



## CITIZENS COMMISSION ON HUMAN RIGHTS

May 18, 2026

### SENATE FINANCE COMMITTEE

#### HB 195 - PHARMACIST PRESCRIPTION AUTHORITY

Dear Senator:

Revision C of HB 195 makes improvements by narrowing the scope of pharmacists' authority in relation to psychiatric issues. This revision adds stronger safeguards for patients statewide by recognizing the complexity of the psychiatric system of diagnosis that lacks visible testing:

**“There are no objective tests in psychiatry-no X-ray, laboratory, or exam finding that says definitively that someone does or does not have a mental disorder.”**

*Allen Frances, Psychiatrist and former DSM-IV Task Force Chairman*

The latest draft of the bill leaves room for further improvement. The bill can use an amendment as the bill would allow a pharmacist to match a psychiatric label of several behavior symptoms, to a drug and issue a prescription. There is no effort or ability on the part of the pharmacist to identify any of the hundreds of environmental issues that and medical issues that can mimic a psychiatric disorder that can be addressed without mind-altering drugs. The pharmacist is limited to see the psychiatric label – then drug the person. How is this a safeguard?

Amendment #1:

Add a new subsection to AS 08.80.337 (pharmacist patient-care services):

“(f) A pharmacist may not prescribe, dispense, initiate, or modify treatment with any psychotropic drug. In this subsection, ‘psychotropic drug’ means a drug primarily indicated for the treatment of a psychiatric, behavioral-health, cognitive, or mood-related condition, including antidepressants, antipsychotics, anxiolytics, mood stabilizers, stimulants, sedative-hypnotics, and any drug with central nervous system effects, whether controlled or non-controlled.”

This could also be addressed by amending the CPA language.

AMENDMENT 2 — Prohibit CPAs from authorizing psychotropic prescribing

Add to AS 08.02.150 (collaborative practice agreements):

“(c) A collaborative practice agreement may not authorize a pharmacist to prescribe, initiate, or modify treatment with a psychotropic drug as defined in AS 08.80.337(f).”

HB 195 now makes a partial and improved distinction between diagnosing and treatment with psychotropic (mind-altering) drugs, but should be further amended.

test

“We know that there is rarely any biological justification for prescribing antidepressants to anyone of any age. We know **these drugs create a chemical imbalance** rather than cure one. We know the effects of these drugs can be severe and long-lasting and can **increase suicidality.**” **“So why does the medicalizing of child behavior and emotions continue to be a booming business for the pharmaceutical industry, with millions of children and young adults being prescribed antidepressants in the US and developed nations?”** Beverly Thomson – *Antidepressed, A Breakthrough Examination of Epidemic Antidepressant Harm and Dependence*

Please further amend HB 195 to protect Alaskans. Pharmacists should not be given the power to prescribe mind-altering psychiatric drugs or be allowed to initiate a mind-altering psychiatric drug treatment to minors under 18.

Sincerely,



Steven Pearce  
Director