



MID-ATLANTIC ASSOCIATION OF COMMUNITY HEALTH CENTERS

Serving Maryland and Delaware





TO: The Honorable Shane E. Pendergrass, Chair

Members, House Health and Government Operations Committee

The Honorable Bonnie Cullison

FROM: J. Steven Wise

Pamela Metz Kasemeyer Danna L. Kauffman

DATE: February 18, 2021

RE: **OPPOSE** – House Bill 810 – Health Occupations - Pharmacists - Laboratory Tests

On behalf of the Maryland State Medical Society, the Maryland Chapter of the American Academy of Pediatrics, the Maryland Section of the American College of Obstetricians and Gynecologists, the Mid-Atlantic Association of Community Health Centers, and the Maryland/District of Columbia Society of Clinical Oncology, we submit this letter of opposition for House Bill 810.

House Bill 810 would require the Board of Pharmacy to adopt regulations authorizing any pharmacist to order and administer laboratory tests without any prescription from an authorized prescriber. The pharmacists would be broadly authorized to order tests related to "health awareness, including screening and early disease detection."

The above organizations are very concerned about tests being ordered by pharmacists without basic information about the patient having first been obtained and considered by an appropriately trained provider. Normally, a patient will be asked by a provider for their patient history and an examination of the patient would occur. Based on that information, the provider will order needed tests to determine whether a patient suffers from a disease or may be at risk for a disease. This process helps ensure that only relevant and needed lab tests are pursued and avoids unnecessary lab tests and added health care costs for the patient. House Bill 810 removes this initial interaction between the patient and their primary care provider, and instead allows a pharmacist to order tests without requiring any apparent basis for doing so. A physician who orders lab tests with no basis is subject to discipline for overutilizing health care services and failing to adhere to the appropriate standard of care. See Md. Code Ann., Health Occ. §14-404(a).

In addition, the Senate bill which is identified as cross-filed but is not identical to the House Bill, requires the pharmacist to provide test results to the patient's primary care provider. This is a recognition that primary care providers have an important role in such testing. Our view is that this role should continue to be at the front of the testing process, not the end, since the provider may determine that the test is not needed to begin with. Furthermore, if the pharmacist is not the right person to be interpreting the results and recommending any necessary treatment, as the bill clearly recognizes, then we would suggest that the pharmacist is also not the appropriate person to be ordering the test in the first place.

For these reasons, the above organizations strongly oppose House Bill 810.

For more information call:

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