



THE STATE  
of **ALASKA**  
GOVERNOR MIKE DUNLEAVY

## Department of Commerce, Community, & Economic Development

Corporations, Business, & Professional Licensing  
Board of Pharmacy

P.O. Box 110806  
Juneau, Alaska 99811-0806  
Main: 907.465.2550  
Fax: 907.465.2974

April 3, 2025

The Honorable Senator Giessel  
Alaska State Senate  
State Capitol Room 121  
Juneau, Alaska 99811

Re: SB- 147A – Letter of Support

Dear Senator Giessel,

The Alaska Board of Pharmacy (“board”) unanimously supports SB 147A, An Act relating to the prescription and administration of drugs and devices by pharmacists; relating to reciprocity for pharmacists; and providing for an effective date, because it:

- Increases access to pharmacist-provided patient care services, allowing healthcare practitioners in Alaska to practice at the top of their education, training, and experience.
- Aligns with the standard of care, including models established within multiple other states, the federal healthcare system, the Public Readiness and Emergency Preparedness (PREP) Act, and the Mainstreaming Addiction Treatment (MAT) Act.
- Encourages interdisciplinary collaboration for patient referral to other practitioners as needed, with pharmacists effectively working as part of the healthcare team to ensure access to safe care.
- Supports the board’s strategic plan, specifically goal #4 which is to grow Alaska’s economy while promoting community health and safety.

The board endeavors to promote, preserve, and protect the public health, safety, and welfare by and through the effective control and regulation of the practice of pharmacy. The board previously supported and provided testimony for HB 145 (2021-2022 Legislative Session), which added AS 08.80.337 Other Patient Care Services. Since the passing of that bill, the board received multiple inquiries about its applicability to independent prescribing. After feedback from the Alaska Department of Law, the Board recognized that clarifications were needed to allow pharmacists to practice at the top of their education, training, and experience. These changes, seen in SB 147A of the current legislative session, are important for overall access to patient care services in Alaska.

Pharmacists are highly qualified and educated healthcare professionals. We fully support the ability for pharmacists to exercise their education, training, and experience to promote community health and safety. As a regulatory body, we also support our ability to oversee these areas to the full capacity for the benefit to Alaskans and our communities.

Sincerely,

Handwritten signature of Ashley Schaber in cursive.

Ashley Schaber, PharmD, MBA, BCPS  
Chair, Alaska Board of Pharmacy



**ALASKA NATIVE  
TRIBAL HEALTH  
CONSORTIUM**

April 29, 2025

Senator Cathy Giessel  
State Capitol Room 121  
Juneau, AK 99801

RE: ANTHC Support of SB 147

Senator Giessel,

On behalf of the Alaska Native Tribal Health Consortium (ANTHC), I write in support of Senate Bill (SB) 147.

The ANTHC is a statewide Tribal health organization serving all 229 tribes and all Alaska Native and American Indian (AN/AI) people in Alaska. ANTHC provides a wide range of statewide public health, community health, environmental health, and other programs and services for Alaska Native people and their communities. ANTHC and Southcentral Foundation operate programs at the Alaska Native Medical Center, the statewide tertiary care hospital for all AN/AI people in Alaska, under the terms of Public Law 105-83.

SB 147 authorizes pharmacists to provide patient care services within the scope of their training and experience, aligning Alaska statute with federal law and Alaska Board of Pharmacy current regulation of the practice. ANTHC supports this legislation in order to increase patient access to care and build capacity within Alaska's health care system.

On behalf of ANTHC, I appreciate you bringing this legislation forward. SB 147 takes the necessary steps to maximize our existing healthcare workforce and to meet the needs of Alaskans by increasing their access to care.

Sincerely,

A handwritten signature in black ink that reads "Monique R. Martin". The signature is written in a cursive, flowing style.

Monique R. Martin, Vice President  
Intergovernmental Affairs

Alaska Native Tribal Health Consortium  
4000 Ambassador Drive, Anchorage, Alaska 99508  
Main: (907) 729-1900 | Fax: (907) 729-1901 | [anthc.org](http://anthc.org)

Brandy Seignemartin, PharmD  
Alaska Pharmacy Association  
3211 Providence Dr., PSB 111  
Anchorage, AK 99508  
akpharmacistsassociation@gmail.com



April 18, 2025

Senator Cathy Giessel  
Alaska State Legislature  
State Capitol  
Juneau, AK 99801

**RE: Support for SB 147 – Pharmacist Provided Patient Care Services**

Dear Senator Giessel,

On behalf of the Alaska Pharmacy Association (AKPhA), I write to express our strong support for SB 147 – Pharmacist Provided Patient Care Services.

AKPhA proudly represents pharmacists, student pharmacists, pharmacy technicians, and pharmacies operating in all corners of our state—urban, rural, and remote. This legislation is an important step toward ensuring that Alaskans have timely, equitable access to healthcare services, especially in areas facing critical provider shortages.

SB 147 authorizes pharmacists to provide patient care services—including prescribing and administration of medications—within the scope of their education, training, and experience. This authority aligns with the current standard of pharmacist education and practice nationwide and ensures that Alaskans can fully benefit from the expertise of their most accessible healthcare providers.

Pharmacists today are highly trained clinicians. Every Doctor of Pharmacy (PharmD) graduate completes four years of intensive didactic coursework paired with a minimum of 1,740 hours of direct patient care before earning their degree. Many go on to pursue post-graduate residencies, clinical fellowships, certifications, and board specialties in fields ranging from ambulatory care and infectious disease to geriatrics and cardiology.

Yet despite this extensive training, pharmacists in Alaska remain underutilized due to outdated legal restrictions. SB 147 modernizes our statutes to reflect current clinical realities and removes unnecessary barriers that limit patient care. Similar legislation has been adopted in many other states and has demonstrably expanded healthcare access and improved outcomes, especially in underserved and rural areas.

Alaskans trust their pharmacists and regularly seek their advice and care. Authorizing pharmacists to provide care within their training improves system efficiency, supports team-based care, and reduces delays in treatment for patients who need it most. This bill helps maximize Alaska's existing healthcare workforce while reducing burdens on physicians and emergency departments.

For these reasons, the Alaska Pharmacy Association urges your full support of SB 147. We stand ready to serve as a resource and partner as this legislation advances.

Sincerely,

A handwritten signature in black ink that reads "Brandy Seignemartin". The signature is written in a cursive, flowing style.

