

**GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2021**

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**SENATE BILL 575
PROPOSED COMMITTEE SUBSTITUTE S575-PCS35280-BC-33**

Short Title: Pharmacists Improve Public Health Needs. (Public)

Sponsors:

Referred to:

April 7, 2021

1 A BILL TO BE ENTITLED
2 AN ACT TO AUTHORIZE CLINICAL PHARMACIST PRACTITIONERS AND
3 IMMUNIZING PHARMACISTS TO PRESCRIBE, DISPENSE, AND ADMINISTER
4 CERTAIN TREATMENT AND MEDICATIONS.

5 Whereas, it is the intention of the North Carolina General Assembly to improve access
6 to care and health outcomes for its citizens; and

7 Whereas, North Carolina's public health ranking is in the bottom one-half to one-third
8 of the nation; and

9 Whereas, one-third of our nation's states have authorized pharmacists to help with
10 access to care related to public health needs beyond immunizations; and

11 Whereas, North Carolinians need and deserve better accessibility to care; Now,
12 therefore,

13 The General Assembly of North Carolina enacts:

14 **SECTION 1.(a)** G.S. 90-85.15B reads as rewritten:

15 **"§ 90-85.15B. Immunizing pharmacists.**

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

20 (b) An immunizing pharmacist may administer the vaccinations or immunizations listed
21 in subdivisions (1) through (7) of this subsection to persons at least 18 years of age if the
22 vaccinations or immunizations are administered under written protocols as defined in 21 NCAC
23 46. 2507(b)(12) and 21 NCAC 32U. 0101(b)(12) and in accordance with the supervising
24 physician's responsibilities as defined in 21 NCAC 46. 2507(e) and 21 NCAC 32U. 0101(e), and
25 the physician is licensed in and has a practice physically located in North Carolina:

- 26 (1) Pneumococcal polysaccharide or pneumococcal conjugate vaccines.
- 27 (2) Herpes zoster vaccine.
- 28 (3) Hepatitis B vaccine.
- 29 (4) Meningococcal polysaccharide or meningococcal conjugate vaccines and
30 Serogroup B meningococcal vaccines.
- 31 (5) Tetanus-diphtheria, tetanus and diphtheria toxoids and pertussis, tetanus and
32 diphtheria toxoids and acellular pertussis, or tetanus toxoid vaccines.
33 However, a pharmacist shall not administer any of these vaccines if the patient
34 discloses that the patient has an open wound, puncture, or tissue tear.
- 35 (6) Human Papillomavirus vaccine.
- 36 (7) Hepatitis A vaccine.



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1 (c) An immunizing pharmacist may administer the influenza vaccine to persons at least
2 10 years of age pursuant to 21 NCAC 46. 2507 and 21 NCAC 32U. 0101. An immunizing
3 pharmacist may administer an influenza vaccine and any other vaccinations approved by the
4 United States Food and Drug Administration in accordance with the protocols established by the
5 Advisory Committee on Immunization Practices to persons at least six years of age pursuant to
6 a specific prescription order initiated by a prescriber following a physical examination of the
7 patient by the prescriber.

8 (c1) An immunizing pharmacist may administer a long-acting injectable medication to
9 persons at least 18 years of age pursuant to a specific prescription order initiated by a prescriber
10 following a physical examination of the patient by the prescriber. An immunizing pharmacist
11 who administers a long-acting injectable medication pursuant to this section shall do all of the
12 following:

- 13 (1) Maintain a record of any administration of a long-acting injectable performed
14 by the immunizing pharmacist to the patient in a patient profile or record.
- 15 (2) Within 72 hours after the administration of the long-acting injectable
16 performed by the immunizing pharmacist to the patient, notify the prescriber
17 regarding which medication and dosage was administered to the patient.

18 (c2) An immunizing pharmacist may prescribe and dispense the following medications:

- 19 (1) Tobacco cessation medications that are approved by the United States Food
20 and Drug Administration.
- 21 (2) Orally administered hormonal contraceptives after the patient completes an
22 assessment consistent with the Centers for Disease Control and Prevention's
23 United States Medical Eligibility Criteria (US MEC) for Contraceptive Use.
- 24 (3) Prenatal vitamins.
- 25 (4) Controlled substances for the prevention of human immunodeficiency virus,
26 including controlled substances prescribed for post-exposure prophylaxis
27 pursuant to guidelines and recommendations of the Centers for Disease
28 Control and Prevention.

29 (d) An immunizing pharmacist who administers a vaccine or immunization to any patient
30 pursuant to this section or prescribes and dispenses a medication listed in subsection (c2) of this
31 section to a patient shall do all of the following:

- 32 (1) Maintain a record of any vaccine or immunization administered to the patient
33 in a patient ~~profile~~-profile for a period of five years from the patient's most
34 recent provision of service.
- 35 (2) Within 72 hours after administration of the vaccine or immunization, or
36 medication listed in subsection (c2) of this section, notify any primary care
37 provider identified by the patient. If the patient does not identify a primary
38 care provider, the immunizing pharmacist shall direct the patient to
39 information describing the benefits to a patient of having a primary care
40 physician, including information about federally qualified health centers, free
41 clinics, and local health departments, prepared by any of the following: North
42 Carolina Medical Board, North Carolina Academy of Family Physicians,
43 North Carolina Medical Society, or Community Care of North Carolina.
- 44 (3) Except for influenza vaccines administered under G.S. 90-85.15B(c), access
45 the North Carolina Immunization Registry prior to administering the vaccine
46 or immunization and record any vaccine or immunization administered to the
47 patient in the registry within 72 hours after the administration. In the event the
48 registry is not operable, an immunizing pharmacist shall report as soon as
49 reasonably possible.
- 50 (4) Furnish patient records to the patient upon the patient's request.

