

# Miami Herald

## With Fewer Doctors, Should Florida Pharmacists Be Given a Prescription Pad?

Jeffrey Singer and Marc Joffe

March 28, 2024

As Florida lawmakers learned in December, their state is expected to have a severe physician shortage in the 2030s.

Even now, it can take up to three weeks to get an appointment with a primary care clinician. Many rural Floridians live in primary care deserts.

While encouraging more aspiring doctors to study and remain in Florida can help ease the problem, that will take time to see results.

Meanwhile, a more immediate and cost-effective approach empowers other qualified healthcare professionals to take on more responsibility for patient health.

One such reform is allowing pharmacists to prescribe certain medications, as they do in the United Kingdom, many Canadian provinces and several states in the U.S.

Florida lawmakers pioneered the idea of pharmacists prescribing back in 1985, but they attached too many strings, so it didn't work. The 1985 reform created a committee to decide which drugs pharmacists could prescribe.

The committee's narrow list and the burdensome paperwork for pharmacists resulted in few pharmacists taking advantage of the new law. The reform was so ineffective that few people today know the law is still on the books.

Meanwhile, as we detail in a new policy brief, other jurisdictions in the U.S., Canada, and Australia have adopted their own pharmacist prescribing laws with greater success.

In Ontario, pharmacists prescribe medications for nineteen common conditions, including urinary tract infections (UTI), menstrual cramps, and hay fever. In the first six months of 2023 alone, Ontario pharmacists wrote over 250,000 prescriptions.

In Queensland, Australia, a state with over five million people, pioneered pharmacists prescribing UTI treatments and has recently added wound care and shingles to the conditions that pharmacists can address.

Expanding pharmacist prescribing authority is also being pioneered closer to home.

In Colorado, which passed a pharmacist prescribing law in 2021, patients can access UTI treatments, EpiPens, diabetes supplies, and several other prescription treatments without a physician's involvement. The Colorado pharmacist prescribing law follows a model initially implemented in Idaho and recently enacted in Montana.

The law permits a pharmacist to prescribe if at least one of four conditions are met: A new diagnosis is not required, the condition to be treated is minor and generally self-limiting, the condition has a test waived under the federal Clinical Laboratory Improvement Amendments to guide diagnosis, or there is an emergency in which the patient's health or safety is threatened without immediate access to a prescription.

More than half of all pharmacists today have doctorate degrees (PharmD), for which they receive as much classroom and nearly as much clinical instruction as medical doctors. They often know more about drug interactions and side effects than physicians, and physicians frequently consult pharmacists before deciding what medication to prescribe. All 50 states let pharmacists give vaccinations. Pharmacists have sufficient training to prescribe independently.

Florida took a second stab at letting pharmacists prescribe in 2020, when lawmakers gave them broader prescription authority if they obtained collaborative practice agreements (CPAs).

In these agreements, pharmacists ask community physicians to supervise them, usually for a fee. Experience in other jurisdictions requiring pharmacists to arrange CPAs to prescribe medications finds pharmacists reluctant to work under a doctor. Such reforms have yet to move the needle.

Pharmacies are much more numerous than doctors' offices. As Florida's shortage of primary care practitioners worsens, lawmakers can help relieve the bottleneck many patients encounter trying to get doctor appointments for routine conditions by passing a law like the ones in Idaho, Colorado, and Montana.

Alternatively, lawmakers can extend the list of drugs pharmacists can prescribe under Florida's 1985 law to include those that Ontario and Queensland allow.

Like their colleagues in Colorado, Idaho and Montana, Florida's pharmacists could treat millions of patients for routine medical problems annually, reduce unnecessary physician visits, add convenience and accelerate patient relief and recovery.

*Jeffrey A. Singer is a senior fellow at the Cato Institute and works in the Department of Health Policy Studies. He is President Emeritus and founder of Valley Surgical Clinics Ltd., the largest and oldest group private surgical practice in Arizona, and has been in private practice as a general surgeon for more than 35 years.*

*Marc Joffe is a federalism and state policy analyst at Cato Institute.*