Brandy Seignemartin, PharmD  
Executive Director  
Alaska Pharmacy Association



# Alaska Native Health Board

THE VOICE OF ALASKA TRIBAL HEALTH SINCE 1968

■ 907.729.7510 ■ 907.729.7506 • 4000 Ambassador Drive (ANHB Office) • Anchorage, Alaska 99508 • [www.anhb.org](http://www.anhb.org)

ALASKA NATIVE TRIBAL  
HEALTH CONSORTIUM

ALEUTIAN PRIBILOF  
ISLANDS ASSOCIATION

ARCTIC SLOPE  
NATIVE ASSOCIATION

BRISTOL BAY AREA  
HEALTH CORPORATION

CHICKALOON VILLAGE  
TRADITIONAL COUNCIL

CHUGACHMIUT

COPPER RIVER  
NATIVE ASSOCIATION

COUNCIL OF ATHABASCAN  
TRIBAL GOVERNMENTS

EASTERN ALEUTIAN TRIBES

KARLUK IRA  
TRIBAL COUNCIL

KENAITZE INDIAN TRIBE

KETCHIKAN  
INDIAN COMMUNITY

KODIAK AREA  
NATIVE ASSOCIATION

MANILAQ ASSOCIATION

METLAKATLA INDIAN  
COMMUNITY

MT. SANFORD  
TRIBAL CONSORTIUM

NATIVE VILLAGE  
OF EKLUTNA

NATIVE VILLAGE OF EYAK

NATIVE VILLAGE  
OF TYONEK

NINILCHIK  
TRADITIONAL COUNCIL

NORTON SOUND  
HEALTH CORPORATION

SELDOVIA VILLAGE TRIBE

SOUTHCENTRAL  
FOUNDATION

SOUTHEAST ALASKA REGIONAL  
HEALTH CONSORTIUM

TANANA CHIEFS CONFERENCE

YAKUTAT TLINGIT TRIBE

YUKON-KUSKOKWIM  
HEALTH CORPORATION

VALDEZ NATIVE TRIBE

April 15, 2025

The Honorable Cathy Giessel  
Senator, District N  
Alaska State Legislature  
State Capitol Room 121  
Juneau, AK 99811

RE: ANHB Support for SB 147 – Pharmacist

Dear Senator Giessel,

On behalf of the Alaska Native Health Board (ANHB)<sup>1</sup>, I write in support of Senate Bill (SB) 147, an Act relating to the prescription and administration of drugs and devices by pharmacists; relating to reciprocity for pharmacists; and providing for an effective date.

SB 147 authorizes pharmacists to provide patient care services—including prescribing and administration of medications—within the scope of their education, training, and experience. ANHB supports this legislation because it will increase access to pharmacist-provided patient care services, maximizing the professional capacity of Alaska's existing healthcare professionals. There are too few Alaskan providers to fill the current demand for healthcare services in Alaska, and job vacancies in the industry are significant. Pharmacists are already an integral part of the AHS and the need for their services is growing. The State of Alaska should take every commonsense step to maximize our existing healthcare workforce, including the more than 500 pharmacists, to ensure access to safe care and referrals to other practitioners as needed.

Pharmacists are highly qualified, trained healthcare professionals. We support legislation that enables pharmacists to utilize the full scope of their education, training, and experience to promote community health and safety for the benefit of Alaskans. Should you have any questions, please contact ANHB at [anhb@anhb.org](mailto:anhb@anhb.org) or (907) 729-7510.

Sincerely,

Chief William F. Smith, Chairman  
Alaska Native Health Board

<sup>1</sup> ANHB was established in 1968 to promote the spiritual, physical, mental, social, and cultural well-being and pride of Alaska Native people. ANHB is the statewide voice on Alaska Native health issues and the advocacy organization for the Alaska Tribal Health System (ATHS), which is comprised of Tribal health programs that serve the 229 Tribes and over 234,000 Alaska Native and American Indian people throughout the state. As the statewide Tribal health advocacy organization, ANHB supports Alaska's Tribes and Tribal programs to achieve effective consultation and communication with state and federal agencies on matters of concern.

Elizabeth Holmgren, PharmD.  
Whites Pharmacy  
Sitka, AK 99835  
[lizh@whitesalaska.com](mailto:lizh@whitesalaska.com)  
907-738-2449

04/26/2025  
Senator Dunbar  
Chair, Senate Health and Social Services Committee  
Alaska State Legislature  
Juneau, AK 99801

Dear Senator Dunbar and Members of the Committee,

My name is Elizabeth Holmgren, and I am a pharmacist practicing in Sitka, Alaska. I am writing to express my strong support for **Senate Bill 147**.

As a pharmacist, I have completed extensive education and clinical training, earning my Doctor of Pharmacy degree and completing over 36 years of pharmacy services. I have worked in hospital settings, retail settings and currently a long term care setting. Every day in my practice, I help patients receive timely care, manage chronic illnesses, and support preventive health. If it wasn't for a LAW in place requiring a pharmacist monthly review/report on the resident's medications, I don't think I would be permitted to spend the time writing this monthly report because there is no financial benefit (reimbursable time) to my employer.

After 36 years I am saddened to say that we are championing for the same issues for our profession; To be given provider status so we can be recognized and included as a knowledgeable member of the health care team. If we are able to bill for our services, like other ancillary team members, we will be assigned a seat at the table because we will be a financial asset while practicing our expertise in medication management.

Pharmacists receive the same number of years of schooling as physicians, including residencies and internships, all focusing on the complexities of medications alone. We are more than capable to perform in this role of medication specialist, please give us the opportunity by supporting SB 147. Healthcare services for Alaskans will be expanded as a result.

Thank you for your consideration.  
Sincerely,  
Elizabeth Holmgren, PharmD.  
Sitka Long Term Care/Whites Pharmacy



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office: 907-290-2984      fax: 907-966-3979  
email: [DirkW@whitesalaska.com](mailto:DirkW@whitesalaska.com)      web: [www.sitkapharmacies.com](http://www.sitkapharmacies.com)  
address: 117 Granite Creek Road Ste. 201 Sitka Alaska 99835



**Idaho State  
University**

**L.S. Skaggs  
College of Pharmacy**

April 22, 2025

Senator Dunbar, Chair  
Senate Health and Social Services Committee  
Alaska State Legislature  
Juneau, Alaska 99801

Dear Chair Dunbar and Members of the Senate Health and Social Services Committee,

On behalf of the University of Alaska Anchorage/Idaho State University Doctor of Pharmacy Program, I am writing to express strong support for Senate Bill 147: Pharmacist-Provided Patient Care Services.

As a collaborative Doctor of Pharmacy (PharmD) program, we are committed to educating and training highly qualified pharmacists who are prepared to meet the healthcare needs of Alaskans, particularly in underserved and rural communities. Our graduates complete a rigorous four-year curriculum that includes intensive didactic coursework, over 1,740 hours of direct patient care experience, and specialized training in clinical services such as disease management, prescribing for minor ailments, preventive care, and collaborative practice.

