

Amendment No. 1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	___	(Y/N)
ADOPTED AS AMENDED	___	(Y/N)
ADOPTED W/O OBJECTION	___	(Y/N)
FAILED TO ADOPT	___	(Y/N)
WITHDRAWN	___	(Y/N)
OTHER	_____	

1 Committee/Subcommittee hearing bill: Health & Human Services
2 Committee

3 Representative Sirois offered the following:

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Amendment (with title amendment)

Remove everything after the enacting clause and insert:

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

381.0031 Epidemiological research; report of diseases of public health significance to department.-

(2) Any practitioner licensed in this state to practice medicine, osteopathic medicine, chiropractic medicine, naturopathy, or veterinary medicine; any licensed pharmacist authorized under a protocol with a supervising licensed physician, under s. 465.1895, or a collaborative pharmacy practice agreement, as defined in s. 465.1865, to perform or

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17 order and evaluate laboratory and clinical tests; any hospital
18 licensed under part I of chapter 395; or any laboratory
19 appropriately certified by the Centers for Medicare and Medicaid
20 Services under the federal Clinical Laboratory Improvement
21 Amendments and the federal rules adopted thereunder which
22 diagnoses or suspects the existence of a disease of public
23 health significance shall immediately report the fact to the
24 Department of Health.

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

27 465.003 Definitions.—As used in this chapter, the term:
28 (13) "Practice of the profession of pharmacy" includes
29 compounding, dispensing, and consulting concerning contents,
30 therapeutic values, and uses of any medicinal drug; consulting
31 concerning therapeutic values and interactions of patent or
32 proprietary preparations, whether pursuant to prescriptions or
33 in the absence and entirely independent of such prescriptions or
34 orders; and conducting other pharmaceutical services. For
35 purposes of this subsection, "other pharmaceutical services"
36 means the monitoring of the patient's drug therapy and assisting
37 the patient in the management of his or her drug therapy, and
38 includes review of the patient's drug therapy and communication
39 with the patient's prescribing health care provider as licensed
40 under chapter 458, chapter 459, chapter 461, or chapter 466, or
41 similar statutory provision in another jurisdiction, or such

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42 provider's agent or such other persons as specifically
43 authorized by the patient, regarding the drug therapy; and
44 initiating, modifying, or discontinuing drug therapy for a
45 chronic health condition under a collaborative pharmacy practice
46 agreement. ~~However,~~ Nothing in this subsection may be
47 interpreted to permit an alteration of a prescriber's
48 directions, the diagnosis or treatment of any disease, the
49 initiation of any drug therapy, the practice of medicine, or the
50 practice of osteopathic medicine, unless otherwise permitted by
51 law or specifically authorized by s. 465.1865 or s. 465.1895.
52 "Practice of the profession of pharmacy" also includes any other
53 act, service, operation, research, or transaction incidental to,
54 or forming a part of, any of the foregoing acts, requiring,
55 involving, or employing the science or art of any branch of the
56 pharmaceutical profession, study, or training, and shall
57 expressly permit a pharmacist to transmit information from
58 persons authorized to prescribe medicinal drugs to their
59 patients. The practice of the profession of pharmacy also
60 includes the administration of vaccines to adults pursuant to s.
61 465.189, the administration of long-acting medication pursuant
62 to s. 465.1893, the testing or screening for and treatment of
63 minor, nonchronic health conditions under s. 465.1895, and the
64 preparation of prepackaged drug products in facilities holding
65 Class III institutional pharmacy permits.

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66 Section 3. Section 465.1865, Florida Statutes, is created
67 to read:

68 465.1865 Collaborative pharmacy practice for chronic
69 health conditions.-

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

71 (a) "Collaborative pharmacy practice agreement" means a
72 written agreement between a pharmacist who meets the
73 qualifications of this section and a physician licensed under
74 chapter 458 or chapter 459 in which a collaborating physician
75 authorizes a pharmacist to provide specified patient care
76 services to the collaborating physician's patients.

