

# MICROFILM DIVIDER

OMB/RECORDS MANAGEMENT DIVISION

SFN 2053 (2/85) 5M



ROLL NUMBER

DESCRIPTION

2387

2007 SENATE POLITICAL SUBDIVISIONS

SB 2387

## 2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. **SB 2387**

Senate Political Subdivisions Committee

Check here for Conference Committee

Hearing Date: **February 2, 2007**

Recorder Job Number: **2710**

Committee Clerk Signature

*Shirley Borg*

Minutes:

**Chairman Cook** called the Senate Political Subdivisions Committee to order. All members (5) present.

**Chairman Cook** opened the hearing on SB 2387 relating to pharmacist license requirements/ relating to the membership of the state board of pharmacy and annual reports of the state board of pharmacy/relating to the North Dakota pharmacists association.

**Chairman Cook**, District 34, Mandan ND, Prime Sponsor, introduced SB 2387. There is one issue that is very dear to me. When I talked to a constituent early in the summer, I realized that pharmacists do not have a choice as far as membership in their association. Belonging to an association should be a free choice not a condition of licensure.

**Representative Porter**, District 34, Mandan, ND testified in support of SB 2387. This bill is an identical version of a bill that was in the House of Representatives early on. There are a couple of different arguments that come up. Should someone be forced to be a member of the trade association? In the existing law the pharmacists that are getting their license mails in a check for two hundred dollars. The state agency, the licensing agency, regulatory agency send a check of half of that amount to the association. So when the pharmacist's mails in their licensing fee they are also mailing in their mandatory membership to the association. In

section one of the bill it talks about the Board of Pharmacy. Inside of the Board of Pharmacy, there are five pharmacists that are appointed to the Board of Pharmacy. Their nominations come from within the association, so they are a self nominating group. There is no member of the public on this board. The majority of the membership is made up of one specific type of pharmacist, retail pharmacist. Currently there are two hospital pharmacists on this board. You hear if you take this mandatory money away from this association that by next session it just won't exist. If they are that non responsive to the needs of their members, maybe they should not exist. They should not have the opportunity to continue on in a mandatory fashion with mandatory assessments and then not be responsive on the other end. You can't have it both ways.

**Joan Johnson**, on behalf of the 128 pharmacists, testified in support of SB 2387. (See attachment #1)

**John Savageau**, RPh, representing himself, testified in support of SB 2387. (See attachment #2)

**Brian Ament**, R.Ph, Pharm.D, testified in support of SB 2387. (See attachment #3)

**George Sinner**, a letter from former governor Sinner, in support of SB 2387, was passed out. (See attachment #4)

Opposed to SB 2387.

**Jerome Wahl**, President elect of the ND Pharmacist Association, testified in opposition to SB 2387.(See attachment # 5A & 5B)

**Joel Aukes**, member of ND Society Health-System Pharmacist and ND Pharmacist Association. (See attachment #6)

**Riely Rogers**, Retired Hospital Pharmacist, testified in opposition to SB 2387. One of the things that has happened in this series of testimonies is that no one has mentioned getting

pharmaceutical services to the people of North Dakota. We have talked about the services that we offer but we are a small state in population, we are a small hospital pharmacy association. There are retail pharmacists that are overseeing hospitals in the small towns that have no pharmacy because they can not afford them. We have to keep the availability if we divide our selves, that won't happen. We don't have that many to start with. We want to maintain strong organizations.

**Mark Hardy**, Pharmacy Student, Niche, ND, testified in opposition of SB 2387. (See attachment # 7A, 7B, & 7C)

**Howard Anderson, Jr. R. Ph**, Executive Director of the ND State Board of Pharmacy, testified in opposition to SB 2387. (See attachment 8A, 8B, & 8C)

**Chairman Cook** asked Mr. Anderson if the Board had taken a position on SB 2387. He did not see that in black and white. Can I get that from the board on letter head with the seal?

**Senator Olafson**: What has been done by the trade association to try to address the concerns of those who are unhappy with the policy of the association?

**Howard Anderson**: There have been negotiations with them.

No further testimony in favor, opposed or neutral to SB 2387.