However, despite the breadth and depth of their training, current Alaska law unnecessarily limits pharmacists' ability to fully utilize their education, skills, and experience to improve patient care. Senate Bill 147 would help close the gap between what pharmacists are trained to do and what they are permitted to do under state law.

Importantly, we have seen firsthand the benefits of this model at our Idaho campuses and communities. In Idaho, similar expansions of pharmacist-provided patient care services have strengthened the healthcare workforce and significantly increased access to care, particularly in rural and medically underserved areas. Pharmacists in Idaho now routinely provide patient-centered services such as prescribing for minor ailments, managing chronic diseases, and delivering preventive care – all within their training and the standard of care. This model has improved healthcare accessibility without compromising patient safety and has helped address provider shortages by ensuring that highly trained pharmacists can contribute meaningfully to the care team.

National accreditation standards for the Doctor of Pharmacy degree require all colleges and schools of pharmacy to train practice-ready graduates who are prepared with the skills to diagnose and prescribe independently and provide patient-care services like those included in Senate Bill 147. This ensures that any Doctor of Pharmacy graduate from any program who may eventually practice in Alaska will have the necessary education, training, and clinical ability to safely provide these services to Alaska's residents – not just those who graduate from ISU/UAA.

**L. S. Skaggs College of Pharmacy | Office of the Dean**

921 South 8th Ave., Stop 8288 | Pocatello, ID 83209-8288 | (208) 282-2175 | [isu.edu/pharmacy](http://isu.edu/pharmacy)

Aligning pharmacists' authorized patient care services in Alaska with their education and training is a critical workforce and healthcare access solution. Pharmacists are among the most accessible healthcare providers in the state, particularly in communities with limited physician coverage. Authorizing pharmacists to provide timely, evidence-based patient care services will increase access to healthcare, reduce burden on emergency departments, and improve health outcomes across Alaska.

Our program is committed to graduating practice-ready pharmacists who are prepared to serve their communities at the highest level. Senate Bill 147 is an essential step to ensuring that Alaska's regulatory framework keeps pace with national educational standards, best practices, and the successful models we have seen implemented in other states like Idaho.

Thank you for your consideration of our strong support for SB 147. We stand ready to serve as a resource and to continue preparing future pharmacists who will help meet Alaska's healthcare needs.

Sincerely,



**Jennifer L. Adams, PharmD, EdD, FAPhA, FNAP**  
**Associate Dean for Academic Programs | Professor | L.S. Skaggs College of Pharmacy**  
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Karen Miller RPH  
Denali Pharmacy  
Fairbanks, AK  
Karen.miller@foundationhealth.org  
907-322-6314

4/18/2025

Senator Cathy Giessel  
Alaska State Legislature  
Juneau, AK 99801

Dear Senator Cathy Giessel,

My name is Karen Miller, and I am a pharmacist practicing in Fairbanks, Alaska. I am writing to express my strong support for **Senate Bill 147**.

As a lifelong Alaskan, I've witnessed firsthand the many changes in our healthcare system. When I was growing up, it was common to be able to call your primary care provider at home after hours. Today, however, it's often difficult for patients to get a timely appointment with their provider. Pharmacists can help fill this gap in care.

Pharmacists today complete extensive clinical training and education, earning a Doctor of Pharmacy degree. We are the most accessible healthcare professionals — a fact that became especially clear during the COVID-19 pandemic, when pharmacists stepped up to advise patients, administer vaccines, and help maintain continuity of care during a time of crisis.

Every day in my practice, I see opportunities to help patients manage common conditions, chronic illnesses, and preventive care needs — but current laws limit how fully we can contribute. My current practice is working to embed pharmacists into primary care clinics, including those focused on behavioral health and substance use disorders. **SB 147** would help streamline this process and empower pharmacists to provide care more effectively.

This bill would allow pharmacists to practice at the top of their training and licensure, within a standard-of-care framework — just like other healthcare providers. By doing so, **SB 147** will reduce strain on overburdened physicians and emergency departments, while improving access and outcomes for patients.

I am confident in my ability to provide safe, effective care, and I am fully committed to working alongside other members of the healthcare team to ensure the best possible outcomes for our patients.

I respectfully urge you to support **SB 147** and help expand access to high-quality healthcare services for Alaskans.

Sincerely,



Karen Miller RPH

Carrie Urena  
Klawock AK Opioid Treatment Program  
Klawock, AK  
carrieurena22@gmail.com  
(907) 888-8234  
4/18/25

Senator Dunbar  
Chair, Senate Health and Social Services Committee  
Alaska State Legislature  
Juneau, AK 99801

Dear Senator Dunbar and Members of the Committee,

My name is Carrie Urena, and I am a pharmacist practicing in Klawock AK which is a small rural community in southeast AK on the Prince of Wales Island. I am writing to express my strong support for **Senate Bill 147**.

As a pharmacist, I have completed extensive education and clinical training, earning my Doctor of Pharmacy degree and completing over 1,900 hours of hands-on patient care training. I went on to complete a PGY1 residency with Alaska Native Tribal Health Consortium and then began work in 2023 in a newly opened opioid treatment program in Klawock AK. Every day in my practice I see opportunities where our underserved community members could benefit from additional pharmacist services — but existing statutory barriers prevent this from happening.

Those who know me know I'm extremely passionate about the work I do, working with our rural populations suffering from opioid use disorder. Throughout my education and into my residency I placed a high emphasis on experiences and learning opportunities that would enhance my knowledge and ability to serve this patient population. Our Alaskan statistics tell the story of the immense need we have for greater access to care, particularly when addressing medications for opioid use disorder (MOUD). At the end of 2023 when the majority of our nation saw a drop in opioid related deaths, here in AK our numbers continue to rise. Not only did we not see the decrease that so many other states saw, but we also actually had increased rates. It is clear that what we are currently doing is not enough. We simply don't have enough providers to cover the need for services. Our smaller, more rural communities continue to have little to no access to essential services such as MOUD. This is where pharmacists can begin to make a positive impact and really help bridge these gaps in care and services. The growing amount of evidence supporting pharmacists' involvement in MOUD continues to show improved patient outcomes. Our training and education make us uniquely qualified to help bridge the service gaps and improve access for MOUD. We are the medication experts with extensive knowledge about drugs, drug metabolism, drug interactions, and drug safety. We are taught how to assess and identify patients with sub- and suprathapeutic medication regimens. Our state continues to talk about increasing access for MOUD and the undeniable need for these services in our rural populations and we, as pharmacists, are here and more than capable of helping to make this happen. Our communities deserve to have access to these services. These increasing "rates" we continue to talk about and quote, were living breathing people that are no longer with us. Their

lives are lost forever. It's time to bring this immense pain and suffering our communities are feeling to stop. I know that I am eager to help bring healing to our communities, please let me use my education and training to bring some relief to the suffering our state is feeling right now.

