1 A bill to be entitled 2 An act relating to electronic prescribing; amending s. 3 456.42, F.S.; requiring all prescriptions for medicinal drugs to be electronically generated and 4 5 transmitted to the pharmacist filling the 6 prescription; providing an exception; deleting a 7 requirement that a health care practitioner may only 8 electronically transmit prescriptions for certain 9 drugs; prohibiting electronic prescribing from 10 interfering with a patient's freedom to choose a 11 pharmacy; providing definitions; authorizing 12 electronic prescribing software to display information regarding a payor's formulary under certain 13 14 circumstances; providing rulemaking authority; repealing s. 456.43, F.S., relating to electronic 15 prescribing for medicinal drugs; amending ss. 458.347 16 17 and 459.022, F.S.; conforming provisions to changes made by the act; providing an effective date. 18 19 20 Be It Enacted by the Legislature of the State of Florida: 21 22 Section 456.42, Florida Statutes, is amended to Section 1. 23 read: 24 456.42 Written Prescriptions for medicinal drugs.-25 Any A written prescription for a medicinal drug issued

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by a health care practitioner licensed by law to prescribe such drug must be electronically generated and transmitted to the pharmacist filling the prescription. legibly printed or typed so as to be capable of being understood by the pharmacist filling the prescription; must contain the name of the prescribing practitioner, the name and strength of the drug prescribed, the quantity of the drug prescribed, and the directions for use of the drug; must be dated; and must be signed by the prescribing practitioner on the day when issued. However, A prescription that is electronically generated and transmitted must contain the name of the prescribing practitioner, the name and strength of the drug prescribed, the quantity of the drug prescribed in numerical format, and the directions for use of the drug and must contain the date and an electronic signature, as defined in s. 668.003(4), by the prescribing practitioner only on the day issued.

when electronic prescribing is not available due to a temporary technological or electrical failure that is not reasonably within the control of the prescribing practitioner, and such failure is documented in the patient record. A written prescription for a controlled substance listed in chapter 893 must have the quantity of the drug prescribed in both textual and numerical formats, must be dated in numerical, month/day/year format, or with the abbreviated month written

out, or the month written out in whole, and must be either written on a standardized counterfeit-proof prescription pad produced by a vendor approved by the department or electronically prescribed as that term is used in s. 408.0611. As a condition of being an approved vendor, a prescription pad vendor must submit a monthly report to the department that, at a minimum, documents the number of prescription pads sold and identifies the purchasers. The department may, by rule, require the reporting of additional information.

- patient's freedom to choose a pharmacy. A health care practitioner licensed by law to prescribe a medicinal drug who maintains a system of electronic health records as defined in s. 408.051(2)(a), or who prescribes medicinal drugs as an owner, an employee, or a contractor of a licensed health care facility or practice that maintains such a system and who is prescribing in his or her capacity as such an owner, an employee, or a contractor, may only electronically transmit prescriptions for such drugs. This requirement applies to such a health care practitioner upon renewal of the health care practitioner's license or by July 1, 2021, whichever is earlier, but does not apply if:
- (a) The practitioner and the dispenser are the same entity;
 - (b) The prescription cannot be transmitted electronically

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under the most recently implemented version of the National Council for Prescription Drug Programs SCRIPT Standard;

- (c) The practitioner has been issued a waiver by the department, not to exceed 1 year in duration, from the requirement to use electronic prescribing due to demonstrated economic hardship, technological limitations that are not reasonably within the control of the practitioner, or another exceptional circumstance demonstrated by the practitioner;
- (d) The practitioner reasonably determines that it would be impractical for the patient in question to obtain a medicinal drug prescribed by electronic prescription in a timely manner and such delay would adversely impact the patient's medical condition;
- (e) The practitioner is prescribing a drug under a research protocol;
- (f) The prescription is for a drug for which the federal Food and Drug Administration requires the prescription to contain elements that may not be included in electronic prescribing;
- (g) The prescription is issued to an individual receiving hospice care or who is a resident of a nursing home facility; or
- (h) The practitioner determines that it is in the best interest of the patient, or the patient determines that it is in his or her own best interest, to compare prescription drug prices among area pharmacies. The practitioner must document

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such determination in the patient's medical record.

