

GENERAL ASSEMBLY OF NORTH CAROLINA
SESSION 2025

H.B. 736
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HOUSE PRINCIPAL CLERK

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HOUSE BILL DRH40383-NB-85B

Short Title: Pharmacists/Test and Treat.

(Public)

Sponsors: Representative Huneycutt.

Referred to:

A BILL TO BE ENTITLED
AN ACT TO ALLOW PHARMACISTS TO TEST AND TREAT FOR CERTAIN ILLNESSES
WITH CERTAIN MEDICATIONS APPROVED BY THE BOARD OF PHARMACY, TO
PROVIDE FOR FAIR AND EQUITABLE REIMBURSEMENT OF HEALTH CARE
SERVICES OR PROCEDURES THAT ARE PERFORMED BY A PHARMACIST
WITHIN THAT PHARMACIST'S SCOPE OF PRACTICE AND THAT ARE
EQUIVALENT TO SERVICES PERFORMED BY OTHER HEALTH CARE
PROFESSIONALS, AND TO APPROPRIATE FUNDS TO THE DEPARTMENT OF
INSURANCE.

The General Assembly of North Carolina enacts:

SECTION 1.(a) G.S. 90-85.3 reads as rewritten:

"§ 90-85.3. Definitions.

...
(b2) "CLIA-waived test" means a laboratory test authorized by the Food and Drug Administration and waived under the Clinical Laboratory Improvement Amendments of 1988.

(b3) "Clinical pharmacist practitioner" means a licensed pharmacist who meets the guidelines and criteria for such title established by the joint subcommittee of the North Carolina Medical Board and the North Carolina Board of Pharmacy and is authorized to enter into drug therapy management agreements with physicians in accordance with the provisions of G.S. 90-18.4.

...."

SECTION 1.(b) G.S. 90-85.3A reads as rewritten:

"§ 90-85.3A. Practice of pharmacy.

...
(b) A pharmacist may advise and educate patients and health care providers concerning therapeutic values, content, uses, and significant problems of drugs and devices; assess, record, and report adverse drug and device reactions; take and record patient histories relating to drug and device therapy; administer drugs; monitor, record, and report drug therapy and device usage; perform drug utilization reviews; and participate in drug and drug source selection and device and device source selection as provided in G.S. 90-85.27 through G.S. 90-85.31.

...
(e) A pharmacist may order and perform a CLIA-waived test to do any of the following:

(1) Assist with clinical decision making related to the use and monitoring of medications.

(2) Treat influenza, COVID-19, pharyngitis caused by group A streptococcus, and other health conditions screened by utilizing a CLIA-waived test, in



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accordance with statewide protocols. A pharmacist shall not treat a health condition under this section with any controlled substance classified in Schedules I–IV."

SECTION 1.(c) This section becomes effective October 1, 2025.

SECTION 2.(a) Article 3 of Chapter 58 of the General Statutes is amended by adding a new section to read:

"§ 58-3-241. Healthcare services provided by pharmacists.

(a) The following definitions apply in this section:

(1) Healthcare provider. – Either of the following:

a. An individual who is licensed, certified, or otherwise authorized under Chapter 90 of the General Statutes to provide healthcare services in the ordinary course of business or practice of a profession or in an approved education or training program.

b. A health care facility licensed under Chapter 131E or Chapter 122C of the General Statutes and where healthcare services are provided to patients.

(2) Healthcare services. – Any of the following health or medical procedures or services rendered by a healthcare provider:

a. Testing, diagnosis, or treatment of a health condition, illness, injury, or disease. This includes testing, diagnosis, or treatment rendered by a pharmacist acting within the pharmacist's scope of practice.

b. Dispensing of drugs, medical devices, medical appliances, or medical goods for the treatment of a health condition, illness, injury, or disease.

c. Administration of a vaccine or medication.

(3) Pharmacist. – An individual licensed to practice pharmacy under Article 4A of Chapter 90 of the General Statutes or the relevant laws of another state.

(b) A health benefit plan offered by an insurer in this State shall cover healthcare services provided by a pharmacist if all of the following conditions are met:

(1) The service or procedure was performed within the pharmacist's licensed lawful scope of practice.

(2) The health benefit plan would have covered the service if the service or procedure had been performed by another healthcare provider.

(c) The participation of a pharmacy in a drug benefit provider network of a health benefit plan shall not satisfy any requirement that insurers offering health benefit plans include pharmacists in medical benefit provider networks."

SECTION 2.(b) G.S. 58-3-230 is amended by adding a new subsection to read:

"(d) Insurers that delegate credentialing agreements or requirements for pharmacists licensed under Article 4A of Chapter 90 of the General Statutes or the relevant laws of another state to a contracted healthcare facility shall accept the credentialing for all pharmacists employed by, or contracted with, those healthcare facilities."

SECTION 2.(c) G.S. 58-3-200(d) reads as rewritten:

"(d) Services Outside Provider Networks. – No insurer shall penalize an insured or subject an insured to the out-of-network benefit levels offered under the insured's approved health benefit plan, including an insured receiving an extended or standing referral under G.S. 58-3-223, unless contracting health care providers able to meet health needs of the insured are reasonably available to the insured without unreasonable delay. Upon notice or request from the insured, the insurer shall determine whether a health care provider able to meet the needs of the insured is available to the insured without unreasonable delay by reference to the insured's location and the specific medical needs of the insured."

SECTION 2.(d) G.S. 58-56-26 is amended by adding a new subsection to read:

1 "(e) Notwithstanding any provision of this Article to the contrary, all requirements relating
2 to the coverage of prescription drugs and pharmacy services under this Chapter that apply to
3 health benefit plans are applicable to a third-party administrator in the same way they are
4 applicable to an insurer."

5 **SECTION 2.(e)** Article 56A of Chapter 58 of the General Statutes is amended by
6 adding a new section to read:

7 **"§ 58-56A-55. Health benefit plan requirements applicable.**

8 All requirements relating to the coverage of prescription drugs and pharmacy services under
9 this Chapter that apply to health benefit plans are applicable to a pharmacy benefits manager in
10 the same way they are applicable to an insurer."

11 **SECTION 2.(f)** This section is effective October 1, 2025, and applies to insurance
12 contracts entered into, renewed, or amended on or after that date.

13 **SECTION 3.** The State Health Director, in consultation with the North Carolina
14 Board of Pharmacy and the North Carolina Medical Board, shall develop statewide protocols for
15 implementing Section 1(b) of this act. The statewide protocol shall include patient parameters
16 necessitating referral to a primary, urgent, or emergency care provider.

17 **SECTION 4.** Except as otherwise provided, this act is effective when it becomes
18 law.