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# A BILL FOR AN ACT

RELATING TO PHYSICIAN ASSISTANTS.

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

1           SECTION 1. The legislature finds that broadening the scope  
2 of practice for physician assistants can help address the  
3 State's shortage of licensed physicians. In 2021, the annual  
4 report on findings from the Hawaii Physician Workforce  
5 Assessment Project found that Hawaii has an unmet need for seven  
6 hundred thirty-two full-time doctors. The islands of Maui and  
7 Hawaii face the most severe shortages, each needing forty per  
8 cent more health care providers. In contrast, the number of  
9 licensed physician assistants has grown by one hundred five per  
10 cent on the island of Hawaii, one hundred fourteen per cent on  
11 the island of Kauai and thirty-five per cent on the island of  
12 Maui.

13           The legislature recognizes that physician assistants are  
14 highly trained and nationally certified health care workers who  
15 already provide a wide range of services. They routinely take  
16 medical histories, perform medical examinations, order and  
17 interpret laboratory tests, diagnose illnesses, develop and



1 manage treatment plans, prescribe medications, and assist in  
2 surgery. Research has shown that hospitalized patients  
3 receiving care from physician assistants have shorter stays,  
4 fewer infections, and fewer readmissions. The legislature  
5 believes that physician assistants are capable of providing  
6 additional care services to help ease the State's shortage of  
7 licensed physicians and that the scope of practice for physician  
8 assistants should be determined at the practice level.

9       The legislature also finds that changes are needed to the  
10 medical records review process for physician assistants. In  
11 2019, the Hawaii Revised Statutes was amended to authorize the  
12 physicians or physicians' groups supervising physician  
13 assistants to develop their own, practice-specific requirements  
14 for medical record reviews. This has helped to ease the  
15 administrative burden on supervising physicians without  
16 compromising patient care. However, supervising physicians or  
17 physicians' groups are currently required to review all  
18 prescriptions for controlled substances that are provided by a  
19 physician assistant.

20       Accordingly, the purpose of this Act is to:



- 1 (1) Improve patients' quality of care and access to care  
2 services, especially in rural and underserved areas,  
3 by broadening the scope of practice for physician  
4 assistants in the State; and
- 5 (2) Continue streamlining the medical records review  
6 process for physician assistants by requiring a  
7 sampling of medical records, rather than all medical  
8 records, to be reviewed when physician assistants  
9 prescribe controlled substances.

10 SECTION 2. Section 291-51, Hawaii Revised Statutes, is  
11 amended as follows:

12 1. By amending the definition of "certificate of  
13 disability" to read:

14 ""Certificate of disability" means a medical statement  
15 issued by a licensed practicing physician, physician assistant,  
16 or advanced practice registered nurse [~~which~~] that verifies that  
17 a person is disabled, limited, or impaired in the ability to  
18 walk."

19 2. By amending the definition of "person with a  
20 disability" to read:



1        ""Person with a disability" means a person with a  
2 disability that limits or impairs the ability to walk, and who,  
3 as determined by a licensed practicing physician, physician  
4 assistant, or an advanced practice registered nurse:

5           (1) Cannot walk two hundred feet without stopping to rest,  
6 and who has been diagnosed with:

7           (A) An arthritic, neurological, orthopedic, renal,  
8           vascular, or oncological condition;

9           (B) Lung disease to such an extent that the person's  
10           forced (respiratory) expiratory volume for one  
11           second, when measured by spirometry, is less than  
12           one liter, or the arterial oxygen tension is less  
13           than sixty mm/hg on room air at rest; or

14           (C) A cardiac condition to the extent that the  
15           person's functional limitations are classified in  
16           severity as Class III or Class IV according to  
17           the standards set by the American Heart  
18           Association; and

19           (2) Because of a condition identified in paragraph (1):

20           (A) Cannot walk two hundred feet under the person's  
21           own power without stopping to rest;



1 (B) Cannot walk without the use of, or assistance  
2 from, a brace, cane, crutch, another person,  
3 prosthetic device, wheelchair, or other assistive  
4 device; or

5 (C) Uses portable oxygen."

