

Test and Treat: What are the requirements for a pharmacist to diagnose and treat?		
Jurisdiction	Answer	Detailed Answer
Alabama	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Tests · Anything specified in CPA · Group A Streptococcus (CPA) · Influenza (CPA) <p>Treatment Allowed:</p> <ul style="list-style-type: none"> · Antibiotics for Group A Streptococcus (CPA) · Antivirals for Influenza (CPA) · Anything specified in CPA <p>Authority:</p> <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) · Protocol · PREP Act (See FDA guidance for more info) 	<p>AL ADC 540-X-26-.01: Definitions: Collaborative Pharmacy Practice. (Amended Effective Estimated 1/1/2024) * * *</p> <p>(d) “Collaborative Drug Therapy Management” means the practice of pharmacy whereby an individual pharmacist licensed in this state jointly and voluntarily works with an individual physician licensed in this state under a Collaborative Drug Therapy Management Agreement to provide a range of services to a patient of the Collaborating Physician and the Collaborating Pharmacist intended to optimize therapeutic outcomes; detect and prevent adverse medication interactions and side effects; provide education on the patient’s medications used to treat the disease state so that medications are taken correctly; monitor, modify, and discontinue drug therapy as directed by the physician; provide education on managing medication side effects; communicate with third party payors and insurers regarding prior authorization for prescription medications; and any other activity or service specified in a protocol approved by both the Board of Medical Examiners and the Board of Pharmacy, or otherwise authorized by this Chapter. * * *</p> <p>Under this definition, a pharmacist may use any tests which the Centers for Medicare and Medicaid Services has determined qualifies for a waiver under the federal Clinical Laboratory Improvement Amendments of 1988, or the federal rules adopted thereunder, or any established screening procedures that can safely be performed by a pharmacist. * * *</p> <p>(q) "Acute, uncomplicated illness or injury" means a recent or new short-term problem with low risk of morbidity for which treatment is considered and full recovery without functional impairment is expected. For the purposes of this section, an acute, uncomplicated illness or injury includes:</p> <ul style="list-style-type: none"> (a) Influenza. (b) Streptococcus. (c) Any other condition as recommended by the Joint Committee. <p>Under this definition, a pharmacist may use any tests which the Centers for Medicare and Medicaid Services has determined qualifies for a waiver under the federal Clinical Laboratory Improvement Amendments of 1988, or the federal rules adopted thereunder, or any established</p>

<p>Alaska</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Vital signs (CPA) · CLIA Tests (Independent) <p>Treatment Allowed:</p> <ul style="list-style-type: none"> · Patient care services for: <ul style="list-style-type: none"> · General health and wellness (Independent) · Disease prevention (Independent) · Minor and self-limiting conditions that can be diagnosed with a CLIA waived test (Independent) · Anything that falls under a statewide standing order from the chief medical officer in the Department of Health (Protocol) · Initiating or modifying drug therapy (CPA) · Monitoring of drug therapy (CPA) <p>Authority:</p> <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) · Statewide protocol · Independent in some cases · PREP Act (See FDA guidance for more info) 	<p>AK ST 08.80.337: Other patient care services. * * *</p> <p>(a) A pharmacist may, under a collaborative practice agreement with a written protocol approved by a practitioner, provide patient care services.</p> <p>(b) A pharmacist may independently provide patient care services for</p> <ol style="list-style-type: none"> (1) general health and wellness; (2) disease prevention; or (3) a condition that <ol style="list-style-type: none"> (A) is minor and generally self limiting; (B) has a test that is used to guide diagnosis or clinical decision-making and the test is waived under 42 U.S.C. 263a (Clinical Laboratory Improvement Amendments of 1988); or (C) falls under a statewide standing order from the chief medical officer in the Department of Health. <p>(c) This section does not authorize a pharmacist to prescribe a prescription drug that the pharmacist is not otherwise authorized to prescribe.</p> <p>(d) In this section, "patient care services" means medical care services given in exchange for compensation intended to achieve outcomes related to the cure or prevention of a disease, elimination or reduction of a patient's symptoms, or arresting or slowing of a disease process.</p> <p>AK ADC 12-52.240: Pharmacist collaborative practice authority. (Amended Effective 09/28/2024)</p> <p>(a) A pharmacist planning to exercise collaborative practice authority in the pharmacist's practice by initiating or modifying drug therapy, in accordance with a written protocol established and approved for the pharmacist's practice by a practitioner authorized to prescribe drugs under AS 08, must submit the completed written protocol to the board.</p> <p>(b) A written protocol must include * * *</p> <ol style="list-style-type: none"> (4) the types of collaborative authority decisions that the pharmacists are authorized to make, including <ol style="list-style-type: none"> (A) types of diseases, drugs, or drug categories involved and the type of collaborative authority authorized in each case; * * *
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<p>Arizona</p>	<p>Tests Allowed: · Anything in a CPA</p> <p>Treatments Allowed: · Drug therapy and disease management (CPA)</p> <p>Authority: · PREP Act (See FDA guidance for more info) · CPA (See CPA FAQs for more info) · Standing order</p>	<p>AZ ST 32-1970: Collaborative practice agreements; requirements; rules; definitions.</p> <p>A. A pharmacist who is licensed pursuant to this chapter may enter into a collaborative practice agreement with a provider pursuant to this section to initiate, monitor and modify drug therapy or provide disease management assistance. The collaborative practice agreement may be between one or more pharmacists and one or more providers. The collaborative practice agreement shall:</p> <ol style="list-style-type: none"> 1. Outline the duties related to drug therapy and disease management that the provider is delegating to the pharmacist to perform, including drug therapy that the pharmacist may initiate, monitor and modify and laboratory tests that the pharmacist may order, and the eligible group of patients that may be treated under the collaborative practice agreement. 2. Specify, at a minimum, the conditions to be managed by the pharmacist through disease management and drug therapy management, the circumstances for which the pharmacist must notify the provider and any documentation or recordkeeping requirements. 3. Specify that the pharmacist must follow the written guidelines provided by the provider and may provide drug therapy and disease management services only pursuant to those guidelines. The guidelines shall specify, at a minimum, the specific drug, drugs or drug classes and the conditions to be managed by the pharmacist, the conditions and events for which the pharmacist must notify the provider and the laboratory tests the pharmacist may order. * * *
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<p>Arkansas</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Influenza (Protocol) · Group A Streptococcus (Protocol) · HIV PrEP (Protocol) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Influenza Treatment (Protocol) · Group A Streptococcal Pharyngitis Treatment (Protocol) · HIV PrEP (Protocol) · Drug therapy management (CPA) <p>Authority:</p> <ul style="list-style-type: none"> · Protocol · PREP Act (See FDA guidance for more info) · CPA (See CPA FAQs for more info) 	<p>AR ST 17-92-101: Definitions. * * *</p> <p>(4)(A) “Disease state management” means a strategy that utilizes a team-oriented, multidisciplinary approach to improve healthcare outcomes and quality of care, and when possible, to control healthcare cost through management of targeted chronic disease states.</p> <p>(B) Disease state management focuses on improving health care from prevention to diagnosis and treatment to ongoing follow-up.</p> <p>(C) Disease state management will involve, but not be limited to, patient education, self-care techniques, and outpatient drug therapy management pursuant to a patient care plan; * * *</p> <p>(17)(A) “Practice of pharmacy” means the healthcare provider profession of: * * *</p> <p>(ix)(a) Performing a specific act of drug therapy management or disease state management delegated to a pharmacist for an individual patient based upon a written protocol or a patient care plan approved by a physician, who shall be licensed in this state under the Arkansas Medical Practices Act, § 17-95-201 et seq., § 17-95-301 et seq., and § 17-95-401 et seq. * * *</p> <p>(17)(A) “Practice of pharmacy” means the healthcare provider profession of:</p> <p>(i) * * *</p> <p>(g) Under a statewide protocol, a pharmacist may initiate therapy and administer or dispense, or both, drugs that include Naloxone, nicotine replacement therapy products, oral contraceptives, HIV preexposure prophylaxis, and HIV postexposure prophylaxis; * * *</p> <p>AR Subreg 2023-04-01 Influenza Protocol: Influenza Treatment Protocol. * * *</p> <p>This standing order is issued pursuant to Act 503 of 2021 (HB 1246) (Arkansas Code § 17-92-101) to authorize licensed pharmacists in Arkansas to order and/or dispense influenza treatment medications according to the provisions of Arkansas Code § 17-92-101 and the requirements of this standing order. * * *</p> <p>AR Subreg 2023-04-01 Strep Protocol: Group A Streptococcal Pharyngitis Treatment Protocol. * * *</p> <p>This standing order is issued pursuant to Act 503 of 2021 (HB 1246) (Arkansas Code § 17-92-101) to authorize licensed pharmacists in Arkansas to order and/or dispense GAS treatment</p>
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<p>California</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Tests · COVID-19 (independent) · STIs (independent) · Strep Throat (independent) · Order and interpret drug therapy-related tests (Advanced Practice Pharmacist ONLY) <p>See DTA for list of more blood-related tests</p> <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · COVID-19 oral therapeutics (independent) · HIV preexposure prophylaxis (independent) · HIV postexposure prophylaxis (independent) · Narcotic CSs for substance use disorder treatment (with physician oversight) · Skin Puncture (independent) · Drug therapy (with physician oversight) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · PREP Act (See FDA guidance for more info) 	<p>CA ST Bus and Prof 1206.5: Persons who may perform clinical laboratory test or examination. * * *</p> <p>(a) Notwithstanding subdivision (b) of Section 1206 and except as otherwise provided in Sections 1206.6 and 1241, no person shall perform a clinical laboratory test or examination classified as waived under CLIA unless the clinical laboratory test or examination is performed under the overall operation and administration of the laboratory director, as described in Section 1209, including, but not limited to, documentation by the laboratory director of the adequacy of the qualifications and competency of the personnel, and the test is performed by any of the following persons: * * *</p> <p>(11) A pharmacist, as defined in Section 4036, if ordering drug therapy-related laboratory tests in compliance with paragraph (2) of subdivision (a) of Section 4052.1 or paragraph (2) of subdivision (a) of Section 4052.2, if performing skin puncture in the course of performing routine patient assessment procedures in compliance with Section 4052.1, or if performing testing as authorized in Section 4052.4. * * *</p> <p>CA ST Bus and Prof 1206.6: Community pharmacies performing laboratory testing.</p> <p>Subdivision (a) of Section 1206.5 shall not apply to a pharmacist at a community pharmacy who, upon customer request, performs only blood glucose, hemoglobin A1c, or cholesterol tests that are classified as waived under CLIA and are approved by the federal Food and Drug Administration for sale to the public without a prescription in the form of an over-the-counter test kit, provided that all of the following requirements are satisfied: * * *</p> <p>CA ST Bus and Prof 4052.2: Permitted Pharmacist Procedures in Health Care Facility; Home Health Agency or Clinic with Physician Oversight.</p> <p>(a) Notwithstanding any other law, a pharmacist may perform the following procedures or functions as part of the care provided by a health care facility, a licensed home health agency, licensed correctional clinic, a licensed clinic in which there is physician oversight, a provider who contracts with a licensed health care service plan with regard to the care or services provided to the enrollees of that health care service plan, or a physician, in accordance with the policies,</p>