SB 147 would allow me to practice at the top of my clinical ability, within a standard of care framework like other healthcare professionals. By streamlining patient access to pharmacist-provided services, this bill will improve health outcomes and reduce unnecessary burdens on physicians and emergency departments.

I am confident in my ability to provide safe, effective patient care, and I am committed to collaborating with other healthcare team members to ensure patients receive the best care possible.

I respectfully urge you to support SB 147 to expand access to high-quality healthcare services for Alaskans.

Thank you for your consideration.

Sincerely,  
Carrie Urena  
PharmD, BCPS  
Klawock Opioid Treatment Program



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islandrx1@gmail.com  
www.islandpharmacyak.com

April 22, 2025

Senator Forrest Dunbar  
Chair Senate Health and Social Services Committee  
Capitol Building Davis 106  
Juneau, AK

Senator Dunbar,

I am writing in support of SB 147 Pharmacist-Provided Patient Care Services. My father started Island Pharmacy in 1974 and we have been serving patients in Southern Southeast for over 51 years. The medications and services we offer now are vastly different and much more complex now. Yet the number of medical providers in our community is shrinking and becoming more dependent on travelling/non-permanent personnel. Pharmacies and pharmacists such as those I employ are highly trained and able to provide a standard of care which supplements existing medical services in our community. SB 147 provides language critical to allowing pharmacists to improve healthcare across Alaska including communities such as mine.

I appreciate you and your Senate HES colleagues efforts to help insure Alaskans receive adequate healthcare. I believe passage of SB 147 will assist in that endeavor.

Respectfully,

*Barry Christensen, RPh*

Barry Christensen, RPh/Owner



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1650 Cowles Street  
Fairbanks, AK 99701

April 13, 2026

The Honorable Donny Olson, Co-Chair  
The Honorable Lyman Hoffman, Co-Chair  
The Honorable Bert Stedman, Co-Chair  
Senate Finance Committee  
Alaska State Capitol  
Juneau, AK 99801

RE: Support for SB 147 – Pharmacist Prescription Authority

Dear Co-Chairs and Members of the Senate Finance Committee:

On behalf of Foundation Health Partners in Fairbanks, I am writing to express our strong support for SB 147, relating to pharmacist-provided patient care services and collaborative practice agreements.

As a regional health system serving Interior Alaska, we see firsthand the challenges posed by limited healthcare capacity, including constrained hospital beds, emergency department crowding, and workforce shortages. SB 147 represents a thoughtful and practical step toward improving access to timely, appropriate care by enabling pharmacists to practice at the top of their education, training, and experience.

Pharmacists are highly trained healthcare professionals who complete a Doctor of Pharmacy (PharmD) degree with extensive clinical training. Allowing them to expand their role in delivering preventive care, managing chronic conditions, and addressing minor, self-limiting illnesses will help reduce unnecessary emergency department visits and improve patient outcomes.

Importantly, SB 147 aligns Alaska statute with the existing standard of care already regulated by the Alaska Board of Pharmacy, ensuring patient safety while removing unnecessary administrative barriers. The bill also promotes interdisciplinary collaboration by encouraging pharmacists to coordinate with and refer patients to higher levels of care when appropriate, strengthening—not fragmenting—the healthcare system.

Expanded pharmacist services are consistent with federal policy and longstanding evidence-based practices in federal healthcare settings, where pharmacists have demonstrated improved patient outcomes, including in the treatment of opioid use disorder.

This is particularly important in Alaska, where access to care can be limited and timely intervention is critical.

Additionally, Alaskans have expressed strong support for expanding the role of pharmacists in providing testing, treatment, and preventive services in their communities. Pharmacists are among the most accessible healthcare providers and empowering them to deliver more care will help ensure patients receive the right care at the right time.

For communities like Fairbanks and across Interior Alaska, SB 147 will help maximize the capacity of our healthcare workforce, improve care coordination, and enhance access to services without compromising safety.

We respectfully urge your support for SB 147.

Sincerely,



Shelley Ebenal, CEO

Cc: Senator Cathy Giessel  
Members of the Interior Delegation



April 15, 2025

The Honorable Senator Cathy Giessel  
Alaska State Legislature  
State Capitol Room 121  
Juneau, AK 99811  
Via email: [Senator.Cathy.Giessel@akleg.gov](mailto:Senator.Cathy.Giessel@akleg.gov)

**RE: Support for SB 147A**

Dear Senator Giessel,

On behalf of the Maniilaq Association, we write in support of Senate Bill (SB) 147, an Act relating to the prescription and administration of drugs and devices by pharmacists; relating to reciprocity for pharmacists; and providing for an effective date.

Maniilaq Association is the Tribal Health Organization (THO) for the Northwest Arctic Region of Alaska, which provides health care to a population of about 8,000 Alaska Native (AN) people who live in 12 remote rural communities in a region of about 34,000 square miles. Our service area is a Roadless rural area that faces significant challenges due to high costs, limited access, and being a high poverty area where communities are only accessible year-round by small aircraft.

SB 147 authorizes pharmacists to provide patient care services including prescribing and administration of medications within the scope of their education, training, and experience. ANHB supports this legislation because it will increase access to pharmacist-provided patient care services, maximizing the professional capacity of Alaska's existing healthcare professionals. There are too few Alaskan providers to fill the current demand for healthcare services in Alaska, and job vacancies in the industry are significant. Pharmacists are already an integral part of the ATHS and the need for their services is growing. The State of Alaska should take every commonsense step to maximize our existing healthcare workforce, including the more than 500 pharmacists, to ensure access to safe care and referrals to other practitioners as needed.

Pharmacists are highly qualified, trained healthcare professionals. We support legislation that enable pharmacists to utilize the full scope of their education, training, and experience to promote community health and safety for the benefit of Alaskans. Maniilaq Association strongly encourage you to support of Senate Bill (SB) 147.

