S.B. NO. ¹²⁴⁵ S.D. 2 H.D. 2

C.D. 1

A BILL FOR AN ACT

RELATING TO PHARMACISTS.

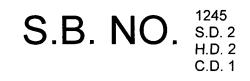
BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF HAWAII:

SECTION 1. The legislature finds that there is currently a
 statewide physician shortage. According to the federal Health
 Resources and Services Administration, each county in the State
 contains a region that is a medically underserved area, as
 defined by the Public Health Service Act of 1944, Public Law
 78-410.

7 The legislature further finds that pharmacists can help 8 bridge the gaps created by the physician shortage. A 9 pharmacist's skill set includes educating patients on how and 10 when to check blood sugar, ways to avoid and manage 11 hypoglycemia, how to take their medications correctly to avoid 12 adverse effects, and various medication utilization techniques. 13 Additionally, patients are significantly less likely to be 14 readmitted to the hospital when pharmacists provide clinical 15 services after a hospital discharge.

16 Accordingly, the purpose of this Act is to require private 17 and public health plans issued in the State to recognize

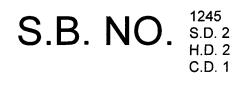
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1	licensed	pharmacists as participating providers and mandate	
2	payment c	r reimbursement for services provided by participating	
3	registered pharmacists within their scope of practice to the		
4	extent that the policy or plan provides coverage for the same		
5	service r	endered by another health care provider.	
6	SECTION 2. Chapter 431, Hawaii Revised Statutes, is		
7	amended b	y adding a new section to article 10A to be	
8	appropria	tely designated and to read as follows:	
9	" <u>§</u> 43	1:10A- Services provided by participating registered	
10	pharmacis	ts; coverage. (a) Each individual or group policy of	
11	accident and health or sickness insurance delivered or issued		
12	for delivery in the State on or after July 1, 2026, shall:		
13	(1)	Recognize pharmacists licensed pursuant to chapter 461	
14		as participating providers;	
15	(2)	Include coverage for a service provided by a	
16		participating registered pharmacist practicing within	
17		the scope of the participating registered pharmacist's	
18		license for purposes of health maintenance or	
19		treatment to the extent that the policy provides	
20		coverage for the same service rendered by another	
21		health care provider; and	

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1	(3)	Pay or reimburse a pharmacist or pharmacy for the cost
2		of a service provided by a pharmacist within the scope
3		of the pharmacist's practice.
4	(b)	For the purposes of this section, "participating
5	registere	d pharmacist" means a registered pharmacist licensed
6	pursuant	to chapter 461 who has contracted with the insurer to
7	provide h	ealth care services to its insureds."
8	SECT	ION 3. Chapter 432, Hawaii Revised Statutes, is
9	amended b	y adding a new section to article 1 to be appropriately
10	designate	d and to read as follows:
11	" <u>§</u> 43	2:1- Services provided by participating registered
12	pharmacis	ts; coverage. (a) Each individual or group hospital
13	or medica	l service plan contract delivered or issued for
14	delivery	in the State on or after July 1, 2026, shall:
15	(1)	Recognize pharmacists licensed pursuant to chapter 461
16		as participating providers;
17	(2)	Provide coverage for a service provided by a
18		participating registered pharmacist practicing within
19		the scope of the participating registered pharmacist's
20		license for purposes of health maintenance or

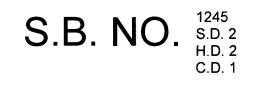




1		provides coverage for the same service rendered by
2		another health care provider; and
3	(3)	Pay or reimburse a pharmacist or pharmacy for the cost
4		of a service performed by a pharmacist within the
5		scope of the pharmacist's practice.
6	(b)	For the purposes of this section, "participating
7	registere	d pharmacist" means a registered pharmacist licensed
8	pursuant	to chapter 461 who has contracted with the mutual
9	benefit s	ociety to provide health care services to its
10	subscribe	rs or members."
11	SECT	ION 4. Chapter 432D, Hawaii Revised Statutes, is
12	amended b	y adding a new section to be appropriately designated
13	and to re	ad as follows:
14	" <u>§</u> 43	2D- Services provided by participating registered
15	pharmacis	ts; coverage. (a) Each health maintenance
16	organizat	ion policy, contract, plan, or agreement that is
17	issued, a	mended, or renewed in the State on or after July 1,
18	2026, sha	<u>11:</u>
19	(1)	Recognize pharmacists licensed pursuant to chapter 461
20		as participating providers;