6 SECTION 3. Section 291-51.4, Hawaii Revised Statutes, is  
7 amended to read as follows:

8 "**§291-51.4 Fraudulent verification of an applicant as a**  
9 **person with a disability; penalty.** A physician, physician  
10 assistant, or advanced practice registered nurse who  
11 fraudulently verifies that an applicant is a person with a  
12 disability to enable the person to represent to the issuing  
13 agency that the person is qualified to obtain a disability  
14 parking permit shall be guilty of a petty misdemeanor. Each  
15 fraudulent verification shall constitute a separate offense."

16 SECTION 4. Section 327K-1, Hawaii Revised Statutes, is  
17 amended by amending the definition of "patient's provider" to  
18 read as follows:

19 ""Patient's provider" means a physician licensed pursuant  
20 to chapter 453, a physician assistant licensed pursuant to



1 chapter 453, or an advanced practice registered nurse licensed  
2 pursuant to chapter 457 who has examined the patient."

3 SECTION 5. Section 327K-3, Hawaii Revised Statutes, is  
4 amended by amending subsection (a) to read as follows:

5 "(a) No physician, physician assistant, advanced practice  
6 registered nurse, health care professional, nurse's aide,  
7 hospice provider, home care provider, including private duty and  
8 medicare home health providers, emergency medical services  
9 provider, adult residential care home operator, skilled nursing  
10 facility operator, hospital, or person employed by or under  
11 contract with a hospital shall be subject to criminal  
12 prosecution, civil liability, or be deemed to have engaged in  
13 unprofessional conduct for:

14 (1) Carrying out in good faith, a decision regarding  
15 treatment orders, including cardiopulmonary  
16 resuscitation by or on behalf of a patient pursuant to  
17 orders in a form and in compliance with the standards  
18 and procedures set forth in this chapter; or

19 (2) Providing cardiopulmonary resuscitation to a patient  
20 for whom an order not to resuscitate has been issued



1 on a form; provided that the person reasonably and in  
2 good faith:

3 (A) Was unaware of the issuance of an order not to  
4 resuscitate; or

5 (B) Believed that any consent to treatment orders,  
6 including the order not to resuscitate, had been  
7 revoked or canceled."

8 SECTION 6. Section 329-38, Hawaii Revised Statutes, is  
9 amended by amending subsection (i) to read as follows:

10 "(i) Prescriptions for controlled substances shall be  
11 issued only as follows:

12 (1) All prescriptions for controlled substances shall  
13 originate from within the State and be dated as of,  
14 and signed on, the day when the prescriptions were  
15 issued and shall contain:

16 (A) The first and last name and address of the  
17 patient; and

18 (B) The drug name, strength, dosage form, quantity  
19 prescribed, and directions for use. Where a  
20 prescription is for gamma hydroxybutyric acid,  
21 methadone, or buprenorphine, the practitioner



1                   shall record as part of the directions for use,  
2                   the medical need of the patient for the  
3                   prescription.

4                   Except for electronic prescriptions, controlled  
5                   substance prescriptions shall be no larger than eight  
6                   and one-half inches by eleven inches and no smaller  
7                   than three inches by four inches. A practitioner may  
8                   sign a prescription in the same manner as the  
9                   practitioner would sign a check or legal document  
10                  (e.g., J.H. Smith or John H. Smith) and shall use both  
11                  words and figures (e.g., alphabetically and  
12                  numerically as indications of quantity, such as five  
13                  (5)), to indicate the amount of controlled substance  
14                  to be dispensed. Where an electronic prescription is  
15                  permitted, either words or figures (e.g.,  
16                  alphabetically or numerically as indications of  
17                  quantity, such as five or 5), to indicate the amount  
18                  of controlled substance to be dispensed shall be  
19                  acceptable. Where an oral order or electronic  
20                  prescription is not permitted, prescriptions shall be  
21                  written with ink or indelible pencil or typed, shall