Sincerely,

Tim Gilbert, President/CEO

[tim.gilbert@maniilaq.org](mailto:tim.gilbert@maniilaq.org) | (907) 442-7677

CC:

Senator Donald Olson, Email: [Senator.Donald.Olson@akleg.gov](mailto:Senator.Donald.Olson@akleg.gov)

Representative Robyn Niayuk Burke, Email: [Representative.Robyn.Burke@akleg.gov](mailto:Representative.Robyn.Burke@akleg.gov)

MANIILAQ ASSOCIATION | P.O. BOX 256 | KOTZEBUE, AK 99752 | 1.800.478.3312

Kotzebue Dikiqtagruk, Ambler Ivisaappaat, Buckland Nunatchiaq, Deering Ipnatchiaq, Kiana Katyaak, Kivalina Kivaliniq, Kobuk Laugviik, Noatak Nautaaq, Noorvik Nuurvik, Point Hope Tikigaaq, Selawik Akuligaaq, Shungnak Isinnaq

**Doniece Gott**

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**From:** Pamela Samash <christlewood123@gmail.com>  
**Sent:** Monday, February 16, 2026 11:14 AM  
**To:** House Labor and Commerce; Senate Finance Committee; House Finance  
**Subject:** No on HB 195 and SB 147

Dear chairs and committee members,

I am writing to request a  
No vote on SB 147  
No vote on HB 195

These bills are deadly for rural women if pharmacies can prescribe and distribute the Mifepristone Cocktail.

I personally transported a woman hemorrhaging from the second dose of the Mifepristone Cocktail. I got her to the Fairbanks Memorial Hospital with 10 minutes. Had she lived far away, she would have bled to death.

The ER doctor told me that they see women hemorrhaging from Mifepristone regularly because the pregnancies are healthy when the women take the pills and so they have a lot of extra blood as opposed to a natural miscarriage event. This can lead to not only hemorrhaging, but also infection and sepsis.

I live in a rural community and I do not support the distribution of Mifepristone in Alaska because I know it endangers the women in my town.

Thank you  
Pamela Samash  
Nenana AK  
[REDACTED]

## Doniece Gott

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**From:** Susan Tullo <[REDACTED]>  
**Sent:** Monday, February 16, 2026 3:35 PM  
**To:** House Labor and Commerce; House Finance; Senate Finance Committee  
**Subject:** HB 195 and SB 147

To all members:

I am opposed to the above bills. Please do not advance them.

They will expand abortions/murder of our babies and endanger the mothers.

Your job is to make laws to protect the people...not to give permission to kill! You do not have authority to kill!

It is time to end abortion in Alaska...not to expand it!

Thank you.  
Susan Tullo  
Fairbanks, Alaska  
[REDACTED]

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**Doniece Gott**

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Aurora Fagan, Anchor Point, AI <PatMartin@alaskarighttolife.org>  
**Sent:** Saturday, February 28, 2026 8:40 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman; Sen. Kelly Merrick; Sen. Jesse Kiehl; Sen. James Kaufman; Sen. Mike Cronk  
**Subject:** Aurora Fagan Urging Opposition and NO Vote on HB 195 / SB 147

**Senate Finance Committee Co-Chairs and Members,**

I am writing to urge you to **oppose House Bill 195 / Senate Bill 147** at every opportunity and to vote **NO** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but *a trojan horse for further abortion deregulation*.

The legal gateway to Pharmacist PAD is simple:

**HB 195 / SB 147** redefine **Patient Care Services** to include **prescribing, administering, and dispensing Chemical Abortion Pills**

**HB 195 / SB 147** allow **Abortionists** and **Pharmacists** to form and operate **Chemical Abortion Pill Distributorships** through **Collaborative Practice Agreements (CPA)**. **HB 195** goes further by eliminating much of the Department's and Board's approval and oversight of **CPAs**.

Separately, but concurrently, **current FDA REMS** for **Mifepristone** have been so relaxed as to permit **prescribing** and **dispensing Mifepristone** and other **progesterone receptor modulators** without in person examinations by **physicians** and **pharmacists** alike.

By redefining Patient Care Services and allowing Abortionist/Pharmacist CPAs,

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the bill record.\*\***

My Petition to **OPPOSE**, vote **NO**, and **DEFEAT HB 195 / SB 147** is below:

**Whereas: Chemical Abortions** have **surged to 59%** of all abortions in 2024, claiming **720 babies' lives**.

**Whereas: HB 195 / SB 147** would redefine **Patient Care Services** to include **prescribing, administering, and dispensing** controlled substances and **Chemical Abortion Pills**;

**Whereas: HB 195 / SB 147** would allow **Abortionists** and **Pharmacists** to form and operate **Chemical**

**Doniece Gott**

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of John Nielsen, PALMER, Alaska <PatMartin@alaskarighttolife.org>  
**Sent:** Sunday, March 01, 2026 7:31 AM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman; Sen. Kelly Merrick; Sen. Jesse Kiehl; Sen. James Kaufman; Sen. Mike Cronk  
**Subject:** John Nielsen Urging Opposition and NO Vote on HB 195 / SB 147

**Senate Finance Committee Co-Chairs and Members,**

I am writing to urge you to **oppose House Bill 195 / Senate Bill 147** at every opportunity and to vote **NO** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but ***a trojan horse for further abortion deregulation.***

The legal gateway to Pharmacist PAD is simple:

**HB 195 / SB 147** redefine **Patient Care Services** to include **prescribing, administering, and dispensing Chemical Abortion Pills**

**HB 195 / SB 147** allow **Abortionists** and **Pharmacists** to form and operate **Chemical Abortion Pill Distributorships** through **Collaborative Practice Agreements (CPA)**. **HB 195** goes further by eliminating much of the Department's and Board's approval and oversight of **CPAs**.

Meanwhile, **current FDA REMS** for **Mifepristone** have been relaxed to permit **prescribing** and **dispensing Mifepristone** and other **progesterone receptor modulators** without in person examinations.

By redefining Patient Care Services and allowing Abortionist/Pharmacist CPAs,

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the bill record.\*\***

My Petition to **OPPOSE**, vote **NO**, and **DEFEAT HB 195 / SB 147** is below:

**Whereas: Chemical Abortions** have **surged to 59%** of all abortions in 2024, claiming **720 babies' lives.**

**Whereas: HB 195 / SB 147** would redefine **Patient Care Services** to include **prescribing, administering, and dispensing** controlled substances and **Chemical Abortion Pills;**

**Whereas: HB 195 / SB 147** would allow **Abortionists** and **Pharmacists** to form and operate **Chemical Abortion Pill Distributorships** through **Collaborative Practice Agreements WITHOUT** approval or

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Carol Allums, Wasilla, Alaska <PatMartin@alaskarighttolife.org>  
**Sent:** Monday, March 02, 2026 1:26 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Carol Allums Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **oppose House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but **a trojan horse for further abortion deregulation**.

