

A BILL FOR AN ACT

RELATING TO HEALTH.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

1	PART I
2	SECTION 1. The legislature finds that pharmacies are vital
3	to the healthcare system because of their convenient points of
4	access in the community. Pharmacists are trusted health care
5	professionals who have established relationships with their
6	patients, medical providers, and hospitals.
7	The legislature further finds that pharmacists in the State
8	are legally permitted to order and perform drug therapy related
9	tests. One interpretation of this provision is that these
10	assessment procedures include tests waived in accordance with
11	the Clinical Laboratory Improvement Amendments of 1988, which
12	are routine tests that are exempted from regulation under the
13	federal laboratory requirements under the Clinical Laboratory
14	Improvement Amendments of 1988. Clinical Laboratory Improvement
15	Amendments waived tests are simple tests that are non-technical
16	and have a low risk for erroneous results. Most Clinical
17	Laboratory Improvement Amendments waived tests are approved by

- 1 the Federal Drug Administration for home use; employ simple
- 2 methodologies that are so accurate as to render the likelihood
- 3 of erroneous results negligible; use unprocessed specimens,
- 4 including blood or oral fluids; and pose very little reasonable
- 5 risk of harm to the patient if performed incorrectly. Some
- 6 examples of Clinical Laboratory Improvement Amendments waived
- 7 tests include blood glucose monitoring tests, cholesterol
- 8 monitoring tests, and, recently, coronavirus disease 2019
- 9 (COVID-19) tests.
- 10 Notwithstanding the existing authority for pharmacists to
- 11 perform assessment procedures, under current department of
- 12 health regulations, pharmacies that perform Clinical Laboratory
- 13 Improvement Amendments waived tests are required to partner with
- 14 a clinical laboratory director to sign-off on the application to
- 15 perform the tests. This requirement places Hawaii in a minority
- 16 of states that still require a laboratory director to sign off
- 17 on Clinical Laboratory Improvement Amendments waiver
- 18 applications. Most states instead allow the
- 19 pharmacist-in-charge of a pharmacy to sign applications for the
- 20 purpose of authorizing Clinical Laboratory Improvement
- 21 Amendments waived testing.



1	The legislature further finds that the COVID-19 pandemic					
2	has highlighted the need to address health care accessibility					
3	and streamline unnecessary administrative regulation. The					
4	federal government addressed pharmacy-administered Clinical					
5	Laboratory Improvement Amendments waived tests specifically in					
6	an April 2020 emergency declaration under the Public Readiness					
7	and Emergency Preparedness Act, which, among other things,					
8	authorized pharmacists to order and administer COVID-19 testing					
9	utilizing a Clinical Laboratory Improvement Amendments waived					
10	device.					
11	Accordingly, the purpose of this Act is to:					
12	(1) Clarify who is authorized to sign an application to					
13	perform Clinical Laboratory Improvement Amendments					
14	waived tests; and					
15	(2) Amend the pharmacist scope of practice to include the					
16	ordering and performing of certain Clinical Laboratory					
17	Improvement Amendments waived tests.					
18	PART II					
19	SECTION 2. Section 321-15.1, Hawaii Revised Statutes, is					
20	amended by adding a new definition to be appropriately inserted					
21	and to read as follows:					

1	" <u>"Cl</u>	inica	l laboratory director" means a person who is		
2	responsible for the administrative, technical, and scientific				
3	operation of a clinical laboratory, including the supervision of				
4	procedures for testing and the reporting of the test results.				
5	"Laboratory director" includes the following:				
6	(1) A physician licensed to practice medicine or				
7		oste	opathy under chapter 453; and		
8	(2)	For	clinical laboratory tests or examinations		
9		clas	sified as waived:		
10		(A)	A duly licensed clinical laboratory scientist;		
11			and		
12		<u>(B)</u>	A pharmacist-in-charge of a pharmacy serving as		
13			the director of a laboratory that only performs		
14			tests waived pursuant to the Clinical Laboratory		
15			Improvement Amendments of 1988 (42 U.S.C. §263a)		
16			or that performs the collection of a specimen		
17			that is processed by a clinical laboratory."		
18	SECI	CION 3	3. Section 461-1, Hawaii Revised Statutes, is		
19	amended b	y ame	ending the definition of "practice of pharmacy" to		
20	read as f	follow	rs:		
21	""Dr	ractio	se of pharmacy" moans:		

1	(1)	The interpretation and evaluation of prescription
2		orders; the compounding, dispensing, and labeling of
3		drugs and devices (except labeling by a manufacturer,
4		packer, or distributor of nonprescription drugs and
5		commercially legend drugs and devices); the
6		participation in drug selection and drug utilization
7		reviews; the proper and safe storage of drugs and
8		devices and the maintenance of proper records
9		therefor; the responsibility for advising when
10		necessary or where regulated, of therapeutic values,
11		content, hazards, and use of drugs and devices; and
12		the interpretation and evaluation of prescription
13		orders to adjust the supply dispensed for purposes of
14		medication synchronization pursuant to
15		section 431:10A-606, 432:1-621, or 432D-30;
16	(2)	[Performing] The performing of the following
17		procedures or functions as part of the care provided
18		by, and in concurrence with, a "health care facility"
19		and "health care service" as defined in
20		section 323D-2, or a "pharmacy" or a licensed
21		physician or a licensed advanced practice registered

