
SENATE BILL No. 221

AM022102 has been incorporated into introduced printing.

Synopsis: Pharmacist treatment by standing order.

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2026

IN 221—LS 6704/DI 104



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Introduced

Second Regular Session of the 124th General Assembly (2026)

PRINTING CODE. Amendments: Whenever an existing statute (or a section of the Indiana Constitution) is being amended, the text of the existing provision will appear in this style type, additions will appear in **this style type**, and deletions will appear in ~~this style type~~.

Additions: Whenever a new statutory provision is being enacted (or a new constitutional provision adopted), the text of the new provision will appear in **this style type**. Also, the word **NEW** will appear in that style type in the introductory clause of each SECTION that adds a new provision to the Indiana Code or the Indiana Constitution.

Conflict reconciliation: Text in a statute in *this style type* or ~~this style type~~ reconciles conflicts between statutes enacted by the 2025 Regular Session of the General Assembly.

SENATE BILL No. 221

A BILL FOR AN ACT to amend the Indiana Code concerning professions and occupations.

Be it enacted by the General Assembly of the State of Indiana:

- 1 SECTION 1. IC 16-19-4-11, AS AMENDED BY P.L.1-2022,
2 SECTION 4, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
3 JULY 1, 2026]: Sec. 11. (a) The state health commissioner or the
4 commissioner's designated public health authority who is a licensed
5 prescriber ~~may~~, **shall**, as part of the individual's official capacity, issue
6 a standing order, prescription, or protocol that allows a pharmacist to
7 administer, ~~or~~ dispense, **test, treat, or prescribe** any of the following:
8 (1) An immunization that is ~~recommended by the federal Centers~~
9 ~~for Disease Control and Prevention Advisory Committee on~~
10 ~~Immunization Practices~~ **approved or authorized by the federal**
11 **Food and Drug Administration** for individuals who are not less
12 than eleven (11) years of age.
13 (2) A smoking cessation product. However, the pharmacist must
14 inform the patient that the patient must have a follow-up
15 consultation with the patient's licensed prescriber.

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(3) Point of care testing that has been approved or authorized by the federal Food and Drug Administration and categorized as Clinical Laboratory Improvement Amendments (CLIA)-waived under 42 U.S.C. 263a for the following conditions:

(A) COVID-19.

(B) Group B streptococcus.

(C) Respiratory syncytial virus (RSV).

(D) Influenza.

(4) A prescription for, including the dispensing of, a medication that meets the following:

(A) Is indicated for the treatment of a diagnosed condition.

(B) Is authorized by the federal Food and Drug Administration for treatment of the diagnosed condition.

(C) Is included on a protocol list that is established by the Indiana board of pharmacy, in consultation with the state department.

(b) This subsection does not apply to a pharmacist. The state health commissioner or the commissioner's designated public health authority who is a licensed prescriber may, as part of the individual's official capacity, issue a standing order, prescription, or protocol that allows an individual who is licensed, certified, or registered by a board (as defined in IC 25-1-9-1), and if within the individual's scope of practice, to administer or dispense an immunization that is recommended by the federal Centers for Disease Control and Prevention Advisory Committee on Immunization Practices approved or authorized by the federal Food and Drug Administration for individuals who are not less than eleven (11) years of age.

(c) A standing order described in subsection (a) or (b) or (e) must include the following:

(1) The purpose of the order.

(2) The eligible recipients.

(3) The geographic area covered by the standing order.

(4) The procedure for administering or dispensing the immunization or product.

(5) A timeline for renewing or updating the standing order.

(d) The state health commissioner or designated public health authority who issues a standing order, prescription, or protocol under subsection (a) or (b) or (e) is immune from civil liability related to the issuing of the standing order, prescription, or protocol.