1 be manually signed by the practitioner, and shall  
2 include the name, address, telephone number, and  
3 registration number of the practitioner. The  
4 prescriptions may be prepared by a secretary or agent  
5 for the signature of the practitioner, but the  
6 prescribing practitioner shall be responsible in case  
7 the prescription does not conform in all essential  
8 respects to this chapter and any rules adopted  
9 pursuant to this chapter. In receiving an oral  
10 prescription from a practitioner, a pharmacist shall  
11 promptly reduce the oral prescription to writing,  
12 which shall include the following information: the  
13 drug name, strength, dosage form, quantity prescribed  
14 in figures only, and directions for use; the date the  
15 oral prescription was received; the full name, Drug  
16 Enforcement Administration registration number, and  
17 oral code number of the practitioner; and the name and  
18 address of the person for whom the controlled  
19 substance was prescribed or the name of the owner of  
20 the animal for which the controlled substance was  
21 prescribed.



1           A corresponding liability shall rest upon a  
2 pharmacist who fills a prescription not prepared in the  
3 form prescribed by this section. A pharmacist may add  
4 a patient's missing address or change a patient's  
5 address on all controlled substance prescriptions  
6 after verifying the patient's identification and  
7 noting the identification number on the back of the  
8 prescription document on file. The pharmacist shall  
9 not make changes to the patient's name, the controlled  
10 substance being prescribed, the quantity of the  
11 prescription, the practitioner's Drug Enforcement  
12 Administration number, the practitioner's name, the  
13 practitioner's electronic signature, or the  
14 practitioner's signature;

15       (2) An intern, resident, or foreign-trained physician, or  
16 a physician on the staff of a Department of Veterans  
17 Affairs facility or other facility serving veterans,  
18 exempted from registration under this chapter, shall  
19 include on all prescriptions issued by the physician:

20       (A) The registration number of the hospital or other  
21 institution; and



1 (B) The special internal code number assigned to the  
2 physician by the hospital or other institution in  
3 lieu of the registration number of the  
4 practitioner required by this section.

5 The hospital or other institution shall forward a copy  
6 of this special internal code number list to the  
7 department as often as necessary to update the  
8 department with any additions or deletions. Failure  
9 to comply with this paragraph shall result in the  
10 suspension of that facility's privilege to fill  
11 controlled substance prescriptions at pharmacies  
12 outside of the hospital or other institution. Each  
13 written prescription shall have the name of the  
14 physician stamped, typed, or hand-printed on it, as  
15 well as the signature of the physician;

16 (3) An official exempted from registration shall include  
17 on all prescriptions issued by the official:

18 (A) The official's branch of service or agency (e.g.,  
19 "U.S. Army" or "Public Health Service"); and

20 (B) The official's service identification number, in  
21 lieu of the registration number of the



1 practitioner required by this section. The  
2 service identification number for a Public Health  
3 Service employee shall be the employee's social  
4 security or other government issued  
5 identification number.

6 Each prescription shall have the name of the officer  
7 stamped, typed, or handprinted on it, as well as the  
8 signature of the officer; and

9 (4) A physician assistant registered to prescribe  
10 controlled substances under the authorization of a  
11 supervising physician shall include on all controlled  
12 substance prescriptions issued:

13 (A) The Drug Enforcement Administration registration  
14 number of the supervising physician; and

15 (B) The Drug Enforcement Administration registration  
16 number of the physician assistant.

17 Each written controlled substance prescription issued  
18 shall include the printed, stamped, typed, or  
19 hand-printed name, address, and phone number of both  
20 the supervising physician and physician assistant, and  
21 shall be signed by the physician assistant. [The



1           ~~medical record of each written controlled substance~~  
2           ~~prescription issued by a physician assistant shall be~~  
3           ~~reviewed and initialed by the physician assistant's~~  
4           ~~supervising physician within seven working days.]"~~

5           SECTION 7. Section 338-9, Hawaii Revised Statutes, is  
6 amended by amending subsection (b) to read as follows:

