

April 23, 2020

The Honorable Van Taylor  
United States House of Representatives  
5600 Tennyson Pkwy., #275  
Plano, TX 75024

Dear Mr. Taylor:

I hope you and your family are well given the current pandemic we are all facing, which only serves to heighten the importance of comprehensive health care in our country. With that, I urge you to please reconsider the impact that Texas House Bill 2561 can have upon critical access to medicine and health care for the citizens of our great state. The amended language of Section 551.006 of the Occupations Code specifically states, “Notwithstanding any other law, a pharmacist has the **exclusive authority** to determine whether or not to dispense a drug,” and this verbiage has implications for all. It grants power to a pharmacist which is excessive, has not been earned and can explicitly defy the order of a physician.

A pharmacist is essential to patient care, but regardless of years of education is not a “practitioner” as clearly defined in Section 551.003(34)(A) of the Pharmacy and Pharmacists section of the Occupations Code. A pharmacist has no place within the sanctity of the doctor-patient relationship, nor should one be gifted the right to use his or her beliefs to override decisions made by a physician or to prohibit a patient’s access to care. To do so ascribes an undue right to potentially harm and forever change the lives of patients who, with guidance from their physician, made informed decisions that were in their best interests of their lives and health as a *whole* – physical, emotional, mental.

This language allows a pharmacist to prevent or hamper distribution of birth control medications. Regardless of your views on choice, let us consider other possible unintended scenarios. Perhaps an antibiotic was prescribed, but there are many cases of the flu. Is the pharmacist then able to question the physician’s decision to use an antibiotic, and refuse to fill the script? What if a pharmacist has strong feelings against a medicine that was made utilizing processes that involve pigs, cows or other animals that may be revered or abhorred by certain cultures or religions – could a pharmacist choose not to honor those prescriptions? Could he choose not fill HIV medications for a gay man if that conflicted with his religious beliefs? When reasons are not demanded and explanations for refusal are not required, how can we be certain that a pharmacist doesn’t selectively discriminate at will?

Our health system already has a long way to go to achieve parity in the clinical outcomes of our peer countries but also in how we treat and care for our citizens as a whole. I ask that you please advocate to provide Texas citizens more access and control over their own health care by amending HB 2561 and eliminating the “exclusive authority” language that in my opinion has no place in the hands of our pharmacists.

Regards,

MSHA Student