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OHIO LEGISLATIVE SERVICE COMMISSION

Office of Research
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Office

S.B. 303
133rd General Assembly

Fiscal Note & Local Impact Statement

[Click here for S.B. 303's Bill Analysis](#)

Version: As Reported by Senate Local Government, Public Safety, & Veterans Affairs

Primary Sponsors: Sens. M. Huffman and Manning

Local Impact Statement Procedure Required: No

Robert Meeker, Budget Analyst, and other LBO staff

Highlights

- For the State Board of Pharmacy, the State Medical Board, and the Ohio Board of Nursing, the bill will create one-time rule adoption costs and related potential ongoing annual compliance and enforcement costs.
- The bill's provision permitting health plan issuers to provide payment or reimbursement for services provided by a pharmacist has the potential to decrease costs for the state and political subdivisions to provide health benefits to employees and their dependents.
- The bill permits Medicaid to cover a health care service that a pharmacist provides to a Medicaid recipient under a consult agreement with a physician assistant and certain nursing professionals.

Detailed Analysis

The bill broadens: (1) the list of practitioners with whom a pharmacist may enter into a consult agreement to include certain physician assistants, clinical nurse specialists, certified nurse-midwives, or certified nurse practitioners, and (2) the tests that a pharmacist may order and evaluate as part of a patient's drug therapy under a consult agreement to include laboratory and diagnostic tests. To effect those changes, the bill allows health plan insurers and Medicaid to pay the costs of such services, and requires the State Board of Pharmacy, the State Medical Board, and the Ohio Board of Nursing to promulgate governing rules.

State Board of Pharmacy

The bill creates the potential for an increase in the number of consult agreements overall, as well as an increase in pharmacist activities regulated by the State Board of Pharmacy vis-a-vis testing orders.

As under current law, a pharmacist that fails to follow the procedures regarding consult agreements and testing orders is subject to the Board's disciplinary procedures. The disciplinary actions include revoking, suspending, or limiting the pharmacist's or intern's identification card; placing the pharmacist's or intern's identification card on probation; refusing to grant or renew the pharmacist's or intern's identification card; or imposing a monetary penalty or forfeiture not to exceed \$500. Any money collected is credited to Fund 4K90, the Occupational Licensing and Regulatory Fund.

In FY 2019, the Board took administrative action against fewer than 300 licensees,¹ indicating that disciplinary actions by the Board for any reason are relatively infrequent in the context of administering over 70,000 active licenses annually. This suggests that the bill's expansion of consult agreements and allowable actions by a pharmacist will have no discernible ongoing effect on the Board's annual operating costs or related revenue generation. The State Board of Pharmacy is expected to use existing staff and appropriated resources to absorb any additional administrative expenses incurred to comply with the bill's rulemaking requirements.

State Medical Board and Ohio Board of Nursing

The bill makes conforming changes to the laws governing the State Medical Board and the Ohio Board of Nursing's authority: (1) to adopt rules for their licensees to follow when entering into consult agreements, and (2) to impose discipline for licensees who fail to comply with agreement terms. Under the bill, both boards could experience administrative costs for rule promulgation. Additionally, the boards could realize an increase in investigative and disciplinary costs for any complaints or violations. The total cost will depend on the number and scope of complaints/violations.

Health insurer payments to pharmacists

Under existing law, a health plan issuer may provide payment or reimbursement for services provided by a pharmacist, under specified conditions, if the pharmacist provided a health care service under a consult agreement with a physician. The bill expands this authorization such that a payment or reimbursement may be provided to a pharmacist who provided a health care service to a patient in accordance with R.C. Chapter 4729, including managing an individual's drug therapy under a consult agreement with: (1) a physician assistant if authorized by a supervising physician, or (2) a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner if authorized by a collaborating physician. The conditions under which this is authorized are generally the same as under existing law for such consult agreements. The bill applies to health insuring corporations (HICs), sickness and accident insurers, public employee benefit plans, and multiple employer welfare arrangements that are delivered, issued for delivery, or renewed in Ohio.

¹ In addition to pharmacists, administrative actions by the State Board of Pharmacy may be taken against pharmacy technicians, pharmacy interns, terminal distributors of dangerous drugs, wholesale distributors of dangerous drugs, users of the Ohio Automated Rx Reporting System (OARRS), and other individuals and entities licensed by the Board.

This provision is permissive. It has the potential to decrease costs for the state and local governments to provide health benefits to employees and their dependents. LBO does not have an estimate of the magnitude of any such cost decrease.

Medicaid payments to pharmacists

Under existing law, Medicaid may cover a health care service that a pharmacist provides to a Medicaid recipient in accordance with R.C. Chapter 4729, including any of the following services: managing drug therapy under a consult agreement with a physician, administering immunizations in accordance with certain requirements, and administering drugs in accordance with certain requirements. The bill expands this authorization such that a payment or reimbursement may be provided to a pharmacist who provided a health care service to a patient in accordance with R.C. Chapter 4729, including managing an individual's drug therapy under a consult agreement with: (1) a physician assistant if authorized by a supervising physician, or (2) a clinical nurse specialist, certified nurse-midwife, or certified nurse practitioner if authorized by a collaborating physician. The provision is permissive, so any impacts will depend on whether Medicaid covers these services.