

## **Ohio Legislative Service Commission**

Sub. Bill Comparative Synopsis

Elizabeth Molnar

## Sub. H.B. 421

131st General Assembly (H. Health and Aging)

This table summarizes how the latest substitute version of the bill differs from the immediately preceding version. It addresses only the topics on which the two versions differ substantively. It does not list topics on which the two bills are substantively the same.

Торіс	Previous Version (As Introduced)	Sub. Version (LSC 131 1738-6)
Pharmacist authority to administer by injection	Authorizes a pharmacist, if certain conditions are met, to administer by injection any of the following drugs as long as the drug to be administered has been prescribed by a health professional authorized to prescribe it: (1) An opioid antagonist used for the treatment of drug addiction and administered in a long- acting or extended-release form; (2) An antipsychotic drug administered in a long- acting or extended-release form; (3) Hydroxyprogesterone caproate (a prescription hormone used to lower the risk of preterm birth);	Similar, but requires that the drug be prescribed by a physician (other than a podiatrist) and that the individual to whom it was prescribed have an ongoing physician-patient relationship with the physician. Authorizes a pharmacist to also administer by injection cobalamin (vitamin B12). <i>(R.C.</i> <i>4729.45(B).)</i>

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	(4) Medroxyprogesterone acetate (a prescription contraceptive). (R.C. 4729.45(A).)	
	Requires that a pharmacist successfully complete a course in drug administration approved by the State Board of Pharmacy in order to be authorized to administer by injection. ( <i>R.C. 4729.45(B).</i> )	Instead, requires that the course in drug administration be one that satisfies requirements established in rules adopted by the Board. (R.C. 4729.45(C).)
Physician protocol	Requires that a pharmacist administer the specified drugs in accordance with a protocol established by a physician. ( <i>R.C. 4729.45(B) and (D).</i> )	Same, but also requires that the protocol be established by a physician who has a scope of practice that includes treatment of the condition for which the drug has been prescribed. <i>(R.C. 4729.45(F).)</i>
	Requires that the Pharmacy Board review each physician protocol to determine whether it meets the bill's requirements and if so, approve the protocol. ( <i>R.C. 4729.45(D).</i> )	Instead, requires that a physician protocol satisfy any requirements established in rules adopted by the Pharmacy Board. (R.C. 4729.45(F) and (H).)
Administration of opioid antagonists	No provision.	When administering an opioid antagonist, requires that a pharmacist obtain test results indicating that it is appropriate to administer the drug to an individual if either of the following is to be administered:
		(1) The initial dose of the drug;
		(2) Any subsequent dose, if the administration occurs more than 30 days after the previous dose was administered.
		Authorizes a pharmacist to obtain test results as follows:
		(1) From the physician;



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		(2) By ordering blood and urine tests for the individual to whom the opioid antagonist is to be administered.
		In the event that a pharmacist orders blood and urine tests, requires that the pharmacist evaluate the test results. Provides that the authority to evaluate test results does not authorize the pharmacist to make a diagnosis. (R.C. 4729.45(E).)
Rule-making authority	Requires the State Medical Board to adopt rules establishing standards and procedures for a physician or physician assistant to follow when prescribing a drug that may be administered by injection by a pharmacist.	Instead, requires that the Board adopt rules for standards and procedures for physicians to follow ( <i>R.C. 4731.057</i> ).
	Permits the Medical Board to determine whether the rules apply in situations in which the physician or physician assistant reasonably believes that the drug will be administered by an individual other than a pharmacist.	No provision.
	(R.C. 4730.412 and 4731.057.)	

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