**Chairman Cook** closed the hearing on SB 2387.

## 2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. **SB 2387**

Senate Political Subdivisions Committee

Check here for Conference Committee

Hearing Date: **February 2, 2007**

Recorder Job Number: **2715**

Committee Clerk Signature

*Shirley Borg*

Minutes:

**Chairman Cook** called the committee back to order.

**Chairman Cook:** We have before us SB 2387. I figured that the testimony would get way off track. I hope that the issue we see here is the mandatory nature of the membership. What are your wishes committee?

**Senator Hacker** moved a Do Pass.

**Senator Olafson** seconded the motion.

Discussion:

Roll call vote: 4 Yes 1 No 0 Absent

Carrier: **Senator Cook**

# FISCAL NOTE

Requested by Legislative Council

01/23/2007

Bill/Resolution No.: SB 2387

**1A. State fiscal effect:** *Identify the state fiscal effect and the fiscal effect on agency appropriations compared to funding levels and appropriations anticipated under current law.*

	2005-2007 Biennium		2007-2009 Biennium		2009-2011 Biennium	
	General Fund	Other Funds	General Fund	Other Funds	General Fund	Other Funds
<b>Revenues</b>	\$0	\$0	\$0	\$0	\$0	\$0
<b>Expenditures</b>	\$0	\$2,000	\$0	(\$153,000)	\$0	(\$153,000)
<b>Appropriations</b>	\$0	\$0	\$0	\$0	\$0	\$0

**1B. County, city, and school district fiscal effect:** *Identify the fiscal effect on the appropriate political subdivision.*

2005-2007 Biennium			2007-2009 Biennium			2009-2011 Biennium		
Counties	Cities	School Districts	Counties	Cities	School Districts	Counties	Cities	School Districts
\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0

**2A. Bill and fiscal impact summary:** *Provide a brief summary of the measure, including description of the provisions having fiscal impact (limited to 300 characters).*

The Board would no longer be paying 1/2 of the license fee to the ND Pharmacists Association

**B. Fiscal impact sections:** *Identify and provide a brief description of the sections of the measure which have fiscal impact. Include any assumptions and comments relevant to the analysis.*

One half of the current license fee of \$200 per year goes to the ND Pharmacists association. This bill repeals that language.

**3. State fiscal effect detail:** *For information shown under state fiscal effect in 1A, please:*

**A. Revenues:** *Explain the revenue amounts. Provide detail, when appropriate, for each revenue type and fund affected and any amounts included in the executive budget.*

The bill does not change revenue amounts, that would need to be done by rule making.

**B. Expenditures:** *Explain the expenditure amounts. Provide detail, when appropriate, for each agency, line item, and fund affected and the number of FTE positions affected.*

The reduction in expenditures is based on \$100 per each of the 765 pharmacists currently licensed. An estimate of \$2000 is included for rule making.

**C. Appropriations:** *Explain the appropriation amounts. Provide detail, when appropriate, for each agency and fund affected. Explain the relationship between the amounts shown for expenditures and appropriations. Indicate whether the appropriation is also included in the executive budget or relates to a continuing appropriation.*

No appropriated funds are involved. None of these funds are included in the executive budget.

<b>Name:</b>	Howard C. Anderson	<b>Agency:</b>	Board of Pharmacy
<b>Phone Number:</b>	328-9535	<b>Date Prepared:</b>	01/23/2007

Date: 2-2-07  
Roll Call Vote #: 1

### 2007 SENATE STANDING COMMITTEE ROLL CALL VOTES

BILL/RESOLUTION NO. SB 2387

Senate Political Subdivisions Committee

Check here for Conference Committee

Legislative Council Amendment Number 1

Action Taken Do Pass ReRefer App.

Motion Made By Senator Hacker Seconded By Senator Olafson

Senators	Yes	No	Senators	Yes	No
Senator Dwight Cook, Chairman	X		Senator Arden C. Anderson		X
Senator Curtis Olafson, ViceChair	X		Senator John M. Warner	X	
Senator Nicholas P. Hacker	X				

Total Yes 4 No 1

Absent 0

Floor Assignment Senator Cook

If the vote is on an amendment, briefly indicate intent:



REPORT OF STANDING COMMITTEE (410)  
February 2, 2007 3:11 p.m.

Module No: SR-23-2030  
Carrier: Cook  
Insert LC: . Title: .

