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3 **Title: Oppose Rapid Diagnostic Testing (RDT) Program in Michigan**  
4 **Pharmacies**  
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6 **Introduced by: Barb Saul, DO, for the Michigan Academy of Family Physicians**  
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8 **Original Author: Fred Van Alstine, MD**  
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10 **Referred to: Reference Committee on Rules and Order of Business**  
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12 **House Action: Approved**  
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15 **Whereas, the Michigan Academy of Family Physicians (MAFP) and the**  
16 **Michigan State Medical Society (MSMS) share a common mission of advocating for**  
17 **the safety, health and wellbeing of medical care patients and caring for the welfare**  
18 **of the citizens of Michigan, and**  
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20 **Whereas, MAFP very recently learned that a new Rapid Diagnostic Testing**  
21 **(RDT) in the Community Pharmacy Program is being conducted in Michigan, which**  
22 **would allow a pharmacist to administer and interpret certain diagnostic tests,**  
23 **perform physical assessments, make a diagnosis and prescribe medication that**  
24 **are beyond a pharmacist’s scope of practice and raise serious concerns about**  
25 **patient safety, and**  
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27 **Whereas, a presentation offered through the Michigan Pharmacists**  
28 **Association (MPA) stated that the “physical assessment skills of many**  
29 **pharmacists/pharmacy students are not adequate for patient care activities,” and**  
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31 **Whereas, it would appear that the RDT program sanctions the unlicensed**  
32 **practice of medicine and violates the delegation, supervision and prescriptive**  
33 **authority provisions of Michigan’s Public Health Code, MCL 333.1101 (PHC), and**  
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35 **Whereas, MSMS and MAFP recognize that pharmacists play a valuable role**  
36 **in the delivery of high quality health care, particularly medication therapy**  
37 **management (MTM) activities administered as part of an integrated, physician-led**  
38 **health care team, patient-centered medical home, or patient-centered medical**  
39 **neighborhood, so long as the activities fall within a pharmacist’s scope of practice**  
40 **and do not sacrifice a patient’s health, safety or welfare, and**  
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42 **Whereas, a recent presentation conducted on behalf of MPA also**  
43 **acknowledged that “pharmacists’ use of RDTs to collect patient information will**  
44 **increase dramatically over the next 5-10 years...[and] will become commonplace**  
45 **like pharmacy-based immunizations,” and**  
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47 **Whereas, the RDT program will not only put patients at risk but will further**  
48 **fragment health care delivery and create unaccountable silos of care, which is in**  
49 **direct opposition to ongoing systemic efforts to promote continuous whole-person**  
50 **care with improved health outcomes for both the individual and society; therefore**  
51 **be it**

52           **RESOLVED:** That MSMS oppose the existing Rapid Diagnostic Testing  
53 (RDT) program in Michigan pharmacies, as well as any future expansion or  
54 creation of similar programs that may result in a diagnosis of illness or initiation of  
55 a prescription medication treatment plan by a pharmacist in the state of Michigan;  
56 and be it further

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58           **RESOLVED:** That MSMS work with the Michigan Academy of Family  
59 Physicians and other partners to ensure the appropriate governmental agencies  
60 investigate activities which may promote the unlicensed practice of medicine  
61 without adequate delegation and supervision, like the Rapid Diagnostic Testing  
62 (RDT) program, and seek the discontinuance of any such programs deemed to  
63 exceed the limits of the Public Health Code or acceptable standards of prevailing  
64 practice; and be it further

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66           **RESOLVED:** That MSMS work with the Michigan Academy of Family  
67 Physicians to educate physician members on what constitutes appropriate  
68 delegation authorities under the Public Health Code and acceptable and prevailing  
69 practice standards; and be it further

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71           **RESOLVED:** That MSMS work with the Michigan Academy of Family  
72 Physicians to educate physician members on what constitutes meaningful  
73 supervision and/or oversight under the Public Health Code and acceptable and  
74 prevailing practice standards; and be it further

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76           **RESOLVED:** That MSMS work with the Michigan Academy of Family  
77 Physicians, the American Medical Association, and the  
78 American Academy of Family Physicians to evaluate whether a Rapid Diagnostic  
79 Testing (RDT) program, which would allow a pharmacist to administer and interpret  
80 certain diagnostic tests, perform physical assessments, make a diagnosis and  
81 prescribe medication that are beyond a pharmacist's scope of practice, violates  
82 federal and state fraud and abuse laws; and be it further

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84           **RESOLVED:** That MSMS work with the Michigan Academy of Family  
85 Physicians, the Michigan Pharmacists Association, and other stakeholders to  
86 develop a legislative and/or regulatory remedy to encourage the lawful integration  
87 of medication therapy management activities as part of an integrated, physician-led  
88 health care team, patient-centered medical home, or patient-centered medical  
89 neighborhood.

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92           **WAYS AND MEANS COMMITTEE FISCAL NOTE: NONE**