7           "(b) In preparing a certificate of death or fetal death  
8 the person in charge of the disposition of the body shall:

- 9           (1) Obtain and enter on the certificate the personal data  
10           and other information pertaining to the deceased  
11           person required by the department from the person best  
12           qualified to supply them;
- 13           (2) Present the certificate of death to the physician,  
14           physician assistant, or advanced practice registered  
15           nurse last in attendance upon the deceased, or to the  
16           coroner's physician, who shall thereupon certify the  
17           cause of death to the physician's, physician  
18           assistant's, or advanced practice registered nurse's  
19           best knowledge and belief, or present the certificate  
20           of fetal death to the physician, physician assistant,  
21           advanced practice registered nurse, midwife, or other



1 person in attendance at the fetal death, who shall  
2 certify the fetal death and such medical data  
3 pertaining thereto as can be furnished; provided that  
4 fetal deaths of less than twenty-four weeks or  
5 intentional terminations of pregnancy performed in  
6 accordance with section 453-16 may be certified by a  
7 nurse or other employee based upon the physician's  
8 records; and

- 9 (3) Notify immediately the appropriate local agent, if the  
10 death occurred without medical attendance, or if the  
11 physician, physician assistant, or advanced practice  
12 registered nurse last in attendance fails to sign the  
13 death certificate. In such event the local agent  
14 shall inform the local health officer, and refer the  
15 case to the local health officer for immediate  
16 investigation and certification of the cause of death  
17 prior to issuing a permit for burial, or other  
18 disposition of the body. When the local health  
19 officer is not a physician or when there is no such  
20 officer, the local agent may complete the certificate



1           on the basis of information received from relatives of  
2           the deceased or others having knowledge of the facts.

3           If the circumstances of the case suggest that the death or  
4 fetal death was caused by other than natural causes, the local  
5 agent shall refer the case to the coroner for investigation and  
6 certification."

7           SECTION 8. Section 338-17.7, Hawaii Revised Statutes, is  
8 amended by amending subsection (a) to read as follows:

9           "(a) The department of health shall establish, in the  
10 following circumstances, a new certificate of birth for a person  
11 born in this State who already has a birth certificate filed  
12 with the department and who is referred to below as the "birth  
13 registrant":

14           (1) Upon receipt of an affidavit of paternity, a court  
15 order establishing paternity, or a certificate of  
16 marriage establishing the marriage of the natural  
17 parents to each other, together with a request from  
18 the birth registrant, or the birth registrant's parent  
19 or other person having legal custody of the birth  
20 registrant, that a new birth certificate be prepared



- 1 because previously recorded information has been  
2 altered pursuant to law;
- 3 (2) Upon receipt of a certified copy of a final order,  
4 judgment, or decree of a court of competent  
5 jurisdiction that determined the nonexistence of a  
6 parent and child relationship between a person  
7 identified as a parent on the birth certificate on  
8 file and the birth registrant;
- 9 (3) Upon receipt of a certified copy of a final adoption  
10 decree, or of an abstract of the decree, pursuant to  
11 sections 338-20 and 578-14;
- 12 (4) Upon receipt of an affidavit from a United States  
13 licensed physician or physician assistant attesting  
14 that:
- 15 (A) The physician or physician assistant has a bona  
16 fide [~~physician-patient~~] provider-patient  
17 relationship with the birth registrant;
- 18 (B) The physician or physician assistant has treated  
19 and evaluated the birth registrant and has  
20 reviewed and evaluated the birth registrant's  
21 medical history;





1 (C) The birth registrant has had appropriate clinical  
2 treatment for gender transition to the new gender  
3 and has completed the transition to the new  
4 gender; and

5 (D) The new gender does not align with the sex  
6 designation on the birth registrant's birth  
7 certificate; or

8 (5) Upon request of a law enforcement agency certifying  
9 that a new birth certificate showing different  
10 information would provide for the safety of the birth  
11 registrant; provided that the new birth certificate  
12 shall contain information requested by the law  
13 enforcement agency, shall be assigned a new number and  
14 filed accordingly, and shall not substitute for the  
15 birth registrant's original birth certificate, which  
16 shall remain in place."