1	nurse with prescriptive authority, or a "managed care				
2	plan" as defined in section 432E-1, in accordance with				
3	policies, procedures, or protocols developed				
4	collaboratively by health professionals, including				
5	physicians and surgeons, pharmacists, and registered				
6	nurses, and for which a pharmacist has received				
7	appropriate training required by these policies,				
8	procedures, or protocols:				
9	(A) Ordering or performing routine drug therapy				
10	related patient assessment procedures;				
11	(B) Ordering or performing drug therapy and				
12	diagnostic related laboratory and Clinical				
13	Laboratory Improvement Amendments of 1988 (42				
14	U.S.C. §263a) waived tests[;], including				
15	performing any United States Food and Drug				
16	Administration-approved or United States Food and				
17	Drug Administration-authorized test that is:				
18	(i) Classified as waived pursuant to the				
19	Clinical Laboratory Improvement Amendments				
20	by a pharmacist having appropriate training				
21	that includes programs approved by the				

1	Accreditation Council for Pharmacy Education
2	(ACPE), curriculum-based programs from an
3	ACPE-accredited college of pharmacy, state
4	or local health department programs, or
5	programs recognized by the board of
6	pharmacy, and any regulations adopted
7	thereunder by the United States Health Care
8	Financing Administration; and
9	(ii) Used to detect or screen for SARS-CoV-2 or
10	other respiratory illness, condition, or
11	disease; mononucleosis; a sexually
12	transmitted infection; strep throat; anemia;
13	cardiovascular health issues;
14	conjunctivitis; a urinary tract infection;
15	liver or kidney function issues, liver or
16	kidney infection; thyroid function issues; a
17	substance use disorder; diabetes,
18	provided that no test shall require the use of
19	specimens collected by vaginal swab,
20	venipuncture, or the collection of seminal fluid;

1	(C)	Initiating emergency contraception oral drug
2		therapy in accordance with a written
3		collaborative agreement approved by the board,
4		between a licensed physician or advanced practice
5		registered nurse with prescriptive authority and
6		a pharmacist who has received appropriate
7		training that includes programs approved by the
8		[Accreditation Council for Pharmacy Education
9		<pre>+]ACPE[+], curriculum-based programs from an</pre>
10		ACPE-accredited college of pharmacy, state or
11		local health department programs, or programs
12		recognized by the board of pharmacy;
13	(D)	Administering drugs orally, topically, by
14		intranasal delivery, or by injection, pursuant to
15		the order of the patient's licensed physician or
16		advanced practice registered nurse with
17		prescriptive authority, by a pharmacist having
18		appropriate training that includes programs
19		approved by the ACPE, curriculum-based programs
20		from an ACPE-accredited college of pharmacy,

1		state	e or local health department programs, or
2		prog	rams recognized by the board of pharmacy;
3	(E)	Admi	nistering:
4		(i)	Immunizations orally, by injection, or by
5			intranasal delivery, to persons eighteen
6			years of age or older by a pharmacist having
7			appropriate training that includes programs
8			approved by the ACPE, curriculum-based
9			programs from an ACPE-accredited college of
10			pharmacy, state or local health department
11			programs, or programs recognized by the
12			board of pharmacy;
13		(ii)	Vaccines to persons between fourteen and
14			seventeen years of age pursuant to
15			section 461-11.4; and
16	(iii)	Human papillomavirus, Tdap (tetanus,
17			diphtheria, pertussis), meningococcal, and
18			influenza vaccines to persons between eleven
19			and seventeen years of age pursuant to
20			section 461-11.4;

1	(F)	As authorized by the written instructions of a
2		licensed physician or advanced practice
3		registered nurse with prescriptive authority,
4		initiating or adjusting the drug regimen of a
5		patient pursuant to an order or authorization
6		made by the patient's licensed physician or
7		advanced practice registered nurse with
8		prescriptive authority and related to the
9		condition for which the patient has been seen by
10		the licensed physician or advanced practice
11		registered nurse with prescriptive authority;
12		provided that the pharmacist shall issue written
13		notification to the patient's licensed physician
14		or advanced practice registered nurse with
15		prescriptive authority or enter the appropriate
16		information in an electronic patient record
17		system shared by the licensed physician or
18		advanced practice registered nurse with
19		prescriptive authority, within twenty-four hours

1		(G)	Transmitting a valid prescription to another
2			pharmacist for the purpose of filling or
3			dispensing;
4		(H)	Providing consultation, information, or education
5			to patients and health care professionals based
6			on the pharmacist's training and for which no
7			other licensure is required; or
8		(I)	Prescribing and dispensing an opioid antagonist
9			pursuant to section 461-11.8;
10	(3)	The	offering or performing of those acts, services,
11		oper	ations, or transactions necessary in the conduct,
12		oper	ation, management, and control of pharmacy; and
13	(4)	Pres	cribing and dispensing contraceptive supplies
14		purs	uant to section 461-11.6."
15	SECTI	ON 4	. This Act does not affect rights and duties that
16	matured, p	enal	ties that were incurred, and proceedings that were
17	begun befo	re i	ts effective date.
18	SECTI	ОИ 5	. Statutory material to be repealed is bracketed
19	and strick	en.	New statutory material is underscored.

1 SECTION 6. This Act shall take effect upon its approval.

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INTRODUCED BY:



Report Title:

Clinical Laboratory Directors; Pharmacies; Pharmacists; Clinical Laboratory Improvement Amendments Waived Tests

Description:

Defines "clinical laboratory director" to include certain physicians, licensed clinical laboratory scientists, and pharmacists—in—charge of pharmacies. Amends the definition of "practice of pharmacy" to include the ordering and performing of certain Clinical Laboratory Improvement Amendments waived tests.

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