(e) Notwithstanding subsection (a) and subsection (b), the state health commissioner or the commissioner's designated public health authority may issue a standing order, prescription, or protocol to administer or dispense an immunization that is recommended by the federal Centers for Disease Control and Prevention Advisory Committee on Immunization Practices for individuals who are at least five (5) years of age. Nothing in this subsection authorizes the state health commissioner or the commissioner's designated public health authority to:

(1) require an individual to receive an immunization for COVID-19; or

(2) waive or otherwise allow a minor to receive an immunization without the consent of the parent or guardian as required under IC 16-36-1.

This subsection expires at the conclusion of the federal public health emergency concerning COVID-19 that was renewed on October 15, 2021, or any subsequent renewal of the declared federal public health emergency concerning COVID-19.

SECTION 2. IC 25-26-13.2 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]:

Chapter 13.2. Ancillary Services of a Pharmacist

Sec. 1. This chapter does not apply to a pharmacy that is not open to the public.

Sec. 2. As used in this chapter, "ancillary services" means services performed by pharmacy personnel that are not directly involved in the dispensation of a prescription drug. The term includes the following:

- (1) Immunizations.
- (2) Drug administration.
- (3) Medication therapy management.
- (4) Disease state management.
- (5) Refill reminders.

Sec. 3. (a) A pharmacy shall develop and implement an organizational policy that permits a pharmacist to do all of the following:

- (1) Limit the provision of ancillary services if, in the pharmacist's professional judgment, the provision of ancillary services cannot be safely provided or may negatively impact patient access to medications.
- (2) Limit pharmacy access points if, in the pharmacist's professional judgment, limiting the access points will



1 minimize fatigue, distraction, or other conditions that
 2 interfere with a pharmacist's ability to practice with
 3 reasonable safety and competence.

4 (b) The organizational policy required under subsection (a)
 5 must include an offer by pharmacy staff to make an appointment
 6 for a patient or refer a patient to another location that is offering
 7 ancillary services.

8 (c) If a pharmacy has not implemented an organizational
 9 policy as required under this section, the pharmacy may not
 10 override the control of the pharmacist on duty to limit the
 11 provision of ancillary services or limit pharmacy access points if
 12 the pharmacist, in the pharmacist's professional judgment, believes
 13 it will affect the pharmacist's ability to safely provide the services
 14 or negatively impact patient access to medications. The pharmacy
 15 staff shall offer to make an appointment for the patient or refer the
 16 patient as set forth in subsection (b).

17 Sec. 4. Upon request, a pharmacy shall make the pharmacy's
 18 organizational policy available to the board and shall maintain a
 19 copy of the policy at the pharmacy for inspection by the board.

20 Sec. 5. (a) A pharmacy may not establish any productivity or
 21 production quotas for the provision of ancillary services. This
 22 section prohibits a fixed number or formula related to the duties of
 23 pharmacy personnel, against which the pharmacy measures or
 24 evaluates the number of times a pharmacy staff perform tasks or
 25 provide services.

26 (b) Quotas under subsection (a) do not include the following
 27 that is not calculated or measured by the number of tasks
 28 performed or services provided:

- 29 (1) A measurement of the revenue earned by the pharmacy.
- 30 (2) An evaluation or measurement of the competence,
- 31 performance, or quality of care provided.

32 Sec. 6. A pharmacy may not discipline or otherwise retaliate
 33 against a pharmacist who, in good faith, acts in accordance with
 34 this chapter. For purposes of this section, discipline or retaliation
 35 include any of the following:

- 36 (1) Termination of suspension of employment.
- 37 (2) Withholding salary increases or employee benefits to
- 38 which the pharmacist is otherwise entitled.
- 39 (3) Transferring or reassigning the pharmacist.
- 40 (4) Denying a promotion that otherwise would have been
- 41 received.
- 42 (5) Reducing pay.



(6) Demoting the individual.

SECTION 3. IC 25-26-24.5 IS ADDED TO THE INDIANA CODE AS A NEW CHAPTER TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]:

Chapter 24.5. Prescribing, Testing, and Treating by Pharmacists by Standing Order

Sec. 1. A pharmacist may administer, dispense, test, treat, or prescribe any of the following through a standing order issued by the commissioner of the Indiana department of health under IC 16-19-4-11:

(1) An immunization that is approved or authorized by the federal Food and Drug Administration for individuals who are not less than eleven (11) years of age.

