

1                   A bill to be entitled  
2           An act relating to the practice of pharmacy; amending  
3           s. 381.0031, F.S.; requiring specified licensed  
4           pharmacists to report certain information relating to  
5           public health to the Department of Health; amending s.  
6           465.003, F.S.; revising the definition of the term  
7           "practice of the profession of pharmacy"; creating s.  
8           465.1865, F.S.; providing definitions; providing  
9           requirements for pharmacists to provide services under  
10          a collaborative pharmacy practice agreement; requiring  
11          the terms and conditions of such agreement to be  
12          appropriate to the training of the pharmacist and the  
13          scope of practice of the physician; requiring  
14          notification to the board upon practicing under a  
15          collaborative pharmacy practice agreement; requiring  
16          pharmacists to submit a copy of the signed  
17          collaborative practice agreement to the Board of  
18          Pharmacy; providing for the maintenance of patient  
19          records for a certain period of time; providing for  
20          renewal of such agreement; requiring a pharmacist and  
21          the collaborating physician to maintain on file and  
22          make available the collaborative pharmacy practice  
23          agreement; prohibiting certain actions relating to the  
24          collaborative pharmacy practice agreement; requiring  
25          specified continuing education for a pharmacist who

26 practices pursuant to a collaborative pharmacy  
27 practice agreement; requiring the Board of Pharmacy to  
28 adopt rules; creating s. 465.1895, F.S.; establishing  
29 a committee to identify minor, nonchronic health  
30 conditions that a pharmacist may test or screen for  
31 and treat; defining "minor, nonchronic health  
32 conditions"; providing requirements for a pharmacist  
33 to test or screen for and treat minor, nonchronic  
34 health conditions; requiring the committee to develop  
35 a formulary of medicinal drugs that a pharmacist may  
36 prescribe; providing requirements for a pharmacist to  
37 test or screen for and treat minor, nonchronic health  
38 conditions; providing requirements for the written  
39 protocol between a pharmacist and a supervising  
40 physician; prohibiting a pharmacist from providing  
41 certain services under certain circumstances;  
42 requiring a pharmacist to complete a specified amount  
43 of continuing education; providing an effective date.

44  
45 Be It Enacted by the Legislature of the State of Florida:

46  
47 Section 1. Subsection (2) of section 381.0031, Florida  
48 Statutes, is amended to read:

49 381.0031 Epidemiological research; report of diseases of  
50 public health significance to department.—

51 (2) Any practitioner licensed in this state to practice  
52 medicine, osteopathic medicine, chiropractic medicine,  
53 naturopathy, or veterinary medicine; any licensed pharmacist  
54 authorized pursuant to a protocol with a supervising licensed  
55 physician, under s. 465.1895, or a collaborative pharmacy  
56 practice agreement, as defined in s. 465.1865, to perform or  
57 order and evaluate laboratory and clinical tests; any hospital  
58 licensed under part I of chapter 395; or any laboratory  
59 appropriately certified by the Centers for Medicare and Medicaid  
60 Services under the federal Clinical Laboratory Improvement  
61 Amendments and the federal rules adopted thereunder which  
62 diagnoses or suspects the existence of a disease of public  
63 health significance shall immediately report the fact to the  
64 Department of Health.

65 Section 2. Subsection (13) of section 465.003, Florida  
66 Statutes, is amended to read:

67 465.003 Definitions.—As used in this chapter, the term:

68 (13) "Practice of the profession of pharmacy" includes  
69 compounding, dispensing, and consulting concerning contents,  
70 therapeutic values, and uses of any medicinal drug; consulting  
71 concerning therapeutic values and interactions of patent or  
72 proprietary preparations, whether pursuant to prescriptions or  
73 in the absence and entirely independent of such prescriptions or  
74 orders; and conducting other pharmaceutical services. For  
75 purposes of this subsection, "other pharmaceutical services"