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<p>Colorado</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Tests · Anything in a CPA · Serology tests <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Medical issues that: (independent) <ul style="list-style-type: none"> · Don't require a new diagnosis; · Are self-limiting; and · Have a test · Pregnancy-related services within the state's generally accepted standards (independent) · Extended-release injectable medications for serious mental health and substance use disorders (independent) · HIV post-exposure prophylaxis (Protocol) · HIV pre-exposure prophylaxis (Protocol) · Statin Therapy (Protocol) · Preventative services (CPA) · Medication management and monitoring (CPA) · Services intended to cure or prevent a disease or symptoms (CPA) <p>Authority:</p>	<p>CO ST 12-280-103: Definitions - Rules. (Amended Effective 8/7/2024) * * *</p> <p>(39) "Practice of pharmacy" means: * * *</p> <p>(e) Pursuant to a standing order or to a statewide drug therapy protocol developed pursuant to section 12-280-125.7, the prescribing and dispensing of post-exposure prophylaxis, as defined in section 12-280-125.7 (1)(d), for nonoccupational exposure to HIV infection and preexposure prophylaxis, as defined in section 12-280-125.7 (1)(e), and the ordering of lab tests in conjunction with prescribing or dispensing the drugs. * * *</p> <p>(g) Exercising independent prescriptive authority:</p> <p>(I) As authorized pursuant to section 25.5-5-322, only with regard to over-the-counter medications prescribed to recipients under the "Colorado Medical Assistance Act", articles 4 to 6 of title 25.5;</p> <p>(II) In accordance with a collaborative pharmacy practice agreement as defined in section 12-280-601 (1)(b);</p> <p>(III) As authorized pursuant to sections 12-30-110 and 12-280-123 (3) regarding opioid antagonists; or</p> <p>(IV) For drugs that are not controlled substances, drug categories, or devices that are prescribed in accordance with the product's FDA-approved labeling and to patients who are at least twelve years of age and that are limited to conditions that:</p> <p>(A) Do not require a new diagnosis;</p> <p>(B) Are minor and generally self-limiting; or</p> <p>(C) Have a test that is used to guide diagnosis or clinical decision-making and is waived under the federal "Clinical laboratory improvement amendments of 1988", Pub.L. 100-578, as amended; or * * *</p> <p>(V) For any FDA-approved product indicated for opioid use disorder in accordance with federal law and regulations, including medications for opioid use disorder, if authorized pursuant to part 6 of this article 280. * * *</p> <p>CO ADC 3-719-1-17.00.10: Definitions- Collaborative Practice; Prescriber. (Amended Effective</p>
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<p>Connecticut</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Tests · Anything in a CPA · Influenza (certification required) · COVID-19 (certification required) · HIV (certification required) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · HIV Prophylaxes (independent)(certification required) · Drug therapy management (CPA) · Anything in CPA <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · PREP Act (See FDA guidance for more info) · CPA (See CPA FAQs for more info) 	<p>CT ST 20-633f: Ordering and administration of COVID-19-related, HIV-related and influenza-related tests, and prescribing of HIV-related prophylaxes, by licensed pharmacists. Recordkeeping. Confidentiality. Disclosure. Regulations. (Amended Effective 10/01/2024) * * *</p> <p>(b) (1) Any pharmacist licensed under this chapter may order, and administer to a patient, a COVID-19-related test or influenza-related test if:</p> <ul style="list-style-type: none"> (A) Such pharmacist <ul style="list-style-type: none"> (i) is employed by a pharmacy that has submitted to the Department of Public Health a complete clinical laboratory improvement amendment application for certification for the COVID-19-related test or influenza-related test and the Department of Public Health has approved such application, and (ii) has completed any training required by the Department of Consumer Protection; and (B) the patient is <ul style="list-style-type: none"> (i) eighteen years of age or older, or (ii) at least twelve years of age but younger than eighteen years of age with <ul style="list-style-type: none"> (I) the consent of such patient's parent, legal guardian or other person having legal custody of such patient, or (II) proof that such patient is an emancipated minor. <p>(2) Any pharmacist licensed under this chapter may order, and administer to a patient, a COVID-19-related test or influenza-related test if:</p> <ul style="list-style-type: none"> (A) Such pharmacist is employed by a hospital; and (B) the patient is <ul style="list-style-type: none"> (i) eighteen years of age or older, or (ii) at least twelve years of age but younger than eighteen years of age with <ul style="list-style-type: none"> (I) the consent of such patient's parent, legal guardian or other person having legal custody of such patient, or (II) proof that such patient is an emancipated minor. * * * <p>(c) (1) On or after the adoption of regulations pursuant to subsection (g) of this section, any</p>
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<p>Delaware</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Tests (Protocol) · Anything in a CPA · Influenza (Protocol) · Group A Streptococcus Pharyngitis (Protocol) · SARS-COV-2 or other respiratory illness, condition, or disease (Protocol) · Lice (Protocol) · Skin conditions, including ringworm and athlete’s foot (Protocol) · Other emerging and existing public health threats identified by the Division of Public Health if permitted by an order, rule, or regulation (Protocol) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in a CPA · Influenza (Protocol) · Group A Streptococcus Pharyngitis (Protocol) · SARS-COV-2 or other respiratory illness, condition, or disease (Protocol) · Lice (Protocol) · Skin conditions, including ringworm and athlete’s foot (Protocol) · Other emerging and existing public 	<p>DE ST 24-2525: Testing, screening, and treatment of health conditions.</p> <p>(a) Pursuant to a statewide written protocol approved by the Division of Public Health, a pharmacist may order, test, screen, and treat health conditions that include all of the following:</p> <ol style="list-style-type: none"> (1) Influenza. (2) Group A Streptococcus Pharyngitis. (3) SARS-COV-2 or other respiratory illness, condition, or disease. (4) Lice. (5) Skin conditions, including ringworm and athlete’s foot. (6) Other emerging and existing public health threats identified by the Division of Public Health if permitted by an order, rule, or regulation. <p>(b) A pharmacist who orders, tests, screens, or treats health conditions under this section may use any test that may guide clinical decision making that is waived under the federal Clinical Laboratory Improvement Amendments of 1988, or the federal rules adopted thereunder, or any established screening procedure that is established via a statewide protocol.</p> <p>(c) A pharmacist may delegate the administrative and technical tasks of performing a test waived by the federal Clinical Laboratory Improvement Amendments of 1988 to an intern or pharmacy technician acting under the supervision of the pharmacist.</p> <p>(d) Prohibit the denial of reimbursement under health benefit plans for services and procedures performed by a pharmacist that are within the scope of the pharmacist’s license and would be covered if the services or procedures were performed by a physician, an advanced practice nurse, or physicians assistant.</p> <p>DE ST 24-2525A: Human immunodeficiency virus (HIV) pre-exposure prophylaxis and HIV post-exposure prophylaxis. (New Effective 09/24/2024)</p> <p>(a) Pursuant to a statewide written protocol approved by the Division of Public Health, a pharmacist may initiate, dispense, or administer medications for HIV pre-exposure prophylaxes and for HIV post-exposure prophylaxis, which includes administering laboratory tests, conducting assessments and consultations, and providing referrals, * * *</p>
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<p>District of Columbia</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Tests · Anything in a CPA · COVID-19 (independent) · Blood glucose (independent) · Screening for depression and other mental health conditions (independent) · Screening for sexually transmitted diseases (independent) · Performing foot checks for patients with diabetes (independent) · Asthma Control checks (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Drug Therapy (CPA) · Medication Therapy Management (independent) · Management of chronic conditions, including Type 2 diabetes mellitus and hypertension (independent) · Performing point-of-care testing and cholesterol monitoring (independent) · Providing transition-of-care services (independent) · Administering anticoagulation therapy (independent) · Extending prescriptions as medically 	<p>DC ST 3-1201.02: Definitions of Health Occupations. (Amended effective 07/19/2024) * * *</p> <p>(11)(A) “Practice of pharmacy” means the interpretation and evaluation of prescription orders; the dispensing and labeling of drugs, devices, and biologicals; the compounding of drugs as authorized by federal and District law; the prescribing and dispensing of self-administered hormonal contraceptives when certified by the Board of Pharmacy to do so and in accordance with regulations issued by the Mayor; drug and device selection; responsibility for advising and providing information, where regulated or otherwise necessary, concerning drugs, devices, and biologicals, and their therapeutic values, content, hazards, and uses in the treatment and prevention of disease; responsibility for conducting drug-regimen reviews; responsibility for the proper and safe storage and distribution of drugs, devices, and biologicals; the administration of a prescribed drug, device, and biological in accordance with regulations issued by the Mayor; the order and administration of immunizations and vaccinations in accordance with the Centers for Disease Control and Prevention’s published guidelines and recommended immunization schedules for adults aged 18 and older with valid identification, adolescents and children aged 3 through 17 with written informed parental consent or without consent if authorized by District law, and the administration of immunizations and vaccinations to any individual pursuant to a valid prescription when certified by the Board of Pharmacy to do so; conducting health screenings, including ordering, performing, and interpreting Clinical Laboratory Improvement Amendments-waived tests; the offering or performance of those acts, services, operations, and transactions necessary in the conduct, operation, management, and control of a pharmacy; the initiating, modifying, or discontinuing a drug therapy in accordance with a duly executed collaborative practice agreement; the maintenance of proper records; and a range of professional healthcare and clinical services as determined by the Mayor through rulemaking, but including:</p> <ul style="list-style-type: none"> (i) Medication Therapy Management; (ii) Management of chronic conditions, including Type 2 diabetes mellitus and hypertension;
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<p>Florida</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA, including: <ul style="list-style-type: none"> · Influenza · Streptococcus · Lice · Skin conditions, such as ringworm and athlete's foot · Minor, uncomplicated infections <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Influenza (CPA) · Streptococcus (CPA) · Lice (CPA) · Skin conditions, such as ringworm and athlete's foot (CPA) · Minor, uncomplicated infections (CPA) · HIV postexposure prophylaxis (CPA) · Drug Therapy Management (CPA) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · PREP Act (See FDA guidance for more info) · CPA (See CPA FAQs for more info) 	<p>FL ST 465.1895: Testing or screening for and treatment of minor, nonchronic health conditions.</p> <p>(1) A pharmacist may test or screen for and treat minor, nonchronic health conditions within the framework of an established written protocol with a supervising physician licensed under chapter 458 or chapter 459. For purposes of this section, a minor, nonchronic health condition is typically a short-term condition that is generally managed with minimal treatment or self-care, and includes:</p> <ul style="list-style-type: none"> (a) Influenza. (b) Streptococcus. (c) Lice. (d) Skin conditions, such as ringworm and athlete's foot. (e) Minor, uncomplicated infections. * * * <p>(5) The written protocol between a pharmacist and supervising physician under this subsection must include particular terms and conditions imposed by the supervising physician relating to the testing and screening for and treatment of minor, nonchronic health conditions under this section. The terms and conditions must be appropriate to the pharmacist's training. A pharmacist who enters into such a protocol with a supervising physician must submit the protocol to the board.</p> <p>(a) At a minimum, the protocol shall include:</p> <ol style="list-style-type: none"> 1. Specific categories of patients who the pharmacist is authorized to test or screen for and treat minor, nonchronic health conditions. 2. The physician's instructions for obtaining relevant patient medical history for the purpose of identifying disqualifying health conditions, adverse reactions, and contraindications to the approved course of treatment. 3. The physician's instructions for the treatment of minor, nonchronic health conditions based on the patient's age, symptoms, and test results, including negative results. * * * <p>FL ADC 64B16-31.039: Test and Treat Certification: Formulary of Medical Drugs.</p> <p>(1) Pursuant to section 465.1895, F.S., the Board hereby incorporates all medicinal drugs</p>
