$\mathbf{B}\mathbf{y}$ the Committees on Appropriations; and Health Policy; and Senator Diaz

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1	A bill to be entitled
2	An act relating to the practice of pharmacy; amending
3	s. 381.0031, F.S.; requiring certain licensed
4	pharmacists to report specified information relating
5	to public health to the Department of Health; amending
6	s. 465.003, F.S.; revising the definition of the term
7	"practice of the profession of pharmacy"; amending s.
8	465.0125, F.S.; requiring a pharmacist to complete
9	additional training to be licensed as a consultant
10	pharmacist; authorizing a consultant pharmacist to
11	perform specified services under certain circumstances
12	and within the scope of a written collaborative
13	practice agreement with certain health care
14	practitioners; providing requirements for the
15	agreement; prohibiting a consultant pharmacist from
16	modifying or discontinuing medicinal drugs prescribed
17	by a health care practitioner without a written
18	collaborative practice agreement; revising the
19	responsibilities of a consultant pharmacist; requiring
20	written collaborative practice agreements to be made
21	available upon request from or upon inspection by the
22	Department of Health; prohibiting a consultant
23	pharmacist from diagnosing any disease or condition;
24	defining the term "health care facility"; creating s.
25	465.1865, F.S.; defining the terms "collaborative
26	pharmacy practice agreement" and "chronic health
27	condition"; specifying criteria a pharmacist must meet
28	to provide services under a collaborative pharmacy
29	practice agreement; providing requirements for

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30	collaborative pharmacy practice agreements; providing
31	for the renewal of such agreements; requiring
32	collaborating pharmacists and physicians to maintain a
33	copy of the collaborative pharmacy practice agreements
34	at their practices and make such agreements available
35	upon request or inspection; requiring pharmacists to
36	submit a copy of the signed collaborative pharmacy
37	practice agreement to the Board of Pharmacy before
38	implementing it; prohibiting pharmacists from engaging
39	in specified activities without a collaborative
40	pharmacy practice agreement; prohibiting pharmacists
41	from entering into collaborative pharmacy practice
42	agreements under certain circumstances; prohibiting
43	collaborating physicians from delegating to
44	pharmacists the authority to initiate or prescribe a
45	controlled substance; providing continuing education
46	requirements for pharmacists practicing under
47	collaborative pharmacy practice agreements; requiring
48	the Board of Medicine in consultation with the Board
49	of Osteopathic Medicine and the Board of Pharmacy to
50	adopt rules; providing an effective date.
51	
52	Be It Enacted by the Legislature of the State of Florida:
53	
54	Section 1. Subsection (2) of section 381.0031, Florida
55	Statutes, is amended to read:
56	381.0031 Epidemiological research; report of diseases of
57	public health significance to department
58	(2) Any practitioner licensed in this state to practice

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576-04564-20 20201094c2 59 medicine, osteopathic medicine, chiropractic medicine, 60 naturopathy, or veterinary medicine; any licensed pharmacist 61 authorized under a collaborative pharmacy practice agreement, as 62 defined in s. 465.1865, to perform or order and evaluate 63 laboratory and clinical tests; any hospital licensed under part 64 I of chapter 395; or any laboratory appropriately certified by 65 the Centers for Medicare and Medicaid Services under the federal 66 Clinical Laboratory Improvement Amendments and the federal rules adopted thereunder which diagnoses or suspects the existence of 67 68 a disease of public health significance shall immediately report 69 the fact to the Department of Health.

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

72

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

73 (13) "Practice of the profession of pharmacy" includes 74 compounding, dispensing, and consulting concerning contents, 75 therapeutic values, and uses of any medicinal drug; consulting 76 concerning therapeutic values and interactions of patent or 77 proprietary preparations, whether pursuant to prescriptions or 78 in the absence and entirely independent of such prescriptions or orders; and conducting other pharmaceutical services. For 79 80 purposes of this subsection, the term "other pharmaceutical 81 services" means the monitoring of the patient's drug therapy and 82 assisting the patient in the management of his or her drug therapy; reviewing and making recommendations regarding, and 83 includes review of the patient's drug therapy and health care 84 85 status in communication with the patient's prescribing health 86 care provider as licensed under chapter 458, chapter 459, 87 chapter 461, or chapter 466, or a similar statutory provision in

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576-04564-20 20201094c2 88 another jurisdiction, or such provider's agent or such other 89 persons as specifically authorized by the patient; and initiating, modifying, or discontinuing drug therapy for a 90 91 chronic health condition under a collaborative pharmacy practice 92 agreement, regarding the drug therapy. However, Nothing in this 93 subsection may be interpreted to permit an alteration of a 94 prescriber's directions, the diagnosis or treatment of any 95 disease, the initiation of any drug therapy, the practice of medicine, or the practice of osteopathic medicine, unless 96 otherwise permitted by law or specifically authorized by s. 97 98 465.1865. The term "Practice of the profession of pharmacy" also 99 includes any other act, service, operation, research, or 100 transaction incidental to, or forming a part of, any of the foregoing acts, requiring, involving, or employing the science 101 102 or art of any branch of the pharmaceutical profession, study, or 103 training, and shall expressly permit a pharmacist to transmit 104 information from persons authorized to prescribe medicinal drugs 105 to their patients. The practice of the profession of pharmacy also includes the administration of vaccines to adults pursuant 106 107 to s. 465.189 and the preparation of prepackaged drug products 108 in facilities holding Class III institutional pharmacy permits. 109 The term also includes ordering and evaluating any laboratory or 110 clinical testing; conducting patient assessments; and modifying, 111 discontinuing, or administering medicinal drugs pursuant to s. 112 465.0125 by a consultant pharmacist. Section 3. Section 465.0125, Florida Statutes, is amended 113 114 to read:

