## A BILL FOR AN ACT

RELATING TO HEALTH.

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

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

- 1 methodologies that are so accurate as to render the likelihood
- 2 of erroneous results negligible; use unprocessed specimens,
- 3 including blood or oral fluids; and pose very little reasonable
- 4 risk of harm to the patient if performed incorrectly. Some
- 5 examples of Clinical Laboratory Improvement Amendments waived
- 6 tests include blood glucose monitoring tests, cholesterol
- 7 monitoring tests, and, recently, coronavirus disease 2019
- 8 (COVID-19) tests.
- 9 Notwithstanding the existing authority for pharmacists to
- 10 perform assessment procedures, under current department of
- 11 health regulations, pharmacies that perform Clinical Laboratory
- 12 Improvement Amendments waived tests are required to partner with
- 13 a clinical laboratory director to sign off on the application to
- 14 perform the tests. This requirement places Hawaii in a minority
- 15 of states that still require a laboratory director to sign off
- 16 on Clinical Laboratory Improvement Amendments waiver
- 17 applications. Most states instead allow the
- 18 pharmacist-in-charge of a pharmacy to sign applications for the
- 19 purpose of authorizing Clinical Laboratory Improvement
- 20 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	SECTION 2. Section 321-15.1, Hawaii Revised Statutes, is
19	amended by adding a new definition to be appropriately inserted
20	and to read as follows:

1	" <u>"</u> Cl:	inica	l laboratory director" means a person who is		
2	responsib	le fo	r the administrative, technical, and scientific		
3	operation	of a	clinical laboratory, including the supervision of		
4	procedure	s for	testing and the reporting of the test results.		
5	"Clinical	labo	ratory director" includes the following:		
6	(1)	A ph	ysician licensed to practice medicine or		
7		<u>oste</u>	opathy under chapter 453; or		
8	(2)	For	clinical laboratory tests or examinations		
9		clas	classified as waived pursuant to the Clinical		
10		Labo	Laboratory Improvement Amendments of 1988 (42 U.S.C.		
11		<u>263a</u>	<u>263a):</u>		
12		<u>(A)</u>	A duly licensed clinical laboratory scientist;		
13			and		
14		<u>(B)</u>	A pharmacist serving as the director of a		
15			laboratory that only performs tests waived		
16			pursuant to the Clinical Laboratory Improvement		
17			Amendments of 1988 (42 U.S.C. 263a) or that		
18			performs the collection of a specimen that is		
19			processed by a clinical laboratory."		

1	SECI	ion 3. Section 461-1, Hawali Revised Statutes, is				
2	amended b	y amending the definition of "practice of pharmacy" to				
3	read as f	ollows:				
4	""Practice of pharmacy" means:					
5	(1)	The interpretation and evaluation of prescription				
6		orders; the compounding, dispensing, and labeling of				
7		drugs and devices (except labeling by a manufacturer,				
8		packer, or distributor of nonprescription drugs and				
9		commercially legend drugs and devices); the				
10		participation in drug selection and drug utilization				
11		reviews; the proper and safe storage of drugs and				
12		devices and the maintenance of proper records				
13		therefor; the responsibility for advising when				
14		necessary or where regulated, of therapeutic values,				
15		content, hazards, and use of drugs and devices; and				
16		the interpretation and evaluation of prescription				
17		orders to adjust the supply dispensed for purposes of				
18		medication synchronization pursuant to section				
19		431:10A-606, 432:1-621, or 432D-30;				
20	(2)	[Performing] The performing of the following				
21		procedures or functions as part of the care provided				

1	bу <u>,</u>	and in concurrence with, a "health care facility"		
2	and	"health care service" as defined in section		
3	323D	-2, or a "pharmacy" or a licensed physician or a		
4	lice	nsed advanced practice registered nurse with		
5	pres	criptive authority, or a "managed care plan" as		
6	defi	ned in section 432E-1, in accordance with		
7	poli	cies, procedures, or protocols developed		
8	coll	collaboratively by health professionals, including		
9	phys	physicians and surgeons, pharmacists, and registered		
10	nurs	nurses, and for which a pharmacist has received		
11	appr	appropriate training required by these policies,		
12	proc	edures, or protocols:		
13	(A)	Ordering or performing routine drug therapy		
14		related patient assessment procedures;		
15	(B)	Ordering or performing drug therapy and		
16		diagnostic related laboratory and Clinical		
17		Laboratory Improvement Amendments of 1988 (42		
18		<pre>U.S.C. 263a) waived tests[+], including</pre>		
19		performing any United States Food and Drug		
20		Administration-approved or United States Food and		
21		Drug Administration-authorized test that is		