**REPORT OF STANDING COMMITTEE**

**SB 2387: Political Subdivisions Committee (Sen. Cook, Chairman) recommends DO PASS and BE REREFERRED to the Appropriations Committee (4 YEAS, 1 NAY, 0 ABSENT AND NOT VOTING). SB 2387 was rereferred to the Appropriations Committee.**

2007 SENATE APPROPRIATIONS

SB 2387

## 2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. 2387

Senate Appropriations Committee

Check here for Conference Committee

Hearing Date: 02-09-07

Recorder Job Number: 3331

Committee Clerk Signature



Minutes:

**Chairman Holmberg** opened the hearing on SB 2387 at 2:40 pm on February 9, 2007 regarding Pharmacist License Requirements.

**Senator Dwight Cook , District 34, Mandan** gave oral testimony in support of SB 2387. He offered a copy of the proposed amendment that he had prepared by the Legislative Council staff and explained the proposed changes to the committee. He stated the pharmacists had concerns regarding the mandates in licensing matters. Representative Todd Porter also put in section 1 that has to do with how the recommendations are made to the governor, as far as who would be serving on the board. We passed this bill out of committee 4 to 1 with a Do Pass. I am here to ask you to support the bill and request the Appropriations Committee to offer to have the amendments attached to the bill. All the amendments do then is remove everything from the bill except the part that would eliminate the requirement for mandated membership in the association. That is all that would be left in the bill. I can tell you that the pharmacists are divided on this issue. Those pharmacists that work in the hospital are against those pharmacists who work on main street retailer and it's the hospital pharmacists that sent a strong message they feel that they are not always being represented.

**Senator Mathern** had questions regarding what portions were left in the bill and membership requirements

**Chairman Holmberg** Could you just tell us the flavor, there's a whole section of repealers, and how does that fit into this.

**Senator Seymour** asked what would happen if this bill passes. Would there be two associations, the hospital group and the other group?

**Senator Cook** stated he thought there would be one association.

**Senator Lindaas** stated he was a bit apprehensive when an industry comes and wants us solve their problems. I realize I signed on to this bill. I probably did it in haste.

**Senator Cook** stated he felt the only way to solve this problem would be to take it to the Legislature. He made one other comment: There was a little confusion in the committee.

Howard Anderson gave excellent testimony. He was opposed to the bill. I got an email from the president of the board who said that is the board's position and I also got an email from a board member who supports the bill, and I just want to add that to the testimony. I can certainly share those two emails with the committee.

**Chairman Holmberg** asked if we pass this bill with the amendment you suggested would your committee carry the bill or do we have to carry your amendment.

**Senator Cook** stated he will be carrying this bill on the floor for the committee I would certainly be expected to carry the amendment also. He stated he'd carry it either way,

**Chairman Holmberg** stated unless it is a do not pass, then you would not want to carry it.

**Howard Anderson, Executive Director of the Board of Pharmacy** stated he came to explain the fiscal note on the bill. He was also willing to discuss any other issues concerning the bill if the committee has questions.

**Chairman Holmberg** asked as far as the amendment, taking out the first section will not impact at all your fiscal note. Senator Cook brought in an amendment to take out all of section one.

**Howard Anderson** I have not seen the amendment as yet. I want to say that my board does support opposition to SB 2387 and I did email Senator Cook after he talked to me yesterday and I found out all 5 members of my board members emailed me back and said it wasn't us, so I am not sure if someone who is on the board of one of the other associations said I'm a board member and I am in favor of this bill. But I can tell you my board members have all gotten back to me and said it's not them.

**Senator Robinson** The amendment stated February 9th, and I think all of us have had emails on this particular bill. Given that, where are your two primary pharmacy groups on the bill now with the amendment? You've got your hospital pharmacists and your retail pharmacists across the state, where do those two camps come down on the bill? Do they support the proposed amendment?

**Howard Anderson** stated the association as a whole is strongly in support of the bill. He stated he thought the pharmacists have not seen the proposed amendment.

**Senator Grindberg** had questions regarding the age factor of the pharmacists and whether the younger ones oppose the older ones concerning this matter. He was informed by Mr. Anderson that age did not seem to be a factor.

**Senator Lindass** had questions regarding appointment of the board.

**Senator Cook** I mentioned that I had an email from a member who of the board that supported it, I see here now the names of the board members that are on the board. The guy said he was a board member; his name is not on here.