76 means the monitoring of the patient's drug therapy and assisting  
77 the patient in the management of his or her drug therapy, and  
78 includes review of the patient's drug therapy and communication  
79 with the patient's prescribing health care provider as licensed  
80 under chapter 458, chapter 459, chapter 461, or chapter 466, or  
81 similar statutory provision in another jurisdiction, or such  
82 provider's agent or such other persons as specifically  
83 authorized by the patient, regarding the drug therapy; and  
84 initiating, modifying, or discontinuing drug therapy for a  
85 chronic health condition pursuant to a collaborative pharmacy  
86 practice agreement. ~~However,~~ Nothing in this subsection may be  
87 interpreted to permit an alteration of a prescriber's  
88 directions, the diagnosis or treatment of any disease, the  
89 initiation of any drug therapy, the practice of medicine, or the  
90 practice of osteopathic medicine, unless otherwise permitted by  
91 law or specifically authorized by s. 465.1865 or s. 465.1895.  
92 "Practice of the profession of pharmacy" also includes any other  
93 act, service, operation, research, or transaction incidental to,  
94 or forming a part of, any of the foregoing acts, requiring,  
95 involving, or employing the science or art of any branch of the  
96 pharmaceutical profession, study, or training, and shall  
97 expressly permit a pharmacist to transmit information from  
98 persons authorized to prescribe medicinal drugs to their  
99 patients. The practice of the profession of pharmacy also  
100 includes the administration of vaccines to adults pursuant to s.

101 465.189, the testing or screening for and treatment of minor,  
102 nonchronic health conditions pursuant to s. 465.1895, and the  
103 preparation of prepackaged drug products in facilities holding  
104 Class III institutional pharmacy permits.

105 Section 3. Section 465.1865, Florida Statutes, is created  
106 to read:

107 465.1865 Collaborative pharmacy practice for chronic  
108 health conditions.—

109 (1) For purposes of this section, the term:

110 (a) "Collaborative pharmacy practice agreement" means a  
111 written agreement between a pharmacist who meets the  
112 qualifications of this section and a physician licensed under  
113 chapter 458 or chapter 459 in which a collaborating physician  
114 authorizes a pharmacist to provide specified patient care  
115 services to the collaborating physician's patients.

116 (b) "Chronic health condition" means a condition that  
117 typically lasts more than 1 year and requires ongoing medical  
118 attention, limits activities of daily living, or both. Such  
119 condition may include, but is not limited to:

- 120 1. Arthritis;
- 121 2. Asthma;
- 122 3. Congestive heart failure;
- 123 4. Chronic obstructive pulmonary diseases;
- 124 5. Diabetes;
- 125 6. Emphysema;

126           7. Human immunodeficiency virus or acquired  
 127 immunodeficiency syndrome;  
 128           8. Hypertension;  
 129           9. Obesity;  
 130           10. Renal disease; or  
 131           11. Any other chronic condition or co-morbidity identified  
 132 by the collaborating physician.  
 133           (2) To provide services under a collaborative pharmacy  
 134 practice agreement, a pharmacist must:  
 135           (a) Hold an active and unencumbered license to practice  
 136 pharmacy in this state.  
 137           (b) Have earned a degree of doctor of pharmacy or have  
 138 completed 5 years of experience as a licensed pharmacist.  
 139           (c) Complete an initial 20-hour course approved by the  
 140 board that includes, at a minimum, instruction on the following:  
 141           1. Performance of patient assessments.  
 142           2. Ordering, performing, and interpreting clinical and  
 143 laboratory tests related to collaborative pharmacy practice.  
 144           3. Evaluating and managing diseases and health conditions  
 145 in collaboration with other health care practitioners.  
 146           4. Any other area required by the board by rule.  
 147           (d) Maintain at least \$250,000 of professional liability  
 148 insurance coverage. However, a pharmacist who maintains  
 149 professional liability insurance coverage pursuant to s.  
 150 465.1895 satisfies this requirement.

