Eliminating Government Burdens to Help Fight COVID-19

Interested Party Testimony
Ohio House State and Local Government Committee
House Bill 673

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As Submitted
Chairman Wiggam Vice Chair Stephens, Ranking Member Kelly, and members of the Committee, thank you for the opportunity to submit testimony regarding House Bill 673.

My name is Greg R. Lawson and I am the research fellow at The Buckeye Institute, an independent research and educational institution—a think tank—whose mission is to advance free-market public policy in the states.

House Bill 673 offers commonsense responses to several complex challenges created by the COVID-19 pandemic. Several of those responses align with The Buckeye Institute’s recent policy recommendations.

First, the bill will strengthen Ohio’s public health infrastructure and remove regulatory hurdles that prevent trained health care professionals from doing their jobs. In Policy Solutions for the Pandemic: Enlisting Pharmacists to Fight COVID-19 (attached), The Buckeye Institute recommended allowing pharmacists to test for and treat COVID-19 to help manage the current crisis and any future flare-ups.

House Bill 673 takes steps in the right direction, but they could be improved either by eliminating the requirement that pharmacists administer tests pursuant to a physician-established protocol or by creating a uniform statewide protocol for pharmacists to follow. Research shows that requiring physician-established protocols provide no health benefits and only make it harder for people to access the care they need.

Second, House Bill 673 allows well-trained prospective nurses to continue helping our health care ranks during this emergency and wisely extends their temporary authorization to practice until July 1, 2021. This prudent extension makes sense given the ongoing medical uncertainty and concern for subsequent waves of COVID-19, and will allow health care facilities to retain as many care providers as possible.

Finally, House Bill 673 also addresses some of Ohio’s ongoing occupational licensing issues by temporarily suspending continuing education requirements that licensed professionals must complete to retain their licenses. The bill’s temporary suspension will relieve tens of thousands of licensed professionals from these educational burdens at a time when meeting those burdens may not be practical, advisable, or even possible.

House Bill 673 does not solve every difficulty that Ohio workers and care providers must now face in this new COVID-19 environment, but it does take commonsense steps in the right direction by paring back unnecessary government restrictions and allowing more trained professionals to do their jobs and help patients.
About The Buckeye Institute

Founded in 1989, The Buckeye Institute is an independent research and educational institution – a think tank – whose mission is to advance free-market public policy in the states.

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The Buckeye Institute’s Recommendation
Ohio should enlist its pharmacists to join doctors, nurses, and other health care professionals on the front lines in the battle against COVID-19. The state should permit pharmacists to test for the virus once tests become available, and encourage them to test and prescribe treatments for common illnesses like the flu and strep throat in order to relieve burdens on other health care workers dealing with surges in COVID-19 patients.

Background
Large scale COVID-19 testing remains in the early stages, but once available, adequate testing capacity will be critical for responding quickly and effectively. Successfully ending the COVID-19 crisis will require widespread testing in order to determine an accurate infection rate, track infections, improve treatment strategies, and implement more focused containment and quarantine measures. Pharmacists can aid that effort by administering the COVID-19 test and dramatically increasing the number of trained professionals and easily accessible locations for testing. An estimated 90 percent of Americans live within two miles of a pharmacy, making pharmacies critical access points for testing and potential treatment for COVID-19 patients especially in rural areas that likely will face general shortages of health care providers and COVID-19 treatment centers.

The Clinical Laboratory Improvement Amendments of 1988 (CLIA) regulates most laboratories that test for human diseases. Some tests, like those for the flu and strep throat, have waivers from CLIA requirements so that they are more widely available at home or local pharmacies. Similar authorization for COVID-19 tests could allow pharmacists to alleviate strains on the overall health care system during this pandemic.

Cutting Ohio’s regulatory red tape and allowing pharmacists to test and treat the flu, strep throat, and other common illnesses will relieve pressure elsewhere in the health care system by shifting the initial point of care for these common ailments away from the doctors and hospitals currently grappling with COVID-19. Florida is the most recent of many states to let pharmacists test and prescribe medication for illnesses like strep throat and influenza. Ohio should follow suit. It also should authorize pharmacists to prescribe any future COVID-19 vaccines or medications and thereby preempt anticipated surges of COVID-19 patients in hospitals and doctors’ offices.

Conclusion
Pharmacies can play a vital role in Ohio’s response to COVID-19. Ohio should enlist its pharmacists in this pandemic fight and authorize them to test for COVID-19. Other states already allow pharmacists to test and prescribe for common illnesses, and Ohio should too. Making full use of pharmacists now and in the future will relieve the burdens on doctors and hospitals, and increase access to health care in Ohio’s rural communities.