17 SECTION 9. Section 392-26, Hawaii Revised Statutes, is  
18 amended as follows:

19 1. By amending subsection (a) to read:

20 "(a) An individual shall be ineligible to receive  
21 temporary disability benefits with respect to any period during



1 which the individual is not under the care of a person duly  
2 licensed to practice medicine, surgery, dentistry, chiropractic,  
3 osteopathy, or naturopathic medicine, a physician assistant, or  
4 an advanced practice registered nurse, who shall certify, in the  
5 form and manner specified by rule of the director, the  
6 disability of the claimant, the probable duration of the  
7 disability, and such other medical facts within the person's  
8 knowledge as required by rule."

9 2. By amending subsection (c) to read:

10 "(c) The proof of disability duly certified by a person  
11 licensed to practice medicine, surgery, dentistry, chiropractic,  
12 osteopathy, or naturopathic medicine, a physician assistant, or  
13 an advanced practice registered nurse, or an authorized or  
14 accredited practitioner of any group that depends for healing  
15 upon prayer or other spiritual means shall be submitted by the  
16 certifying person to the disabled employee within seven working  
17 days after the date on which the employee was examined and found  
18 disabled. If the certifying person fails to submit the required  
19 proof within seven working days, the director, upon notification  
20 by the insurer, may levy a penalty of \$25 for each delinquent



1 certification where the certifying person fails to show good  
2 cause for the person's failure to file on time."

3 SECTION 10. Section 453-5.3, Hawaii Revised Statutes, is  
4 amended by amending subsection (g) to read as follows:

5 "(g) For medical records of patients seen by physician  
6 assistants:

7 (1) Each physician assistant and supervising physician,  
8 osteopathic physician, or group of physicians shall  
9 establish written guidelines for the review of medical  
10 records as appropriate to the specific practice.  
11 These guidelines shall be kept in the office of the  
12 practice setting in which either the physician  
13 assistant or supervising physician, osteopathic  
14 physician, or group of [†]physicians[†] practices, and  
15 shall be made available to the Hawaii medical board  
16 and the regulated industries complaints office or its  
17 designees;

18 (2) The supervising physician, osteopathic physician, or  
19 group of physicians shall review medical records as  
20 required by this subsection; provided that:



- 1 (A) When supervising a physician assistant with less  
2 than one year of practice experience as a  
3 licensed physician assistant, the supervising  
4 physician, osteopathic physician, or group of  
5 physicians shall:
- 6 (i) For the first six months of supervision,  
7 review fifty per cent of the medical records  
8 within thirty days of the patient visit;  
9 ~~[and]~~ provided that the supervising  
10 physician, osteopathic physician, or group  
11 of physicians may, on a case-by-case basis,  
12 require physician assistants who begin in a  
13 new practice specialty with less than one  
14 year of full-time practice experience in the  
15 specialty to comply with this clause;
- 16 (ii) For the next six months of supervision,  
17 review twenty-five per cent of the medical  
18 records within thirty days of the patient  
19 visit[-  
20 ~~The~~]; provided that the board may, on a  
21 case-by-case basis, require physician



1 assistants ~~[that]~~ who begin in a new  
2 practice specialty with less than one year  
3 of full-time practice experience in the  
4 specialty to comply with this  
5 ~~[subparagraph]~~ clause; and  
6 (iii) For physician assistants who issue  
7 controlled substance prescriptions, at least  
8 fifty per cent of the records reviewed under  
9 clause (i) or (ii) shall include controlled  
10 substance prescriptions; provided that if  
11 the number of records that include  
12 controlled substance prescriptions amount to  
13 less than fifty per cent of the records in  
14 clause (i) or (ii), the supervising  
15 physician, osteopathic physician, or group  
16 of physicians shall review as many  
17 controlled substance prescriptions as are  
18 available; and  
19 (B) When supervising a physician assistant with more  
20 than one year of practice experience as a  
21 licensed physician assistant, the supervising



1 physician, osteopathic physician, or group of  
2 physicians shall:

3 (i) Establish a process for the regular review  
4 of a sample of medical records of patients  
5 seen by the physician assistant[+],  
6 including a sample of controlled substance  
7 records, if available; and

8 (ii) For at least thirty minutes each month,  
9 perform an audit and review of the medical  
10 records; and

11 (3) Notwithstanding paragraph (2), a supervising  
12 physician, osteopathic physician, or group of  
13 physicians may require additional supervisory  
14 requirements at any time for patient safety."

