

More ways for pharmacists to help

Understanding pharmacy standard of care reform in Wisconsin

The idea

Give qualified pharmacists clearer authority to use their training to help patients, while keeping legal limits and responsibility for their care. Any change to Wisconsin law would determine which services pharmacists could provide.

What standard of care means

The care a reasonably careful professional with similar training and experience would provide in the same situation. The pharmacist still needs enough information and a suitable setting, and must recognize when another clinician should help.

Why it matters

Some medication needs are difficult to address when the usual prescriber is unavailable. Pharmacies can be another access point. A study published in 2021 used 2019 location data and found 265 Wisconsin community pharmacies in primary care shortage areas. Location alone does not establish that a pharmacy is ready to provide more services.

A patient example

A person needs a replacement rescue inhaler before the weekend and cannot reach their prescriber. They are not having severe symptoms. The pharmacist checks symptoms, history, records, and current legal options. Expanded authority could help with some appropriate requests. This is a hypothetical example, not a new service announcement or treatment protocol.

Continue the conversation

Bring your questions to a chapter meeting, or ask your student PSW club how to take part.

Sources

NASPA Standard of Care Regulatory Model updated September 29 2026

Look KA, Dekeyser C, Conjurske S, et al. Illustrating access to community pharmacies in Wisconsin. J Am Pharm Assoc. 2021;61(4):492–499. doi:10.1016/j.japh.2021.02.004.

What patients should be able to expect

Clear information and a safe next step

Care at a pharmacy

- The service is legally permitted and fits the pharmacist's preparation.
- The pharmacy has enough information, staffing, time, privacy, and resources.
- The pharmacist explains the plan, keeps records, and arranges appropriate communication and follow up.
- The patient is referred when another clinician or setting should help.

Ask about cost

Insurance would not automatically cover every newly authorized service. Ask about the visit and medicine costs before agreeing whenever possible.

What the evidence says

Studies of pharmacist prescribing report promising results for several services. The evidence has limitations, and the effect of a Wisconsin reform would need to be evaluated. More authority is an opportunity to improve access, not a guarantee of outcomes.

Questions for discussion

- What need could a prepared pharmacy help address?
- What would make referral the better choice?
- How would a patient know whether the service is available and affordable?

Urgent symptoms

Severe trouble breathing, chest pain, or other emergency symptoms need emergency help. Call 911 rather than wait for a routine pharmacy visit.

Sources

Teahan Á, et al. Effectiveness and safety of pharmacist prescribing: a systematic review. *BMJ Open*. 2026;16:e112886. doi:10.1136/bmjopen-2025-112886.

ForwardHealth Online Handbook pharmacist policies

NHLBI Asthma Attack emergency guidance

American Heart Association Heart Attack Warning Symptoms