{deleted text} shows text that was in HB0422 but was deleted in HB0422S01. inserted text shows text that was not in HB0422 but was inserted into HB0422S01.

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Representative Stewart E. Barlow proposes the following substitute bill:

PUBLIC HEALTH ORDERS AMENDMENTS

2024 GENERAL SESSION

STATE OF UTAH

Chief Sponsor: Stewart E. Barlow

Senate Sponsor: <u>Evan J. Vickers</u>

LONG TITLE

General Description:

This bill amends provisions related to prescriptions issued within the public health system.

Highlighted Provisions:

This bill:

- removes the requirement that the physician who writes and signs a prescription for a
 prescription drug, other than a controlled substance, approve a written health
 department protocol governing prescriptions issued within the public health system;
 and
- grants authority to the medical director of a local health department to approve a written health department protocol under which prescriptions may be issued within the public health system, which is in addition to the same existing authority granted

to the medical director of the Department of Health and Human Services.

Money Appropriated in this Bill:

None

Other Special Clauses:

None This bill provides a coordination clause.

Utah Code Sections Affected:

AMENDS:

58-17b-620, as last amended by Laws of Utah 2023, Chapter 328

Utah Code Sections Affected By Coordination Clause:

58-17b-620, as last amended by Laws of Utah 2023, Chapter 328

Be it enacted by the Legislature of the state of Utah:

The following section is affected by a coordination clause at the end of this bill.

Section 1. Section **58-17b-620** is amended to read:

58-17b-620. Prescriptions issued within the public health system.

(1) As used in this section:

(a) "Department of Health and Human Services" means the Department of Health and Human Services created in Section 26B-1-201.

(b) "Health department" means either the Department of Health and Human Services or a local health department.

(c) "Local health departments" mean the local health departments created in Title 26A, Chapter 1, Local Health Departments.

(2) When it is necessary to treat a reportable disease or non-emergency condition that has a direct impact on public health, a health department may implement the prescription procedure described in Subsection (3) for a prescription drug that is not a controlled substance for use in:

(a) a clinic; or

(b) a remote or temporary off-site location, including a triage facility established in the community, that provides:

(i) treatment for sexually transmitted infections;

(ii) fluoride treatment;

(iii) travel immunization;

(iv) preventative treatment for an individual with latent tuberculosis infection;

(v) preventative treatment for an individual at risk for an infectious disease that has a direct impact on public health when the treatment is indicated to prevent the spread of disease or to mitigate the seriousness of infection in the exposed individual; or

(vi) other treatment as defined by the Department of Health and Human Services by rule made in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act.

(3) In a circumstance described in Subsection (2), an individual with prescriptive authority may write a prescription for each contact, as defined in Section 26B-7-201, of a patient of the individual with prescriptive authority without a face-to-face exam, if:

(a) the individual with prescriptive authority is treating the patient for a reportable disease or non-emergency condition having a direct impact on public health; and

(b) the contact's condition is the same as the patient of the individual with prescriptive authority.

(4) The following prescription procedure shall be carried out in accordance with the requirements of Subsection (5) and may be used only in the circumstances described under Subsections (2) and (3):

(a) a physician writes and signs a prescription for a prescription drug, other than a controlled substance, without the name and address of the patient and without the date the prescription is provided to the patient; and

(b) the physician authorizes a registered nurse employed by the health department to complete the prescription written under this Subsection (4) by inserting the patient's name and address, and the date the prescription is provided to the patient, in accordance with:

(i) the physician's standing written orders; and

(ii) a written health department protocol approved by [the physician and] the medical director of the local health department or the [state] medical director of the Department of Health and Human Services.

(5) A physician assumes responsibility for all prescriptions issued under this section in the physician's name.

(6) (a) All prescription forms to be used by a physician and health department in accordance with this section shall be serially numbered according to a numbering system

assigned to that health department.

(b) All prescriptions issued shall contain all information required under this chapter and rules adopted under this chapter.

(7) Notwithstanding Sections 58-17b-302 and 58-17b-309, a nurse who is employed by a health department and licensed under Chapter 31b, Nurse Practice Act, may dispense a drug to treat a sexually transmitted infection if the drug is:

(a) a prepackaged drug as defined in Section 58-17b-802;

(b) dispensed under a prescription authorized by this section;

(c) provided at a location that is described in Subsection (2)(a) or (b) and operated by the health department;

(d) provided in accordance with a dispensing standard that is issued by a physician who is employed by the health department; and

(e) if applicable, in accordance with requirements established by the division in collaboration with the board under Subsection (8).

(8) The division may make rules in collaboration with the board and in accordance with Title 63G, Chapter 3, Utah Administrative Rulemaking Act, to establish specific requirements regarding the dispensing of a drug under Subsection (7).

Section 2. Effective date.

This bill takes effect on May 1, 2024.

Section 3. Coordinating H.B. 422 with S.B. 46.

If H.B. 422, Public Health Orders Amendments, and S.B. 46, Health and Human Services Amendments, both pass and become law, the Legislature intends that, on May 1, 2024, the amendments to Section 58-17b-620 in H.B. 422 supersede the amendments to Section 58-17b-620 in S.B. 46.