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<p>Georgia</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in a CPA · Tests that have been cleared or approved for home use by the FDA (independent) · Viral and serology COVID-19 tests (independent) · Capillary blood tests (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in a CPA <p>Authority:</p> <ul style="list-style-type: none"> · Independent in some cases · PREP Act (See FDA guidance for more info) · CPA (See CPA FAQs for more info) 	<p>GA ST 26-4-5: Definitions-Administer; Electronic Signature. * * *</p> <p>(1) "Administer" or "administration" means the provision of a unit dose of medication to an individual patient as a result of the order of an authorized practitioner of the healing arts.* * *</p> <p>(30) "Pharmacy" means:</p> <p>(A) The profession, art, and science that deals with pharmacy care, drugs, or both, medicines, and medications, their nature, preparation, administration, dispensing, or effect; * * *</p> <p>(31) "Pharmacy care" means:</p> <p>(A) Those services related to the interpretation, evaluation, or dispensing of prescription drug orders, the participation in drug and device selection, drug administration, and drug regimen reviews, and the provision of patient counseling related thereto; and</p> <p>(B) Ordering and administering:</p> <p>(i) Tests that have been cleared or approved for home use by the federal Food and Drug Administration and interpreting the results as a means to screen for or monitor disease, disease risk factors, or drug use and to facilitate patient education; and</p> <p>(ii) Viral and serology COVID-19 tests, provided that such authority shall expire 12 months after the end of the public health emergency declared by the United States secretary of health and human services on January 31, 2020; provided, however, that such expiration shall not apply to viral and serology COVID-19 tests cleared or approved pursuant to division (i) of this subparagraph. * * *</p> <p>GA ST 26-4-4: Definition of "practice of pharmacy".</p> <p>The "practice of pharmacy" means * * * ; participation in drug and device selection, drug administration, drug regimen reviews, and drug or drug related research; * * * ; performing capillary blood tests and interpreting the results as a means to screen for or monitor disease risk factors and facilitate patient education, and a pharmacist performing such functions shall report the results obtained from such blood tests to the patient's physician of choice; * * *</p>
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<p>Hawaii</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA Tests (CPA) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Initiating drug therapy (CPA) <p>Authority:</p> <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) · PREP Act (See FDA guidance for more info) 	<p>HI ST 461-1: Definitions; Board; Director; Emergency Contraception. * * *</p> <p>"Practice of pharmacy" means: * * *</p> <p>(2) Performing the following procedures or functions as part of the care provided by and in concurrence with a health care facility and health care service as defined in section 323D-2; pharmacy; licensed physician, licensed physician assistant, or licensed advanced practice registered nurse with prescriptive authority; or managed care plan as defined in section 432E-1, in accordance with policies, procedures, or protocols developed collaboratively by health professionals, including physicians and surgeons, pharmacists, physician assistants, and registered nurses, and for which a pharmacist has received appropriate training required by these policies, procedures, or protocols:</p> <p>(A) Ordering or performing routine drug therapy related patient assessment procedures;</p> <p>(B) Ordering drug therapy related laboratory tests; * * *</p> <p>(D) Administering drugs orally, topically, by intranasal delivery, or by injection, pursuant to the order of the patient's licensed physician, physician assistant, or advanced practice registered nurse with prescriptive authority, by a pharmacist having appropriate training that includes programs approved by the ACPE, curriculum-based programs from an ACPE-accredited college of pharmacy, state or local health department programs, or programs recognized by the board; * * *</p> <p>(F) As authorized by the written instructions of a licensed physician, physician assistant, or advanced practice registered nurse with prescriptive authority, initiating or adjusting the drug regimen of a patient pursuant to an order or authorization made by the patient's licensed physician, physician assistant, or advanced practice registered nurse with prescriptive authority and related to the condition for which the patient has been seen by the licensed physician, physician assistant, or advanced practice registered nurse with prescriptive authority; provided that the pharmacist shall issue written notification to the patient's licensed physician, physician assistant, or advanced practice registered nurse with prescriptive authority or enter the appropriate information in an electronic patient record system shared by the licensed physician, physician assistant, or advanced practice registered nurse with prescriptive authority, within</p>
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<p>Idaho</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-waived lab tests <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Drug therapy management (independent) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>ID ADC 24.36.01.010: Definitions and Abbreviations. * * * (Temporary Effective 07/01/2024)</p> <p>19. Pharmaceutical Care Services. A broad range of services for patients performed independently or in collaboration with other health care professionals. Pharmaceutical care services are not limited to, but may include one (1) or more of the following: (7-1-24)T</p> <ol style="list-style-type: none"> a. Diagnosing the patient's health status or condition; (7-1-24)T b. Reviewing or formulating a drug utilization plan; (7-1-24)T c. Monitoring and evaluating the patient's response to drug therapy; (7-1-24)T d. Ordering and interpreting laboratory tests and imaging; (7-1-24)T e. Performing drug product selection, substitution, medication administration, prescription adaptation, or refill authorization as provided in these rules; and (7-1-24)T f. Prescribing drugs and devices as provided in these rules. (7-1-24)T * * * <p>ID ST 54-1704: Definitions. * * *</p> <p>(42) "Pharmaceutical care" means drug therapy and other pharmaceutical patient care services intended to achieve outcomes related to the cure or prevention of a disease, elimination or reduction of a patient's symptoms, or arresting or slowing of a disease process as defined in the rules of the board. * * *</p> <p>(46) "Practice of pharmacy" means the safe interpretation, evaluation, compounding, administration, and dispensing of prescription drug orders, patient counseling, collaborative pharmacy practice, provision of pharmaceutical care services, proper storage of drugs and devices, and prescribing of drugs and devices as may be further defined in this chapter. * * *</p> <p>ID Subreg 2020-04-13 Board of Pharmacy Guidance: How to Obtain a CLIA Waiver and Begin Testing. * * *</p> <p>Administering Waived Tests</p> <p>There are no minimum training requirements specified in federal or state law for the personnel conducting waived tests. Both pharmacists or pharmacy technicians may participate in administering waived testing, though they should only provide those for which they have proper education and training. * * *</p>
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<p>Illinois</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA Waived · HIV prophylaxis (independent) · Influenza (independent) · SARS-CoV-2 (independent) · Group A Streptococcus (independent) · Respiratory syncytial virus (independent) · Health conditions identified by a statewide public health emergency, as defined in the Illinois Emergency Management Agency Act (independent) · Blood cholesterol · Blood glucose <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · HIV prophylaxis (independent) · Influenza (independent) · SARS-CoV-2 (independent) · Group A Streptococcus (independent) · Respiratory syncytial virus (independent) · Health conditions identified by a statewide public health emergency, as defined in the Illinois Emergency Management Agency 	<p>IL ST 225-85/3: Definitions; Medicine; Inpatient Drug Order. (Amended Effective 01/01/2025) * * *</p> <p>(d) "Practice of pharmacy" means: * * *</p> <p>(14) the initiation, dispensing, or administration of drugs, laboratory tests, assessments, referrals, and consultations for human immunodeficiency virus pre-exposure prophylaxis and human immunodeficiency virus post-exposure prophylaxis under Section 43.5; * * *</p> <p>(17) the ordering and administration of point of care tests, screenings, and treatments for</p> <ul style="list-style-type: none"> (i) influenza, (ii) SARS-CoV-2, (iii) Group A Streptococcus, (iv) respiratory syncytial virus, (v) adult-stage head louse, and (vi) health conditions identified by a statewide public health emergency, as defined in the Illinois Emergency Management Agency Act, with notification to the patient's physician, if any, and appropriate record retention or pursuant to hospital pharmacy and therapeutics committee policies and procedures. <p>Eligible tests and screenings are those approved, authorized, or licensed by the United States Food and Drug Administration and must be administered in accordance with that approval, authorization, or licensing.</p> <p>A pharmacist who orders or administers tests or screenings for health conditions described in this paragraph may use a test that may guide clinical decision-making for the health condition that is waived under the federal Clinical Laboratory Improvement Amendments of 1988 and regulations promulgated thereunder or any established screening procedure that is established under a statewide protocol.</p> <p>A pharmacist may delegate the administrative and technical tasks of performing a test for the health conditions described in this paragraph to a registered pharmacy technician or student pharmacist acting under the supervision of the pharmacist.</p>
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<p>Indiana</p>	<p>Tests Allowed: · Anything in CPA or protocol</p> <p>Treatments Allowed: · Medication therapy management (CPA)</p> <p>Authority: · Protocol · CPA (See CPA FAQs for more info)</p>	<p>IN ST 25-26-13-2: Definitions; Board; Administering; Electronic data intermediary. * * *</p> <p>"Medication therapy management" means a distinct service or group of services that optimize therapeutic outcomes for individuals that are independent of, but may occur in conjunction with, the provision of a medication or medical device. The term includes the following services:</p> <ol style="list-style-type: none"> (1) Performing or obtaining assessments of an individual's health status. (2) Formulating a medication treatment plan. (3) Selecting, initiating, modifying, or administering medication therapy. (4) Monitoring and evaluating an individual's response to therapy, including safety and effectiveness. (5) Performing a comprehensive medication review to identify, resolve, and prevent medication related problems, including adverse drug events. (6) Documenting the care delivered and communicating essential information to the patient's other health care providers. (7) Providing education and training designed to enhance patient understanding and appropriate use of the individual's medications. (8) Providing information and support services and resources designed to enhance patient adherence with the individual's therapeutic regimens, including medication synchronization. (9) Coordinating and integrating medication therapy management services within the broader health care services being provided to an individual. (10) Providing other patient care services allowable by law. * * * <p>"The practice of pharmacy" or "the practice of the profession of pharmacy" means a patient oriented health care profession in which pharmacists interact with and counsel patients and with other health care professionals concerning drugs and devices used to enhance patients' wellness, prevent illness, and optimize the outcome of a drug or device, by accepting responsibility for performing or supervising a pharmacist intern or an unlicensed person under section 18.5 of this chapter to do the following acts, services, and operations: * * *</p> <ol style="list-style-type: none"> (8) Provision of medication therapy management. * * *
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<p>Iowa</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA Waived · Influenza · Strep A <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Influenza (protocol) · Strep A (protocol) <p>Authority:</p> <ul style="list-style-type: none"> · Protocol · CPA (See CPA FAQs for more info) 	<p>IA ADC 657-39.13: Collaborative pharmacy practice.</p> <p>39.13(1) Definitions. For the purpose of this rule, the following definitions shall apply: “Collaborative pharmacy practice” means a practice of pharmacy whereby one or more pharmacists provides patient care and drug therapy management services not otherwise permitted to be performed by a pharmacist to patients under a collaborative pharmacy practice agreement with one or more practitioners which defines the nature, scope, conditions, and limitations of the patient care and drug therapy management services to be provided by the pharmacist(s) in order to ensure that a patient achieves the desired outcomes. “Practitioner” means a physician, dentist, podiatric physician, veterinarian, optometrist, or advanced registered nurse practitioner who holds an active license to practice in Iowa.</p> <p>39.13(2) Collaborative practice agreement. * * *</p> <p>b. A collaborative pharmacy practice agreement shall include: * * *</p> <p>(2) The establishment of the delegating practitioner’s scope of practice authorized in the agreement and a description of the permitted activities and decisions to be performed by the pharmacist(s);</p> <p>(3) The protocol, formulary, or clinical guidelines that describe or limit the pharmacist’s authority to perform the patient care or drug therapy management services and, as applicable, the drug name, class or category provided under drug therapy management;</p> <p>(4) A description of the process to monitor compliance with the agreement and clinical outcomes of patients; * * *</p> <p>IA Subreg 2022-08-24 Influenza Statewide Protocol: Point-of-Care Test and Treat - Influenza.</p> <p>I. Purpose</p> <p>This statewide protocol specifies the criteria and procedures for a pharmacist to initiate CLIA-waived point-of-care testing and, when indicated, the dispensing of antiviral therapies to treat acute influenza infection. The purpose of this protocol is to ensure appropriate and timely antiviral therapy for individuals with influenza following diagnostic confirmation via a CLIA-waived point-of-care influenza diagnostic test.</p>
