

GENERAL ASSEMBLY OF NORTH CAROLINA  
SESSION 2013

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HOUSE BILL 832\*  
PROPOSED COMMITTEE SUBSTITUTE H832-PCS10373-TJ-38

Short Title: Expand Pharmacists' Immunizing Authority.

(Public)

Sponsors:

Referred to:

April 11, 2013

1 A BILL TO BE ENTITLED  
2 AN ACT TO PROTECT THE PUBLIC'S HEALTH BY INCREASING ACCESS TO  
3 IMMUNIZATIONS AND VACCINES THROUGH THE EXPANDED ROLE OF  
4 IMMUNIZING PHARMACISTS.

5 The General Assembly of North Carolina enacts:

6 SECTION 1. G.S. 90-85.3 is amended by adding the following new subsection to  
7 read:

8 "(i1) "Immunizing pharmacist" means a licensed pharmacist who meets all of the  
9 following qualifications:

- 10 (1) Holds a current provider level cardiopulmonary resuscitation certification  
11 issued by the American Heart Association or the American Red Cross, or an  
12 equivalent certification.  
13 (2) Has successfully completed a certificate program in vaccine administration  
14 accredited by the Centers for Disease Control and Prevention, the  
15 Accreditation Council for Pharmacy Education, or a similar health authority  
16 or professional body approved by the Board.  
17 (3) Maintains documentation of three hours of continuing education every two  
18 years, designed to maintain competency in the disease states, drugs, and  
19 vaccine administration.  
20 (4) Has successfully completed training approved by the Division of Public  
21 Health's Immunization Branch for participation in the North Carolina  
22 Immunization Registry.  
23 (5) Has notified the North Carolina Board of Pharmacy and the North Carolina  
24 Medical Board of immunizing pharmacist status.  
25 (6) Administers vaccines or immunizations in accordance with G.S. 90-18.15B."

26 SECTION 2. G.S. 90-85.3(r) reads as rewritten:

27 "(r) ~~"Practice of pharmacy" means the responsibility for: interpreting and evaluating~~  
28 ~~drug orders, including prescription orders; compounding, dispensing and labeling prescription~~  
29 ~~drugs and devices; properly and safely storing drugs and devices; maintaining proper records;~~  
30 ~~and controlling pharmacy goods and services. A pharmacist may advise and educate patients~~  
31 ~~and health care providers concerning therapeutic values, content, uses and significant problems~~  
32 ~~of drugs and devices; assess, record and report adverse drug and device reactions; take and~~  
33 ~~record patient histories relating to drug and device therapy; monitor, record and report drug~~  
34 ~~therapy and device usage; perform drug utilization reviews; and participate in drug and drug~~  
35 ~~source selection and device and device source selection as provided in G.S. 90-85.27 through~~  
36 ~~G.S. 90-85.31. A pharmacist who has received special training may be authorized and~~



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1 ~~permitted to administer drugs pursuant to a specific prescription order in accordance with rules~~  
2 ~~adopted by each of the Boards of Pharmacy, the Board of Nursing, and the North Carolina~~  
3 ~~Medical Board. The rules shall be designed to ensure the safety and health of the patients for~~  
4 ~~whom such drugs are administered. An approved clinical pharmacist practitioner may~~  
5 ~~collaborate with physicians in determining the appropriate health care for a patient, subject to~~  
6 ~~the provisions of G.S. 90-18.4.js as specified in G.S. 90-85.3A."~~

7 **SECTION 3.** Article 4A of Chapter 90 of the General Statutes is amended by  
8 adding a new section to read:

9 **"§ 90-85.3A. Practice of pharmacy.**

10 (a) A pharmacist is responsible for interpreting and evaluating drug orders, including  
11 prescription orders; compounding, dispensing, and labeling prescription drugs and devices;  
12 properly and safely storing drugs and devices; maintaining proper records; and controlling  
13 pharmacy goods and services.

14 (b) A pharmacist may advise and educate patients and health care providers concerning  
15 therapeutic values, content, uses, and significant problems of drugs and devices; assess, record,  
16 and report adverse drug and device reactions; take and record patient histories relating to drug  
17 and device therapy; monitor, record, and report drug therapy and device usage; perform drug  
18 utilization reviews; and participate in drug and drug source selection and device and device  
19 source selection as provided in G.S. 90-85.27 through G.S. 90-85.31.

20 (c) An immunizing pharmacist is authorized and permitted to administer drugs as  
21 provided in G.S. 90-85.15B.

22 (d) An approved clinical pharmacist practitioner may collaborate with physicians in  
23 determining the appropriate health care for a patient subject to the provisions of G.S. 90-18.4."

24 **SECTION 4.** Article 4A of Chapter 90 of the General Statutes is amended by  
25 adding a new section to read:

26 **"§ 90-85.15B. Immunizing pharmacists.**

27 (a) Except as provided in subsection (b) of this section, an immunizing pharmacist may  
28 administer vaccinations or immunizations only if the vaccinations or immunizations are  
29 recommended or required by the Centers for Disease Control and Prevention and administered  
30 to persons at least 18 years of age pursuant to a specific prescription order.

