

## **The New York State Council of Health-system Pharmacists**

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210 Washington Avenue Extension • Albany, NY 12203  
(518) 456-8819 • Fax: (518) 456-9319

### **Permanently Authorizing Pharmacists to Perform CLIA-Waived Tests** A3033 McDonald/S2529 Rivera

**Fact Sheet**  
November 1<sup>st</sup>, 2021

#### **Who the bill applies to:**

- Licensed Pharmacists

#### **What the bill does:**

- Permanently authorizes pharmacists to perform simple non-invasive tests (e.g. point-of-care tests)
- Directs the Commissioner of Health to establish which CLIA-waived tests pharmacists may perform
- Strengthens physician-pharmacist collaboration by establishing communication protocols for test results

#### **Why this legislation is needed:**

- Many New Yorkers do not get screened for common disease states
- Access to simple testing can lower healthcare costs, reduce inappropriate antimicrobial use, and screen at-risk patients for physician referral for diabetes, high blood pressure, high cholesterol. It also avoids patients needing to seek higher level services, such as Emergency Room and Urgent Care visits
- During the height of the pandemic, the federal PREP act authorized pharmacists to perform point-of-care CLIA-waived tests to detect COVID-19, demonstrating the ease of access to the public
  - Pharmacies in New York have developed infrastructure to support testing of respiratory diseases
- When the state of emergency ends, the authorization ends. These services must be maintained
- Most states allow patients to receive this type of testing/screening by pharmacists and support physician-pharmacist collaboration on screening and referral. On average, ~20% of community pharmacies within a given state have a CLIA waiver and can perform these simple tests (range: 0-60%). In New York State, less than 0.5% of community pharmacies have such a waiver.

#### **Support:**

- Strongly supported by the New York State Council of Health System Pharmacists, Pharmacist Society of the State of New York, Community Pharmacy Association, American Society of Consultant Pharmacists

#### **References:**

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2. *Health Secur.* May-Jun 2015;13(3):166-73
3. *J Am Pharm Assoc* (2003). May-Jun 2006;46(3):370-7
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