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<p>Kansas</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA Waived <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Initial therapy for: (Protocol) <ul style="list-style-type: none"> · Influenza · Group A Streptococcal · UTIs · Drug therapy management (CPA) <p>Authority:</p> <ul style="list-style-type: none"> · Protocol · CPA (See CPA FAQs for more info) 	<p>KS ST 65-1626a: Practice of Pharmacy Defined; Persons Engaged as pharmacists. * * *</p> <p>(b)(b) As used in this section:</p> <p>(1) “Practice of pharmacy” means the * * * ; performance of collaborative drug therapy management pursuant to a written collaborative practice agreement with one or more physicians who have an established physician-patient relationship; and participation in the offering or performing of those acts, services, operations or transactions necessary in the conduct, operation, management and control of a pharmacy. * * *</p> <p>(2) “Collaborative drug therapy management” means a practice of pharmacy where a pharmacist performs certain pharmaceutical-related patient care functions for a specific patient which have been delegated to the pharmacist by a physician through a collaborative practice agreement. A physician who enters into a collaborative practice agreement is responsible for the care of the patient following initial diagnosis and assessment and for the direction and supervision of the pharmacist throughout the collaborative drug therapy management process. Nothing in this subsection shall be construed to permit a pharmacist to alter a physician’s orders or directions, diagnose or treat any disease, independently prescribe drugs or independently practice medicine and surgery.</p> <p>(3) “Collaborative practice agreement” means a written agreement or protocol between one or more pharmacists and one or more physicians that provides for collaborative drug therapy management. Such collaborative practice agreement shall contain certain specified conditions or limitations pursuant to the collaborating physician’s order, standing order, delegation or protocol. A collaborative practice agreement shall be:</p> <p>(A) Consistent with the normal and customary specialty, competence and lawful practice of the physician; and</p> <p>(B) appropriate to the pharmacist’s training and experience.</p> <p>KS ST 65-16,131: Pharmacist-initiated therapy for certain health conditions; requirements; establishment of protocols by collaborative drug therapy management advisory committee; penalty for violation.</p>
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<p>Kentucky</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived · Acute Influenza infection (protocol) · SARS-CoV-2 (protocol) · Acute Group A Streptococcal (protocol) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · SARS-CoV-2 (protocol) · Acute Group A Streptococcal (protocol) · Acute Influenza infection (protocol) <p>Authority:</p> <ul style="list-style-type: none"> · Protocol · CPA (See CPA FAQs for more info) 	<p>KY ADC 201:2:380: Board Authorized Protocols.</p> <p>Section 1. Definitions. * * *</p> <p>(3) "Protocol" means a written agreement between a pharmacist or pharmacists and a prescriber that outlines the plan to initiate the dispensing of noncontrolled medications, over-the-counter medications, or other professional services within the prescriber's statutory scope of practice. * * *</p> <p>Section 5. Authorized Conditions. Board-authorized protocols may be established for the following conditions:</p> <ol style="list-style-type: none"> (1) Acute influenza infection pursuant to recommendations by the Centers for Disease Control and Prevention (CDC); (2) Acute streptococcal pharyngitis infection; (3) Acute, uncomplicated urinary tract infection; (4) Acute cutaneous or mucocutaneous fungal infection; (5) Alcohol use disorder utilizing naltrexone-based therapy pursuant to recommendations from the American Psychiatric Association; (6) Allergic rhinitis; (7) Anaphylaxis; (8) Colorectal cancer prevention and screening; (9) HCV infection screening; (10) HIV infection prophylaxis, pre-exposure and post-exposure pursuant to recommendations by the CDC; (11) HIV infection screening pursuant to recommendations by the CDC; (12) Nutritional supplementation with vitamins and minerals; (13) Opioid use disorder pursuant to recommendations by the American Society of Addiction Medicine; (14) Tobacco use disorder; (15) Traveler's health pursuant to recommendations by the CDC;
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<p>Louisiana</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA Waived, including: (independent) <ul style="list-style-type: none"> · Dipstick or tablet reagent urinalysis · Fecal occult blood · Ovulation tests-visual color tests for human luteinizing hormone · Urine pregnancy tests · Erythrocyte sedimentation rate, non-automated · Blood glucose via an FDA-approved, home-use device · Spun microhematocrit · Hemoglobin by single analyte instrument · HIV (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · HIV pre and post-exposure prophylaxis (independent) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>LA ADC 46 XLV:3503: Definitions. * * *</p> <p>Waived Test--those routine technical procedures performed under or eligible for a certificate of waiver under CLIA. An illustrative list of such routine technical procedures includes:</p> <ol style="list-style-type: none"> a. dipstick or tablet reagent urinalysis (non-automated) for the following determination levels: bilirubin, glucose, hemoglobin, ketone, leukocytes, nitrite, pH, protein, specific gravity, or urobilinogen; b. fecal occult blood; c. ovulation tests-visual color tests for human luteinizing hormone; d. urine pregnancy tests-visual color comparison tests; e. erythrocyte sedimentation rate, non-automated; f. hemoglobin-copper sulfate, non-automated; g. blood glucose as determined by monitoring device approved by the Federal Drug Administration specifically for home use; h. spun microhematocrit; i. hemoglobin by single analyte instrument with self-contained or component features to perform specimen/reagent interaction providing direct measurement or readout. <p>LA ST 37:1218.2: Administration and treatment for human immunodeficiency virus. * * *</p> <p>B. (1) A pharmacist may dispense and administer up to a thirty day supply of HIV pre-exposure prophylaxis and a twenty-eight day course of HIV post-exposure prophylaxis to any person age seventeen or older pursuant to rules promulgated by the department if there is no prescription drug order.</p> <p>(2) A pharmacist may perform a rapid HIV test at the pharmacy in a private, secured location or may order laboratory testing for HIV infection for any person age seventeen or older pursuant to rules promulgated by the department.</p> <p>(3) A pharmacist shall administer any tests performed pursuant to this Section in a private location within the pharmacy, and shall ensure patient confidentiality, including storing all records and documents regarding a patient's test results for HIV in a secured location that is not easily</p>
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<p>Maine</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA Waived, including: <ul style="list-style-type: none"> · Urine pregnancy testing · Cholesterol testing · Colon cancer testing · Fecal occult blood testing · Glucose testing for persons previously diagnosed with diabetes <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Drug therapy management for qualifying conditions, such as: (CPA) <ul style="list-style-type: none"> · Anticoagulation · Asthma · Diabetes · Dyslipidemia · Hyperlipidemia · Hypertension · Infectious Disease · Cancer · Thyroid Disorder · HIV Prevention Drugs (CPA / Standing Order) <p>Authority:</p> <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) 	<p>ME ADC 02-392-39-A-3: Collaborative Practice Agreement Content. A collaborative practice agreement may authorize collaborative drug therapy management only for qualifying conditions. A collaborative practice agreement must: * * *</p> <p>6. Describe in detail the types of diseases, drugs or drug categories involved and collaborative drug therapy management allowed in each patient's case; * * *</p> <p>ME ADC 02-392-005-39-01: Definitions - Pharmacy Terms. * * *</p> <p>5. Qualifying condition. "Qualifying condition" means a condition or disease with generally accepted standards of care, which may include the following examples:</p> <ul style="list-style-type: none"> A. Anticoagulation B. Asthma C. Diabetes D. Dyslipidemia E. Hyperlipidemia F. Hypertension G. Infectious Disease H. Cancer I. Thyroid Disorder * * * <p>ME ST 32-13841: Authority to engage in collaborative drug therapy management. * * *</p> <p>2. Scope of authority. A pharmacist engaging in collaborative drug therapy management pursuant to subsection 1 is entitled to adequate access to a patient's history, disease status, drug therapy and laboratory and procedure results and may:</p> <ul style="list-style-type: none"> A. Collect and review a patient's history; B. Obtain and check vital signs; C. Order and evaluate the results of laboratory tests directly related to drug therapy under the supervision of, or in direct consultation with, a practitioner and in accordance with approved protocols applicable to the practice setting and when the evaluation does not include a diagnostic component; and
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<p>Maryland</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA <p>Independent for the following:</p> <ul style="list-style-type: none"> · Whole blood glucose by glucose monitoring devices · Dermatophyte screen · Dipstick glucose · Dipstick urinalysis using reagent test pads affixed to plastic strips that detect: <ul style="list-style-type: none"> · Glucose · Bilirubin · Ketones detected in the form of acetoacetic acid · Specific gravity · Red blood cells or hemoglobin · pH · Protein · Urobilinogen · Nitrites · Leukocytes · Gram stain · Group A streptococcal · Hematocrit · Hemoglobin · Infectious mononucleosis · Microscopic urinalysis 	<p>MD ADC 10.10.03.02: Letters of Exception. * * *</p> <p>B. Excepted Tests. A POL or POCL operating under a letter of exception may perform one or more of the following excepted tests or types of tests:</p> <ol style="list-style-type: none"> (1) Whole blood glucose by glucose monitoring devices cleared by the FDA for home use or a CLIA waived analyzer; (2) Dermatophyte screen; (3) Dipstick glucose; (4) Dipstick urinalysis using reagent test pads affixed to plastic strips that detect one or a combination of any of the following urine characteristics or constituents: <ol style="list-style-type: none"> (a) Glucose; (b) Bilirubin; (c) Ketones detected in the form of acetoacetic acid; (d) Specific gravity; (e) Red blood cells or hemoglobin; (f) pH; (g) Protein; (h) Urobilinogen; (i) Nitrites; and (j) Leukocytes; (5) Gram stain; (6) Group A streptococcal screen; (7) Hematocrit; (8) Hemoglobin; (9) Infectious mononucleosis slide or card test; (10) Microscopic urinalysis; (11) Occult blood; (12) Pinworms;
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<p>Massachusetts</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Waived · Anything in CPA, including: <ul style="list-style-type: none"> · Vital signs · Lab tests related to drug therapy <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Drug therapy management for: (CPA) <ul style="list-style-type: none"> · asthma · chronic obstructive pulmonary disease · diabetes · hypertension · hyperlipidemia · congestive heart failure · HIV or AIDS · osteoporosis · co-morbidities listed in 247 CMR 16.03(5)(e)1.b.i. through viii <p>Authority:</p> <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) 	<p>MA Subreg 2023-12-07 Policy 2020-15: Scope of Practice.</p> <p>I. Pharmacist / Intern * * *</p> <p>Independent Practice: Pharmacists practicing independently (without an employee / employer relationship with a pharmacy) may not order or possess drugs without a Massachusetts Controlled Substances Registration (“MCSR”). An independently practicing pharmacist may perform compliance packaging services for patients. Sorting a patient’s oral medications within their home from prescription vials into a dose planner is not considered “re-dispensing.” These pharmacists should obtain informed patient consent before providing services and maintain policies and procedures for their services.</p> <p>A. Testing</p> <p>No aspects of testing (including machine-processing of specimens), may be conducted within a pharmacy’s licensed prescription area, including the service counter.</p> <p>1. Health Promotion Screening Tests:</p> <p>A pharmacist and pharmacy intern may administer, process, read, and report the results of Health Promotion Screening tests to patients, but may not interpret any test results, diagnose, or initiate / modify drug therapy based on the results of the tests. For more information on Health Promotion Screening, contact the DPH Clinical Laboratory Program: https://www.mass.gov/how-to/apply-for-approval-of-health-promotionscreening-laboratory-testing</p> <p>2. COVID-19 Tests:</p> <p>Pursuant to a prescription or standing order, a pharmacist and pharmacy intern may administer, process, read, and report results of COVID-19 tests to patients, but may not interpret any test results, diagnose, or initiate / modify drug therapy based on the results of the tests. See Policy 2023-03: COVID-19 Control Measures for details.</p> <p>3. CDTM Testing:</p> <p>Pharmacists engaged in a CDTM agreement may order and evaluate the results of laboratory tests directly related to drug therapy when performed in accordance with approved protocols applicable to the practice setting and when the evaluation does not include a diagnostic</p>