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

81 1. Arthritis;

82 2. Asthma;

83 3. Congestive heart failure;

84 4. Chronic obstructive pulmonary diseases;

85 5. Diabetes;

86 6. Emphysema;

87 7. Human immunodeficiency virus or acquired
88 immunodeficiency syndrome;

89 8. Hypertension;

90 9. Obesity;

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91 10. Renal disease; or

92 11. Any other chronic condition or comorbidity identified
93 by the collaborating physician.

94 (2) To provide services under a collaborative pharmacy
95 practice agreement, a pharmacist must:

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

98 (b) Have earned a degree of doctor of pharmacy or have
99 completed 5 years of experience as a licensed pharmacist.

100 (c) Complete an initial 20-hour course approved by the
101 board that includes, at a minimum, instruction on the following:

102 1. Performance of patient assessments.

103 2. Ordering, performing, and interpreting clinical and
104 laboratory tests related to collaborative pharmacy practice.

105 3. Evaluating and managing diseases and health conditions
106 in collaboration with other health care practitioners.

107 4. Any other area required by the board by rule.

108 (d) Maintain at least \$250,000 of professional liability
109 insurance coverage. However, a pharmacist who maintains
110 professional liability insurance coverage pursuant to s.
111 465.1895 satisfies this requirement.

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

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115 (f) Maintain records of all patients receiving services
116 under a collaborative pharmacy practice agreement for a period
117 of 5 years.

118 (3) The terms and conditions of the collaborative pharmacy
119 practice agreement must be appropriate to the pharmacist's
120 training and the services delegated to the pharmacist must be
121 within the collaborating physician's scope of practice.

122 (a) A collaborative pharmacy practice agreement must
123 include the following:

124 1. Name of the patient or patients for whom a pharmacist
125 may provide services.

126 2. Each chronic disease to be collaboratively managed.

127 3. Specific medicinal drug or drugs to be managed by the
128 pharmacist.

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

131 5. Conditions and events upon which the pharmacist must
132 notify the collaborating physician and the manner and timeframe
133 in which such notification must occur.

134 6. Beginning and ending dates for the collaborative
135 pharmacy practice agreement and termination procedures,
136 including procedures for patient notification and medical
137 records transfers.

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138 7. A statement that the collaborative pharmacy practice
139 agreement may be terminated, in writing, by either party at any
140 time.

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

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

147 (4) A pharmacist may not:

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

151 (b) Enter into a collaborative pharmacy practice agreement
152 while acting as an employee without the written approval of the
153 owner of the pharmacy.

154 (5) A physician may not delegate the authority to initiate
155 or prescribe a controlled substance as defined in s. 893.03 or
156 21 U.S.C. s. 812 to a pharmacist.

157 (6) A pharmacist who practices under a collaborative
158 pharmacy practice agreement must complete an 8-hour continuing
159 education course approved by the board that addresses issues
160 related to collaborative pharmacy practice each biennial
161 licensure renewal in addition to the continuing education
162 requirements under s. 465.009. A pharmacist must submit

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163 confirmation of having completed such course when applying for
164 licensure renewal. A pharmacist who fails to comply with this
165 subsection shall be prohibited from practicing under a
166 collaborative pharmacy practice agreement as authorized in this
167 section.

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

170 Section 4. Subsections (2) through (8) of section 465.189,
171 Florida Statutes, are renumbered as sections (3) through (9),
172 respectively, subsection (1) and present subsection (6) are
173 amended, and a new subsection (2) is added to that section, to
174 read:

175 465.189 Administration of vaccines and epinephrine
176 autoinjection.—

177 (1) In accordance with guidelines of the Centers for
178 Disease Control and Prevention for each recommended immunization
179 or vaccine, a pharmacist, or a registered intern under the
180 supervision of a pharmacist who is certified under subsection
181 (7) (6), may administer the following vaccines to an adult
182 within the framework of an established protocol under a
183 supervising physician licensed under chapter 458 or chapter 459:

184 (a) Immunizations or vaccines listed in the ~~Adult~~
185 ~~Immunization Schedule as of February 1, 2015, by the United~~
186 ~~States Centers for Disease Control and~~ Prevention's Recommended
187 ~~Prevention. The board may authorize, by rule, additional~~

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188 ~~immunizations or vaccines as they are added to the Adult~~
189 Immunization Schedule, the United States Centers for Disease
190 Control and Prevention's Health Information for International
191 Travel, or the United States Food and Drug Administration's
192 Vaccines Licensed for Use in the United States.

