Pharmacy Legislative Day Reflection and Bill Development

Posted on September 21, 2018

Pharmacy Legislative Day gives pharmacists, students, educators, professional associations, and patients an opportunity to discuss healthcare policy directly with legislators and staff. The original reflection describes the 2018 event as educational and inspiring because it transformed the legislative process from an abstract classroom topic into a real form of professional participation. It also records meetings with students from other schools, practicing pharmacists, institutional leaders, and Chris Hudtwalcker on behalf of Senator José Javier Rodríguez and Representative Evan Jenne. Those details remain the center of this reflection. However, the event should be called a legislative day or forum rather than a "health fare," and the Florida bill process requires clarification. Citizens and professional groups propose ideas, but only a legislator or authorized committee can introduce a bill. A proposal must pass both the Florida Senate and House in identical form before it is presented to the governor (Florida Senate, "How an Idea Becomes a Law"; Florida Constitution, art. III, §§ 7–8).

Purpose of Pharmacy Legislative Day

Pharmacy practice is shaped by statutes and regulations concerning licensure, scope of practice, controlled substances, medication access, insurance, telehealth, immunization, collaborative practice, patient safety, and professional accountability. Legislative Day helps pharmacists explain how those rules affect care. Legislators cannot become experts in every clinical and operational detail, so practitioners provide examples from community pharmacies, hospitals, long-term care, public health, managed care, and other settings. Students participate to learn advocacy, but they also contribute the perspective of future professionals facing debt, training requirements, technology change, and evolving patient needs (Florida Senate, "Effective Communication with a Legislator").

Personal Experience

Before attending the event, meeting legislators felt distant and formal. I imagined that elected officials and their staff would be inaccessible to students. At the event, I discovered that legislative advocacy depends on ordinary conversation prepared carefully. Participants could introduce themselves, describe a problem, explain who was affected, and request a specific action. The freedom to speak directly with policymakers made the experience inspiring. It also created responsibility: a professional should not use access merely to promote private advantage. Pharmacy advocacy should connect the profession's concerns with patient safety, affordability, access, and public health (Florida Senate, "Effective Communication with a Legislator").

Learning From Practicing Pharmacists

Meeting practicing pharmacists showed how policy affects daily care. A rule that appears technical may determine whether a pharmacist can provide a service, obtain reimbursement, communicate with a prescriber, or help a patient receive medicine on time. Experienced pharmacists were able to describe unintended consequences and suggest workable language. Their presentations demonstrated that strong advocacy combines clinical knowledge with evidence, legal understanding, and a realistic implementation plan. Passion attracts attention, but credibility depends on accurate claims and awareness of competing interests (Florida Senate, “Effective Communication with a Legislator”).

Learning From Other Students

Students from different schools brought diverse experiences and priorities. Some were interested in clinical services, others in community practice, public health, research, business, or regulation. Discussion across schools created a sense of professional community that extended beyond one campus. It also showed that pharmacy policy is not controlled by one institution. Coalition building requires people to identify shared goals while respecting differences in curriculum, location, and career plans. The event turned classmates and strangers into potential partners in future advocacy.

Meeting Legislative Staff

Our discussion with Chris Hudtwalcker, representing the offices of Senator José Javier Rodríguez and Representative Evan Jenne, introduced us to the role of legislative staff. Staff members research issues, prepare briefings, communicate with constituents, help manage schedules, and track bills. Meeting with staff is not a lesser form of advocacy. They often become the people who review evidence, identify legal questions, and advise the legislator. A respectful follow-up with concise information can therefore be more effective than a brief photograph with an elected official (Florida Senate, “Effective Communication with a Legislator”).

Professional Identity and Civic Responsibility

The event expanded my understanding of a pharmacist’s role. Professional responsibility includes safe dispensing and clinical judgment, but it also includes attention to the laws governing care. Pharmacists observe barriers that may be invisible in legislative text: patients unable to obtain medication, shortages, insurance delays, unsafe prescribing, or services that are clinically valuable but not reimbursed. Advocacy provides a way to translate those observations into policy discussion. It should remain evidence-based and transparent about professional interests (Florida Senate, “Effective Communication with a Legislator”).

