



Advancement of Pharmacy Practice: Lessons from Iowa

Rep. Brett Barker, PharmD



A Foundation in Collaboration



Iowa Pharmacy Association

Unified voice for pharmacists.



Board of Pharmacy

Regulatory partner enabling practice advancement through rules and enforcement.




Colleges (UI & Drake)

Leadership, education, & student engagement.



Stakeholders

Medicaid, CPESN, CEimpact and grassroots collaboration.



Advocacy & Grassroots



Day on the Hill

Nearly 200 pharmacists & students advocated in 2025. Most visible grassroots impact. Allows for training & equipping.



Grassroots & Champions

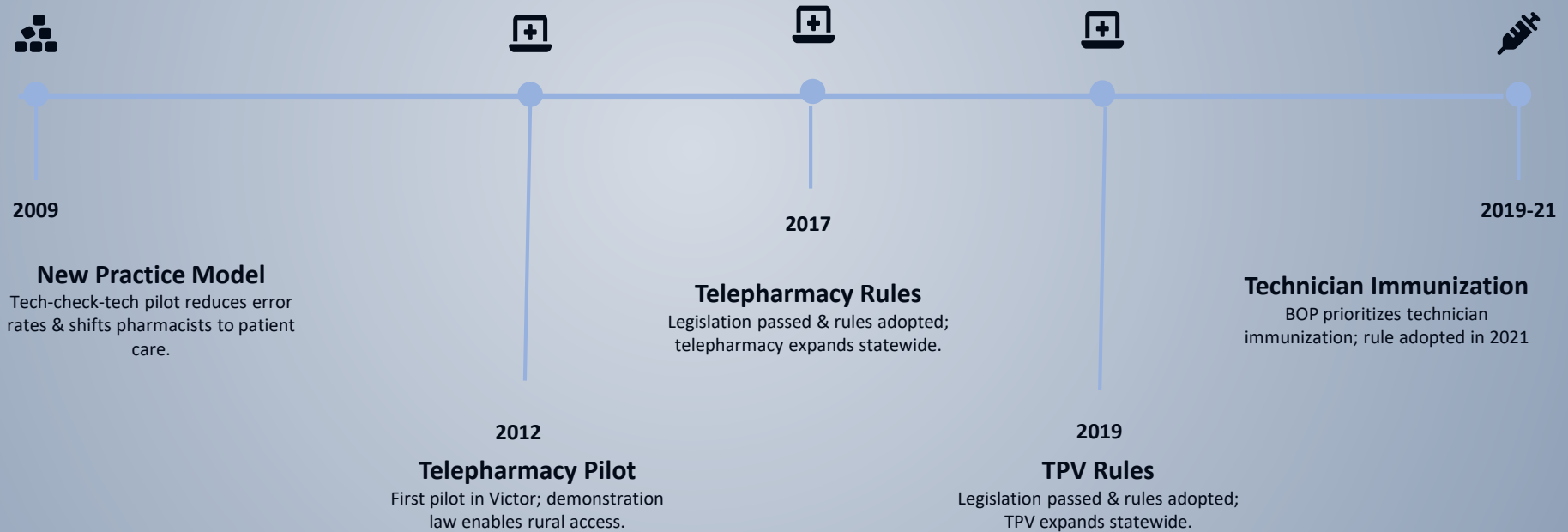
Champion Advocate program builds relationships with legislators; Action Alerts; Ongoing in-district relationships



Lobbying & Coalitions

Professional lobby team & issue specific coalitions

Timeline Advanced Technician Roles





“New Practice Model” → TPV

New Practice Model

- › Formal Task Force - 2009
- › Pilot demonstration project legislation
- › Drake research project
- › TPV legislation & BOP Rules – 2018-2019



Telepharmacy

Telepharmacy

- › Utilized previously passed demonstration project legislation
- › 2012 – first pilot in Victor, IA
- › Legislation passed 2016
- › BOP rules adopted in 2017 – not without controversy



Modernized Pharmacy Practice Act

Feature	1986 PPA	2024 HF 555
Regulatory Approach	Bright-line lists; 27-page act; restricts tasks	Standard-of-care model; 16-page act; adaptive to training
Flexibility	Rigid definitions; hindered innovation	Aligns with other professions; responsive to education
Prescriptive Authority	Limited	Expanded
Status	Longest healthcare practice act in Iowa	Third state to adopt standard-of-care; effective Jul. 1, 2024

Why Modernize?

Law unchanged since 1986; modernized to align with evolving education and patient needs.



PBM Reform

- › Started efforts in late 2000s
- › Mid-2010s – legislation and litigation
 - Focused on reporting and transparency
- › 2022 – HF 2384 Post-Rutledge framework
 - Enhanced enforcement
 - Funding at IID
- › 2025 – SF383
 - Nondiscrimination payment provision
 - Maintain pharmacy infrastructure

Key Provisions: No PBM discrimination; any willing pharmacy; pass through 100% rebates; reimburse \geq NADAC + \$10.68; appeals; prohibit arbitrary specialty designations



Questions?

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