An Act To Improve Access to Certain Injectable Medications for Treatment of Mental Illness and Substance Use Disorder

Reference to the Committee on Health Coverage, Insurance and Financial Services suggested and ordered printed.

Presented by Senator CLAXTON of Androscoggin.
Be it enacted by the People of the State of Maine as follows:

Sec. 1. 32 MRSA §13702-A, sub-§2-A, as enacted by PL 2013, c. 308, §1, is amended to read:

2-A. Collaborative drug therapy management. "Collaborative drug therapy management" means the initiating, administering, monitoring, modifying and discontinuing of a patient's drug therapy by a pharmacist as authorized by a practitioner in accordance with a collaborative practice agreement. "Collaborative drug therapy management" includes collecting and reviewing patient histories; obtaining and checking vital signs, including pulse, temperature, blood pressure and respiration; and, under the supervision of, or in direct consultation with, a practitioner, ordering and evaluating 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 component.

Sec. 2. 32 MRSA §13702-A, sub-§28, as amended by PL 2017, c. 185, §1, is further amended to read:

28. Practice of pharmacy. "Practice of pharmacy" means the interpretation and evaluation of prescription drug orders; the compounding, dispensing and labeling of drugs and devices, except labeling by a manufacturer, packer or distributor of nonprescription drugs and commercially packaged legend drugs and devices; the participation in drug selection and drug utilization reviews; the proper and safe storage of drugs and devices and the maintenance of proper records for these drugs and devices; the administration of vaccines licensed by the United States Food and Drug Administration that are recommended by the United States Centers for Disease Control and Prevention Advisory Committee on Immunization Practices, or successor organization, for administration to adults; the administration to adults by intramuscular and subcutaneous injection of drugs approved by the United States Food and Drug Administration to treat mental illness or substance use disorder; the performance of collaborative drug therapy management; the responsibility for advising, when necessary or regulated, of therapeutic values, content, hazards and use of drugs and devices; the ordering and dispensing of over-the-counter nicotine replacement products approved by the United States Food and Drug Administration; and the offering or performing of those acts, services, operations or transactions necessary in the conduct, operation, management and control of a pharmacy.

Sec. 3. 32 MRSA §13831, sub-§5 is enacted to read:

5. Administration of injectable drugs. A pharmacist who meets the qualifications and requirements of section 13832 and rules adopted by the board may administer to adults by intramuscular and subcutaneous injection drugs approved by the United States Food and Drug Administration to treat mental illness or substance use disorder under the following conditions:

A. Upon the order of a practitioner to dispense and administer the drug, as long as the practitioner is notified after administration is complete in accordance with section 13833, subsection 3; or

B. While engaged in collaborative drug therapy management pursuant to a collaborative practice agreement in accordance with the requirements of subchapter 14.
Sec. 4. 32 MRSA §13835, sub-§1, as amended by PL 2011, c. 577, §8, is further amended to read:

1. Criteria. Criteria for the operation of a vaccine administration clinic inside, outside or off the premises of a retail pharmacy, rural health clinic or free clinic licensed under section 13751. The rules must require one-time board approval of the plan of operation for any vaccine administration clinics to be operated by a pharmacist or pharmacy and may not require board approval of each individual clinic. Criteria for the administration of drugs by intramuscular or subcutaneous injection inside, outside or off the premises of a retail pharmacy, rural health clinic or free clinic licensed under section 13751 and must require one-time board approval of the plan for the administration of drugs by intramuscular or subcutaneous injection by a pharmacist or pharmacy and may not require board approval for each administration;

Sec. 5. 32 MRSA §13841, sub-§2, ¶D, as enacted by PL 2013, c. 308, §4, is amended to read:

D. Initiate, administer, monitor, modify and discontinue drug therapy for a particular patient pursuant to the collaborative practice agreement with a practitioner who is treating the patient, as long as the action is reported to the practitioner in a timely manner as determined by rules adopted pursuant to section 13846.

Sec. 6. 32 MRSA §13843, sub-§6, ¶A, as enacted by PL 2013, c. 308, §4, is amended to read:

A. A provision that states that activity in the initial 3 months of a collaborative practice agreement is limited to monitoring drug therapy. After the initial 3 months, the practitioner and pharmacist shall meet to review the collaborative practice agreement and determine the scope of the agreement, which may after the initial 3 months include a pharmacist's initiating, administering, monitoring, modifying and discontinuing a patient's drug therapy and reporting these actions to the practitioner in a timely manner in accordance with rules adopted pursuant to section 13846;

SUMMARY

This bill permits pharmacists licensed within the State to administer to adults injections of drugs approved by the United States Food and Drug Administration for the treatment of mental illness and substance use disorder upon the order of a licensed practitioner or as part of a collaborative practice agreement.