THE SENATE THIRTY-FIRST LEGISLATURE, 2022 STATE OF HAWAII

S.B. NO. 2592

JAN 2 1 2022

A BILL FOR AN ACT

RELATING TO HEALTH.

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

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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

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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 perform assessment procedures, under current department of 11 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.

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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:					

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1	" <u>"Cl</u>	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 or				
4	procedure	s for	testing and the reporting of the test results.		
5	"Laborato	ory di	rector" includes the following:		
6	(1)	(1) A physician licensed to practice medicine or			
7		oste	opathy under chapter 453; and		
8	(2)	For	clinical laboratory tests or examinations		
9		<u>clas</u>	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	SECT	'ION 3	. Section 461-1, Hawaii Revised Statutes, is		
19	amended b	y ame	nding the definition of "practice of pharmacy" to		
20	read as f	ollow	rs:		

21 ""Practice of pharmacy" means:



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1 The interpretation and evaluation of prescription (1) 2 orders; the compounding, dispensing, and labeling of 3 drugs and devices (except labeling by a manufacturer, packer, or distributor of nonprescription drugs and 4 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 therefor; the responsibility for advising when 9 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 orders to adjust the supply dispensed for purposes of 13 14 medication synchronization pursuant to 15 section 431:10A-606, 432:1-621, or 432D-30; [Performing] The performing of the following 16 (2) 17 procedures or functions as part of the care provided by, and in concurrence with, a "health care facility" 18 and "health care service" as defined in 19 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>U.S.C. §263a) waived</u> 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	<u>(ii)</u>	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	prov	ided that no test shall require the use of
19	spec	imens collected by vaginal swab,
20	venij	puncture, or the collection of seminal fluid;

1 Initiating emergency contraception oral drug (C) 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 a pharmacist who has received appropriate 6 7 training that includes programs approved by the 8 [Accreditation Council for Pharmacy Education 9 +]ACPE[+], curriculum-based programs from an 10 ACPE-accredited college of pharmacy, state or 11 local health department programs, or programs 12 recognized by the board of pharmacy; 13 Administering drugs orally, topically, by (D) 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		stat	e or local health department programs, or
2		prog	rams recognized by the board of pharmacy;
3	(E)	Admin	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;

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As authorized by the written instructions of a 1 (F) licensed physician or advanced practice 2 3 registered nurse with prescriptive authority, initiating or adjusting the drug regimen of a 4 patient pursuant to an order or authorization 5 made by the patient's licensed physician or 6 advanced practice registered nurse with 7 prescriptive authority and related to the 8 condition for which the patient has been seen by 9 10 the licensed physician or advanced practice 11 registered nurse with prescriptive authority; 12 provided that the pharmacist shall issue written notification to the patient's licensed physician 13 14 or advanced practice registered nurse with 15 prescriptive authority or enter the appropriate information in an electronic patient record 16 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	SECT	ION 4	. This Act does not affect rights and duties that
16	matured,	penal	ties that were incurred, and proceedings that were
17	begun bef	ore i	ts effective date.
18	SECT	ION 5	. Statutory material to be repealed is bracketed

19 and stricken. New statutory material is underscored.

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1	SECTION 6.	This Act shall take effect upon its approval.
2		INTRODUCED BY:

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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.

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

