

TO: The Honorable Peter A. Hammen, Chairman  
Members, House Health & Government Operations Committee  
The Honorable David Rudolph

FROM: Joseph A. Schwartz, III  
Pamela Metz Kasemeyer  
J. Steven Wise

DATE: March 11, 2010

RE: **OPPOSE** – House Bill 1089 – *Health Occupations – Pharmacists – Laboratory Tests*

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On behalf of MedChi, the Maryland State Medical Society and the Maryland Chapter of the American Academy of Pediatrics, we oppose House Bill 1089.

House Bill 1089 authorizes pharmacists to perform laboratory tests that are waived from the requirements of the federal clinical laboratory improvement amendments (CLIA). CLIA waived laboratory tests can be performed in locations that do not otherwise have to meet the stringent requirements of a full-scale laboratory. They are laboratory tests which are now commonly performed in physician offices, such as dipstick urinalysis, quick strep tests, fecal occult blood, etc., or in some cases, those tests which can be performed at home, such as pregnancy tests. However, the fact that a test need not be performed in, or by a laboratory, should not be confused with the implications of how the results of those tests are treated.

This legislation, if enacted, will only serve to further fragment the provision of health care services and will undermine the efforts to build stronger and more comprehensive primary care practices and patient centered medical homes. A pharmacist is not trained to interpret, counsel, recommend treatment, or prescribe medications that may be indicated based on the results of any of these CLIA waived tests. It is not clear what benefit would accrue to the patient to have a pharmacist provide the laboratory test and then be completely unable to address the results of the test. Further, it would destroy any possibility of continuity of care, as a pharmacist would have no knowledge of the patient's medical history or underlying conditions and the patient's physician would no longer have any assurance that he/she would have knowledge of the tests and results that a patient may undertake.

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House Bill 1089 provides no identifiable benefit to the patient or the patient's provider and will only serve to further fragment primary care services resulting in duplication, lack of coordination and increased costs. CLIA waived tests should remain within the purview of the patient and his or her primary care physician. An unfavorable request is strongly requested.

**For more information call:**

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