A BILL FOR AN ACT

RELATING TO PHARMACISTS.

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

SECTION 1. The legislature finds that there is currently a
 statewide physician shortage. According to the federal Health
 Resources and Services Administration, each county in the State
 contains a region that is a medically underserved area, as
 defined by the Public Health Service Act of 1944, P.L. 78-410.

6 The legislature further finds that pharmacists can help 7 bridge the gaps created by the physician shortage. A 8 pharmacist's skill set includes educating patients on how and 9 when to check blood sugar, ways to avoid and manage 10 hypoglycemia, how to take their medications correctly to avoid 11 adverse effects, and various medication utilization techniques. 12 Additionally, patients are three times more likely to stay out 13 of the hospital when pharmacists provide clinical services after 14 a hospital discharge.

15 Accordingly, the purpose of this Act is to mandate 16 reimbursement for services provided by pharmacists within their

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1	scope of practice by private and public health plans in the
2	State.
3	SECTION 2. Chapter 431, Hawaii Revised Statutes, is
4	amended by adding a new section to article 10A to be
5	appropriately designated and to read as follows:
6	" <u>\$431:10A-</u> Services provided by participating
7	registered pharmacists; coverage. (a) Each individual or group
8	policy of accident and health or sickness insurance delivered or
9	issued for delivery in this State after December 31, 2023, shall
10	recognize pharmacists licensed pursuant to chapter 461 as
11	participating providers and shall include coverage for care
12	provided by a participating registered pharmacist practicing
13	within the scope of their license for purposes of health
14	maintenance or treatment to the extent that the policy provides
15	benefits for identical services rendered by another health care
16	provider.
17	(b) For the purposes of this section, "participating
18	registered pharmacist" means a pharmacist licensed pursuant to
19	chapter 461 who has contracted with the insurer to provide
20	health care services to its insureds."

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1 residence, including long term care facilities, or at 2 another medical facility; and 3 (7)Within the scope of services provided by the State 4 under its fee-for-service medicaid program and its 5 medicaid managed care program, on and after August 6 1994, and as amended from time to time." 7 SECTION 5. Section 346-59, Hawaii Revised Statutes, is 8 amended by amending subsection (b) to read as follows: 9 Rates of payment to providers of medical care who are "(b) 10 individual practitioners, including doctors of medicine, 11 dentists, podiatrists, psychologists, osteopaths, optometrists, 12 pharmacists, and other individuals providing services, shall be 13 based upon the Hawaii medicaid fee schedule. The amounts paid 14 shall not exceed the maximum permitted to be paid individual 15 practitioners or other individuals under federal law and 16 regulation, the medicare fee schedule for the current year, the 17 state limits as provided in the appropriation act, or the 18 provider's billed amount. 19 The appropriation act shall indicate the percentage of the 20 medicare fee schedule for the year 2000 to be used as the basis 21 for establishing the Hawaii medicaid fee schedule. For any

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1 subsequent adjustments to the fee schedule, the legislature
2 shall specify the extent of the adjustment in the appropriation
3 act."

4 SECTION 6. Section 346-59.1, Hawaii Revised Statutes, is
5 amended by amending subsection (g) to read as follows:

6 "(g) For the purposes of this section:

7 "Distant site" means the location of the health care
8 provider delivering services through telehealth at the time the
9 services are provided.

10 "Health care provider" means a provider of services, as 11 defined in title 42 United States Code section 1395x(u), a 12 provider of medical and other health services, as defined in 13 title 42 United States Code section 1395x(s), other 14 practitioners licensed by the State and working within their scope of practice, and any other person or organization who 15 16 furnishes, bills, or is paid for health care in the normal 17 course of business, including but not limited to primary care 18 providers, mental health providers, oral health providers, 19 physicians and osteopathic physicians licensed under chapter 20 453, advanced practice registered nurses licensed under chapter 21 457, psychologists licensed under chapter 465, pharmacists

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licensed under chapter 461, and dentists licensed under chapter
 448.

3 "Originating site" means the location where the patient is 4 located, whether accompanied or not by a health care provider, 5 at the time services are provided by a health care provider 6 through telehealth, including but not limited to a health care 7 provider's office, hospital, critical access hospital, rural 8 health clinic, federally qualified health center, a patient's 9 home, and other non-medical environments such as school-based 10 health centers, university-based health centers, or the work 11 location of a patient.

12 "Telehealth" means the use of telecommunications services, 13 as defined in section 269-1, to encompass four modalities: 14 store and forward technologies, remote monitoring, live 15 consultation, and mobile health; and which shall include but not 16 be limited to real-time video conferencing-based communication, 17 secure interactive and non-interactive web-based communication, 18 and secure asynchronous information exchange, to transmit 19 patient medical information, including diagnostic-quality 20 digital images and laboratory results for medical interpretation 21 and diagnosis, for the purpose of delivering enhanced health

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1	care services and information while a patient is at an
2	originating site and the health care provider is at a distant
3	site. Standard telephone contacts, facsimile transmissions, or
4	e-mail text, in combination or by itself, does not constitute a
5	telehealth service for the purposes of this section."
6	SECTION 7. Section 432D-23, Hawaii Revised Statutes, is
7	amended to read as follows:
8	"§432D-23 Required provisions and benefits.
9	Notwithstanding any provision of law to the contrary, each
10	policy, contract, plan, or agreement issued in the State after
11	January 1, 1995, by health maintenance organizations pursuant to
12	this chapter, shall include benefits provided in sections
13	431:10-212, 431:10A-115, 431:10A-115.5, 431:10A-116, 431:10A-
14	116.2, 431:10A-116.5, 431:10A-116.6, 431:10A-119, 431:10A-120,
15	431:10A-121, 431:10A-122, 431:10A-125, 431:10A-126, 431:10A-132,
16	431:10A-133, <u>431:10A-134</u> , 431:10A-140, and [431:10A-134,]
17	<u>431:10A-</u> , and chapter 431M."
18	SECTION 8. The department of human services shall apply to
19	the United States Department of Health and Human Services for
20	any amendment to the state Medicaid plan or for any Medicaid

21 waiver necessary to implement sections 4, 5, and 6 of this Act.

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1	The department shall submit the Medicaid state plan amendment no
2	later than .
3	SECTION 9. This Act does not affect rights and duties that
4	matured, penalties that were incurred, and proceedings that were
5	begun before its effective date.
6	SECTION 10. Statutory material to be repealed is bracketed
7	and stricken. New statutory material is underscored.
8	SECTION 11. This Act shall take effect on June 30, 3000;
9	provided that sections 4 through 6 of this Act shall take effect
10	upon approval of the Hawaii medicaid state plan by the Centers
11	for Medicare and Medicaid Services.
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Report Title:

Insurance Coverage; Pharmacists; Reimbursement

Description:

Mandates reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State beginning 1/1/2024. Effective 6/30/3000. (HD1)

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

