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S.B. 230
136th General Assembly

Bill Analysis

Version: As Introduced

Primary Sponsor: Sen. Romanchuk

Emma Carroll, Research Analyst

SUMMARY

- Authorizes a pharmacist to conduct screenings, order and administer laboratory and diagnostic tests, evaluate the results of screenings and tests, and provide treatment for specified respiratory health conditions.
- Requires coverage of these pharmacist services by health insurers and Medicaid.
- Requires, instead of permits as under current law, health insurers and Medicaid to cover the management of drug therapy under a consult agreement, administration of immunizations, and administration of specific injected drugs when done by a pharmacist.

DETAILED ANALYSIS

Pharmacist treatment of respiratory conditions

S.B. 230 permits pharmacists to conduct screenings, order and administer laboratory and diagnostic tests, evaluate the results of those screenings and tests, and provide treatment for the following health conditions:

- Influenza;
- Pharyngitis (throat inflammation) caused by group A Streptococcus bacteria – a condition commonly known as strep throat;
- COVID-19;
- Respiratory syncytial virus (RSV);
- Other respiratory conditions specified in rule by the Ohio Board of Pharmacy.¹

¹ R.C. 4729.01(B)(9) and 4729.392(A).

Under the bill, pharmacists are authorized to engage in these activities involving treatment of respiratory conditions only when working in accordance with a statewide written protocol established by the State Board of Pharmacy.²

In addition to the bill's new authority, a pharmacist may continue to manage drug therapy for the treatment of certain conditions and order laboratory and diagnostic tests when working under a consult agreement with a physician, physician assistant, clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner. A pharmacist may also continue to order and administer diagnostic tests for COVID-19 and tests for COVID-19 antibodies.³

Screening and testing

To conduct screenings and order and administer laboratory and diagnostic tests, a pharmacist may use any established procedures that can safely be performed by a pharmacist. The pharmacist is permitted to use any tests that qualify for a waiver under the Clinical Laboratory Improvement Amendments of 1988, a federal law that established quality standards for clinical laboratory testing. Tests that qualify for a waiver are simple and have an insignificant risk of giving incorrect results.⁴ A pharmacist may delegate technical and administrative tasks associated with screening and testing to a pharmacy intern, registered pharmacy technician, or certified pharmacy technician working directly under the supervision of the pharmacist.⁵

Initiating drug therapy

When providing treatment, a pharmacist may initiate drug therapy. The bill specifies that this authority is granted even though a pharmacist is not otherwise described in statute as being a health professional authorized to prescribe drugs.⁶

Rulemaking

The bill requires the Ohio Board of Pharmacy to adopt rules establishing the statewide written protocol that pharmacists must use when conducting screenings, ordering and administering laboratory and diagnostic tests, evaluating the results of those screenings and tests, and providing treatment for the conditions specified in the bill. Other rules are to be adopted as necessary to implement the bill's new authority being granted to pharmacists. All of the rules are to be adopted in accordance with the Administrative Procedure Act (R.C. Chapter 119).⁷

² R.C. 4729.392(A).

³ R.C. 4729.392(E); see R.C. 4729.39 and 4729.42, not in the bill.

⁴ 42 United States Code (U.S.C.) 263a.

⁵ R.C. 4729.392(B).

⁶ R.C. 4729.392(C); see R.C. 4729.01(I).

⁷ R.C. 4729.392(A) and (D).

Insurance and Medicaid coverage

Current law permits health insuring corporations, sickness and accident insurers, public employee benefit plans, and Medicaid, including Medicaid managed care plans, to cover the following services provided by pharmacists: (1) management of drug therapy under a consult agreement, (2) administration of immunizations, and (3) administration of specific drugs by injection. This coverage is only required if the insurer covers those services generally. The bill makes this coverage mandatory, and additionally requires the coverage of the screenings, laboratory and diagnostic tests, evaluation of those tests, and treatment by pharmacists authorized by the bill. The coverage must be provided in the same manner as coverage of equivalent services by other health care providers.⁸

ERISA considerations

For health insurers, the bill exempts its requirement to cover pharmacist-provided services from an existing Ohio law that otherwise could prevent the coverage from being applied to some health benefit plans. Under that law, a new mandated health benefit cannot be applied until it has been determined that the coverage can be applied fully and equally to employee benefit plans that are subject to the federal Employee Retirement Income Security Act of 1974 (ERISA). The determination is to be made by the Superintendent of Insurance through a hearing conducted under the Administrative Procedure Act.⁹ In general, ERISA preempts state law in the area of employee benefit plans, including employer-sponsored health insurance.¹⁰

HISTORY

Action	Date
Introduced	07-07-25

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⁸ R.C. 1751.91, 3923.89, 4729.01, 5164.14, and 5167.051.

⁹ R.C. 3901.71, not in the bill.

¹⁰ See 29 U.S.C. 1144(a).