**Chairman Holmberg** asked if there was further discussion. There was none. Hearing closed.

Written testimony (1) was submitted to the committee after the hearing closed.

## 2007 SENATE STANDING COMMITTEE MINUTES

Bill/Resolution No. 2387

Senate Appropriations Committee

Check here for Conference Committee

Hearing Date: 02-09-07

Recorder Job Number: 3332

Committee Clerk Signature

*Alice Pulger*

Minutes:

**Chairman Holmberg** opened the hearing on SB 2387. Discussion followed what the committee wants to do with the amendment and the bill.

**Senator Wardner** moved a **DO PASS ON THE AMENDMENT**, Seconded by Senator **Christmann**. The vote carried.

**Senator Wardner** moved a **DO NOT PASS ON SB 2387**. Seconded by Senator **Lindaas**. A roll call vote was taken resulting in 13 yeas, 0 nays, and 1 absent. The motion carried.

**Senator Lindaas** will carry the bill.

The hearing on SB 2387 closed.

PROPOSED AMENDMENTS TO SENATE BILL NO. 2387

Page 1, line 2, replace "sections" with "section"

Page 1, line 3, remove "43-15-03 and" and remove "membership of the"

Page 1, line 4, remove "state board of pharmacy and"

Page 1, remove lines 9 through 14

Renumber accordingly

Date: 2/9/07  
Roll Call Vote #:

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES  
BILL/RESOLUTION NO. 2387

Senate Appropriations Committee

Check here for Conference Committee

Legislative Council Amendment Number 0101

Action Taken del<sup>ass</sup> or Amendment

Motion Made By Wardner Seconded By Christman

Senators	Yes	No	Senators	Yes	No
Senator Ray Holmberg, Chrm			Senator Aaron Krauter		
Senator Bill Bowman, V Chrm			Senator Elroy N. Lindaas		
Senator Tony Grindberg, V Chrm			Senator Tim Mathern		
Senator Randel Christmann			Senator Larry J. Robinson		
Senator Tom Fischer			Senator Tom Seymour		
Senator Ralph L. Kilzer			Senator Harvey Tallackson		
Senator Karen K. Krebsbach					
Senator Rich Wardner					

Total (Yes) all No \_\_\_\_\_

Absent \_\_\_\_\_

Floor Assignment \_\_\_\_\_

If the vote is on an amendment, briefly indicate intent:



Date: 2/9/87  
Roll Call Vote #:

2007 SENATE STANDING COMMITTEE ROLL CALL VOTES  
BILL/RESOLUTION NO. 2387

Senate Appropriations Committee

Check here for Conference Committee

Legislative Council Amendment Number \_\_\_\_\_

Action Taken DO NOT Pass

Motion Made By Wardner Seconded By Lindaas

Senators	Yes	No	Senators	Yes	No
Senator Ray Holmberg, Chrm	✓		Senator Aaron Krauter	✓	
Senator Bill Bowman, V Chrm	✓		Senator Elroy N. Lindaas	✓	
Senator Tony Grindberg, V Chrm	✓		Senator Tim Mathern	✓	
Senator Randel Christmann	✓		Senator Larry J. Robinson	✓	
Senator Tom Fischer	✓		Senator Tom Seymour	✓	
Senator Ralph L. Kilzer	✓		Senator Harvey Tallackson		
Senator Karen K. Krebsbach	✓				
Senator Rich Wardner	✓				

Total (Yes) 13 No 0

Absent 1 absent

Floor Assignment Lindaas (Krebsbach)

If the vote is on an amendment, briefly indicate intent:

**REPORT OF STANDING COMMITTEE (410)**  
February 9, 2007 4:17 p.m.

Module No: SR-28-2794  
Carrier: Lindaas  
Insert LC: . Title: .

**REPORT OF STANDING COMMITTEE**

**SB 2387: Appropriations Committee (Sen. Holmberg, Chairman) recommends DO NOT PASS (13 YEAS, 0 NAYS, 1 ABSENT AND NOT VOTING).** SB 2387 was placed on the Eleventh order on the calendar.