115 465.0125 Consultant pharmacist license; application, 116 renewal, fees; responsibilities; rules.-

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117	(1) The department shall issue or renew a consultant
118	pharmacist license upon receipt of an initial or renewal
119	application <u>that</u> which conforms to the requirements for
120	consultant pharmacist initial licensure or renewal as <u>adopted</u>
121	promulgated by the board by rule and a fee set by the board not
122	to exceed \$250. <u>To be licensed as a consultant pharmacist, a</u>
123	pharmacist must complete additional training as required by the
124	board.
125	(a) A consultant pharmacist may provide medication
126	management services in a health care facility within the
127	framework of a written collaborative practice agreement between
128	the pharmacist and a health care facility medical director or a
129	physician licensed under chapter 458 or chapter 459, a podiatric
130	physician licensed under chapter 461, or a dentist licensed
131	under chapter 466 who is authorized to prescribe medicinal
132	drugs. A consultant pharmacist may provide medication management
133	services, conduct patient assessments, and order and evaluate
134	laboratory or clinical testing only for patients of the health
135	care practitioner with whom the consultant pharmacist has a
136	written collaborative practice agreement.
137	(b) A written collaborative practice agreement must outline
138	the circumstances under which the consultant pharmacist may:
139	1. Order and evaluate any laboratory or clinical tests to
140	promote and evaluate patient health and wellness, and monitor
141	drug therapy and treatment outcomes.
142	2. Conduct patient assessments as appropriate to evaluate
143	and monitor drug therapy.
144	3. Modify or discontinue medicinal drugs as outlined in the
145	agreed-upon patient-specific order or preapproved treatment
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146	protocol under the direction of a physician. However, a
147	consultant pharmacist may not modify or discontinue medicinal
148	drugs prescribed by a health care practitioner who does not have
149	a written collaborative practice agreement with the consultant
150	pharmacist.
151	4. Administer medicinal drugs.
152	<u>(c) A</u> The consultant pharmacist shall <u>maintain</u> be
153	responsible for maintaining all drug, patient care, and quality
154	assurance records as required by law and, with the collaborating
155	practitioner, maintain written collaborative practice agreements
156	that must be available upon request from or upon inspection by
157	the department.
158	(d) This subsection does not authorize a consultant
159	pharmacist to diagnose any disease or condition.
160	(e) For purposes of this subsection, the term "health care
161	facility" means an ambulatory surgical center or hospital
162	licensed under chapter 395, an alcohol or chemical dependency
163	treatment center licensed under chapter 397, an inpatient
164	hospice licensed under part IV of chapter 400, a nursing home
165	licensed under part II of chapter 400, an ambulatory care center
166	as defined in s. 408.07, or a nursing home component licensed
167	under chapter 400 within a continuing care facility licensed
168	<u>under chapter 651</u> for establishing drug handling procedures for
169	the safe handling and storage of drugs. The consultant
170	pharmacist may also be responsible for ordering and evaluating
171	any laboratory or clinical testing when, in the judgment of the
172	consultant pharmacist, such activity is necessary for the proper
173	performance of the consultant pharmacist's responsibilities.
174	Such laboratory or clinical testing may be ordered only with

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175	regard to patients residing in a nursing home facility, and then
176	only when authorized by the medical director of the nursing home
177	facility. The consultant pharmacist must have completed such
178	additional training and demonstrate such additional
179	qualifications in the practice of institutional pharmacy as
180	shall be required by the board in addition to licensure as a
181	registered pharmacist.
182	(2) Notwithstanding the provisions of subsection (1), a
183	consultant pharmacist or a doctor of pharmacy licensed in this
184	state may also be responsible for ordering and evaluating any
185	laboratory or clinical testing for persons under the care of a
186	licensed home health agency when, in the judgment of the
187	consultant pharmacist or doctor of pharmacy, such activity is
188	necessary for the proper performance of his or her
189	responsibilities and only when authorized by a practitioner
190	licensed under chapter 458, chapter 459, chapter 461, or chapter
191	466. In order for the consultant pharmacist or doctor of
192	pharmacy to qualify and accept this authority, he or she must
193	receive 3 hours of continuing education relating to laboratory
194	and clinical testing as established by the board.
195	(3) The board shall <u>adopt</u> promulgate rules necessary to
196	implement and administer this section.
197	Section 4. Section 465.1865, Florida Statutes, is created
198	to read:
199	465.1865 Collaborative pharmacy practice for chronic health
200	conditions
201	(1) For purposes of this section, the term:
202	(a) "Collaborative pharmacy practice agreement" means a
203	written agreement between a pharmacist who meets the