1		classified as waived pursuant to the Clinical
2		Laboratory Improvement Amendments of 1988 (42
3		U.S.C. 263a) by a pharmacist having appropriate
4		training that includes programs approved by the
5		Accreditation Council for Pharmacy Education
6		(ACPE), curriculum-based programs from an ACPE-
7		accredited college of pharmacy, state or local
8		health department programs, or programs
9		recognized by the board of pharmacy, and any
10		regulations adopted thereunder by the United
11		States Health Care Financing Administration;
12		provided that no test shall require the use of
13		specimens collected by vaginal swab,
14		venipuncture, or the collection of seminal fluid;
15	(C)	Initiating emergency contraception oral drug
16		therapy in accordance with a written
17		collaborative agreement approved by the board,
18		between a licensed physician or advanced practice
19		registered nurse with prescriptive authority and
20		a pharmacist who has received appropriate
21		training that includes programs approved by the

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2		<pre>+]ACPE[+], curriculum-based programs from an</pre>
3		ACPE-accredited college of pharmacy, state or
4		local health department programs, or programs
5		recognized by the board of pharmacy;
6	(D)	Administering drugs orally, topically, by
7		intranasal delivery, or by injection, pursuant to
8		the order of the patient's licensed physician or
9		advanced practice registered nurse with
10		prescriptive authority, by a pharmacist having
11		appropriate training that includes programs
12		approved by the ACPE, curriculum-based programs
13		from an ACPE-accredited college of pharmacy,
14		state or local health department programs, or
15		programs recognized by the board of pharmacy;
16	(E)	Administering:
17		(i) Immunizations orally, by injection, or by
18		intranasal delivery, to persons eighteen
19		years of age or older by a pharmacist having
20		appropriate training that includes programs
21		approved by the ACPE, curriculum-based

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1		programs from an ACPE-accredited coffege of
2		pharmacy, state or local health department
3		programs, or programs recognized by the
4		board of pharmacy;
5	(ii)	Vaccines to persons between fourteen and
6		seventeen years of age pursuant to section
7		461-11.4; and
8	(iii)	Human papillomavirus, Tdap (tetanus,
9		diphtheria, pertussis), meningococcal, and
10		influenza vaccines to persons between eleven
11		and seventeen years of age pursuant to
12		section 461-11.4;
13	(F) As au	thorized by the written instructions of a
14	licen	sed physician or advanced practice
15	regis	tered nurse with prescriptive authority,
16	initi	ating or adjusting the drug regimen of a
17	patie	nt pursuant to an order or authorization
18	made	by the patient's licensed physician or
19	advan	ced practice registered nurse with
20	presc	riptive authority and related to the
21	condi	tion for which the patient has been seen by

1		the licensed physician or advanced practice
2		registered nurse with prescriptive authority;
3		provided that the pharmacist shall issue written
4		notification to the patient's licensed physician
5		or advanced practice registered nurse with
6		prescriptive authority or enter the appropriate
7		information in an electronic patient record
8		system shared by the licensed physician or
9		advanced practice registered nurse with
10		prescriptive authority, within twenty-four hours;
11	(G)	Transmitting a valid prescription to another
12		pharmacist for the purpose of filling or
13		dispensing;
14	(H)	Providing consultation, information, or education
15		to patients and health care professionals based
16		on the pharmacist's training and for which no
17		other licensure is required; or
18	(I)	Prescribing and dispensing an opioid antagonist
19		pursuant to section 461-11.8;

1	(3)	The offering or performing of those acts, services,
2		operations, or transactions necessary in the conduct,
3		operation, management, and control of pharmacy; and
4	(4)	Prescribing and dispensing contraceptive supplies
5		pursuant to section 461-11.6."
6	SECT	ION 4. This Act does not affect rights and duties that
7	matured,	penalties that were incurred, and proceedings that were
8	begun bef	ore its effective date.
9	SECT	ION 5. Statutory material to be repealed is bracketed
10	and stric	ken. New statutory material is underscored.
11	SECT	ION 6. This Act shall take effect on July 1, 2060.
12		

### 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. Amends the definition of "practice of pharmacy" to include the ordering and performing of certain Clinical Laboratory Improvement Amendments waived tests. Effective 7/1/2060. (HD2)

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