2007 TESTIMONY

SB 2387

Senate Political Subdivisions Committee Hearing February 2, 2007  
SB2387

Chairman Cook, Senators Olafson, Hacker, Anderson and Warner,

My name is Joan Johnson and I am here on behalf of the 128 pharmacists that brought SB 2387 for you to consider. These pharmacists, and the many more that support the bill, are a grassroots effort that have come together for this specific purpose. I have registered as their lobbyist to speak for them, as most are at work. The issue of mandatory membership has bothered pharmacists since it became law in 1989. We decided now was the time to do something about it. We contacted our legislators for advice on how to proceed. Our legislators from District 34 met with us and like most people, were shocked that pharmacists had to belong to an association as part of their licensure and at first thought it was a mistake. When they found it was true, they agreed that it just wasn't right and decided to bring this bill forward. Some pharmacists developed a signature page of those who support this bill which filled up rapidly with 124 names. There are many more than that now supporting this bill. Pharmacists are angry about mandatory membership, and it became apparent there are many reasons they feel it is wrong and needs to be changed. Even pharmacists that say they will always belong to the association are uncomfortable with mandated membership. Mandated membership removes the incentive to become a quality organization responsive to its members. Allow pharmacists to "vote" with their membership.

Although the traditional face of pharmacy is the neighborhood druggist, pharmacy is a very diverse profession. Not all practices of pharmacy are as visible to the public, however. The pharmacists that support this bill are those that practice in chain drugstores, research, healthsystem or hospital and nursing homes, government, independent community, education, insurance and benefit management. Many are residency-trained and board certified in a practice area. Pharmacy is not a one-size-fits-all profession and one association will not fill all needs. Even if the ND Pharmacists Association was the best, most universally beneficial, equally representative, fiscally responsible organization the world had ever seen, it should still be the choice of the licensed pharmacist to belong or not belong. The pharmacists that brought this bill acknowledge the rights of pharmacists to organize with like-minded individuals for the benefit of their business or practice issues, but there is a problem with forcing others that are not liked-minded, those that derive no benefit, to carry their burden, even if it adversely affects us. We have not been shirkers, we have tried to work within the Association, we have been officers, presidents, board members and committee members. What makes this whole situation worse is that it involves a state regulatory agency.

SB 2387 will do 3 things: separate the State Board of Pharmacy from the ND Pharmacists Association, allow pharmacists to exercise their right to free speech and to choose with whom they associate, and allow other organizations or individuals to submit names of qualified individuals to the governor for appointment to the Board of Pharmacy.

To fulfill their mission of protecting the public health, it is in the best interest of all citizens that healthcare practitioner licensing and regulatory boards maintain a healthy distance from the trade organizations of those they regulate. Separating membership and licensure would allow the Board to avoid becoming involved in the political, business or financial issues of the association and other potential conflicts with their mission.

**NDCC 61-01-01-01. Organization of Board of Pharmacy.**

**1. History and functions.**

**The board is responsible for examining and licensing applicants for licensure as pharmacists, for issuing permits to operate pharmacies, and for regulating and controlling the dispensing of prescription drugs and the practice of pharmacy for the protection of the health, welfare and safety of the citizens of the state.**

The Board, a state agency that must be accountable to the state government, should not use Board funds for a private interest group that does not have the same accountabilities. An example of this is the association requiring the Board of Pharmacy to increase the fees because of financial problems of the association, as happened this year, when the Board of Pharmacy already has approximately \$700,000 in reserves.

(2005 Annual Report of the State Board of Pharmacy).

The mandated membership law creates conflict with pharmacists and their employers because of the nature and activities of the association, forcing pharmacists to finance and add their voice to an agenda that often adversely affects the employer they have chosen to work for. Health regulatory agencies should be at arms length from the profession they regulate, to provide a checks and balances system and to avoid any semblance of conflict of interest. Dr. Carmen Catizone, Executive Secretary of the National Association of Boards of Pharmacy, agrees, stating that "there should be a clear separation of Boards of Pharmacy and associations". A health board should not discriminate among those pharmacists they monitor because of matters relating to association issues or because of who the pharmacist's at-will employer happens to be. No pharmacist should be treated differently by the Board of Pharmacy due to the agenda of an association, but that is not the case.