(2) A smoking cessation product. However, the pharmacist must inform the patient that the patient must have a follow-up consultation with the patient's licensed prescriber.

(3) Point of care testing that has been approved or authorized by the federal Food and Drug Administration and categorized as Clinical Laboratory Improvement Amendments (CLIA)-waived under 42 U.S.C. 263a for the following conditions:

(A) COVID-19.

(B) Group B streptococcus.

(C) Respiratory syncytial virus (RSV).

(D) Influenza.

(4) A prescription for, including the dispensing of, a medication that meets the following:

(A) Is indicated for the treatment of a diagnosed condition.

(B) Is authorized by the federal Food and Drug Administration for treatment of the diagnosed condition.

(C) Is included on a protocol list that is established by the Indiana board of pharmacy, in consultation with the Indiana department of health.

Sec. 2. A pharmacist acting under a standing order described in IC 16-19-4-11(a)(3) and IC 16-19-4-11(a)(4) shall do the following:

(1) Complete a continuing education course from provider approved by the Accreditation Council for Pharmacy Education (ACPE).

(2) Maintain records of testing and treatment for at least



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seven (7) years.

(3) Report positive test results, as required by the Indiana department of health.

(4) Provide the patient with written information advising the patient to follow up with the patient's primary care provider or another licensed practitioner.

(5) If the patient identifies a primary care provider and the patient consents, transmit a summary of the visit, including any test results and prescribed medication, to the identified primary care provider within a reasonable period of time and in a manner that is consistent with federal and state privacy laws.

Sec. 3. A pharmacy technician or pharmacy intern registered under this article may perform specimen collection and administer a test described in section 1(3) of this chapter if the following are met:

(1) The collection or administration is conducted under the direct supervision of a pharmacist.

(2) The pharmacist is immediately available on the premises.

(3) The pharmacist remains responsible for:

(A) the interpretation of the test;

(B) the prescribing or dispensing of any medication in compliance with section 1 of this chapter; and

(C) compliance with the reporting and record keeping requirements set forth in section 2 of this chapter.

Sec. 4. (a) The Indiana board of pharmacy shall adopt rules under IC 4-22-2 to implement this chapter, including rules concerning the following:

(1) Standardized protocols.

(2) Reporting requirements.

(3) Age and dosage limitations.

(4) Continuing education requirements.

(b) The Indiana board of pharmacy shall consult with the commissioner of the Indiana department of health in the development of the rules described in subsection (a).

Sec. 5. (a) This section does not apply to an act or omission that constitutes gross negligence, willful or wanton misconduct, or intentional wrongdoing.

(b) A pharmacist who acts in good faith in compliance with a statewide standing order described in this chapter and the rules adopted under section 4 of this chapter is immune from civil liability for the following:



(1) An act or omission related to the ordering, administering, or interpretation of a test described in section 1(3) of this chapter.

(2) The prescribing and dispensing of medication described in section 1(4) of this chapter.

SECTION 4. IC 34-30-2.1-383.2 IS ADDED TO THE INDIANA CODE AS A NEW SECTION TO READ AS FOLLOWS [EFFECTIVE JULY 1, 2026]: Sec. 383.2. IC 25-26-24.5-5 (Concerning a pharmacist ordering, administering, or interpreting tests and the prescribing and dispensing of medication).

SECTION 5. [EFFECTIVE UPON PASSAGE] (a) As used in this SECTION, "board" refers to the Indiana board of pharmacy.

(b) Before July 1, 2026, the board shall begin the administrative rulemaking process to adopt rules to implement IC 25-26-24.5, as added by this act.

(c) This SECTION expires December 31, 2026.

SECTION 6. An emergency is declared for this act.

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