The bills create a legal pathway for pharmacists to **prescribe, administer, and dispense abortion drugs**, specifically:

1. **HB 195 / SB 147** redefine **patient care services** to include **prescribing, administering, and dispensing abortion pills**.
2. **HB 195 / SB 147** permit **abortionists and pharmacists** to form and operate **abortion pill distributorships** through **collaborative practice agreements (CPA)**.
3. **HB 195** goes further by eliminating much of the Department's and Board's approval and oversight of CPAs.
4. Meanwhile, the **FDA Risk Evaluation and Mitigation Strategy (REMS)** for **mifepristone** has been relaxed to permit **pharmacists prescribing and dispensing mifepristone** and other **progesterone receptor modulators** without in person examinations.

I oppose **HB 195 / SB 147** specifically because **every abortion pill (such as mifepristone) kills a baby, and 1 in 10 abortion pills sends a woman to the hospital with serious or life-threatening complications**, according to this **EPPC study**.

Alaska can pursue pharmacy modernization **without embedding abortion expansion** within it.

**HB 195 / SB 147** can advance **without controversy** if amended to remove any authority for **pharmacists to prescribe, administer, OR dispense progesterone receptor modulating drugs** such as **mifepristone**. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the bill record.\*\***

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Denise Petrash, Anchorage, Ala <PatMartin@alaskarighttolife.org>  
**Sent:** Monday, March 02, 2026 3:36 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Denise Petrash Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **oppose House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but *a trojan horse for further abortion deregulation*.

The bills create a legal pathway for pharmacists to **prescribe, administer, and dispense abortion drugs**, specifically:

1. **HB 195 / SB 147** redefine **patient care services** to include **prescribing, administering, and dispensing abortion pills**.
2. **HB 195 / SB 147** permit **abortionists and pharmacists** to form and operate **abortion pill distributorships** through **collaborative practice agreements (CPA)**.
3. **HB 195** goes further by eliminating much of the Department's and Board's approval and oversight of CPAs.
4. Meanwhile, the *FDA Risk Evaluation and Mitigation Strategy (REMS)* for **mifepristone** has been relaxed to permit **pharmacists prescribing and dispensing mifepristone** and other **progesterone receptor modulators** without in person examinations.

I oppose **HB 195 / SB 147** specifically because **every abortion pill (such as mifepristone) kills a baby, and 1 in 10 abortion pills sends a woman to the hospital with serious or life-threatening complications**, according to this **EPPC study**.

Alaska can pursue pharmacy modernization **without embedding abortion expansion** within it.

**HB 195 / SB 147** can advance **without controversy** if amended to remove any authority for **pharmacists to prescribe, administer, OR dispense progesterone receptor modulating drugs** such as **mifepristone**. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the bill record.\*\***

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Sonya Halverson, Anchorage, AI <PatMartin@alaskarighttolife.org>  
**Sent:** Monday, March 02, 2026 8:35 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Sonya Halverson Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **oppose House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but **a trojan horse for further abortion deregulation**.

The bills create a legal pathway for pharmacists to **prescribe, administer, and dispense abortion drugs**, specifically:

1. **HB 195 / SB 147** redefine **patient care services** to include **prescribing, administering, and dispensing abortion pills**.
2. **HB 195 / SB 147** permit **abortionists and pharmacists** to form and operate **abortion pill distributorships** through **collaborative practice agreements (CPA)**.
3. **HB 195** goes further by eliminating much of the Department's and Board's approval and oversight of CPAs.
4. Meanwhile, the *FDA Risk Evaluation and Mitigation Strategy (REMS)* for **mifepristone** has been relaxed to permit **pharmacists prescribing and dispensing mifepristone** and other **progesterone receptor modulators** without in person examinations.

I oppose **HB 195 / SB 147** specifically because **every abortion pill (such as mifepristone) kills a baby**, and **1 in 10** abortion pills sends a woman to the hospital with **serious or life-threatening complications** according to this **EPPC study**.

Alaska can pursue pharmacy modernization **without embedding abortion expansion** within it.

**HB 195 / SB 147** can advance **without controversy** if amended to remove any authority for **pharmacists to prescribe, administer, OR dispense progesterone receptor modulating drugs** such as **mifepristone**. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the bill record.\*\***

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Jay Halverson, Anchorage, Alas <PatMartin@alaskarighttolife.org>  
**Sent:** Monday, March 02, 2026 10:13 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Jay Halverson Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **oppose House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but *a trojan horse for further abortion deregulation*.

The bills create a legal pathway for pharmacists to **prescribe, administer, and dispense abortion drugs**, specifically:

1. **HB 195 / SB 147** redefine **patient care services** to include **prescribing, administering, and dispensing abortion pills**.
2. **HB 195 / SB 147** permit **abortionists and pharmacists** to form and operate **abortion pill distributorships** through **collaborative practice agreements (CPA)**.
3. **HB 195** goes further by eliminating much of the Department's and Board's approval and oversight of **CPAs**.
4. Meanwhile, the *FDA Risk Evaluation and Mitigation Strategy (REMS)* for **mifepristone** has been relaxed to permit **pharmacists prescribing and dispensing mifepristone** and other **progesterone receptor modulators** without in person examinations.

I oppose **HB 195 / SB 147** specifically because **every abortion pill (such as mifepristone) kills a baby**, and **1 in 10** abortion pills sends a woman to the hospital with **serious or life-threatening complications**, according to this **EPPC study**.

Alaska can pursue pharmacy modernization **without embedding abortion expansion** within it.

**HB 195 / SB 147** can advance **without controversy** if amended to remove any authority for **pharmacists to prescribe, administer, OR dispense progesterone receptor modulating drugs** such as **mifepristone**. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the bill record.\*\***

**Doniece Gott**

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Patrick Seidl, Anchorage, Alas <PatMartin@alaskarighttolife.org>  
**Sent:** Tuesday, March 03, 2026 9:01 AM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Patrick Seidl Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### **Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman**

I am writing to urge you to **oppose House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but **a trojan horse for further abortion deregulation**.

The bills create a legal pathway for pharmacists to **prescribe, administer, and dispense abortion drugs**, specifically:

1. **HB 195 / SB 147** redefine **patient care services** to include **prescribing, administering, and dispensing abortion pills**.
2. **HB 195 / SB 147** permit **abortionists and pharmacists** to form and operate **abortion pill distributorships** through **collaborative practice agreements (CPA)**.
3. **HB 195** goes further by eliminating much of the Department's and Board's approval and oversight of **CPAs**.
4. Meanwhile, the **FDA Risk Evaluation and Mitigation Strategy (REMS)** for **mifepristone** has been relaxed to permit **pharmacists prescribing and dispensing mifepristone** and other **progesterone receptor modulators** without in person examinations.

I oppose **HB 195 / SB 147** specifically because **every abortion pill (such as mifepristone) kills a baby**, and **1 in 10** abortion pills sends a woman to the hospital with **serious or life-threatening complications**, according to this **EPPC study**.

Alaska can pursue pharmacy modernization **without embedding abortion expansion** within it.

