learning track to provide this experience. Approving HB 2373 will enable these next generation providers an affordable way to move into rural practice.

Thank you for your consideration.

Sincerely,

Danielle Backus, PharmD, Assistant Professor
John Begert, PharmD, Assistant Professor
Edward Saito, PharmD, Assistant Professor
Nicola Carter, PhD, Assistant Professor
Sigrid Roberts, PhD, Assistant Dean for Pharmaceutical Sciences
Ian Doyle, PharmD, Assistant Dean for Pharmacy Practice