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<p>Michigan</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · COVID-19 (independent) · Influenza (independent) · Respiratory infections (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · COVID-19 (independent) · Influenza (independent) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>MI ST 333.17724a: Pharmacist; Immunization; Waived Tests; Prescribing. * * *</p> <p>(1) Subject to this section, a pharmacist may order a qualified laboratory test for and administer the qualified laboratory test to an individual if the qualified laboratory test meets all of the following requirements:</p> <ul style="list-style-type: none"> (a) The qualified laboratory test is classified as waived by the Food and Drug Administration. (b) The qualified laboratory test requires only the use of a specimen collected by a nasal or throat swab or a finger prick. (c) The qualified laboratory test is used to detect or screen for any of the following: <ul style="list-style-type: none"> (i) COVID-19. (ii) Influenza. (iii) A respiratory infection. <p>(2) Before ordering or administering a qualified laboratory test under this section, a pharmacist shall successfully complete the training program approved under subsection (5).</p> <p>(3) A pharmacist who orders a qualified laboratory test for or administers a qualified laboratory test to an individual under this section shall advise the individual of the test result and refer the individual to a physician, or another health professional, designated by the individual.</p> <p>(4) A pharmacist who orders a qualified laboratory test for and administers that qualified laboratory test to an individual under this section for purposes of detecting or screening for COVID-19 or influenza may, without a prescription, dispense a drug to the individual if all of the following are met:</p> <ul style="list-style-type: none"> (a) The pharmacist determines that the drug is needed to treat the individual for COVID-19 or influenza based on the individual’s test result. (b) The drug is an antiviral drug and is available at the pharmacy. (c) The drug is provided pursuant to protocols established by the Centers for Disease Control and Prevention or public health guidelines established by the department of health and human services. (d) The pharmacist complies with subsection (3) and any other requirement established by rule
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<p>Minnesota</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA waived <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · HIV prevention (protocol) · Drug therapy management (CPA) <p>Authority:</p> <ul style="list-style-type: none"> · Protocol · CPA (See CPA FAQs for more info) 	<p>MN ST 151.01: Definitions. (Amended Effective 7/1/2024) * * *</p> <p>Subd. 27. Practice of pharmacy. "Practice of pharmacy" means: * * *</p> <p>(3) participation in clinical interpretations and monitoring of drug therapy for assurance of safe and effective use of drugs, including ordering and performing laboratory tests that are waived under the federal Clinical Laboratory Improvement Act of 1988, United States Code, title 42, section 263a et seq. A pharmacist may collect specimens, interpret results, notify the patient of results, and refer the patient to other health care providers for follow-up care and may initiate, modify, or discontinue drug therapy only pursuant to a protocol or collaborative practice agreement. A pharmacist may delegate the authority to administer tests under this clause to a pharmacy technician or pharmacy intern. A pharmacy technician or pharmacy intern may perform tests authorized under this clause if the technician or intern is working under the direct supervision of a pharmacist; * * *</p> <p>MN ST 151.37: Legend Drugs, Who May Prescribe, Possess. (Amended Effective 1/1/2025) * * *</p> <p>Subd. 17. Drugs for preventing the acquisition of HIV.</p> <p>(a) A pharmacist is authorized to prescribe and administer drugs to prevent the acquisition of human immunodeficiency virus (HIV) in accordance with this subdivision.</p> <p>(b) (Effective 05/25/2024) By January 1, 2025, the Board of Pharmacy shall develop a standardized protocol for a pharmacist to follow in prescribing the drugs described in paragraph (a). In developing the protocol, the board may consult with community health advocacy groups, the Board of Medical Practice, the Board of Nursing, the commissioner of health, professional pharmacy associations, and professional associations for physicians, physician assistants, and advanced practice registered nurses.</p> <p>(c) Before a pharmacist is authorized to prescribe a drug described in paragraph (a), the pharmacist must successfully complete a training program specifically developed for prescribing drugs for preventing the acquisition of HIV that is offered by a college of pharmacy, a continuing education provider that is accredited by the Accreditation Council for Pharmacy Education, or a program approved by the board. To maintain authorization to prescribe, the pharmacist shall</p>
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<p>Mississippi</p>	<p>Tests Allowed: <ul style="list-style-type: none"> · CLIA waived tests · Anything specified in CPA Treatments Allowed: <ul style="list-style-type: none"> · Anything specified in CPA Authority: <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) </p>	<p>MS ST 73-21-73: Definitions - Pharmacy Practice Act. * * *</p> <p>(dd) "Practice of pharmacy" means a health care service that includes, but is not limited to, the compounding, dispensing, and labeling of drugs or devices; interpreting and evaluating prescriptions; administering and distributing drugs and devices; the compounding, dispensing and labeling of drugs and devices; maintaining prescription drug records; advising and consulting concerning therapeutic values, content, hazards and uses of drugs and devices; initiating or modifying of drug therapy in accordance with written guidelines or protocols previously established and approved by the board * * * ordering lab work in accordance with written guidelines or protocols as defined by paragraph (nn) of this section; * * *</p> <p>(nn) "Written guideline or protocol" means an agreement in which any practitioner authorized to prescribe drugs delegates to a pharmacist authority to conduct specific prescribing functions in an institutional setting, or with the practitioner's individual patients, provided that a specific protocol agreement between the practitioner and the pharmacist is signed and filed as required by law or by rule or regulation of the board. * * *</p>
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<p>Missouri</p>	<p>Tests Allowed: · Anything in CPA</p> <p>Treatments Allowed: · Anything in CPA · HIV prophylaxis (Protocol) · Influenza (Protocol) · Group A Streptococcus (Protocol) · COVID-19 (Protocol)</p> <p>Authority: · Protocol · CPA (See CPA FAQs for more info)</p>	<p>MO ST 338.012: Pharmacists; Immunizations; Physicians; Physician Assistants; APRN; CPA; License Renewal; Prescriptive Authority; Dispensing; Administering.</p> <p>1. A pharmacist with a certificate of medication therapeutic plan authority may provide influenza, group A streptococcus, and COVID-19 medication therapy services pursuant to a statewide standing order issued by the director or chief medical officer of the department of health and senior services if that person is a licensed physician, or a licensed physician designated by the department of health and senior services. * * *</p> <p>MO ST 338.010: Practice of pharmacy defined. * * *</p> <p>1. The "practice of pharmacy" means * * * the prescribing and dispensing of any nicotine replacement therapy product under section 338.665 * * * the dispensing of HIV postexposure prophylaxis pursuant to section 338.730; * * *</p> <p>9. This section shall not be construed to allow a pharmacist to diagnose or independently prescribe pharmaceuticals. * * *</p> <p>13. Nothing in this section shall be construed to allow a pharmacist to make a therapeutic substitution of a pharmaceutical prescribed by a physician unless authorized by the written protocol or the physician's prescription order. * * *</p> <p>MO ADC 20-2220-6.025: HIV Post-Exposure Prophylaxis.</p> <p>(1) Definitions.</p> <p>(A) Authorized pharmacist—A Missouri-licensed pharmacist who has completed a training course or certificate program in HIV antiretroviral prophylaxis that includes training in CDC guidelines for HIV PEP. * * *</p> <p>(H) Protocol—For purposes of section 338.730, RSMo, and this rule, a protocol is defined as—</p> <p>1. A written protocol approved by a Missouri-licensed physician that meets the minimum standards in section (2) of this rule and agreed to by the authorized pharmacist who would be dispensing HIV PEP;</p> <p>2. A written protocol approved by the medical staff committee of a hospital or hospital system as defined by section 338.165, RSMo, that includes a Missouri-licensed physician;</p>
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<p>Montana</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · Any conditions that: <ul style="list-style-type: none"> · Are minor and self-limiting (with patient relationship) (independent) · Can be diagnosed by a CLIA-Waived test · Are an emergency <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>MT ST 37-7-106: Pharmacist prescribing authority -- exception. * * *</p> <p>(1) A pharmacist may prescribe a drug or device for a legitimate medical purpose as allowed under this section for a person with whom the pharmacist has a patient-prescriber relationship.</p> <p>(2) A pharmacist shall establish the patient-prescriber relationship through a documented patient evaluation that is adequate to:</p> <ul style="list-style-type: none"> (a) establish diagnoses, if the drug or device is being prescribed pursuant to subsection (3)(b); and (b) identify underlying conditions and contraindications to the treatment. <p>(3) A pharmacist's prescribing authority is limited to drugs and devices that are prescribed for conditions that:</p> <ul style="list-style-type: none"> (a) do not require a new diagnosis; or (b)(i) are minor and generally self-limiting; (ii) are diagnosed by or for which clinical decisions are made using a test that is waived under the federal clinical laboratory improvement amendments of 1988; or (iii) are patient emergencies. * * * <p>MT ST 37-7-306: Clinical pharmacist practitioner qualifications.</p> <p>(1) A clinical pharmacist practitioner is a licensed pharmacist in good standing who:</p> <ul style="list-style-type: none"> (a) is certified by the board, in concurrence with the board of medical examiners, to provide drug therapy management, including initiating, modifying, or discontinuing therapies, identifying and managing drug-related problems, or ordering tests under the direction or supervision of a prescriber; (b) has additional education, experience, or certification as required by the board in concurrence with the board of medical examiners; and (c) has in place a collaborative pharmacy practice agreement. <p>(2) Only a pharmacist certified by the board may legally be identified as a clinical pharmacist practitioner.</p> <p>MT ADC 24.174.524: Collaborative practice agreement requirements. * * *</p>
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<p>Nebraska</p>	<p>Tests Allowed: · Anything in CPA</p> <p>Treatments Allowed: · Anything in CPA</p> <p>Authority: · Protocol · CPA (See CPA FAQs for more info)</p>	<p>NE ST 38-2867.03: Pharmacist; practice agreement; notice; contents; form; pharmacist intern participations.</p> <p>(1) A pharmacist may enter into a practice agreement as provided in this section with a licensed health care practitioner authorized to prescribe independently to provide pharmaceutical care according to written protocols. The pharmacist shall notify the board of any practice agreement at the initiation of the agreement and at the time of any change in parties to the agreement or written protocols. The notice shall be given to both the Board of Pharmacy and the board which licensed the health care practitioner. The notice shall contain the name of each pharmacist participating in the agreement and each licensed health care practitioner authorized to prescribe independently participating in the agreement and a description of the therapy being monitored or initiated. * * *</p> <p>(5) A pharmacist intern may participate in a practice agreement without expressly being mentioned in the agreement if the pharmacist intern is supervised by a pharmacist who is a party to the agreement.</p>
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<p>Nevada</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived · HIV (independent, with training) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · HIV (independent, with training) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>NV ST 639.28085: Certain drugs for preventing acquisition of human immunodeficiency virus: Ordering and performing necessary laboratory tests for therapy; prescribing, dispensing and administering; coverage by liability insurance; protocol; regulations.</p> <p>1. To the extent authorized by federal law, a pharmacist who meets the requirements prescribed by the Board pursuant to subsection 2 may, in accordance with the requirements of the protocol prescribed pursuant to subsection 2:</p> <p>(a) Order and perform laboratory tests that are necessary for therapy that uses a drug approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus; and</p> <p>(b) Prescribe, dispense and administer any drug described in paragraph (a) to a patient. * * *</p> <p>NV ADC 639.777: Requirements for pharmacist to prescribe, dispense and administer.</p> <p>1. A pharmacist may prescribe, dispense and administer drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus pursuant to section 1 of Senate Bill No. 325, chapter 492, Statutes of Nevada 2021, at page 3201 (NRS 639.28085), if the pharmacist has completed a course of training concerning the prescribing, dispensing and administering of such drugs. The course must be: * * *</p> <p>NV ADC 639.779: Compliance with certain guidelines, laws and regulations; prescribing, dispensing and administering without laboratory testing; plan of care for treatment.</p> <p>1. Except as otherwise provided in subsection 2, a pharmacist shall comply with the publications adopted by reference in NAC 639.7785 and all applicable federal and state laws and regulations, including, without limitation, laws and regulations relating to the labeling of prescriptions and keeping records, when prescribing, dispensing and administering drugs approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus pursuant to NRS 639.28085.</p> <p>2. A pharmacist may prescribe, dispense and administer up to a 30-day supply of a drug approved by the United States Food and Drug Administration for preventing the acquisition of human immunodeficiency virus to continue treatment without completing the requirements for</p>