**HB 195 / SB 147** can advance **without controversy** if amended to remove any authority for **pharmacists to prescribe, administer, OR dispense progesterone receptor modulating drugs** such as **mifepristone**. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the bill record.\*\***

**Doniece Gott**

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**From:** Norman Sams <[REDACTED]>  
**Sent:** Friday, March 06, 2026 10:43 AM  
**To:** Rep. Mike Prax; Senate Finance Committee; House Labor and Commerce  
**Subject:** HB 195 / SB 147

I am strongly opposed to potentially subject legislation. Last year, nearly 1000 unborn Alaskans were killed, at only 3 (now 2) Planned Parenthood sites. Killing innocent, unborn children will only increase with the passage of this legislation. I urge you to oppose and vote no should it come up for vote.

VR  
Norman Sams

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Jan DeLand, Anchorage, Alaska <PatMartin@alaskarighttolife.org>  
**Sent:** Friday, March 06, 2026 7:22 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Jan DeLand Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **OPPOSE House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but *a trojan horse for further abortion deregulation*.

**HB 195 / SB 147** authorize pharmacist prescribed, administered, and dispensed abortions in several ways:

1. **HB 195 / SB 147** authorize *abortionists* and *pharmacists* to *diagnose pregnancies* and other health conditions and illnesses under *Collaborative Practice Agreements* (CPA).
2. **HB 195 / SB 147** redefine *patient care services* to include *prescribing, administering, and dispensing* drugs and devices, including *abortion pills* such as *mifepristone*.
3. **HB 195** eliminates much of the Department's and Board's approval and oversight of CPAs.
4. The *FDA Risk Evaluation and Mitigation Strategy (REMS)* for *mifepristone* has already been relaxed to permit *pharmacists'* *prescribing* and *dispensing* *mifepristone* and other *progesterone receptor modulators* without in person examinations.

I oppose **HB 195 / SB 147** specifically because *every abortion pill (such as mifepristone) kills a baby*, and **1** in **10** abortion pills sends a woman to the hospital with *serious or life-threatening complications*. according to this **EPPC study**.

Alaska can pursue pharmacy modernization *without embedding abortion expansion* within it.

**HB 195 / SB 147** can advance *without controversy* if amended to remove any authority for *pharmacists* to *prescribe, administer, OR dispense progesterone receptor modulating drugs* such as *mifepristone*. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the Bill Record.\*\***

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Scott Cormier, Anchorage, Alas <PatMartin@alaskarighttolife.org>  
**Sent:** Sunday, March 08, 2026 3:24 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Scott Cormier Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **OPPOSE House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but **a trojan horse for further abortion deregulation**.

**HB 195 / SB 147** authorize pharmacist prescribed, administered, and dispensed abortions in several ways:

1. **HB 195 / SB 147** authorize **abortionists** and **pharmacists** to **diagnose pregnancies** and other health conditions and illnesses under Collaborative Practice Agreements (CPA).
2. **HB 195 / SB 147** redefine **patient care services** to include **prescribing, administering, and dispensing** drugs and devices, including **abortion pills** such as **mifepristone**.
3. **HB 195** eliminates much of the Department's and Board's approval and oversight of **CPAs**.
4. The **FDA Risk Evaluation and Mitigation Strategy (REMS)** for **mifepristone** has already been relaxed to permit **pharmacists' prescribing and dispensing mifepristone** and other **progesterone receptor modulators** without in person examinations.

I oppose **HB 195 / SB 147** specifically because **every abortion pill (such as mifepristone) kills a baby**, and **1 in 10** abortion pills sends a woman to the hospital with **serious or life-threatening complications**, according to this **EPPC study**.

Alaska can pursue pharmacy modernization **without embedding abortion expansion** within it.

**HB 195 / SB 147** can advance **without controversy** if amended to remove any authority for **pharmacists** to **prescribe, administer, OR dispense progesterone receptor modulating drugs** such as **mifepristone**. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the Bill Record.\*\***

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of David Mitchell, Anchorage, Ala <PatMartin@alaskarighttolife.org>  
**Sent:** Sunday, March 08, 2026 9:35 PM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** David Mitchell Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **OPPOSE House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but **a trojan horse for further abortion deregulation**.

**HB 195 / SB 147** authorize pharmacist prescribed, administered, and dispensed abortions in several ways:

- 1. HB 195 / SB 147** authorize **abortionists** and **pharmacists** to **diagnose pregnancies** and other health conditions and illnesses under Collaborative Practice Agreements (CPA).
- 2. HB 195 / SB 147** redefine **patient care services** to include **prescribing, administering, and dispensing** drugs and devices, including **abortion pills** such as **mifepristone**.
- 3. HB 195** eliminates much of the Department's and Board's approval and oversight of **CPAs**.
- 4. The FDA Risk Evaluation and Mitigation Strategy (REMS)** for **mifepristone** has already been relaxed to permit **pharmacists' prescribing and dispensing mifepristone** and other **progesterone receptor modulators** without in person examinations.

I oppose **HB 195 / SB 147** specifically because **every abortion pill (such as mifepristone) kills a baby**, and **1 in 10** abortion pills sends a woman to the hospital with **serious or life-threatening complications** according to this **EPPC study**.

Alaska can pursue pharmacy modernization **without embedding abortion expansion** within it.

**HB 195 / SB 147** can advance **without controversy** if amended to remove any authority for **pharmacists to prescribe, administer, OR dispense progesterone receptor modulating drugs** such as **mifepristone**. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the Bill Record.\*\***

## Doniece Gott

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**From:** PatMartin=alaskarighttolife.org@mg.alaskarighttolife.org on behalf of Michele Finley, Eagle River, A <PatMartin@alaskarighttolife.org>  
**Sent:** Sunday, March 08, 2026 8:33 AM  
**To:** Senate Finance Committee; Sen. Lyman Hoffman; Sen. Donny Olson; Sen. Bert Stedman  
**Subject:** Michele Finley Urging Opposition and DO NOT PASS Vote on HB 195 / SB 147

### Senate Finance Committee Co-Chairs Hoffman, Olson, and Stedman

I am writing to urge you to **OPPOSE House Bill 195 / Senate Bill 147** at every opportunity and to vote **DO NOT PASS** on **HB 195 / SB 147**.