15 SECTION 11. Section 453-5.5, Hawaii Revised Statutes, is  
16 amended to read as follows:

17 "[+]§453-5.5[+] **Physician assistant; authority to sign**  
18 **documents.** Any physician assistant who holds a current, valid,  
19 and permanent license to practice medicine pursuant to this  
20 chapter, and who is under the supervision of a licensed



1 physician or osteopathic physician, shall have the authority to  
2 sign the following documents:

- 3 (1) Certification of psychiatric medical condition of the  
4 parents of a child applicant for aid from the  
5 temporary assistance for needy families program;
- 6 (2) Evaluation forms for Hansen's disease patients;
- 7 (3) Orders for physical therapy and plans of care;
- 8 (4) Pharmacist orders to assist in monitoring and  
9 management of anticoagulation anemia and atrial  
10 fibrillation;
- 11 (5) Orders for speech therapy and plans of care;
- 12 (6) Applications for bracelets indicating compassionate  
13 care only;
- 14 (7) Admissions applications for foster homes;
- 15 (8) Dietary consultations forms; [~~and~~]
- 16 (9) Medicaid application forms for nursing care facility  
17 admission[~~;~~]; and
- 18 (10) Orders for occupational therapy and plans of care."

19 SECTION 12. Section 461-1, Hawaii Revised Statutes, is  
20 amended by amending the definition of "practice of pharmacy" to  
21 read as follows:



- 1        ""Practice of pharmacy" means:
- 2        (1) The interpretation and evaluation of prescription
- 3           orders; the compounding, dispensing, and labeling of
- 4           drugs and devices (except labeling by a manufacturer,
- 5           packer, or distributor of nonprescription drugs and
- 6           commercially legend drugs and devices); the
- 7           participation in drug selection and drug utilization
- 8           reviews; the proper and safe storage of drugs and
- 9           devices and the maintenance of proper records
- 10          therefor; the responsibility for advising when
- 11          necessary or where regulated, of therapeutic values,
- 12          content, hazards, and use of drugs and devices; and
- 13          the interpretation and evaluation of prescription
- 14          orders to adjust the supply dispensed for purposes of
- 15          medication synchronization pursuant to section
- 16          431:10A-606, 432:1-621, or 432D-30;
- 17          (2) Performing the following procedures or functions as
- 18          part of the care provided by and in concurrence with a
- 19          "health care facility" and "health care service" as
- 20          defined in section 323D-2[~~7~~]; or a "pharmacy"; or a
- 21          licensed physician [~~or~~], a licensed physician





1        assistant, or a licensed advanced practice registered  
2        nurse with prescriptive authority[~~7~~]; or a "managed  
3        care plan" as defined in section 432E-1, in accordance  
4        with policies, procedures, or protocols developed  
5        collaboratively by health professionals, including  
6        physicians and surgeons, pharmacists, physician  
7        assistants, and registered nurses, and for which a  
8        pharmacist has received appropriate training required  
9        by these policies, procedures, or protocols:

- 10        (A) Ordering or performing routine drug therapy  
11                related patient assessment procedures;
- 12        (B) Ordering drug therapy related laboratory tests;
- 13        (C) Initiating emergency contraception oral drug  
14                therapy in accordance with a written  
15                collaborative agreement approved by the board,  
16                between a licensed physician, physician  
17                assistant, or advanced practice registered nurse  
18                with prescriptive authority and a pharmacist who  
19                has received appropriate training that includes  
20                programs approved by the Accreditation Council  
21                for Pharmacy Education (ACPE), curriculum-based