31 (b) An immunizing pharmacist may administer the vaccinations or immunizations listed  
32 in subdivisions (1) through (6) of this subsection if the vaccinations or immunizations are  
33 administered under written protocols as defined in 21 NCAC 46 .2507(b)(12) and 21 NCAC  
34 32U .0101(b)(12) and in accordance with the supervising physician's responsibilities as defined  
35 in 21 NCAC 46 .2507(e) and 21 NCAC 32U .0101(e), and the physician is licensed in and has  
36 a practice physically located in North Carolina:

37 (1) Pneumococcal polysaccharide or pneumococcal conjugate vaccines.

38 (2) Herpes zoster vaccine.

39 (3) Hepatitis B vaccine.

40 (4) Meningococcal polysaccharide or meningococcal conjugate vaccines.

41 (5) Tetanus-diphtheria, tetanus and diphtheria toxoids and pertussis, tetanus and  
42 diphtheria toxoids and acellular pertussis, or tetanus toxoid vaccines.  
43 However, a pharmacist shall not administer any of these vaccines if the  
44 patient discloses that the patient has an open wound, puncture, or tissue tear.

45 (6) Influenza vaccine pursuant to 21 NCAC 46 .2507 and 21 NCAC 32U .0101,  
46 which may be administered to patients aged 14 years and older.

47 (c) An immunizing pharmacist who administers a vaccine or immunization to any  
48 patient pursuant to this section shall do all of the following:

49 (1) Maintain a record of any vaccine or immunization administered to the  
50 patient in a patient profile.

1           (2)    Within 72 hours after administration of the vaccine or immunization, notify  
2           any primary care provider identified by the patient. If the patient does not  
3           identify a primary care provider, the immunizing pharmacist shall direct the  
4           patient to information describing the benefits to a patient of having a primary  
5           care physician, prepared by any of the following: North Carolina Medical  
6           Board, North Carolina Academy of Family Physicians, North Carolina  
7           Medical Society, or Community Care of North Carolina.

8           (3)    Except for influenza administered under G.S. 90-85.15B(b)(6), access to the  
9           North Carolina Immunization Registry prior to administering the vaccine or  
10          immunization and record any vaccine or immunization administered to the  
11          patient in the registry within 72 hours after the administration."

12          **SECTION 5.** G.S. 130A-153 reads as rewritten:

13          **"§ 130A-153. Obtaining immunization; reporting by local health departments; access to**  
14          **immunization information in patient records; immunization of minors.**

15          (a)    The required immunization may be obtained from a physician licensed to practice  
16          ~~medicine or medicine~~, from a local health ~~department~~, or in the case of a person at  
17          least 18 years of age, from an immunizing pharmacist. Local health departments shall  
18          administer required and State-supplied immunizations at no cost to uninsured or underinsured  
19          patients with family incomes below two hundred percent (200%) of the federal poverty level. A  
20          local health department may redistribute these vaccines only in accordance with the rules of the  
21          Commission.

22          (b)    Local health departments shall file monthly immunization reports with the  
23          Department. The report shall be filed on forms prepared by the Department and shall state, at a  
24          minimum, each patient's age and the number of doses of each type of vaccine administered.

25          (c)    Immunization certificates and information concerning immunizations contained in  
26          medical or other records shall, upon request, be shared with the Department, local health  
27          departments, an immunizing pharmacist, and the patient's attending physician. In addition, an  
28          insurance institution, agent, or insurance support organization, as those terms are defined in  
29          G.S. 58-39-15, may share immunization information with the Department. The Commission  
30          may, for the purpose of assisting the Department in enforcing this Part, provide by rule that  
31          other persons may have access to immunization information, in whole or in part.

32          (d)    A physician or local health department may immunize a minor with the consent of a  
33          parent, guardian, or person standing in loco parentis to the minor. A physician or local health  
34          department may also immunize a minor who is presented for immunization by an adult who  
35          signs a statement that he or she is authorized by a parent, guardian, or person standing in loco  
36          parentis to the minor to obtain the immunization for the minor."

37          **SECTION 6.** Representatives of the North Carolina Academy of Family  
38          Physicians, the North Carolina Medical Society, the North Carolina Pediatric Society, the  
39          North Carolina Association of Community Pharmacists, the North Carolina Association of  
40          Pharmacists, and the North Carolina Retail Merchants Association are directed to cooperate  
41          and collaborate to recommend a minimum standard screening questionnaire and safety  
42          procedures for written protocols for vaccinations or immunizations administered under  
43          G.S. 90-85.15B(b). The questionnaire and recommended standards shall be submitted to the  
44          North Carolina Board of Medicine, the North Carolina Board of Nursing, the North Carolina  
45          Board of Pharmacy, and the Joint Legislative Oversight Committee on Health and Human  
46          Services no later than October 1, 2013. In the event agreement is not reached on a minimum  
47          standard screening questionnaire and safety procedures for written protocols by October 1,  
48          2013, the Immunization Branch of the North Carolina Division of Public Health shall develop  
49          the questionnaire and standards and submit them to the North Carolina Board of Medicine, the  
50          North Carolina Board of Nursing, the North Carolina Board of Pharmacy, and the Joint  
51          Legislative Oversight Committee on Health and Human Services by January 1, 2014.

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**SECTION 7.** This act becomes effective July 1, 2013.