**HB 195 / SB 147** is not a healthcare modernization bill, but *a trojan horse for further abortion deregulation*.

**HB 195 / SB 147** authorize pharmacist prescribed, administered, and dispensed abortions in several ways:

- 1. HB 195 / SB 147** authorize *abortionists* and *pharmacists* to *diagnose pregnancies* and other health conditions and illnesses under *Collaborative Practice Agreements* (CPA).
- 2. HB 195 / SB 147** redefine *patient care services* to include *prescribing, administering, and dispensing* drugs and devices, including *abortion pills* such as *mifepristone*.
- 3. HB 195** eliminates much of the Department's and Board's approval and oversight of CPAs.
- 4.** The *FDA Risk Evaluation and Mitigation Strategy (REMS)* for *mifepristone* has already been relaxed to permit *pharmacists' prescribing and dispensing mifepristone* and other *progesterone receptor modulators* without in person examinations.

I oppose **HB 195 / SB 147** specifically because *every abortion pill (such as mifepristone) kills a baby*, and **1 in 10** abortion pills sends a woman to the hospital with *serious or life-threatening complications*, according to this **EPPC study**.

Alaska can pursue pharmacy modernization *without embedding abortion expansion* within it.

**HB 195 / SB 147** can advance *without controversy* if amended to remove any authority for *pharmacists to prescribe, administer, OR dispense progesterone receptor modulating drugs* such as *mifepristone*. If those provisions remain, our opposition will continue and expand as a direct result of that decision.

**\*\*Record my OPPOSITION to HB 195 / SB 147 in the Bill Record.\*\***

## **Doniece Gott**

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**From:** Dante Conley <[REDACTED]>  
**Sent:** Saturday, March 14, 2026 7:02 PM  
**To:** Senate Finance Committee  
**Subject:** Pharmacist Prescription Powers (SB 147)

To Whom It May Concern,

### **I am writing in opposition to Senate Bill 147.**

In its current iteration, the bill would allow test-and-treat for CLIA-waived tests and broad prescribing privileges. This would allow pharmacists to diagnose and treat patients independent of a licensed clinical provider (such as a physician).

My primary concern is that pharmacists are not trained in the full diagnostic process. Physicians spend years learning differential diagnosis — systematically ruling out conditions that mimic one another. For example, a sore throat could be strep, mono nucleosis, a peritonsillar abscess, epiglottitis, or cancer — conditions requiring very different responses.

Pharmacists are trained to recognize drug-related problems, not to diagnose disease from scratch. Physical examination skills (lymph node palpation, throat inspection, the use of a stethoscope) are minimal in pharmacy curricula.

Unfortunately, retail pharmacies are also geared toward quick, transactional encounters. This may lead to superficial diagnoses and undertriage. In other words, a pharmacist may correctly identify a positive strep test but miss that the patient also has signs of a deeper infection, autoimmune condition, or something requiring an urgent referral.

The systematic safety net present in a clinic with a robust medical record and supervising physicians is also missing. This will almost certainly lead to a third concern, over prescription of antibiotics with a resulting increase in resistant bacteria.

Finally, I am concerned about gaps in liability and oversight. The malpractice and liability framework for pharmacist prescribing is less developed than for physicians. This means that oversight mechanisms — peer review, credentialing, outcome tracking — are less robust in retail pharmacy settings. So if or when something goes wrong, there is no clear accountability.

My opposition to broad test-and-treat authority is not because I question pharmacists' intelligence or dedication. It comes from the recognition that retail pharmacies, and the training that equips pharmacists to practice there, are not optimized for diagnostics, complexity, or accountability. Before expanding prescription powers, we need to spend time considering which conditions are appropriate, what protocols should govern them, and how to ensure coordination with the broader healthcare system.

**Please vote against Senate Bill 147.**

**Doniece Gott**

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**From:** Anna Marsan <[REDACTED]>  
**Sent:** Sunday, April 19, 2026 10:00 PM  
**To:** Senate Finance Committee  
**Subject:** SB 147

## **I'm emailing to oppose SB 147**

This bill would bring mifepristone abortion pills into pharmacy and rural clinics . Mifepristone blocks the action of the hormone progesterone which in turn, cuts off nourishment to the baby, who then dies in the mothers womb.

Not only does this kill babies.. it's also a huge risk to the mothers with 1 in 10 women who took the tablet reported having serious complications. (Stated in a study done by EPPC (Ethics and Public Policy Counsel April 2025)

Expanding mifepristone access kills babies and are dangerous to mothers . I've visited several of the rural villages in Alaska. If women that live there got these pills and had serious complications, a hospital isn't just 20 minutes down the road. It can take hours - sometimes days depending on weather (there's been times when even airplanes couldn't land because of weather) and mode of transportation to get medical help. Pharmacists are not doctors and should not be given the authority to act as a doctor. I urge you to oppose this bill and stand up for the safety of our pre born neighbors and their mothers!

Anna Ford  
Wasilla, Ak

**Doniece Gott**

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**From:** Titus and Desirae Hermann <[REDACTED]>  
**Sent:** Monday, April 20, 2026 1:10 PM  
**To:** Senate Finance Committee  
**Subject:** Opposition to SB 147

Dear Senate Finance Committee Members,

We are writing to express our firm opposition to SB 147. We respectfully urge the Finance Committee to vote against this legislation due to significant concerns regarding public safety and the ethical implications of expanding access to Mifepristone.

Our opposition to this bill is based on several critical points:

- **Safety and Health Risks:** Statistics suggest that the use of Mifepristone can lead to serious or life-threatening complications for approximately one in ten women. Expanding access to this drug increases the number of women placed at medical risk.
- **Geographic Vulnerability:** In a state like Alaska, the risks are magnified for women in rural and remote communities. Those separated from emergency medical facilities by boats, ferries, or planes face a heightened danger should fatal complications arise without immediate access to a hospital.
- **Expansion of Pharmacist Authority:** We are strongly opposed to any expansion of pharmacist authority that facilitates the distribution of abortion-inducing drugs.
- **Ethical Concerns:** Beyond medical safety, the primary function of this drug is to terminate a life, which remains a fundamental point of our opposition.
- **Advocacy Concerns:** It appears that the primary advocates for this expansion are large-scale pharmaceutical and abortion-providing interests, rather than the grassroots interests of the community's well-being.

Expanding Mifepristone access is dangerous for mothers and deadly for the unborn. For these reasons, we believe the risks to Alaskan women are too great, and we respectfully request that you oppose SB 147.

Thank you for your time and for your consideration of these serious concerns.

Sincerely,

Titus and Desirae Hermann

[REDACTED]  
[REDACTED]  
[REDACTED]

**Doniece Gott**

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**From:** Glenn and Sharolyn Hermann <[REDACTED]>  
**Sent:** Monday, April 20, 2026 3:18 PM  
**To:** Senate Finance Committee  
**Subject:** SB 147

I urge you to vote against this bill which would allow women of age age to obtain an abortion pill to kill their unborn baby without a doctor or a parent's knowledge. This baby is a human being with a right for life. Thank you, Glenn Hermann