The Cost of Attendance

The original reflection identifies high attendance cost as the principal negative experience. Fees, travel, accommodation, missed work, and professional clothing can exclude students and early-career practitioners. That exclusion weakens the range of voices legislators hear. Professional associations should consider scholarships, reduced student fees, shared transport, virtual preparation, and sponsorship rules that do not compromise independence. Schools can integrate advocacy into experiential education and provide funding where possible. Legislative participation should not become a privilege available only to people with disposable income.

Preparing a Policy Idea

A policy proposal begins with a clearly defined problem rather than a preferred bill title. Advocates should identify who is affected, how often the problem occurs, which law or regulation contributes, and why existing remedies are insufficient. They should review current statutes, agency authority, related bills, fiscal effects, and stakeholder positions. A pharmacy proposal may concern patient access, but it can also affect physicians, nurses, insurers, employers, regulators, and public budgets. Early consultation reveals conflicts before language is filed (Florida Senate, “Effective Communication with a Legislator”; Florida Senate, “How an Idea Becomes a Law”).

From Idea to Legislative Sponsor

Citizens, pharmacists, associations, agencies, and advocacy groups can present ideas to senators or representatives. A legislator decides whether to sponsor the proposal. Legislative staff and professional bill-drafting services convert the concept into formal language. Drafting is not clerical copying. A bill must identify which statutory sections are created, amended, or repealed and must use definitions that courts, agencies, and regulated parties can apply. Advocates should review the draft to ensure that the language still addresses the original problem (Florida Senate, “How an Idea Becomes a Law”).

Filing and First Reading

After a bill is drafted and approved by its sponsor, it is filed, assigned a number, and introduced in either the Senate or House. The bill is read by title and referred to one or more committees according to subject matter and fiscal impact. The original essay suggests that an idea is simply read and accepted by a senator before being published in a journal. The process is more structured. Bill pages, calendars, staff analyses, amendments, and votes become part of the public legislative record (Florida Senate, “How an Idea Becomes a Law”; Florida Constitution, art. III, § 7).

Committee Review

Committees are where much legislative work occurs. Members hear presentations, question sponsors and stakeholders, review staff analysis, consider amendments, and vote. A committee may report a bill favorably, favorably with amendments or a committee substitute, or unfavorably. A bill can also die when it is never scheduled. Pharmacy advocates should therefore identify every committee of reference and communicate with members before hearings. Testimony should be concise, accurate, and connected to the language under consideration (Florida Senate, “How an Idea Becomes a Law”; Florida Senate, “Effective Communication with a Legislator”).

Fiscal and Regulatory Analysis

Healthcare bills often create costs or change agency responsibilities. Analysts may examine effects on Medicaid, state employee insurance, professional boards, public health, law enforcement, or information systems. A proposal that appears inexpensive to practitioners may require state staff, rulemaking, databases, enforcement, or training. Advocates strengthen their case by acknowledging costs and suggesting funding or phased implementation. Claims that a bill will save money should be supported by evidence and a credible time horizon (Florida Senate, “How an Idea Becomes a Law”).

Second and Third Readings

If a bill advances from committee and reaches the floor, it proceeds through constitutionally required readings. Members debate, offer amendments under chamber rules, and vote. The exact scheduling and procedure differ by chamber and bill type. Passage in one house does not make the proposal law. It is sent to the other house, where it goes through a similar process. Advocacy must continue because the second chamber may change or reject the bill (Florida Senate, “How an Idea Becomes a Law”; Florida Constitution, art. III, § 7).

Identical Passage by Both Houses

The Florida Senate and House must pass identical text. If one chamber amends the bill, the other may concur or refuse. Differences can be resolved through messages between chambers or, in some cases, a conference process. The original essay describes a “Senate Speaker,” but Florida has a Senate President and a Speaker of the House. Neither officer appoints a special feasibility committee automatically after every Senate passage. Procedures depend on the bill and disagreement between chambers (Florida Senate, “How an Idea Becomes a Law”; Florida Constitution, art. III, § 7).