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<p>New Hampshire</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived · COVID-19 (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>NH ADC He-P 808.02: Scope; Laboratories and Laboratory Services.</p> <p>This part shall apply to any individual, agency, partnership, corporation, government entity, association or other legal entity operating a laboratory, except: * * *</p> <p>(e) All entities that perform waived testing for the sole purpose of risk assessment and which test results are not used for the diagnosis or treatment of disease; * * *</p> <p>NH ST 318:14-b: COVID-19 Testing.</p> <p>Pharmacists may administer COVID-19 testing if the following conditions are met:</p> <p>I. The pharmacist received adequate education and training to initiate, order, administer, and analyze COVID-19 test kits.</p> <p>II. The COVID-19 tests are administered at a pharmacy that holds the appropriate clinical certificate under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) and a New Hampshire laboratory license issued by the department of health and human services (DHHS) or DHHS waiver.</p> <p>III. The pharmacy creates and implements policies and procedures to address the collection, storage, transport, and analysis of samples collected as a result of administering and analyzing COVID-19 test kits. Such policies and procedures shall be in accordance with the manufacturer’s instructions and supplemented as needed.</p> <p>NH ST 318:16-a: Standards for Collaborative Pharmacy Practice. * * *</p> <p>IV. Collaborative pharmacy practice agreements shall meet the following general requirements:</p> <p>(a) Each protocol developed pursuant to the collaborative pharmacy practice agreement shall contain detailed direction concerning the services that the pharmacist may perform for patients. The protocol shall include, but not be limited to: * * **</p> <p>(2) The terms and conditions under which drug therapy may be implemented, modified, or discontinued. * * *</p>
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<p>New Jersey</p>	<p>Tests Allowed: · Anything in CPA</p> <p>Treatments Allowed: · Anything in CPA · Drug therapy management (CPA)</p> <p>Authority: · CPA (See CPA FAQs for more info)</p>	<p>NJ ADC 13:39-13.7: Scope of collaborative drug therapy management. * * *</p> <p>(b) Collaborative drug therapy management may include the collecting, analyzing, and monitoring of patient data, ordering or performing of laboratory tests based on the standing orders of a physician as set forth in the written collaborative practice protocols, consistent with (c) below; ordering of clinical tests based on the standing orders of a physician as set forth in the written collaborative practice protocols; modifying, continuing, or discontinuing drug or device therapy; and therapeutic drug monitoring with appropriate modification to dose, dosage regimen, dosage forms, or route of administration.</p> <p>(c) A pharmacist may perform laboratory tests that are granted waived status in accordance with the provisions of the "New Jersey Clinical Laboratory Improvement Act," P.L. 1975, c. , Department of Health and Senior Services' rules set forth at NJAC 8:44 and Department of Health and Senior Services CLIA Program requirements, available at: http://www.state.nj.us/health/phel/instruct116.shtml, provided the tests are consistent with the pharmacy practice area or disease state covered by the collaborative practice agreement.</p> <p>(d) The interpretation of clinical or laboratory tests under a written collaborative practice protocol shall be performed by a pharmacist only in direct consultation with a physician.</p> <p>(e) Collaborative drug therapy management shall not include therapeutic interchange at the time of dispensing without the prior, specific informed consent of the patient and the consent of the patient's physician. Written confirmation of the consent, which may be by electronic means, shall be maintained at the pharmacy practice site of the collaborating pharmacist. * * *</p>
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<p>New Mexico</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived · Influenza (independent) · Group A Streptococcus Pharyngitis (independent) · SARS-COV-2 (independent) · Uncomplicated urinary tract infection (independent) · HIV (independent) · TB (protocol) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · Influenza (independent) · Group A Streptococcus Pharyngitis (independent) · SARS-COV-2 (independent) · Uncomplicated urinary tract infection (independent) · HIV, limited to pre and post-exposure prophylaxis (independent) · Other emerging and existing public health threats identified by the board (independent) · TB (protocol) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases 	<p>NM ST 61-11-30: Testing, screening and treatment of health conditions.</p> <p>A. Pursuant to a board-approved protocol approved by the New Mexico medical board, a pharmacist may order, test, screen, treat and provide preventative services for health conditions or situations that include:</p> <ol style="list-style-type: none"> (1) influenza; (2) group A streptococcus pharyngitis; (3) SARS-COV-2; (4) uncomplicated urinary tract infection; (5) human immunodeficiency virus, limited to the provision of pre-exposure prophylaxis and post-exposure prophylaxis; and (6) other emerging and existing public health threats identified by the board or department of health during civil or public health emergencies. * * * <p>NM ADC 16.19.26.11: TB testing.</p> <p>A. PROTOCOL:</p> <ol style="list-style-type: none"> (1) Prescriptive authority for Tuberculosis (TB) testing shall be exercised solely in accordance with the written protocol for TB testing drug therapy approved by the board. (2) Any pharmacist exercising prescriptive authority for TB testing must maintain a current copy of the written protocol for TB testing approved by the board. * * * <p>C. AUTHORIZED DRUGS:</p> <ol style="list-style-type: none"> (1) TB skin antigen serum(s). (2) Prescriptive authority for TB testing shall be limited to those drugs delineated in the written protocol approved by the board. * * * <p>NM ADC 16.19.26.14: Prescribing dangerous drugs in conjunction with point-of-care testing.</p> <p>A. Protocol:</p> <ol style="list-style-type: none"> (1) Prescriptive authority shall be exercised solely in accordance with the written protocol for prescribing of dangerous drugs in conjunction with point-of-care testing (POCT) approved by the board.
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<p>New York</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA (Facility pharmacists ONLY) · CLIA-Waived · COVID-19 (independent) · Influenza (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · HIV post-exposure prophylaxis (independent) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>NY ADC 8.63.13: Non-patient specific orders and protocols. Orders to dispense drugs to prevent human immunodeficiency virus (HIV) infection. A licensed pharmacist may, pursuant to a non-patient specific order and protocol issued by a licensed physician in accordance with section 60.12 of this Title or by a certified nurse practitioner in accordance with subdivision (h) of section 64.5 of this Title, dispense up to a seven-day supply of HIV post-exposure prophylaxis drugs for the purpose of preventing HIV infection in persons who have potentially been exposed to HIV.</p> <p>NY ST Educ 6801: Definition of practice of pharmacy. * * *</p> <p>* 7. A licensed pharmacist is a qualified health care professional under section five hundred seventy-one of the public health law for the purposes of directing a limited service laboratory and ordering and administering COVID-19 and influenza tests authorized by the Food and Drug Administration (FDA), subject to certificate of waiver requirements established pursuant to the federal clinical laboratory improvement act of nineteen hundred eighty-eight. * * *</p> <p>NY ADC 8.63.10: Collaborative drug therapy management. * * *</p> <p>(b) Definitions. As used in this section: * * *</p> <p>(3) Collaborative drug therapy management means the performance of clinical services by a pharmacist relating to the review, evaluation and management of drug therapy to a patient, who is being treated by a physician for a specific disease or associated disease states, in accordance with a written agreement or protocol with a voluntarily participating physician and in accordance with the policies, procedures, and protocols of the facility.</p> <p>(4) Facility means:</p> <p>(i) a teaching hospital or general hospital, including any diagnostic center, treatment center, or hospital-based out-patient department as defined in section 2801 of the Public Health Law; or</p> <p>(ii) a nursing home with an on-site pharmacy staffed by a licensed pharmacist; provided, however, for the purposes of this section the term facility shall not include dental clinics, dental dispensaries, residential health care facilities and rehabilitation centers. * * *</p> <p>(d) Requirements for collaborative drug therapy management written agreements or protocols. A</p>
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<p>North Carolina</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · COVID-19 Therapeutics (independent) · HIV post-exposure prophylaxis (protocol) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · Protocol · CPA (See CPA FAQs for more info) 	<p>NC Subreg BoP Memo: 2021-11-02 COVID-19 Therapeutics. COVID Therapeutic. A “COVID-19 therapeutic” must be one authorized, approved, licensed, or cleared by the FDA. A pharmacist may order and administer, and a qualified pharmacy technician or intern may administer, a COVID-19 therapeutic if by subcutaneous, intramuscular, or oral route. * * *</p> <p>State Standing Order. Although the PREP Act declaration is an independent grant of authority to pharmacists, on September 2, Governor Cooper issued Executive Order 232, which directs State Health Director Betsey Tilson to issue a statewide standing order to expand access to monoclonal antibody treatment for COVID-19: https://governor.nc.gov/media/2723/open When Director Tilson issues that standing order, Board of Pharmacy staff will update this guidance document. * * *</p> <p>NC Subreg 2023-07-21 HIV PEP Protocol: North Carolina Medical Board and North Carolina Board of Pharmacy Protocols for Post Exposure Prophylaxis (PEP) for Human Immunodeficiency Virus (HIV).</p> <p>Pursuant to S.L. 2021-110, these protocols adopted by the North Carolina Medical Board and the North Carolina Board of Pharmacy authorize immunizing pharmacists practicing pharmacy in the state of North Carolina and licensed by the North Carolina Board of Pharmacy to dispense, deliver, or administer PEP therapy products as directed below. * * *</p> <p>NC Subreg Pharmacist FAQs: Frequently Asked Questions for Pharmacists on Pharmacies' Use of CLIA-Waived Rapid Diagnostic Tests.</p> <p>Q: What is the Board’s position on pharmacies performing “rapid diagnostic” and other “CLIA-waived” tests?</p> <p>A: Board staff have received numerous questions about pharmacies' ability to perform "rapid diagnostic" and other "CLIA-waived" tests.</p> <p>Some point-of-care tests for things like streptococcus infection, blood glucose levels, and cholesterol levels are approved by the FDA as so-called “CLIA-waived” tests. CLIA refers to the Clinical Laboratory Improvement Amendments Act, a federal statute that, as the name suggests,</p>
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<p>North Dakota</p>	<p>Tests Allowed: (independent)</p> <ul style="list-style-type: none"> · Cholesterol · Bilirubin. · Blood. · Glucose. · Ketone. · Leukocyte. · Nitrate. · Potential of hydrogen (pH). · Specific gravity. · Urobilinogen. · Fecal occult blood by any accepted method. · Ovulation test by visual color comparison. · Qualitative urine pregnancy test by visual color comparison. · Erythrocyte sedimentation rate by any accepted nonautomated method. · Whole blood glucose by any accepted single analyte method. · Spun microhematocrit by any accepted method. · Hemoglobin by single analyte instrument or manual copper sulfate method. · Helicobacter pylori. 	<p>ND ST 43-15-01: Definitions. * * *</p> <p>24. "Practice of pharmacy" means * * * the participation in interpreting and applying pharmacokinetic data and other pertinent laboratory data to design safe and effective drug dosage regimens; * * * the performance of laboratory tests to provide pharmaceutical care services which are waived under the Federal Clinical Laboratory Improvement Act of 1988 [Pub. L.100-578, section 2; 102 Stat. 2903; 42 U.S.C. 263a et seq.], as amended; * * *</p> <p>ND ST 43-15-25.3: Approved laboratory tests.</p> <p>Approved laboratory tests are the following waived screening tests: glucose monitoring devices (FDA cleared/home use) 9221, cholesterol 1020, HDL cholesterol 2550, triglyceride 6118, glycosylated hemoglobin (Hgb A1C) 2204 , and SARS-CoV-2. Additional tests may be added to this list as jointly determined by the board and the North Dakota board of medicine.</p> <p>ND ADC 61-04-10-06: Exempt tests and methods. (Amended Effective 01/01/2023)</p> <p>An individual licensed or registered by the board, performing the following food and drug administration-waived tests and using the following methods, is exempt from the provisions of North Dakota Century Code chapter 43-48:</p> <ol style="list-style-type: none"> 1. Total cholesterol, HDL cholesterol, LDL cholesterol, and triglycerides test by any accepted method. 2. Any of the following tests by nonautomated or automated urinalysis by dipstick: <ol style="list-style-type: none"> a. Bilirubin. b. Blood. c. Glucose. d. Ketone. e. Leukocyte. f. Nitrate. g. Potential of hydrogen (pH). h. Protein.