193 ~~(b) Immunizations or vaccines recommended by the United~~
194 ~~States Centers for Disease Control and Prevention for~~
195 ~~international travel as of July 1, 2015. The board may~~
196 ~~authorize, by rule, additional immunizations or vaccines as they~~
197 ~~are recommended by the United States Centers for Disease Control~~
198 ~~and Prevention for international travel.~~

199 (b)(e) Immunizations or vaccines approved by the board in
200 response to a state of emergency declared by the Governor
201 pursuant to s. 252.36.

202
203 A registered intern who administers an immunization or vaccine
204 under this subsection must be supervised by a certified
205 pharmacist at a ratio of one pharmacist to one registered
206 intern.

207 (2) A pharmacist who is certified under subsection (7) may
208 administer influenza vaccines to individuals 7 years of age and
209 older within the framework of an established protocol under a
210 supervising physician licensed under chapter 458 or chapter 459.

211 ~~(7)(6)~~ Any pharmacist or registered intern seeking to
212 administer vaccines ~~to adults~~ under this section must be

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213 certified to administer such vaccines pursuant to a
214 certification program approved by the Board of Pharmacy in
215 consultation with the Board of Medicine and the Board of
216 Osteopathic Medicine. The certification program shall, at a
217 minimum, require that the pharmacist attend at least 20 hours of
218 continuing education classes approved by the board and the
219 registered intern complete at least 20 hours of coursework
220 approved by the board. The program shall have a curriculum of
221 instruction concerning the safe and effective administration of
222 such vaccines, including, but not limited to, potential allergic
223 reactions to such vaccines.

224 Section 5. Paragraph (a) of subsection (1) and paragraph
225 (a) of subsection (2) of section 465.1893, Florida Statutes, are
226 amended to read:

227 465.1893 Administration of antipsychotic medication by
228 injection.—

229 (1) (a) A pharmacist, at the direction of a physician
230 licensed under chapter 458 or chapter 459, may administer a
231 long-acting antipsychotic medication and extended-release
232 medications, including controlled substances, to treat substance
233 abuse disorder or dependency that have been approved by the
234 United States Food and Drug Administration by injection to a
235 patient if the pharmacist:

236 1. Is authorized by and acting within the framework of an
237 established protocol with the prescribing physician.

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238 2. Practices at a facility that accommodates privacy for
239 nondeltoid injections and conforms with state rules and
240 regulations regarding the appropriate and safe disposal of
241 medication and medical waste.

242 3. Has completed the course required under subsection (2).

243 (2) (a) A pharmacist seeking to administer ~~a long-acting~~
244 antipsychotic medication as described in paragraph (1) (a) of
245 this section by injection must complete an 8-hour continuing
246 education course offered by:

247 1. A statewide professional association of physicians in
248 this state accredited to provide educational activities
249 designated for the American Medical Association Physician's
250 Recognition Award (AMA PRA) Category 1 Credit or the American
251 Osteopathic Association (AOA) Category 1-A continuing medical
252 education (CME) credit; and

253 2. A statewide association of pharmacists.

254 Section 6. Section 465.1895, Florida Statutes, is created
255 to read:

256 465.1895 Testing or screening for and treatment of minor,
257 nonchronic health conditions.—

258 (1) The board, in consultation with the Board of Medicine
259 and the Board of Osteopathic Medicine, shall adopt rules
260 identifying the minor, nonchronic health conditions for which a
261 pharmacist may test or screen for and treat. For purposes of
262 this section a minor, nonchronic health condition is typically a

