
STATE BOARD OF PHARMACY

Administration of immunizations

- Authorizes certified pharmacy technicians and registered pharmacy technicians to administer immunizations in the same manner that pharmacy interns are authorized to do so under current law.
- Authorizes pharmacists, interns, and technicians to administer immunizations beginning when a child is five, as opposed to the current law age limit of seven.
- Eliminates, for children under age 13, a requirement that most immunizations be prescribed in order to be administered by a pharmacist or pharmacy intern.

Terminal distributor license exemptions

- Adds exemptions from terminal distributor licensure related to nitrous oxide, medical oxygen, sterile water, sterile saline, and dog training.

OBOT licensure eliminated

- Eliminates the Pharmacy Board's licensure of terminal distributors of dangerous drugs with an office-based opioid treatment (OBOT) classification, which is required under current law for facilities, clinics, and other locations providing OBOT to more than 30 patients.

Administration of immunizations

(R.C. 4729.41)

The bill makes several modifications to the authority of pharmacists and other persons under their supervision to administer immunizations. First, it extends the authority to certified pharmacy technicians and registered pharmacy technicians in the same manner as pharmacy interns under current law. This involves having to meet a number of conditions, including that the technician (1) work under the direct supervision of a pharmacist, (2) complete a course in the administration of immunizations that meets requirements established in rules, (3) receive and maintain certification to perform basic life-support procedures, and (4) practice in accordance with a protocol that meets various requirements established under existing law.

Second, the bill makes several changes regarding immunizations for children. The bill authorizes pharmacists, interns, and technicians to administer immunizations beginning when a child is five, as opposed to the current law age limit of seven. For children under 13, the bill eliminates a requirement that their immunizations generally be prescribed (other than immunizations for COVID-19 and the flu, which do not require a prescription under current law or the bill). The bill also requires, for each immunization administered to a child under 18, that the pharmacist, intern, or technician inform the child's parent or legal guardian of the importance of well child visits with a pediatrician or other primary care provider, and refer patients when appropriate.

Terminal distributor license exemptions

(R.C. 4729.541; conforming changes in R.C. 4729.51 and 4729.55)

The bill adds the following to the current law list of exemptions from licensure as a terminal distributor of dangerous drugs:

- A person who possesses nitrous oxide for use as a direct ingredient in food under federal regulations or for testing or maintaining a plumbing or HVAC system;
- A person who possesses medical oxygen, sterile water, or sterile saline for direct patient administration or for installing or maintaining home medical equipment;
- A person who possesses controlled substances and other dangerous drugs for dog training on behalf of, and under a written contract with, a law enforcement agency.

OBOT licensure eliminated

(Repealed R.C. 4729.553; Section 747.30; conforming changes in other sections)

The bill eliminates the required licensure through the Pharmacy Board for office-based opioid treatment (OBOT). As defined under the law being repealed, “office-based opioid treatment” is the treatment of opioid dependence or addiction using a controlled substance. Although there are numerous exemptions, current law generally requires a facility, clinic, or other location where a prescriber provides OBOT to more than 30 patients to hold a category III terminal distributor of dangerous drugs license with an OBOT classification. The bill makes a number of conforming changes related to the OBOT licensure repeal.

Additionally, the bill provides that, in rescinding rules related to the repeal, the Pharmacy Board is not subject to review by the Common Sense Initiative Office, and the Board does not have to transmit a business impact analysis to the Office.