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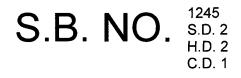
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1	(2)	Provide coverage for a service provided by a
2		participating registered pharmacist practicing within
3		the scope of the participating registered pharmacist's
4		license for purposes of health maintenance or
5		treatment to the extent that the plan contract
6		provides coverage for the same service rendered by
7		another health care provider; and
8	(3)	Pay or reimburse a pharmacist or pharmacy for the cost
9		of a service provided by a pharmacist within the scope
10		of the pharmacist's practice.
11	(b)	For the purposes of this section, "participating
12	registere	d pharmacist" means a registered pharmacist licensed
13	pursuant	to chapter 461 who has contracted with the health
14	maintenan	ce organization to provide health care services to its
15	enrollees	or subscribers."
16	SECT	ION 5. Section 346-59, Hawaii Revised Statutes, is
17	amended by	y amending subsection (b) to read as follows:
18	"(b)	Rates of payment to providers of medical care who are
19	individua	l practitioners, including doctors of medicine,
20	dentists,	podiatrists, psychologists, osteopaths, optometrists,
21	pharmacis	ts, and other individuals providing services, shall be

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1 based upon the Hawaii medicaid fee schedule. The amounts paid 2 shall not exceed the maximum permitted to be paid individual 3 practitioners or other individuals under federal law and 4 regulation, the medicare fee schedule for the current year, the 5 state limits as provided in the appropriation act, or the 6 provider's billed amount.

7 The appropriation act shall indicate the percentage of the 8 medicare fee schedule for the year 2000 to be used as the basis 9 for establishing the Hawaii medicaid fee schedule. For any 10 subsequent adjustments to the fee schedule, the legislature 11 shall specify the extent of the adjustment in the appropriation 12 act."

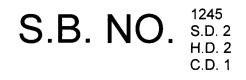
13 SECTION 6. Section 346-59.1, Hawaii Revised Statutes, is14 amended by amending subsection (g) to read as follows:

15 "(g) For the purposes of this section:

16 "Distant site" means the location of the health care
17 provider delivering services through telehealth at the time the
18 services are provided.

"Health care provider" means a provider of services, as
defined in title 42 United States Code section 1395x(u), a
provider of medical and other health services, as defined in

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1 title 42 United States Code section 1395x(s), other 2 practitioners licensed by the State and working within their 3 scope of practice, and any other person or organization who furnishes, bills, or is paid for health care in the normal 4 5 course of business, including but not limited to primary care 6 providers, mental health providers, oral health providers, 7 physicians and osteopathic physicians licensed under chapter 453, advanced practice registered nurses licensed under 8 9 chapter 457, psychologists licensed under chapter 465, 10 pharmacists licensed under chapter 461, and dentists licensed 11 under chapter 448.

12 "Interactive telecommunications system" has the same 13 meaning as the term is defined in title 42 Code of Federal 14 Regulations section 410.78(a).

15 "Originating site" means the location where the patient is
16 located, whether accompanied or not by a health care provider,
17 at the time services are provided by a health care provider
18 through telehealth, including but not limited to a health care
19 provider's office, hospital, critical access hospital, rural
20 health clinic, federally qualified health center, a patient's
21 home, and other nonmedical environments such as school-based



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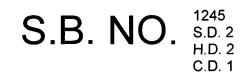
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health centers, university-based health centers, or the work
 location of a patient.

"Telehealth" means the use of telecommunications services, 3 4 as defined in section 269-1, to encompass four modalities: 5 store and forward technologies, remote monitoring, live 6 consultation, and mobile health; and which shall include but not 7 be limited to real-time video conferencing-based communication, 8 secure interactive and non-interactive web-based communication, 9 and secure asynchronous information exchange, to transmit 10 patient medical information, including diagnostic-quality 11 digital images and laboratory results for medical interpretation and diagnosis, for the purpose of delivering enhanced health 12 13 care services and information while a patient is at an 14 originating site and the health care provider is at a distant 15 site. Except as provided through an interactive telecommunications system, standard telephone contacts, 16 17 facsimile transmissions, or e-mail text, in combination or 18 alone, do not constitute telehealth services."

19 SECTION 7. The department of human services shall apply to20 the United States Department of Health and Human Services for

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1	any amendment to the state medicaid plan or for any medicaid
2	waiver necessary to implement sections 5 and 6 of this Act.
3	SECTION 8. This Act does not affect rights and duties that
4	matured, penalties that were incurred, and proceedings that were
5	begun before its effective date.
6	SECTION 9. Statutory material to be repealed is bracketed
7	and stricken. New statutory material is underscored.
8	SECTION 10. This Act shall take effect upon its approval;
9	provided that sections 5 and 6 shall take effect upon approval
10	of the Hawaii medicaid state plan by the Centers for Medicare
11	and Medicaid Services; provided further that the amendments made
12	to section 346-59.1, Hawaii Revised Statutes, by section 6 of
13	this Act shall not be repealed when that section is reenacted on
14	December 31, 2025, pursuant to section 8 of Act 107, Session
15	Laws of Hawaii 2023.

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Report Title:

Insurance Coverage; Pharmacists; Reimbursement; Health Insurers; Mutual Benefit Societies; Health Maintenance Organizations; Medicaid Plans

Description:

Beginning 7/1/2026, mandates reimbursement for services provided by participating registered pharmacists practicing within their scope of practice by private and public health plans in the State and requires the health plans to recognize pharmacists licensed in the State as participating providers. (CD1)

The summary description of legislation appearing on this page is for informational purposes only and is not legislation or evidence of legislative intent.