- 1 programs from an ACPE-accredited college of  
2 pharmacy, state or local health department  
3 programs, or programs recognized by the board of  
4 pharmacy;
- 5 (D) Administering drugs orally, topically, by  
6 intranasal delivery, or by injection, pursuant to  
7 the order of the patient's licensed physician,  
8 physician assistant, or advanced practice  
9 registered nurse with prescriptive authority, by  
10 a pharmacist having appropriate training that  
11 includes programs approved by the ACPE,  
12 curriculum-based programs from an ACPE-accredited  
13 college of pharmacy, state or local health  
14 department programs, or programs recognized by  
15 the board of pharmacy;
- 16 (E) Administering:
- 17 (i) Immunizations orally, by injection, or by  
18 intranasal delivery, to persons eighteen  
19 years of age or older by a pharmacist having  
20 appropriate training that includes programs  
21 approved by the ACPE, curriculum-based



1 programs from an ACPE-accredited college of  
2 pharmacy, state or local health department  
3 programs, or programs recognized by the  
4 board of pharmacy;

5 (ii) Vaccines to persons between fourteen and  
6 seventeen years of age pursuant to section  
7 461-11.4; and

8 (iii) Human papillomavirus, Tdap (tetanus,  
9 diphtheria, pertussis), meningococcal, and  
10 influenza vaccines to persons between eleven  
11 and seventeen years of age pursuant to  
12 section 461-11.4;

13 (F) As authorized by the written instructions of a  
14 licensed physician, physician assistant, or  
15 advanced practice registered nurse with  
16 prescriptive authority, initiating or adjusting  
17 the drug regimen of a patient pursuant to an  
18 order or authorization made by the patient's  
19 licensed physician, physician assistant, or  
20 advanced practice registered nurse with  
21 prescriptive authority and related to the



1 condition for which the patient has been seen by  
2 the licensed physician, physician assistant, or  
3 advanced practice registered nurse with  
4 prescriptive authority; provided that the  
5 pharmacist shall issue written notification to  
6 the patient's licensed physician, physician  
7 assistant, or advanced practice registered nurse  
8 with prescriptive authority or enter the  
9 appropriate information in an electronic patient  
10 record system shared by the licensed physician,  
11 physician assistant, or advanced practice  
12 registered nurse with prescriptive authority,  
13 within twenty-four hours;

14 (G) Transmitting a valid prescription to another  
15 pharmacist for the purpose of filling or  
16 dispensing;

17 (H) Providing consultation, information, or education  
18 to patients and health care professionals based  
19 on the pharmacist's training and for which no  
20 other licensure is required; or



1 (I) Prescribing and dispensing an opioid antagonist  
2 pursuant to section 461-11.8;

3 (3) The offering or performing of those acts, services,  
4 operations, or transactions necessary in the conduct,  
5 operation, management, and control of pharmacy; and

6 (4) Prescribing and dispensing contraceptive supplies  
7 pursuant to section 461-11.6."

8 SECTION 13. This Act does not affect rights and duties  
9 that matured, penalties that were incurred, and proceedings that  
10 were begun before its effective date.

11 SECTION 14. Statutory material to be repealed is bracketed  
12 and stricken. New statutory material is underscored.

13 SECTION 15. This Act shall take effect on July 1, 2060;  
14 provided that the amendments made to section 329-38(i), Hawaii  
15 Revised Statutes, by section 6 of this Act shall not be repealed  
16 when that section is reenacted on June 30, 2023, pursuant to  
17 section 6 of Act 66, Session Laws of Hawaii 2017.

18



# H.B. NO. 1575 H.D. 2

**Report Title:**

Physician Assistant; Scope of Practice; Medical Records Review;  
Controlled Substances

**Description:**

Expands the scope of practice for physician assistants.  
Requires a sampling of medical records, rather than all medical  
records, to be reviewed when physician assistants prescribe  
controlled substances. Effective 7/1/2060. (HD2)

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

