

Utah



Utah - HB 301

Sponsor: Representative Raymond Ward (R)

Actions: 03/03/2022 Passed Senate; House Concurred
02/23/2022 Hearing Held; Amended; Passed Committee
02/18/2022 Referred to Senate Health and Human Services Committee
02/17/2022 Amended; Passed House
02/14/2022 Hearing Held; Substituted; Passed Committee
02/08/2022 Referred to House Health and Human Services Committee
02/02/2022 Introduced

Summary: Summary for 2/23/2022 Version

This measure permits certain licensed health professionals to practice as dispensing medical practitioners.

This measure applies to physicians, physician assistants, nurse practitioners, and optometrists. Under this measure, anyone licensed in these professions is permitted to practice as a dispensing medical practitioner if they hold a valid license. Licenses to act as a pharmacy are not required to operate a dispensing practice. Under this measure, dispensing practitioners may dispense a drug at a licensed dispensing practice so long as the drug is not a controlled substance, packaged in a fixed quantity per package, is not gabapentin, and dispensed at a dispensing practice under a prescription issued by the dispensing practitioner. Dispensing practitioners may not dispense more than a 30-days supply of a drug, or dispense a drug for outpatient use if the claim is for a workers' compensation or automobile insurance claim and the practitioner is not contracted with a pharmacy network established by the claim payor.

When a dispensing practitioner dispenses a drug to a patient they must disclose verbally and in writing that the patient has the right to fill the prescription through a pharmacy (not required to fill through the dispensing practice) and if the patient is responsible to pay cash for the drug, disclose that they are responsible to provide such payment and that amount will be charged by the dispensing practice.

Dispensing practices are required to designate at least one responsible dispensing practitioner. They must be currently licensed to prescribe, practice at the dispensing practice, and accept responsibility for the operation of the practice.

This measure outlines an application process for dispensing practitioners and practices and requires regular administrative inspections of practices. Licensed dispensing practices are required to report in writing a theft of a drug immediately after the licensed dispensing practice is aware the theft has occurred.

Additionally, the division is required to make rules for dispensing practice operating standards, including standards for inventory control and patient counseling.

"Physician" means someone who holds a valid license as a physician, surgeon, or osteopathic physician or surgeon.

“Dispense” means the delivery by a prescriber of a prescription drug or device to a patient, including the packaging, labeling, and security necessary to prepare and safeguard the drug or device for supplying to a patient. It does not include prescribing or administering a drug or device or delivering to a patient a sample packaged for individual use by a licensed manufacturer or re-packager of a drug or device.

“Dispensing practitioner” means an individual who is currently licensed as a physician and surgeon, an osteopathic physician and surgeon, an advanced practice registered nurse, or a physician assistant, is authorized to prescribe and administer drugs, and practices at a licensed dispensing practice.

This measure takes effect 60 days after adjournment.

Bill Links [2/23/2022 Amendment](#)
[2/17/2022 Version](#)
[2/14/2022 Version](#)
[2/2/2022 Version](#)



Utah - HB 74

Sponsor: Representative Jen Dailey-Provost (D)

Actions: 03/04/2022 Failed upon adjournment
02/15/2022 Hearing Held; Substituted
01/25/2022 Referred to House Health and Human Services Committee
01/18/2022 Introduced

Summary: Summary for 3/4/2022 Version

This measure authorizes terminally ill patients to make a request for aid-in-dying medication.

This measure establishes procedures for patients who wish to be prescribed medication for aid in dying. A patient must:

- Make an oral request for the aid-in-dying medication to their physician.
- Make a written request for the aid-in-dying medication to their physician.
- Repeat the oral request to the physician no less than 15 days after the initial oral requirement.

This measure requires the physician to offer the patient an opportunity to rescind the request after the second oral request is delivered. A patient can rescind their oral or written request at any time in any manner without regard to their mental state. A physician is prohibited from prescribing aid-in-dying medication unless they offer the patient an opportunity to rescind the request.

A patient is permitted to make a written request for aid-in-dying medication to end their life if they are:

- Suffering from a terminal disease.
- Is capable

- Is a Utah resident
- Has made an oral request.

This measure specifies that a written request cannot be signed by the patient's power of attorney, advanced health care directive, or any other means. The written request must be signed and dated by the patient and witnessed by at least two adults who attest to the best of their knowledge that they are capable, are acting voluntarily, and are not being coerced. At least one witness has to be unrelated to the patient, not entitled to the patient's estate, and not the owner or employee of the health care facility. The patient's attending physician cannot be a witness.

This measure requires the patient's attending physician to make an initial determination that the patient has a terminal disease, is capable, and is acting voluntarily. Physicians must also request that the patient attests to Utah residency. Physicians must inform the patient of their medical diagnosis, prognosis, any potential risks associated with taking aid-in-dying medication, the probable result of taking the medication, and the feasible alternative such as additional treatments, palliative care, comfort care, and hospice care.

Physicians also have to refer the patient to a consulting physician for confirmation that the patient is suffering from a terminal disease and must counsel the patient about the importance of taking the medication in the presence of another individual and not taking the medication in a public place. Physicians must inform the patient that they can rescind their request at any time.

If the physician writes a prescription for aid-in-dying medication, they must:

- Electronically contact a pharmacist and inform them about the aid-in-dying prescription.
- Personally send the electronic prescription to the pharmacist for the aid-in-dying medication.
- Inform the Department of Health of the prescription for the medication, including the recipient's name.

The pharmacist is only permitted to dispense the aid-in-dying medication to the patient, the attending physician, or their expressly identified agent.

The physician is required to maintain and hold all relevant documentation.

The measure clarifies that the physician or pharmacist is immune from civil and criminal liability or licensure consequences, resulting from good faith compliance with an aid-in-dying request. This does not apply for a practitioner knowingly providing medication or a procedure to aid the individual to commit or attempt to commit suicide.

This measure takes effect 60 days after adjournment.



Utah - SB 236

Sponsor: Senator Evan Vickers (R)

Actions: 03/03/2022 Passed House
03/01/2022 Referred to House Rules Committee
02/25/2022 Substituted; Passed Senate
02/23/2022 Hearing held; Amended; Passed committee
02/22/2022 Introduced; Referred to Senate Health and Human Services Committee

Summary: Summary for 2/25/2022 Version

This measure relates to insurers' or pharmacy benefit managers' requests for disclosure of how a drug is paid for, redistribution of unused drugs, substitutions for insulin, and dispensing drugs to treat sexually transmitted diseases.

This measure removes language prohibiting insurers or pharmacy benefit managers from asking pharmacies or insured persons to disclose how a drug was paid for except to ensure compliance with state or federal law. The measure allows pharmacists to accept and redistribute unused drugs under certain conditions. The measure requires the Division of Occupational and Professional Licensing to designate therapeutically appropriate substitutes for insulin, to make rules to ensure the safe dispensing of insulin, and make rules to designate other supplies for which a therapeutic equivalent may be dispensed.

This measure allows medical practitioners to dispense drugs to treat sexually transmitted diseases if the dispensing medical practitioner is currently licensed as a physician, an osteopathic physician, a physician assistant, a surgeon, or a nurse practitioner and the drug is prepackaged. The measure also requires dispensing medical practitioners to treat and dispense the drugs to patients at a clinic operated by the Department of Health or a local health department.

Bill Links [2/25/2022 Substitute](#)
[2/23/2022 Version](#)
[2/21/2022 Version](#)
