

# Provide this, Pal...

**Provider** noun pro-vid-er | \prə-ˈvī-dər \

**Definition of provider:** one that provides, health-care providers, an Internet provider, especially : breadwinner

**Examples of provider in a Sentence** She works hard and is a good provider. He is the sole provider for his family.  
*www.merriam-webster.com/dictionary/provider*



This whole “provider” nonsense just keeps getting worse...I thought it was bad enough that Yelp! has us reviewed like restaurants and plumbers. The disrespect for the medical profession continues its progressive decline. We are called by our

first names, we have no defensive options to reputation slamming, and on top of it we are lumped into a bucket of white coats with no regard to training or identity. Dr. Google has not done us any favors, either, as many of us are found by “provider databases.” And now, Merriam Webster dictionary has turned on us, too, by defining “health-care provider” on the same level as “Internet provider.”

Four years ago, I ranted about being called a “provider,” making fun of the concept that we have gone from physicians to HCPs to simply providers. I used to think it was a pharma term, since prescribing numbers fall under one umbrella, but insurance companies (who don’t provide much) and pharmacies (who provide us headaches) have adopted this term, too. Honestly, it is about laziness and indifference, even though every dermatologist, physician assistant, and nurse practitioner worked their tails off to get to where they are today.

Ironically, groups of physicians have banded together to try to mandate that state legislatures abolish this term, but the states love to keep us in our place. Just ask any of your colleagues in Ohio who recently witnessed the assembly’s passage of SB 265, Senator Matt Dolan’s legislation to formally recognize pharmacists as providers.<sup>1</sup> A few more weeks and it will be a law in Ohio that pharmacists can do our jobs.

This is a slap in the face to our advocacy efforts, especially since there is no such thing as “provider status” that any of us signed up for. But according to these lawmakers who think they are doing medicine a favor, we can continue to watch the erosion of what we spent years training for by one signature of a pharmacist’s pen...and those will actually be prescriptions, not suggestions. From their website, this is the statement I can’t understand: “By including pharmacists as medical professionals with provider status, we are permit-

ting pharmacists to practice at the top of their license,” said Senator Dolan. “Pharmacists learn and train with physicians in our universities, but are not able to practice this collaborative spirit in the field; this bill allows for that.” Remind me when pharmacists learned morphology description, differential diagnoses, and CPC. I sure hope they can recognize steroid atrophy or identify reactions from misdiagnosed tinea infections, let alone the impending shortage of permethrin and acyclovir for the pandemic of scabies and zoster.

And like in New Jersey, they hide behind the opioid prescribing crisis and growing “underserved” to get this through: “In light of the opioid crisis, increased chronic disease costs, and growing behavioral health demands, SB 265 will help knock down the barriers that have stood in the way of health plans, hospitals, and health care teams from integrating and utilizing the pharmacological expertise of the pharmacist.” But as you read through the fine print, guess how this will really hurt physicians? Surprise, surprise: they will assume more control of formularies, sit on more P&T committees, and reassess step therapy guidelines as if we are Denmark...even though it is for the global good, and because they were trained in pharmacology and apparently know which drugs to use when. “In addition to containing these important provider status provisions, we are also pleased to report that the language from SB 56/HB 72, which would make needed reforms to step therapy, was also added to SB 265 while being deliberated in the House. OPA is supportive of the provisions to streamline step therapy for Ohio patients.” Streamline...dismantle...complicate...clearly their definitions are different than ours. But don’t worry, we will still have to do prior authorizations, sit on hold, and deal with the same headaches.

This is yet another reminder of our need for advocacy and a call for SkinPAC, the American Medical Association, and our leaders to act to protect patient safety. The time to be aggressive in your state is now. We must speak with our wallets and our voices. Every state derm society should get members active, even if there is no political arm, because this is another example of how apathy leads to weakness. Look at the pharmacy lobby. They banded together and got what they wanted...hopefully not at our patient’s expense. The question is, how many more calls for a unified front do dermatologists need before the next poach of our specialty? ■

—Neal Bhatia, MD  
Chief Medical Editor

1. [https://ohiopharmacists.org/aws/OPA/pt/sd/news\\_article/205369/\\_PARENT/layout\\_interior\\_details/false?fbclid=IwAR26M6zszCH000vhTTctfDK5ILEG2hSWFys6FK11UuKmc14Dl\\_QcQ2CC-IE](https://ohiopharmacists.org/aws/OPA/pt/sd/news_article/205369/_PARENT/layout_interior_details/false?fbclid=IwAR26M6zszCH000vhTTctfDK5ILEG2hSWFys6FK11UuKmc14Dl_QcQ2CC-IE)