151 (e) Submit a copy of the signed collaborative pharmacy  
152 practice agreement and proof of satisfying the conditions of  
153 this section to the board before commencing practice.

154 (f) Maintain records of all patients receiving services  
155 under a collaborative pharmacy practice agreement for a period  
156 of 5 years.

157 (3) The terms and conditions of the collaborative pharmacy  
158 practice agreement must be appropriate to the pharmacist's  
159 training and the services delegated to the pharmacist must be  
160 within the collaborating physician's scope of practice.

161 (a) A collaborative pharmacy practice agreement must  
162 include the following:

163 1. Name of the patient or patients for whom a pharmacist  
164 may provide services.

165 2. Each chronic disease to be collaboratively managed.

166 3. Specific medicinal drug or drugs to be managed by the  
167 pharmacist.

168 4. Circumstances under which the pharmacist may order or  
169 perform and evaluate laboratory or clinical tests.

170 5. Conditions and events upon which the pharmacist must  
171 notify the collaborating physician and the manner and timeframe  
172 in which such notification must occur.

173 6. Beginning and ending dates for the collaborative  
174 pharmacy practice agreement and termination procedures,  
175 including procedures for patient notification and medical

176 records transfers.

177 7. A statement that the collaborative pharmacy practice  
178 agreement may be terminated, in writing, by either party at any  
179 time.

180 (b) A collaborative pharmacy practice agreement must be  
181 renewed at least every 2 years.

182 (c) The pharmacist, along with the collaborating  
183 physician, must maintain on file the collaborative pharmacy  
184 practice agreement at his or her practice location, and must  
185 make such agreements available upon request or inspection.

186 (4) A pharmacist may not:

187 (a) Modify or discontinue medicinal drugs prescribed by a  
188 health care practitioner with whom he or she does not have a  
189 collaborative practice agreement.

190 (b) Enter into a collaborative pharmacy practice agreement  
191 while acting as an employee without the written approval of the  
192 owner of the pharmacy.

193 (5) A physician may not delegate the authority to initiate  
194 or prescribe a controlled substance as defined in s. 893.03 or  
195 21 U.S.C. s. 812 to a pharmacist.

196 (6) A pharmacist who practices pursuant to a collaborative  
197 pharmacy practice agreement must complete an 8-hour continuing  
198 education course approved by the board that addresses issues  
199 related to collaborative pharmacy practice each biennial  
200 licensure renewal in addition to the continuing education



201 requirements under s. 465.009. A pharmacist must submit  
202 confirmation of having completed such course when applying for  
203 licensure renewal. A pharmacist who fails to comply with this  
204 subsection shall be prohibited from practicing under a  
205 collaborative pharmacy practice agreement as authorized in this  
206 section.

207 (7) The board shall adopt rules pursuant to ss. 120.536(1)  
208 and 120.54 to implement this section.

209 Section 4. Section 465.1895, Florida Statutes, is created  
210 to read:

211 465.1895 Testing or screening for and treatment of minor,  
212 nonchronic health conditions.—

213 (1) The board, in consultation with the Board of Medicine  
214 and the Board of Osteopathic Medicine, shall adopt rules  
215 identifying the minor, nonchronic health conditions for which a  
216 pharmacist may test or screen for and treat. For purposes of  
217 this section a minor, nonchronic health condition is typically a  
218 short-term condition that is generally managed with minimal  
219 treatment or self-care, including, but not limited to, the  
220 following:

221 (a) Influenza.

222 (b) Streptococcus.

223 (c) Lice.

224 (d) Skin conditions, such as ringworm and athlete's foot.

225 (e) Minor, uncomplicated infections.

226        (2) A pharmacist who tests or screens for and treats  
227 minor, nonchronic health conditions pursuant to this section  
228 must:

229        (a) Hold an active and unencumbered license to practice  
230 pharmacy in this state.