Enrollment and Presentation to the Governor

After both houses pass identical text, the bill is enrolled, signed by the appropriate legislative officers, and presented to the governor. The governor may sign the bill, allow it to become law without a signature within the constitutional period, or veto it. Florida's timing depends on whether the legislature is in session and when the bill is presented. It is therefore inaccurate to state universally that every unsigned act becomes effective on the sixtieth day after adjournment. The effective date is usually specified in the bill; if not, constitutional and statutory default rules apply (Florida Senate, "How an Idea Becomes a Law"; Florida Constitution, art. III, § 8).

Veto and Override

If the governor vetoes a bill, the veto is returned with objections. The legislature can override through a two-thirds vote in each house. An override is politically difficult because it requires a larger coalition than ordinary passage. Advocates should understand that a governor's concerns may involve policy, cost, constitutionality, administration, or political disagreement. Engagement with executive agencies before passage can reveal implementation concerns and reduce the chance of a veto (Florida Constitution, art. III, § 8; Florida Senate, "How an Idea Becomes a Law").

Rulemaking After Enactment

Passing a statute may begin another process. If the law directs the Board of Pharmacy, Department of Health, Agency for Health Care Administration, or another body to adopt rules, those agencies must develop detailed requirements within the authority granted. Pharmacists should participate in public rulemaking because ambiguous or burdensome regulations can change the practical impact of the law. Implementation may also require education, forms, systems, and enforcement guidance.

Tracking Outcomes

Advocacy should not end at enactment. Supporters should track whether the law improves access, safety, cost, or professional practice as intended. Measures might include service use, medication errors, patient outcomes, geographic access, complaints, or budget impact. Unintended consequences should be reported honestly. A profession builds legislative credibility by supporting correction when its own proposal does not work as expected.

Effective Communication With Legislators

A strong meeting begins with a brief introduction and a clear request. Advocates should explain the problem through one accurate example, provide evidence, describe the bill or amendment, and leave a concise written summary. They should avoid technical language where ordinary language is sufficient. Legislators also need to know who opposes the proposal and why. Respectful answers to difficult questions are more persuasive than pretending no trade-offs exist. Follow-up should thank staff, supply requested material, and track the bill's next step (Florida Senate, "Effective Communication with a Legislator").

Ethical Advocacy

Pharmacy advocacy must protect patients from conflicts of interest. A policy that expands professional authority should include competence, referral, documentation, quality, and accountability. Claims should not exaggerate shortages, outcomes, or savings. Relationships with manufacturers, insurers, employers, or professional organizations should be disclosed when relevant. Students should understand lobbying and gift rules and follow school and employer policies. Credibility depends on honesty even when it weakens a preferred argument (Florida Senate, "Effective Communication with a Legislator").

How the Experience Changed My Career Perspective

The 2018 event showed me that legislation is not created by distant figures acting alone. Ideas move through relationships, drafting, committees, analysis, debate, amendment, and implementation. Pharmacists can contribute at every stage by identifying problems, supplying evidence, and explaining patient consequences. The experience also showed that advocacy is a learned professional skill. Confidence comes from preparation rather than status. Even as a student, I could listen, ask questions, introduce myself, and begin building the knowledge required for future participation (Florida Senate, "Effective Communication with a Legislator"; Florida Senate, "How an Idea Becomes a Law").

Conclusion

Pharmacy Legislative Day was educational because it connected professional practice with democratic policymaking. Meeting legislators, staff, pharmacists, and students made advocacy tangible and strengthened my commitment to patient-centered policy. The main limitation was the cost of attendance, which should be addressed so more students and practitioners can participate. I

also learned that an idea does not move directly from a citizen to the governor. It requires sponsorship, drafting, filing, committee review, readings, passage by both houses in identical form, and gubernatorial action, often followed by agency rulemaking. The experience prepared me to approach future legislation with greater confidence, accuracy, and ethical responsibility (Florida Senate, “How an Idea Becomes a Law”; Florida Senate, “Effective Communication with a Legislator”; Florida Constitution, art. III, §§ 7–8).

Works Cited

Florida Senate. “Effective Communication with a Legislator.” *The Florida Senate*, 2026.

Florida Senate. “How an Idea Becomes a Law.” *The Florida Senate*, 2026.

Florida Constitution, art. III, §§ 7–8.