

**Department of Legislative Services**  
Maryland General Assembly  
2024 Session

**FISCAL AND POLICY NOTE**  
**Third Reader - Revised**

House Bill 127

(Chair, Health and Government Operations  
Committee)(By Request - Departmental - Health)

Health and Government Operations

Finance

---

**Public Health - Nonoccupational Postexposure Prophylaxis (nPEP) Standing  
Order Program - Establishment**

---

This departmental bill establishes a Nonoccupational Postexposure Prophylaxis (nPEP) Standing Order Program. The program must authorize a licensed pharmacist to dispense nPEP under specified circumstances. The Maryland Department of Health (MDH) may administer the program, collect fees with specified exception, establish guidelines for conducting patient education and training, and collect and report data on the program. MDH must adopt regulations necessary for the administration of the program and that address the needs of specified populations, as specified.

---

**Fiscal Summary**

**State Effect:** MDH can implement the program with existing budgeted resources. To the extent MDH collects fees, general fund revenues increase by an indeterminate amount. To the extent the program results in increased utilization of nPEP drugs for Medicaid enrollees, Medicaid expenditures (and associated federal matching revenues) increase in the near term; however, such expenditures are likely offset by indeterminate savings due to the prevention of HIV infections.

**Local Effect:** None.

**Small Business Effect:** MDH has determined that this bill has minimal or no impact on small business (attached). The Department of Legislative Services concurs with this assessment. (The attached assessment does not reflect amendments to the bill.)

---

## Analysis

### Bill Summary:

#### *Definitions*

“Nonoccupational postexposure prophylaxis” means medication used in accordance with the most recent U.S. Centers for Disease Control and Prevention (CDC) Guidelines to reduce the chances of a patient developing HIV after potential exposure to the disease. “Standing order” means a directive authorizing pharmacists to dispense the nPEP regimens listed in the order without a prescription.

#### *Nonoccupational Postexposure Prophylaxis Standing Order Program*

The program must (1) authorize a pharmacist registered with the program to dispense nPEP through a standing order and (2) operate in accordance with the procedures approved by MDH with the advice and approval of the State Board of Pharmacy (MBOP).

MDH may (1) collect fees necessary for the administration of the program, unless the patient qualifies for nPEP through the Program for Preventing HIV Infection for Rape Victims; (2) administer the program and establish a standardized set of guidelines for pharmacists participating in the program to use in developing and conducting patient education and training on nPEP that includes specified topics; and (3) collect and report data on the operation and results of the program.

#### *Pharmacist Dispensing of Nonoccupational Postexposure Prophylaxis*

The definition of “practice pharmacy” is expanded to include dispensing nPEP approved by the U.S. Food and Drug Administration in accordance with CDC guidelines if the pharmacist is registered with the program.

At the time of dispensing nPEP, a pharmacist registered with the program must (1) screen the patient to determine that HIV exposure occurred within 72 hours before the dispensing; (2) determine whether the patient meets clinical criteria consistent with the most recent CDC guidelines, including the identification of any contraindicated medications and, if applicable, exposure as the result of an alleged rape or sexual offense or alleged child sexual abuse; (3) determine whether an available standing order is appropriate for the patient and dispense nPEP in accordance with the most recent CDC guidelines; (4) refer the patient to a disease intervention specialist within MDH for ongoing treatment; and (5) determine whether the patient has a primary care provider and, if so, notify the provider that the patient was dispensed nPEP or, if not, provide the patient with a list of local primary care providers and clinics provided by MDH.

If an available standing order is not appropriate for the patient, the pharmacist must refer the patient to a primary care provider. A pharmacist may dispense nPEP in accordance with a drug therapy management contract.

**Current Law:**

*Practice of Pharmacy*

An individual must be licensed by MBOP to practice pharmacy in the State. The practice of pharmacy includes compounding, dispensing, or distributing prescription drugs or devices; monitoring prescriptions; providing information, explanation, and recommendations to patients and health care practitioners about the safe and effective use of prescription drugs or devices; providing drug therapy management; administering vaccinations; prescribing and dispensing certain contraceptive medications and devices; and administering a self-administered drug to a patient in accordance with regulations adopted by the board.

*Prohibition on Prior Authorization for Postexposure Prophylaxis*

Chapter 684 of 2022 prohibits carriers and Medicaid managed care organizations from applying a prior authorization requirement for a prescription drug used as postexposure prophylaxis (better known as PEP) for the prevention of HIV if the prescription drug is prescribed for use in accordance with CDC guidelines.

*Program for Preventing HIV Infection for Rape Victims*

Chapter 431 of 2019 established the Pilot Program for Preventing HIV Infection for Rape Victims to prevent HIV infection for victims of an alleged rape or sexual offense or victims of alleged child sexual abuse. Chapter 144 of 2022 made the pilot program permanent. The Governor's Office of Crime Prevention and Policy administers the program. A qualifying victim must be provided with a full course of treatment and follow-up care for nPEP for the prevention of HIV, at the victim's request, and as prescribed.

**Background:** MDH advises that nPEP is a 28-day course of three antiretroviral medications that an individual must begin taking within 72 hours of exposure to HIV in order to prevent transmission. However, nPEP currently requires a prescription, which presents a barrier to accessing the medication within the window of efficacy. The bill allows a licensed pharmacist registered with the program to dispense nPEP.

## Additional Information

**Recent Prior Introductions:** Similar legislation has not been introduced within the last three years.

**Designated Cross File:** SB 246 (Chair, Finance Committee)(By Request - Departmental - Health) - Finance.

**Information Source(s):** Maryland Association of County Health Officers; Maryland Department of Health; Department of Legislative Services

**Fiscal Note History:** First Reader - January 28, 2024  
rh/ljm Third Reader - March 18, 2024  
Revised - Amendment(s) - March 18, 2024

---

Analysis by: Jennifer B. Chasse

Direct Inquiries to:  
(410) 946-5510  
(301) 970-5510

**ANALYSIS OF ECONOMIC IMPACT ON SMALL BUSINESSES**

**Maryland Department of Health**

**Session 2024**

**BILL TITLE:**     **Public Health - Nonoccupational Postexposure Prophylaxis (nPEP)  
Standing Order Program - Establishment**

---

**BILL  
NUMBER:**            HB 127

**PREPARED  
BY:**

**(Program\Unit):**    Prevention and Health Promotion Administration

---

**PART A. ECONOMIC IMPACT RATING**

This agency estimates that the proposed bill:

WILL HAVE MINIMAL OR NO ECONOMIC IMPACT ON MARYLAND SMALL  
BUSINESS

OR

WILL HAVE MEANINGFUL ECONOMIC IMPACT ON MARYLAND SMALL  
BUSINESSES

**PART B. ECONOMIC IMPACT ANALYSIS**

The proposal has no economic impact.