231        (b) Complete an initial 20-hour education course approved  
232 by the board. The course, at a minimum, must address patient  
233 assessments, point-of-care testing procedures, safe and  
234 effective treatment of minor, nonchronic health conditions, and  
235 identification of contraindications.

236        (c) Maintain at least \$250,000 of liability coverage. A  
237 pharmacist who maintains liability coverage pursuant to s.  
238 465.1865 satisfies this requirement.

239        (d) Report a diagnosis or suspected existence of a disease  
240 of public health significance to the department pursuant to s.  
241 381.0031.

242        (e) Upon request of a patient, furnish patient records to  
243 a health care practitioner designated by the patient.

244        (f) Maintain records of all patients receiving services  
245 pursuant to this section for a period of 5 years.

246        (3) The board shall adopt, by rule, a formulary of  
247 medicinal drugs that a pharmacist may prescribe for the minor,  
248 nonchronic health conditions approved under subsection (1). The  
249 formulary must include medicinal drugs approved by the United  
250 States Food and Drug Administration that are indicated for

251 treatment of the minor, nonchronic health condition, including  
252 any over-the-counter medication. The formulary may not include  
253 any controlled substance, as defined in s. 893.03 or 21 U.S.C.  
254 s. 812.

255 (4) A pharmacist who tests or screens for and treats  
256 minor, nonchronic health conditions pursuant to this section may  
257 use any tests that may guide diagnosis or clinical  
258 decisionmaking which the Centers for Medicare and Medicaid  
259 Services has determined qualifies for a waiver under the federal  
260 Clinical Laboratory Improvement Amendments of 1988, or the  
261 federal rules adopted thereunder, or any established screening  
262 procedures that can safely be performed by a pharmacist.

263 (5) A pharmacist who tests for and treats influenza or  
264 streptococcus pursuant to this section may only provide such  
265 services within the framework of an established written protocol  
266 with a supervising physician licensed under chapter 458 or  
267 chapter 459, and must submit the protocol to the board.

268 (a) The protocol between a pharmacist and supervising  
269 physician under this subsection must include particular terms  
270 and conditions imposed by the supervising physician relating to  
271 the testing for and treatment of influenza and streptococcus  
272 pursuant to this section. The terms and conditions must be  
273 appropriate to the pharmacist's training. At a minimum, the  
274 protocol shall include:

275 1. Specific categories of patients who the pharmacist is

276 authorized to test for and treat influenza and streptococcus.

277 2. The supervising physician's instructions for the  
278 treatment of influenza and streptococcus based on the patient's  
279 age, symptoms, and test results, including negative results.

280 3. A process and schedule for the supervising physician to  
281 review the pharmacist's actions under the protocol.

282 4. A process and schedule for the pharmacist to notify the  
283 supervising physician of the patient's condition, tests  
284 administered, test results, and course of treatment.

285 5. Other requirements, as established by the board in  
286 rule.

287 (b) A pharmacist authorized to test for and treat  
288 influenza and streptococcus under the protocol shall provide  
289 evidence of current certification by the board to the  
290 supervising physician. A supervising physician shall review the  
291 pharmacist's actions in accordance with the protocol.

292 (6) A pharmacist providing services pursuant to this  
293 section may not perform such services while acting as an  
294 employee without the written approval of the owner of the  
295 pharmacy.

296 (7) A pharmacist providing services pursuant to this  
297 section must complete a 3-hour continuing education course  
298 approved by the board addressing issues related to minor,  
299 nonchronic health conditions each biennial licensure renewal in  
300 addition to the continuing education requirements under s.

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301 | 465.009. Each pharmacist must submit confirmation of having  
302 | completed the course when applying for licensure renewal. A  
303 | pharmacist who fails to comply with this subsection may not  
304 | provide testing, screening, and treatment services.

305 | Section 5. This act shall take effect July 1, 2019.