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<p>Ohio</p>	<p>Tests Allowed: <ul style="list-style-type: none"> · Anything in Consult Agreement · CLIA-waived tests Treatments Allowed: <ul style="list-style-type: none"> · Anything in Consult Agreement Authority: <ul style="list-style-type: none"> · Consult Agreement (See CPA FAQs for more info) </p>	<p>OH ST 4729.42: Unauthorized conduct by pharmacy technicians. (A) A pharmacist may order and administer diagnostic tests for COVID-19 and tests for COVID-19 antibodies. (B) Both of the following may, under the direct supervision of a pharmacist, administer diagnostic tests for COVID-19 and tests for COVID-19 antibodies: (1) A pharmacy intern; (2) A certified pharmacy technician.</p> <p>OH ADC 4729:1-3-01: Pharmacist administration of diagnostic tests. (A) A pharmacist may administer clinical laboratory improvement amendments (CLIA) waived diagnostic laboratory testing provided the following conditions are met: (1) The pharmacy or facility licensed as a terminal distributor of dangerous drugs is certified by the United States department of health and human services (HHS), as a clinical laboratory through the CLIA; (2) The pharmacy or facility licensed as a terminal distributor of dangerous drugs has obtained a CLIA certificate of waiver from HHS; and (3) The responsible person of the terminal distributor of dangerous drugs and the terminal distributor of dangerous drugs ensures and documents that all pharmacists conducting CLIA waived tests pursuant to this rule receive appropriate training to conduct testing in a safe and effective manner. (B) A pharmacist may evaluate the results of a test administered under this rule when advising a patient or a health care professional treating a patient if the test relates to the patient's drug therapy. (C) This rule applies only to the administration and evaluation of laboratory testing by individuals licensed or registered in accordance with Chapter 4729. of the Revised Code.</p> <p>OH ST 4729.39: Consult agreement with physicians. * * * (C) Before entering into a consult agreement, all of the following conditions are must be met: (1) Each practitioner must have an ongoing practitioner-patient relationship with each patient</p>
<p>Oklahoma</p>	<p>Law is silent.</p>	

<p>Oregon</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-waived · HIV (protocol) · SARS-CoV-2 (protocol) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · SARS-CoV-2 antivirals (protocol) · HIV pre and post-exposure Prophylaxis (protocol) <p>Authority:</p> <ul style="list-style-type: none"> · Protocol · CPA (See CPA FAQs for more info) 	<p>OR ADC 855-115-0345: Services: Prescribing - Protocol Compendium. (Permanent Rule Effective 12/17/2024)</p> <p>A Pharmacist may prescribe, according to OAR 855-115-0330 and OAR 855-115-0335, FDA-approved drugs and devices listed in the following compendium, pursuant to a statewide drug therapy management protocol.</p> <p>(1) Continuation of therapy including emergency refills of insulin and early refills of opioid use disorder medications (v. 08/2024)</p> <p>(2) Conditions</p> <p>(a) Cough and cold symptom management</p> <p>(A) Benzonatate (v. 06/2021);</p> <p>(B) Short-acting beta agonists (v. 06/2021);</p> <p>(C) Intranasal corticosteroids (v. 06/2021);</p> <p>(b) COVID-19 Antigen Self-Test (v. 12/2021);</p> <p>(c) SARS-CoV-2 Antiviral (v. 08/2024) * * *</p> <p>OR ST 689.704: Preexposure and post-exposure antiretroviral therapies; HIV tests; rules. * * *</p> <p>(2) A pharmacist may prescribe, dispense and administer:</p> <p>(a) Preexposure prophylactic antiretroviral therapies; and</p> <p>(b) In accordance with any rules adopted by the State Board of Pharmacy under ORS 689.645, post-exposure prophylactic antiretroviral therapies. * * *</p> <p>OR Subreg 2023-06-13 HIV PEP Protocol: HIV Post-Exposure Prophylaxis (PEP).</p> <p>AUTHORITY and PURPOSE:</p> <ul style="list-style-type: none"> • Per ORS 689.645, a pharmacist may provide patient care services pursuant to a statewide drug therapy management protocol. • Following all elements outlined in OAR 855-020-0110, a pharmacist licensed and located in Oregon may prescribe post-exposure prophylaxis (PEP) drug regimen. * * * <p>OR Subreg 2023-06-13 HIV PrEP Protocol: HIV Pre-Exposure Prophylaxis (PrEP).</p> <p>AUTHORITY and PURPOSE:</p>
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<p>Pennsylvania</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · COVID-19 (waiver certificate) · Influenza (waiver certificate) · Respiratory syncytial virus (waiver certificate) · Streptococcal infections (waiver certificate) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases with CLIA certificate · CPA (See CPA FAQs for more info) 	<p>PA ST 169-1003: Clinical laboratory certificate. (New Effective 11/14/2024)</p> <p>(a) Certificate.--If a pharmacy holds a valid certificate of waiver issued by the Centers for Medicare and Medicaid Services, a pharmacy or pharmacist may order and perform laboratory examinations and procedures for COVID-19, influenza, respiratory syncytial virus and streptococcal infections authorized or approved by the United States Food and Drug Administration under the Clinical Laboratory Improvement Amendments of 1988 (Public Law 100-578, 102 Stat. 2903) and shall be exempt from the requirements under section 3 of the act of September 26, 1951 (P.L.1539, No.389), known as The Clinical Laboratory Act. * * *</p> <p>PA ADC 49-27.302: Collaborative agreement for management of drug therapy in a non-institutional setting. * * *</p> <p>(f) The collaborative agreement must contain: * * *</p> <p>(4) A statement identifying the types of decisions regarding the management of drug therapy that the pharmacist is authorized to make within the physician’s scope of practice and types of management of drug therapy authorized.</p> <p>(5) A statement identifying the terms under which a pharmacist providing the management of drug therapy is permitted to: adjust the drug regimen, the drug strength and the frequency of administration or the route of administration; administer drugs; order laboratory tests; and order and perform other diagnostic tests necessary in the management of drug therapy without prior written or oral consent by the collaborating physician. This paragraph does not provide prescriptive authority to a pharmacist. * * *</p> <p>(k) A pharmacist who is party to a collaborative agreement authorizing the management of drug therapy shall: * * *</p> <p>(2) Initiate the management of drug therapy only upon a written referral to the pharmacist from the physician . The written referral must include the minimum frequency in which the pharmacist shall conduct the management of the drug therapy in person. * * *</p>
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<p>Rhode Island</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-waived <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anti-infectives (Independent) · Anti-HIV (Independent) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>RI ST 27-41-98: Dispensing and Administration of HIV PrEP or PEP Drugs. (Amended Effective 01/01/2024) * * *</p> <p>(a) Notwithstanding any provision of law to the contrary and as authorized by the Rhode Island board of pharmacy (the “board”) in accordance with rules and regulations adopted under subsection (e) of this section, a pharmacist may prescribe, dispense and administer HIV PrEP or PEP drugs (hereinafter sometimes referred to as “prevention drugs”) as described in § 27-18-91(a) pursuant to a standing order or collaborative practice agreement or to protocols developed by the board for when there is no prescription drug order, standing order or collaborative practice agreement in accordance with the requirements in this subsection and may also order laboratory testing for HIV infection as necessary. * * *</p> <p>RI ADC 216-40-15-1.11.3: Administration of Medications.</p> <p>A. In accordance with R.I. Gen. Laws § 5-19.1-1, a pharmacist can administer medications in the drug classes listed in § 1.11.3(B) of this Part, to any age group, pursuant to a valid prescription or physician-approved protocol, including, but not limited to, a standing order, and under the following conditions:</p> <ol style="list-style-type: none"> 1. The route(s) are FDA approved; and 2. The medication is administered privately. <ol style="list-style-type: none"> a. The pharmacist must administer the medication in an area that provides for patient privacy, particularly for medications administered to sites that require removal of clothing (e.g., intramuscular injections into the gluteal muscles). <p>B. A pharmacist is authorized to administer medications in the following drug classes:</p> <ol style="list-style-type: none"> 1. Anti-infectives 2. Anti-HIV * * * <p>RI ST 5-19.1-2: Definitions. * * *</p> <p>(p) "Limited-function test" means those tests listed in the federal register under the Clinical Laboratory Improvement Amendments of 1988 (CLIA) as waived tests. For the purposes of this chapter, limited-function test shall include only the following: blood glucose, hemoglobin A1c,</p>
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<p>South Carolina</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived · COVID (independent) · Flu (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA appropriate to their training <p>Authority:</p> <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) 	<p>SC ST 40-43-30: Definitions for Pharmacy Practice Act. (Amended Effective 07/02/2024)</p> <p>(1) "Administer" means the direct application of a drug or device pursuant to a lawful order of a practitioner to the body of a patient by injection, inhalation, ingestion, topical application, or any other means. * * *</p> <p>(49) "Practice of pharmacy" means the:</p> <ul style="list-style-type: none"> (a) interpretation, evaluation, and dispensing of prescription drug orders in the patient's best interest; (b) participation in drug and device selection, drug administration, prospective drug reviews, and drug or drug-related research; (c) provision of patient counseling and the provision of those acts or services necessary to provide pharmacy care and drug therapy management; (d) responsibility for compounding and labeling of drugs and devices, (except labeling by a manufacturer, repackager, or distributor or nonprescription drugs and commercially packaged legend drugs and devices) proper and safe storage of drugs and devices and maintenance of proper records for them; (e) initiation, ordering, and administration of flu and COVID tests. Pharmacists may delegate the task of administering tests provided for in this subsection to a trained pharmacy technician or pharmacy intern, but the pharmacist must perform any interpretation of the results; (f) reporting of a person's flu or COVID test results and the referral of that patient for follow-up care to the health care provider identified by the patient or if none is identified, to an appropriate health care provider; or (g) the offering or performing of those acts, services, operations, or transactions necessary in the conduct, operation, education, management, and control of pharmacy. * * *
<p>South Dakota</p>	<p>Law is silent.</p>	

<p>Tennessee</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA-Waived · COVID-19 (independent) · Influenza (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · COVID-19 (independent) · Influenza (independent) · Ivermectin provision (independent) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>TN ST 63-10-224: Provision of ivermectin by pharmacists. (a) A pharmacist, in good faith, may provide ivermectin to a patient who is eighteen (18) years of age or older pursuant to a valid collaborative pharmacy practice agreement containing a non-patient-specific prescriptive order and standardized procedures developed and executed by one (1) or more authorized prescribers. * * *</p> <p>TN ST 63-10-204: Definitions. (Amended effective 05/01/2024)</p> <p>(1) "Administer" means the direct application of a drug to a patient or research subject by injection, inhalation, ingestion, topical application or by any other means; * * *</p> <p>(39) (A) "Practice of pharmacy" * * *</p> <p style="padding-left: 40px;">(iii) Participation in drug, dietary supplement and device selection, storage, distribution and administration; * * *</p> <p style="padding-left: 40px;">(vii) Provision of patient care services and activities pursuant to a collaborative pharmacy practice agreement;</p> <p style="padding-left: 40px;">(ix) Those professional acts, professional decisions or professional services necessary to maintain all areas of a patient's pharmacist-provided care; * * *</p> <p>(C) Notwithstanding subdivision (39)(B), "practice of pharmacy" includes the issuing of a prescription or medical order of the following drugs, drug categories, or devices, excluding controlled substances, that are issued in accordance with the product's federal food and drug administration-approved labeling or guidelines of the federal centers for disease control and prevention that are limited to:</p> <p style="padding-left: 40px;">(i) Antivirals for influenza and COVID-19 that are waived under the federal Clinical Laboratory Improvement Amendments of 1988 (CLIA) (42 U.S.C. § 263a), upon completion of a test that is used to guide diagnosis or clinical decision-making; * * *</p> <p>TN ADC 1200-06-03-.17: Waived testing.</p> <p>(1) Definition: "Waived" means those laboratory tests, as defined by the Board, which may be performed by individuals not licensed under the Medical Laboratory Act, and which pose no reasonable risk of harm if performed incorrectly.</p>
<p>Texas</p>	<p>Law is silent.</p>	

<p>Utah</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA Waived <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · HIV pre and post-exposure prophylaxis <p>Authority:</p> <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) 	<p>UT ST 58-17b-627: Prescription of drugs or devices by a pharmacist.</p> <p>(1) Beginning January 1, 2022, a pharmacist may prescribe a prescription drug or device if: * * *</p> <p>(3) The division shall make rules in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to:</p> <p>(a) designate the prescription drugs or devices that may be prescribed by a pharmacist under this section, beginning with prescription drugs or devices that address a public health concern that is designated by the Department of Health, including:</p> <ul style="list-style-type: none"> (i) post-exposure HIV prophylaxis; (ii) pre-exposure HIV prophylaxis; <p>UT ADC R444-1-3: Approval for Clinical Laboratories - Administration. * * *</p> <p>(2) The department shall approve a facility to operate as a laboratory for particular specialties or subspecialties upon the facility's demonstrating that it has satisfied the requirements for approval, this includes:</p> <p>(a) the facility must hold a valid federal Clinical Laboratory Improvement Act (CLIA) certificate under 42 C.F.R. part 493, 1990 edition, which is incorporated by reference, for the specialty or subspecialty associated with the testing covered by this rule; and * * *</p> <p>UT ST 58-17b-102: Definitions. * * *</p> <p>(45)(a) "Pharmaceutical care" means carrying out the following in collaboration with a prescribing practitioner, and in accordance with division rule:</p> <ul style="list-style-type: none"> (i) designing, implementing, and monitoring a therapeutic drug plan intended to achieve favorable outcomes related to a specific patient for the purpose of curing or preventing the patient's disease; (ii) eliminating or reducing a patient's symptoms; or (iii) arresting or slowing a disease process. <p>(b) "Pharmaceutical care" does not include prescribing of drugs without consent of a prescribing practitioner. * * *</p>