- or permit any other person to use any means to influence, through economic incentives or otherwise, the prescribing decision of a prescribing practitioner or his or her agent at the point of care, including but not limited to, means such as advertising, instant messaging, pop-up ads, or similar means triggered by or in specific response to the input, selection, or act of a prescribing practitioner or his or her agent in prescribing a certain medicinal drug or directing a patient to a certain pharmacy. For purposes of this subsection, the term:
- (a) "Point of care" means the time at which a prescribing practitioner or his or her agent prescribes any medicinal drug.
- (b) "Prescribing decision" means a prescribing practitioner's or his or her agent's decision to prescribe any medicinal drug.
- (5) Electronic prescribing software may display information regarding a payor's formulary if nothing is designed to preclude or make more difficult the selection of any particular pharmacy by a patient or the selection of any certain medicinal drug by a prescribing practitioner or his or her agent.

The department, in consultation with the Board of Medicine, the Board of Osteopathic Medicine, the Board of Podiatric Medicine,

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the Board of Dentistry, the Board of Nursing, and the Board of Optometry, may adopt rules to implement this section subsection.

- Section 2. Section 456.43, Florida Statutes, is repealed.
- Section 3. Paragraph (e) of subsection (4) of section 458.347, Florida Statutes, is amended to read:
 - 458.347 Physician assistants.-

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- (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.-
- (e) A supervising physician may delegate to a fully licensed physician assistant the authority to prescribe or dispense any medication used in the supervising physician's practice unless such medication is listed on the formulary created pursuant to paragraph (f). A fully licensed physician assistant may only prescribe or dispense such medication under the following circumstances:
- 1. A physician assistant must clearly identify to the patient that he or she is a physician assistant and inform the patient that the patient has the right to see the physician before a prescription is prescribed or dispensed by the physician assistant.
- 2. The supervising physician must notify the department of his or her intent to delegate, on a department-approved form, before delegating such authority and of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a supervising physician who is registered as a dispensing practitioner in compliance with s.

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151 465.0276.

- 3. The physician assistant must complete a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal. Three of the 10 hours must consist of a continuing education course on the safe and effective prescribing of controlled substance medications which is offered by a statewide professional association of physicians in this state accredited to provide educational activities designated for the American Medical Association Physician's Recognition Award Category 1 credit or designated by the American Academy of Physician Assistants as a Category 1 credit.
- 4. The department may issue a prescriber number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the requirements of this paragraph. The physician assistant is not required to independently register pursuant to s. 465.0276.
- 5. The prescription $\frac{1}{1}$ must comply with $\frac{1}{1}$ ss. $\frac{1}{1}$ 456.0392(1) and $\frac{1}{1}$ and $\frac{1}{1}$ and chapter 499 and must contain, in addition to the supervising physician's name, address, and telephone number, the physician assistant's prescriber number. Unless it is a drug or drug sample dispensed by the physician assistant, the prescription must be filled in a pharmacy permitted under

chapter 465 and must be dispensed in that pharmacy by a pharmacist licensed under chapter 465. The inclusion of the prescriber number creates a presumption that the physician assistant is authorized to prescribe the medicinal drug and the prescription is valid.

- 6. The physician assistant must note the prescription or dispensing of medication in the appropriate medical record.
- Section 4. Paragraph (e) of subsection (4) of section 459.022, Florida Statutes, is amended to read:
 - 459.022 Physician assistants.-

- (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.-
- (e) A supervising physician may delegate to a fully licensed physician assistant the authority to prescribe or dispense any medication used in the supervising physician's practice unless such medication is listed on the formulary created pursuant to s. 458.347. A fully licensed physician assistant may only prescribe or dispense such medication under the following circumstances:
- 1. A physician assistant must clearly identify to the patient that she or he is a physician assistant and must inform the patient that the patient has the right to see the physician before a prescription is prescribed or dispensed by the physician assistant.
- 2. The supervising physician must notify the department of her or his intent to delegate, on a department-approved form,

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before delegating such authority and of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a supervising physician who is registered as a dispensing practitioner in compliance with s. 465.0276.

- 3. The physician assistant must complete a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal.
- 4. The department may issue a prescriber number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the requirements of this paragraph. The physician assistant is not required to independently register pursuant to s. 465.0276.
- 5. The prescription may be in paper or electronic form but must comply with ss. 456.0392(1) and 456.42 ss. 456.0392(1) and 456.42(1) and chapter 499 and must contain, in addition to the supervising physician's name, address, and telephone number, the physician assistant's prescriber number. Unless it is a drug or drug sample dispensed by the physician assistant, the prescription must be filled in a pharmacy permitted under chapter 465, and must be dispensed in that pharmacy by a pharmacist licensed under chapter 465. The inclusion of the prescriber number creates a presumption that the physician

assistant is authorized to prescribe the medicinal drug and the prescription is valid.

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6. The physician assistant must note the prescription or dispensing of medication in the appropriate medical record.

Section 5. This act shall take effect July 1, 2021.

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