

## **Abstract**

*Introduction:* Limited access to primary care, driven by provider shortage and healthcare disparities, requires implementation of new strategies for patient care. Pharmacists are an underutilized resource facing restrictions to providing care due to bright line regulatory models.

*Objective:* To evaluate the barriers and impact of transitioning to a standard of care (SOC) framework for pharmacy practice in Illinois, outlining the implications for access to care, patient outcomes, and healthcare efficiency.

*Evidence Review:* Review of existing literature and policy frameworks was conducted, including pharmacist education, regulatory models, and outcomes from areas where SOC is utilized.

*Findings:* Bright line regulatory models restrict pharmacy practice, prohibiting pharmacists from utilizing their knowledge and training to the full extent and limiting their ability to help close gaps in care. SOC frameworks allow pharmacists to practice at the top of their licensure, providing patient-centered care based on their clinical judgement. Many studies show that expanded pharmacist authority improves access to care, enhances chronic disease state management, and reduces healthcare costs without compromising patient safety.

*Conclusion:* Transitioning to an SOC model in Illinois would allow pharmacists to more fully integrate into the healthcare team, improving access to care, reducing disparities, and enhancing system efficiency. Policy reform is required to modernize pharmacy practice alongside the evolving healthcare system.