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<p>Vermont</p>	<p>Tests Allowed: · Anything in CPA, including: · COVID-19</p> <p>Treatments Allowed: · Anything in CPA</p> <p>Authority: · CPA (See CPA FAQs for more info)</p>	<p>VT ST 26-2023: Clinical Pharmacy: Prescribing. (Section (b)(2)(A)(xi) Amended Effective 09/01/2023; Section (b)(2)(A)(v), (vii), (viii) and (xi) Amended Effective 06/20/2023) * * *</p> <p>(b) A pharmacist may prescribe in the following contexts:</p> <p>(1) Collaborative practice agreement. A pharmacist may prescribe, for the patient or patients of a prescribing practitioner licensed pursuant to this title, within the scope of a written collaborative practice agreement with that primary prescriber.</p> <p>(A) The collaborative practice agreement shall require the pharmacist and collaborating practitioner to contemporaneously notify each other of any change in the patient’s pharmacotherapy or known medical status.</p> <p>(B) Under a collaborative practice agreement, a pharmacist may select or modify antibiotic therapy for a diagnosed condition under the direction of the collaborating practitioner.</p> <p>(2) State protocol.</p> <p>(A) A pharmacist may prescribe, order, or administer in a manner consistent with valid State protocols that are approved by the Commissioner of Health after consultation with the Director of Professional Regulation and the Board and the ability for public comment: * * *</p> <p>(xi) tests for COVID-19 for individuals by entities holding a Certificate of Waiver pursuant to the Clinical Laboratory Amendments of 1988 (42 U.S.C. § 263a). If a test for COVID-19, prescribed, ordered, or administered by a pharmacist in accordance with this section and the resulting State protocol incidentally detects influenza or human respiratory syncytial virus, a pharmacist shall advise the individual tested that the results indicate influenza or human respiratory syncytial virus infection and recommend to the individual to seek further care from an appropriate health care provider. * * *</p>
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<p>Virginia</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Group A Streptococcus bacteria infection (independent with established patient relationship) · Influenza virus infection (independent with established patient relationship) · COVID-19 virus infection (independent with established patient relationship) · Urinary tract infection (independent with established patient relationship) <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>VA ST 54.1-3303.1: Initiating of treatment with and dispensing and administering of controlled substances by pharmacists.</p> <p>A. Notwithstanding the provisions of § 54.1-3303, a pharmacist may initiate treatment with, dispense, or administer the following drugs, devices, controlled paraphernalia, and other supplies and equipment to persons 18 years of age or older with whom the pharmacist has a bona fide pharmacist-patient relationship and in accordance with a statewide protocol developed by the Board in collaboration with the Board of Medicine and the Department of Health and set forth in regulations of the Board: * * *</p> <p>9. Controlled substances for the prevention of human immunodeficiency virus, including controlled substances prescribed for pre-exposure and post-exposure prophylaxis pursuant to guidelines and recommendations of the Centers for Disease Control and Prevention; * * *</p> <p>11. Controlled substances or devices for the initiation of treatment of the following diseases or conditions for which clinical decision making can be guided by a clinical test that is classified as waived under the federal Clinical Laboratory Improvement Amendments of 1988: Group A Streptococcus bacteria infection, influenza virus infection, COVID-19 virus infection, and urinary tract infection; * * *</p> <p>VA ST 54.1-3300.1: Participation in collaborative agreements; regulations to be promulgated by the Boards of Medicine and Pharmacy. * * *</p> <p>C. Collaborative agreements may include the implementation, modification, continuation, or discontinuation of drug therapy pursuant to written or electronic protocols, provided implementation of drug therapy occurs following diagnosis by the prescriber; the ordering of laboratory tests; or other patient care management measures related to monitoring or improving the outcomes of drug or device therapy. No such collaborative agreement shall exceed the scope of practice of the respective parties. Any pharmacist who deviates from or practices in a manner inconsistent with the terms of a collaborative agreement shall be in violation of § 54.1-2902; such violation shall constitute grounds for disciplinary action pursuant to §§ 54.1-2400 and 54.1-3316.</p> <p>D. Collaborative agreements may only be used for conditions which have protocols that are</p>
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<p>Washington</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived · COVID-19 (independent) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Anything in CPA <p>Authority:</p> <ul style="list-style-type: none"> · Independent in certain cases · CPA (See CPA FAQs for more info) 	<p>WA ADC 246-945-350: Collaborative drug therapy agreements. * * *</p> <p>(b) A statement of the type of prescriptive authority decisions which the pharmacist is authorized to make, which includes:</p> <p>(i) A statement of the types of diseases, drugs, or drug categories involved, and the type of prescriptive authority activity (e.g., modification or initiation of drug therapy) authorized in each case. * * *</p> <p>WA ST 70.42.030: Waiver of license — Conditions.</p> <p>(1) As a part of the application for licensure, a test site may request a waiver from licensure under this chapter if the test site performs only examinations which are determined to have insignificant risk of an erroneous result, including those which (a) are approved by the federal food and drug administration for home use; (b) are so simple and accurate as to render the likelihood of erroneous results negligible; or (c) pose no reasonable risk of harm to the patient if performed incorrectly. * * *</p> <p>(4) Any test site which has received a waiver under subsection (3) of this section shall report to the department any changes in the type of tests it intends to perform thirty days in advance of the changes. In no case shall a test site with a waiver perform tests which require a license under this chapter.</p> <p>WA Subreg 2021-01-22 PQAC Plan 19 (Update #17): 2019 Novel Coronavirus (COVID-19) Response Packet 'A Live Plan'. * * *</p> <p>COVID-19 Testing Information as it Relates to the Practice of Pharmacy in Washington State Pharmacist Scope of Practice in WA State:</p> <p>As part of its business meeting on April 24, 2020, the Pharmacy Quality Assurance Commission (PQAC) clarified some of the following as it relates to Washington licensed pharmacists ordering, administering and reporting results of COVID-19 testing to patients:</p> <ul style="list-style-type: none"> • Screening for patients receiving COVID-19 tests – A pharmacist or pharmacy intern, under the supervision of a pharmacist, may conduct this screening. It is not within the scope of practice for a Pharmacy Technician to perform discretionary functions. A Pharmacy Technician may only
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<p>West Virginia</p>	<p>Tests Allowed: · Anything in CPA</p> <p>Treatments Allowed: · Anything in CPA</p> <p>Authority: · CPA (See CPA FAQs for more info)</p>	<p>WV ST 30-5-19: Collaborative pharmacy practice agreement and practice notification. * * *</p> <p>(b) A collaborative pharmacy practice agreement may authorize a pharmacist to provide drug therapy management. In instances where drug therapy is discontinued, the pharmacist shall notify the treating physician of the discontinuance in the time frame and in the manner established by joint legislative rules. Each protocol developed, pursuant to the collaborative pharmacy practice agreement, shall contain detailed direction concerning the services that the pharmacists may perform for that patient. The protocol shall include, but need not be limited to:</p> <ol style="list-style-type: none"> (1) The specific drug or drugs to be managed by the pharmacist; (2) The terms and conditions under which drug therapy may be implemented, modified, or discontinued; (3) The conditions and events upon which the pharmacist is required to notify the physician; (4) The laboratory tests that may be ordered in accordance with drug therapy management; and (5) The mutually agreed upon patient evaluations the pharmacist may conduct. * * * <p>(d) Collaborative pharmacy agreements may not include the management of controlled substances. * * *</p> <p>WV ADC 11-8-4: Collaborative Pharmacy Practice Agreements. * * *</p> <p>4.7. Collaborative practice agreements shall incorporate protocols containing detailed direction concerning the services that collaborating pharmacists may perform for patients and the role of collaborating physicians. The protocols shall, at a minimum, include:</p> <ol style="list-style-type: none"> 4.7.1. The specific drug or drugs to be managed by the collaborating pharmacist, and the terms and conditions under which drug therapy may be implemented, modified, or discontinued, including: <ol style="list-style-type: none"> 4.7.1.a. The protocols may authorize implementation or modification of drug dosages based on symptoms or laboratory or patient evaluations defined in the protocol; * * * 4.7.3. The laboratory tests that may be ordered in accordance with drug therapy management, including:
<p>Wisconsin</p>	<p>Tests Allowed: · Anything in CPA</p> <p>Treatments Allowed: · Anything in CPA</p> <p>Authority: · CPA (See CPA FAQs for more info)</p>	<p>WI ST 450.033: Services delegated by physician.</p> <p>A pharmacist may perform any patient care service delegated to the pharmacist by a physician, as defined in s. 448.01 (5).</p>

<p>Wyoming</p>	<p>Tests Allowed: <ul style="list-style-type: none"> · Anything in CPA · CLIA-Waived Treatments Allowed: <ul style="list-style-type: none"> · Anything in CPA Authority: <ul style="list-style-type: none"> · CPA (See CPA FAQs for more info) </p>	<p>WY ADC 059-0001-2: General Practice of Pharmacy Regulations. * * *</p> <p>Section 3. Definitions.</p> <p>(a) “Collaborative pharmacy practice” is that practice of pharmacy whereby one or more pharmacists have jointly agreed, on a voluntary basis, to work in conjunction with one or more practitioners in collaboration to provide patient care services to achieve optimal medication use and desired patient outcomes.</p> <p>(b) “Collaborative practice agreement” is a written and signed agreement between one or more pharmacists and one or more practitioners that defines a collaborative practice. * * *</p> <p>Section 16. Collaborative Pharmacy Practice</p> <p>(a) Collaborative pharmacy practice is where one (1) or more pharmacists jointly agree to work under a protocol authorized by one (1) or more prescribers to provide patient care and drug therapy management services not otherwise permitted to be performed by a pharmacist under specified conditions.</p> <p>(b) A collaborative practice agreement must be in place prior to engaging in collaborative pharmacy practice.</p> <p>(c) The collaborative practice agreement must explain the scope of the pharmacist’s practices and shall be updated upon any changes in the scope or agreement of practices. * * *</p> <p>Section 17. Medication Therapy Management</p> <p>Medication Therapy Management (MTM) services may be performed without a collaborative practice agreement. These services may include, but are not limited to:</p> <ul style="list-style-type: none"> (a) Such other patient care services as may be allowed by law; (b) Ordering, or performing laboratory assessments; and (c) Evaluating the response of the patient to therapy, as it directly relates to MTM, provided: <ul style="list-style-type: none"> (i) The pharmacy or service is certified by the US Department of Health and Human Services, as a clinical laboratory under the Clinical Laboratory Improvement Amendments (CLIA); <p>or</p> <ul style="list-style-type: none"> (ii) The tests do not otherwise require a physician’s order and the pharmacy or service has
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<p>Federal</p>	<p>Tests Allowed:</p> <ul style="list-style-type: none"> · CLIA Tests · COVID-19 (PREP Act) <p>Treatments Allowed:</p> <ul style="list-style-type: none"> · Law is silent. <p>Authority:</p> <ul style="list-style-type: none"> · CLIA · PREP Act (See FDA guidance for more info) 	<p>42 CFR 493.15: Laboratories performing waived tests. * * *</p> <p>(c) Certificate of waiver tests. A laboratory may qualify for a certificate of waiver under section 353 of the PHS Act if it restricts the tests that it performs to one or more of the following tests or examinations (or additional tests added to this list as provided under paragraph (d) of this section) and no others:</p> <ol style="list-style-type: none"> (1) Dipstick or Tablet Reagent Urinalysis (non-automated) for the following: <ol style="list-style-type: none"> (i) Bilirubin; (ii) Glucose; (iii) Hemoglobin; (iv) Ketone; (v) Leukocytes; (vi) Nitrite; (vii) pH; (viii) Protein; (ix) Specific gravity; and (x) Urobilinogen. (2) Fecal occult blood-non-automated; (3) Ovulation tests—visual color comparison tests for human luteinizing hormone; (4) Urine pregnancy tests—visual color comparison tests; (5) Erythrocyte sedimentation rate—non-automated; (6) Hemoglobin—copper sulfate—nonautomated; (7) Blood glucose by glucose monitoring devices cleared by the FDA specifically for home use; (8) Spun microhematocrit; and (9) Hemoglobin by single analyte instruments with self-contained or component features to perform specimen/ reagent interaction, providing direct measurement and readout. * * *
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