Pharmacists that are compliant with every requirement for licensure regarding education, competency, character and compliance with rules and regulations, can lose their ability to practice if they refuse to pay dues to an association not of their choice. No other healthcare professionals in ND are forced to belong to their association. (Physicians and Surgeons, Physical Therapists, Veterinarians, Optometrists, Dentists, Chiropractors, Nurses, Respiratory Therapists, Podiatrists NDCC 43.) The physicians, nurses and other

healthcare providers we work with daily agree that it is wrong to be forced to belong to an association. The association often uses the integrated State Bar Association as an analogy. The Bar Association is a different profession, law, not healthcare, whose members are part of the Judiciary System and are officers of the court. The integrated bar system is controversial in many states.

Integrated memberships may not use mandated fees for activities of an ideological or political nature, which makes integrated memberships vastly different than organizations of voluntary members. The Pharmacists Association, per state law, can use its monies specifically for "payment of expenses of the association including continuing pharmaceutical education, pharmacist discipline, the impaired pharmacist program, matters related to pharmacist registration standards, professional service standards, and general operating expenses". The word including does not prohibit other activities, but they must be reasonably similar in nature.

ND is a right to work state.

**34-12-02. Right of employees as to organization, collective bargaining.** Employees have the right to self-organization, to form, join, or assist labor organizations, to bargain collectively through representatives of their own choosing, and to engage in other lawful concerted activities for the purpose of collective bargaining or other mutual aid or protection, and also have the right to refrain from any or all of such activities and are free to decline to associate with their fellows and are free to obtain employment wherever possible without interference or being hindered in any way.

The First Amendment:

Congress shall make no law respecting an establishment of religion, or prohibiting the free exercise thereof; or abridging the freedom of speech, or of the press; or the right of the people peaceably to assemble, and to petition the Government for a redress of grievances.

Mandatory membership forces speech on the members. There is no "majority rules" option in an organization that removes the free will of the members to join. Any dissenter or group of dissenters, no matter what size that group is, should essentially prohibit the association from pursuing that activity, because they have no recourse.

The association often likens itself to the government. It is an association, it is not a government.

The 1989 legislature did the association a big favor by passing this law. Unfortunately, it came at the cost of a loss of basic rights of the pharmacists who choose to work in ND. The practice of pharmacy and medicine has changed dramatically in the 18 years since this law was passed. Few of those that promoted this idea are practicing today and many of them agree it is time to change it. Let us choose which associations we belong to or if you can't agree to that, put the whole Board of Pharmacy/ ND Pharmacists Association in a department in the Capitol, where it can be monitored for compliance and regulated.

Lastly, SB2387 strengthens the ability of the State Board of Pharmacy to fulfill its mission. Allowing the submission of names for the Governor to consider for appointment to the State Board allows qualified candidates from all walks of pharmacy practice to serve on the Board without the narrow constraints of the NDPHA nomination and popular voting process. Allowing pharmacists with diverse backgrounds to bring their unique perspectives to the Board table, and eventually, I hope, public or citizen members, like 44 of the other states and many ND professional boards have, will result in a stronger agency of greater benefit to the citizens of North Dakota.

Please stand for the basic principles of freedom and for the greater good of all and pass this bill.

*"To compel a man to furnish contributions of money for the propagation of opinions which he disbelieves, is sinful and tyrannical."*