- 1 (5) Furnish patient records to the primary care provider identified by the patient
2 upon the primary care provider's request.
- 3 (6) If the immunizing pharmacist has administered or dispensed a hormonal
4 contraceptive to the patient, the immunizing pharmacist shall counsel the
5 patient about preventative care, including well-woman visits, sexually
6 transmitted infection testing information, and Pap smear testing.
- 7 (e) An immunizing pharmacist that prescribes and dispenses the medications listed in
8 subsection (c2) of this section shall comply with the following conditions:
- 9 (1) The North Carolina Medical Board and the North Carolina Board of Pharmacy
10 have adopted rules developed by a joint subcommittee governing the approval
11 of the individual immunizing pharmacist to administer, prescribe, and
12 dispense the medications with limitations that the Boards determine to be in
13 the best interest of patient health and safety.
- 14 (2) The immunizing pharmacist has current approval from both Boards.
- 15 (3) The North Carolina Medical Board has assigned an identification number to
16 the immunizing pharmacist which is shown on written prescriptions written
17 by the immunizing pharmacist."

18 **SECTION 1.(b)** G.S. 90-18.4 reads as rewritten:

19 "**§ 90-18.4. Limitations on clinical pharmacist practitioners.**

20 (a) Any pharmacist who is approved under the provisions of G.S. 90-18(c)(3a) to perform
21 medical acts, tasks, and functions may use the title "clinical pharmacist practitioner". Any other
22 person who uses the title in any form or holds himself or herself out to be a clinical pharmacist
23 practitioner or to be so licensed shall be deemed to be in violation of this Article.

24 (b) Clinical pharmacist practitioners are authorized to implement predetermined drug
25 therapy, which includes diagnosis and product selection by the patient's physician, modify
26 prescribed drug dosages, dosage forms, and dosage schedules, and to order laboratory tests
27 pursuant to a drug therapy management agreement that is physician, pharmacist, patient, and
28 disease specific under the following conditions:

- 29 (1) The North Carolina Medical Board and the North Carolina Board of Pharmacy
30 have adopted rules developed by a joint subcommittee governing the approval
31 of individual clinical pharmacist practitioners to practice drug therapy
32 management with such limitations that the Boards determine to be in the best
33 interest of patient health and safety.
- 34 (2) The clinical pharmacist practitioner has current approval from both Boards.
- 35 (3) The North Carolina Medical Board has assigned an identification number to
36 the clinical pharmacist practitioner which is shown on written prescriptions
37 written by the clinical pharmacist practitioner.
- 38 (4) The drug therapy management agreement prohibits the substitution of a
39 chemically dissimilar drug product by the pharmacist for the product
40 prescribed by the physician without the explicit consent of the physician and
41 includes a policy for periodic review by the physician of the drugs modified
42 pursuant to the agreement or changed with the consent of the physician.

43 **(b1)** Clinical pharmacist practitioners may prescribe and dispense the following
44 medications:

- 45 (1) Tobacco cessation medications that are approved by the United States Food
46 and Drug Administration.
- 47 (2) Orally administered hormonal contraceptive after the patient completes an
48 assessment consistent with the Centers for Disease Control and Prevention's
49 United States Medical Eligibility Criteria (US MEC) for Contraceptive Use.
- 50 (3) Prenatal vitamins.

1 (4) Controlled substances for the prevention of human immunodeficiency virus,
2 including controlled substances prescribed for post-exposure prophylaxis
3 pursuant to guidelines and recommendations of the Centers for Disease
4 Control and Prevention.

5 (b2) Clinical pharmacist practitioners that prescribe and dispense the medications listed in
6 subsection (b1) of this section shall comply with the following conditions:

7 (1) The North Carolina Medical Board and the North Carolina Board of Pharmacy
8 have adopted rules developed by a joint subcommittee governing the approval
9 of individual clinical pharmacist practitioners to administer, prescribe, and
10 dispense the medications with limitations that the Boards determine to be in
11 the best interest of patient health and safety.

12 (2) The clinical pharmacist practitioner has current approval from both Boards.

13 (3) The North Carolina Medical Board has assigned an identification number to
14 the clinical pharmacist practitioner which is shown on written prescriptions
15 written by the clinical pharmacist practitioner.

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17 **SECTION 2.** The North Carolina Medical Board and the North Carolina Board of
18 Pharmacy joint subcommittee shall develop statewide written protocols and amend existing rules
19 and protocols to provide and develop certification for clinical pharmacist practitioners and
20 immunizing pharmacists that encompass the new authorized treatments and practices as
21 authorized in this act.

22 **SECTION 3.** Section 1 of this act becomes effective October 1, 2022, and applies to
23 immunizing pharmacists and clinical pharmacist practitioners on or after that date. Section 2 of
24 this act becomes effective October 1, 2021. The remainder of this act is effective when it becomes
25 law.