



TESTIMONY IN SUPPORT OF SENATE BILL 377

BY

TERICA GATEWOOD

Good morning Chair Schmidt and members of the Senate Public Health and Welfare Committee. My name is Terica Gatewood and I am a practicing pharmacist and site manager for Genoa Healthcare. I am here on behalf of Genoa and the Kansas Association of Chain Drug Stores to urge you to SUPPORT Senate Bill 377. As you know, SB 377 would allow pharmacists to administer drugs by injection pursuant to a prescription order.

First, I would like tell you a little bit about Genoa and what we do. Genoa's pharmacies are located within community mental health centers. My pharmacy is located within Valeo Behavioral Health Care here in Topeka.

Genoa pharmacies are closed door, which means that the patients for which

we fill medications have to have a relationship with the clinic. Therefore, nearly 100% of our patients are living with a severe and persistent mental illness, which allows us to understand the unique and special needs of this population. Genoa pharmacies have very low rates of unclaimed prescriptions, resulting in higher adherence and lower overall healthcare costs. Our success in this area comes from a number of services we provide, all based on Genoa's dedication to making sure our patients have the care they need to lead their best life. Our pharmacies fill all medications, offer full service, confidential and discrete pharmacy services to patients, and present a convenient, comfortable place for them to fill their prescriptions.

SB 377 improves access to injectable medications for the population with which we most closely work. Since pharmacists are some of the most accessible health care providers, this bill enlists the help of these caring clinicians to administer these specific medications. Long Acting Injectable medications are intra-muscular shots. These shots are good for 30 days in most cases, and in one case 90 days. The advantage is, the shot takes the place of a daily, or in some cases, twice daily pill form medications. For Genoa's patients living with mental illness, this reduces the number of times

they need to remember to take their medications, once every thirty days versus once or twice daily. This helps to increase adherence. However, patients need to have access to more health care professionals to administer the medication.

The passage of this bill will allow pharmacists to complement the efforts of physicians, psychiatrists, nurses, and other healthcare providers to help improve access to these medications that are so needed by our patients.

Because almost 100% of Genoa's patients are living with mental illness, many of our patients rely on some sort of public assistance and in many cases, transportation is an issue. Since our pharmacies are located inside the mental health clinic, a patient could see their psychiatrist and receive their injectable medication at the same location. Furthermore, for this population, a one day gap in therapy greatly increases the risk of hospitalization. Our pharmacies provide a safe, comfortable, and convenient option to ensure they get the medication needed to protect their health and ensure they don't need to be admitted into the hospital. This bill would allow our pharmacists to administer these medications and not require our patients to travel to another site to receive the injection.

I am willing to improve accessibility to these injectables. The bill will give my patients access to the therapies they need to lead the lives they so much deserve.

In fact, one of my colleagues Tessa Callaway, our site manager in Olathe had a perfect situation come up that supports why we need to administer these medications. She had a patient discharged from Osawatomie State Hospital and she uses Invega. She had no services set up with anyone. She had just gotten the 234mg loading dose so now she had less than a week before she needs to get the next injection (give or take a few days.) The OSH doctor sent out a prescription for it, but no doctor's office will administer that prescription. She now has to get services started, get an appointment with a doctor, and get in to see a nurse before she can get her injection. The clinic, which offers amazing services, unfortunately is short staffed and fully booked, so there is a decent chance she'll be late getting her injection. Please remember, as stated, a one day gap in greatly increases the risk of hospitalization. If Tessa could give the injection, this risk would be non-existent for this patient.

Madam Chair, and the members of the committee I am asking you to support SB 377. Thank you for allowing me to testify on this important issue. I am happy to try and answer any questions.