*-Thomas Jefferson*

Jeffrey Zak	Joe Farrell	Tim Gagnon	Sandra Monger
Jaclyn Olson	Lisa Durick	Mark Dick	Brian Ament
Matthew Uhrich	Susan Carter	Katie Thompson	Elise Carlson
Kevin Kern	Barbara Wessling	Susan Spaeth	Chip Storandt
Jesse Lunde	Jan Detke	Carol Collette	Ken Johnson
James Malinowski	Greg Pfister	Curtis Trowbridge	Mark Plencner
Michael Scheer	Janet Bonn	Jeff Ferber	Tammie Dohman
Robert Roberg	Pam Benson	Joan Viets	Lisa Johnson
Amy Aeilts	Julie Bubach	Lisa Nagel	Susan Carlson
Bob Schultz	Travis Swartz	Charles Dillabough	John Schultz
Wade Nagel	Kenton Omgig	Carrie Sorenson	Sarah Larson
Dan McPherson	Dorothy Sander	Sam Aadnes	Vaughn Thorstad
Joan Johnson	Kailee Fretland	Shmeylan Al Harbi	Susanne Mathias
Dawn Mayer	Jen Murphy	Kim Christiansen	Cheryl Halvorson
Bernie Behm	Deb McPherson	Janel Silvernagel	Leeann Ness
Nicole Boustead	Joan Galbraith	Chad Porsborg	Katie Hanson
Kristy Vadnais	Ross Tolstedt	Laci Ahrens	Stephanie Perreault
Allison Germolus	Raymond Link	Debra Orley	Jon Schock
Gary Barker	Bill Paul	Kirsten Helleckson	Laurie Rook
Barbara Holwegner	Al Behrens	Lance Sateren	Brenda Selzler
Natalie Horner	Connie Schulz	Bethany Pfister	Robert Halvorson
Carolyn Bodell	Robert Bangen	Cheryl Newcomb	Ronald Keel
Ellen Feldmann	Jerry Hansen	Laura Jensen	Matthew Carlson
Sara Fuller	Kevin House	Krista Herner	Jennifer Gauss
Teresa Gerbig	Greg Fritz	Andrea Honeyman	Melissa Rohrich
Ray Clary	Jaycee Reisenauer	Michael Urbanec	Thomas Krier
John Savageau	Tom Simmer	Brent Roller	Alicia Marie Nygren
Lisa Hustad	Joanne Rose	Alison Black	Daniel Adams
Stephanie Keller	Troy Hertz	Dewey Baranyak	Lisa Wanner
Robert Nelson	Jesse Breidenbach	Alyssa Engebretson	Jerome Kemper
Amy Gourde	Brien Nelson	Jeffrey Hunter	Mary Lee Clarens
Robert Stieglitz	Jeff Mari	Bernadette Keller	Heather Strawsell

Chairman Cook and committee members;

Thank you for giving me the opportunity to speak to you today in support of SB 2387. Before I give you my reasoning for support of the bill let me tell this committee who health system (hospital) pharmacists are. We are a minority group of about 200 licensed pharmacists out of a total of approximately 700 annually licensed with the State of North Dakota. We are the people who work 24/7; 365 days of the year. We are the resources for drug information and delivery to the medical and nursing staff within our hospitals. We specialize in areas of neonatology, pain management, oncology, infectious disease, surgery, and anticoagulation (treatment of blood clots). Our mission is recognizing the uniqueness of patients and delivering pharmaceuticals safely and appropriately while in our care. We are not the pharmacists on Main Street or in grocery stores.

There are two issues of concern to hospital pharmacists in SB 2387. The first is whether it is the responsibility for a state agency to mandate membership in an association as a requirement for licensure and whether that state agency should transfer the dues to the association. The second, is the right for anyone to nominate person(s) to the governor for the Board of Pharmacy.

For hospital pharmacists, the first issue is not about the cost of membership, but rather being mandated to support an association whose primary focus, mission and practice setting is different than that of hospital pharmacists. While this arrangement may have worked years ago, it is time to recognize and respect the differences between hospital and retail pharmacy for their distinct attributes to patient care. It is time for the state to amend the law and recognize the differences. North Dakota is the only state that has this specific arrangement where the Board of Pharmacy collects the money and then transfers it to the NDPHA. Furthermore, this is unique to the profession of pharmacy since neither the nursing profession, nor the medical profession etc. has this arrangement. Therefore, by supporting this bill, I feel it will make the association stronger by recruiting members who want to belong to an association that represents them, rather than having members who are bound by law to belong to an association that does not represent them. What is not clear to me is, why NDPHA wants to force membership on such a large number of pharmacists, when they don't want to belong, thus minimizing the associations effectiveness.

The second issue regarding the process of nominating members to the Board of Pharmacy is not only important to hospital pharmacists to insure they have representation, but that all practice settings of pharmacy should be represented. A diverse board serves not only the profession well, but also the public. After all, the purpose of the Board of Pharmacy is for the licensure process and to ensure public safety. With the current process, for a member to be nominated to the governor, the individual must first be approved by NDPHA. In other words, if an individual disagrees with the mantra of NDPHA, then that essentially will exclude them from the opportunity to serve on the Board of Pharmacy.

Many states (Alabama, Arizona, California, Connecticut, Florida, Indiana, Maine, Maryland, Massachusetts, Mississippi, Missouri, Nebraska, New Jersey, New Mexico, Pennsylvania, Rhode Island and South Carolina) have mandated that their Board be made up of