

HOUSE No. 2184

The Commonwealth of Massachusetts

PRESENTED BY:

Carmine Lawrence Gentile

To the Honorable Senate and House of Representatives of the Commonwealth of Massachusetts in General Court assembled:

The undersigned legislators and/or citizens respectfully petition for the adoption of the accompanying bill:

An Act authorizing pharmacists to provide opioid use disorder treatment.

PETITION OF:

NAME:	DISTRICT/ADDRESS:	DATE ADDED:
<i>Carmine Lawrence Gentile</i>	<i>13th Middlesex</i>	<i>1/19/2023</i>
<i>James K. Hawkins</i>	<i>2nd Bristol</i>	<i>1/27/2023</i>
<i>Christopher Hendricks</i>	<i>11th Bristol</i>	<i>1/27/2023</i>
<i>Lindsay N. Sabadosa</i>	<i>1st Hampshire</i>	<i>1/30/2023</i>
<i>James B. Eldridge</i>	<i>Middlesex and Worcester</i>	<i>2/18/2023</i>

HOUSE No. 2184

By Representative Gentile of Sudbury, a petition (accompanied by bill, House, No. 2184) of Carmine Lawrence Gentile and others relative to authorizing pharmacists to provide opioid use disorder treatment. Public Health.

The Commonwealth of Massachusetts

**In the One Hundred and Ninety-Third General Court
(2023-2024)**

An Act authorizing pharmacists to provide opioid use disorder treatment.

Be it enacted by the Senate and House of Representatives in General Court assembled, and by the authority of the same, as follows:

1 SECTION 1. Section 24B ½ of chapter 112 of the General Laws, as appearing in the
2 2020 Official Edition, is hereby amended by striking out subsection (c) and inserting thereof the
3 following:-

4 (c) Collaborative drug therapy management shall only be allowed in the following
5 settings: (1) hospitals licensed pursuant to section 51 of chapter 111, subject to approval by the
6 medical staff executive committee at a licensed hospital or designee; (2) long-term care facilities
7 licensed pursuant to section 71 of chapter 111, subject to approval by the long-term care
8 facilities' medical director or designee; (3) inpatient or outpatient hospice settings licensed
9 pursuant to section 57D of chapter 111, subject to approval by the hospice's medical director or
10 designee; (4) ambulatory care clinics licensed pursuant to section 51 of chapter 111, with on-site
11 supervision by the attending physician and a collaborating pharmacist, subject to approval by the
12 ambulatory care clinic's medical staff executive committee or designee, or medical director or

13 designee; (5) collaborating pharmacists in a retail drug business, as registered in section 38 of
14 chapter 112 and limited by this section, with supervision by physicians according to the terms of
15 their collaborative practice agreements and limited to the following: patients 18 years of age or
16 older; an extension by 30 days of current drug therapy prescribed by the supervising physician;
17 and administration of vaccines or initiation of medications pursuant to a diagnosis,
18 discontinuation, and/or modification of dosages of medications prescribed by the supervising
19 physicians for substance use disorders, asthma, chronic obstructive pulmonary disease, diabetes,
20 hypertension, hyperlipidemia, congestive heart failure, HIV or AIDS, osteoporosis and co-
21 morbidities identified by the supervising physician for the individual patient along with the
22 primary diagnosis. The collaborative practice agreement shall specifically reference each disease
23 state being co-managed. A patient shall be referred by supervising physicians to that physicians'
24 collaborating pharmacists and shall be given notice of the collaboration and shall consent to the
25 collaboration. Pharmacists in the retail setting, who have a collaborative practice agreement with
26 supervising physicians which specifically allows initial prescriptions for referred patients of the
27 supervising physician, may issue prescriptions for schedule II-VI controlled substances, as
28 defined in clause 6 of section 3 of chapter 94C. Collaborative Practice Agreements with
29 pharmacists in a retail setting that include controlled substances shall only be used to treat
30 substance use disorders as defined by section 35 of chapter 123 or any disorder described in the
31 most recent edition of the Diagnostic and Statistical Manual of Mental Disorders. Such
32 prescriptions shall be for a patient diagnosis specified in the supervising physician's individual
33 referral of that patient. A copy of the prescription shall be sent to the supervising physician
34 within 24 hours.