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204	qualifications of this section and a physician licensed under
205	chapter 458 or chapter 459 in which a collaborating physician
206	authorizes a pharmacist to provide specified patient care
207	services to the collaborating physician's patients.
208	(b) "Chronic health condition" means:
209	1. Arthritis;
210	2. Asthma;
211	3. Chronic obstructive pulmonary diseases;
212	4. Type 2 diabetes;
213	5. Human immunodeficiency virus or acquired immune
214	deficiency syndrome; or
215	6. Obesity.
216	(2) To provide services under a collaborative pharmacy
217	practice agreement, a pharmacist must be certified according to
218	rules of the Board of Medicine that he or she:
219	(a) Holds an active and unencumbered license to practice
220	pharmacy in the state.
221	(b) Has earned a degree of doctor of pharmacy or has
222	completed 5 years of experience as a licensed pharmacist.
223	(c) Has completed an initial 20-hour course approved by the
224	Board of Medicine in consultation with the Board of Osteopathic
225	Medicine and the Board of Pharmacy which includes, at a minimum,
226	instruction on all of the following:
227	1. Performance of patient assessments.
228	2. Ordering, performing, and interpreting clinical and
229	laboratory tests related to collaborative pharmacy practice.
230	3. Evaluating and managing diseases and health conditions
231	in collaboration with other health care practitioners.
232	4. Any other area required by Board of Medicine rule,

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233	adopted in consultation with the Board of Osteopathic Medicine
234	and the Board of Pharmacy.
235	(d) Maintains at least \$250,000 of professional liability
236	insurance coverage. However, a pharmacist who maintains
237	professional liability insurance coverage of at least \$250,000
238	under a written protocol with a supervising physician for the
239	testing for and treatment of minor nonchronic health conditions
240	satisfies this requirement.
241	(e) Has established a system to maintain records of all
242	patients receiving services under a collaborative pharmacy
243	practice agreement for a period of 5 years.
244	(3) The terms and conditions of the collaborative pharmacy
245	practice agreement must be appropriate to the pharmacist's
246	education and training and the services delegated to the
247	pharmacist must be within the collaborating physician's scope of
248	practice. A copy of the certification issued under subsection
249	(2) must be included as an attachment to the collaborative
250	pharmacy practice agreement.
251	(a) A collaborative pharmacy practice agreement must
252	include the following:
253	1. Name of the collaborating physician's patient or
254	patients for whom a pharmacist may provide services.
255	2. Each chronic health condition to be collaboratively
256	managed.
257	3. Specific medicinal drug or drugs to be managed by the
258	pharmacist.
259	4. Circumstances under which the pharmacist may order or
260	perform and evaluate laboratory or clinical tests.
261	5. Conditions and events upon which the pharmacist must
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262	notify the collaborating physician and the manner and timeframe
263	in which such notification must occur.
264	6. Beginning and ending dates for the collaborative
265	pharmacy practice agreement and termination procedures,
266	including procedures for patient notification and medical
267	records transfers.
268	7. A statement that the collaborative pharmacy practice
269	agreement may be terminated, in writing, by either party at any
270	time.
271	(b) A collaborative pharmacy practice agreement must be
272	renewed at least every 2 years.
273	(c) The pharmacist, along with the collaborating physician,
274	must maintain on file the collaborative pharmacy practice
275	agreement at his or her practice location and must make such
276	agreements available upon request or inspection.
277	(d) A pharmacist who enters into a collaborative pharmacy
278	practice agreement must submit a copy of the signed agreement to
279	the Board of Pharmacy before the agreement may be implemented.
280	(4) A pharmacist may not:
281	(a) Modify or discontinue medicinal drugs prescribed by a
282	health care practitioner with whom he or she does not have a
283	collaborative pharmacy practice agreement.
284	(b) Enter into a collaborative pharmacy practice agreement
285	while acting as an employee without the written approval of the
286	owner of the pharmacy.
287	(5) A physician may not delegate to a pharmacist the
288	authority to initiate or prescribe a controlled substance as
289	described in s. 893.03 or 21 U.S.C. s. 812.
290	(6) In addition to the continuing education requirements
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291	under s. 465.009, a pharmacist who practices under a
292	collaborative pharmacy practice agreement must, for each
293	biennial licensure renewal, complete an 8-hour continuing
294	education course approved by the Board of Medicine in
295	consultation with the Board of Osteopathic Medicine and the
296	Board of Pharmacy which addresses issues related to the chronic
297	conditions to be collaboratively managed. Such pharmacist must
298	submit confirmation of having completed such course when
299	applying for licensure renewal. A pharmacist who fails to comply
300	with this subsection shall be prohibited from practicing under a
301	collaborative pharmacy practice agreement under this section.
302	(7) The Board of Medicine in consultation with the Board of
303	Osteopathic Medicine and the Board of Pharmacy shall adopt rules
304	pursuant to ss. 120.536(1) and 120.54 to implement this section.
305	Section 5. This act shall take effect July 1, 2020.

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