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- 263 short-term condition that is generally managed with minimal
264 treatment or self-care, including, but not limited to, the
265 following:
- 266 (a) Influenza.
 - 267 (b) Streptococcus.
 - 268 (c) Lice.
 - 269 (d) Skin conditions, such as ringworm and athlete's foot.
 - 270 (e) Minor, uncomplicated infections.
- 271 (2) A pharmacist who tests or screens for and treats
272 minor, nonchronic health conditions under this section must:
- 273 (a) Hold an active and unencumbered license to practice
274 pharmacy in this state.
 - 275 (b) Complete an initial 20-hour education course approved
276 by the board. The course, at a minimum, must address patient
277 assessments; point-of-care testing procedures; safe and
278 effective treatment of minor, nonchronic health conditions; and
279 identification of contraindications.
 - 280 (c) Maintain at least \$250,000 of liability coverage. A
281 pharmacist who maintains liability coverage pursuant to s.
282 465.1865 satisfies this requirement.
 - 283 (d) Report a diagnosis or suspected existence of a disease
284 of public health significance to the department pursuant to s.
285 381.0031.
 - 286 (e) Upon request of a patient, furnish patient records to
287 a health care practitioner designated by the patient.

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288 (f) Maintain records of all patients receiving services
289 under this section for a period of 5 years.

290 (3) The board shall adopt, by rule, a formulary of
291 medicinal drugs that a pharmacist may prescribe for the minor,
292 nonchronic health conditions approved under subsection (1). The
293 formulary must include medicinal drugs approved by the United
294 States Food and Drug Administration which are indicated for
295 treatment of the minor, nonchronic health condition, including
296 any over-the-counter medication. The formulary may not include
297 any controlled substance as defined in s. 893.03 or 21 U.S.C. s.
298 812.

299 (4) A pharmacist who tests or screens for and treats
300 minor, nonchronic health conditions under this section may use
301 any tests that may guide diagnosis or clinical decisionmaking
302 which the Centers for Medicare and Medicaid Services has
303 determined qualifies for a waiver under the federal Clinical
304 Laboratory Improvement Amendments of 1988, or the federal rules
305 adopted thereunder, or any established screening procedures that
306 can safely be performed by a pharmacist.

307 (5) A pharmacist who tests for and treats influenza or
308 streptococcus under this section may only provide such services
309 within the framework of an established written protocol with a
310 supervising physician licensed under chapter 458 or chapter 459,
311 and must submit the protocol to the board.

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312 (a) The protocol between a pharmacist and supervising
313 physician under this subsection must include particular terms
314 and conditions imposed by the supervising physician relating to
315 the testing for and treatment of influenza and streptococcus
316 under this section. The terms and conditions must be appropriate
317 to the pharmacist's training. At a minimum, the protocol shall
318 include:

319 1. Specific categories of patients who the pharmacist is
320 authorized to test for and treat influenza and streptococcus.

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

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

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

329 5. Other requirements as established by the board in rule.

330 (b) A pharmacist authorized to test for and treat
331 influenza and streptococcus under the protocol shall provide
332 evidence of current certification by the board to the
333 supervising physician. A supervising physician shall review the
334 pharmacist's actions in accordance with the protocol.

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335 (6) A pharmacist providing services under this section may
336 not perform such services while acting as an employee without
337 the written approval of the owner of the pharmacy.

338 (7) A pharmacist providing services under this section
339 must complete a 3-hour continuing education course approved by
340 the board addressing issues related to minor, nonchronic health
341 conditions each biennial licensure renewal in addition to the
342 continuing education requirements under s. 465.009. Each
343 pharmacist must submit confirmation of having completed the
344 course when applying for licensure renewal. A pharmacist who
345 fails to comply with this subsection may not provide testing,
346 screening, or treatment services.

347 Section 7. This act shall take effect July 1, 2020.

348
349 -----
350 **T I T L E A M E N D M E N T**

351 Remove everything before the enacting clause and insert:
352 An act relating to the practice of pharmacy; amending s.
353 381.0031, F.S.; requiring specified licensed pharmacists to
354 report certain information relating to public health to the
355 Department of Health; amending s. 465.003, F.S.; revising the
356 definition of the term "practice of the profession of pharmacy";
357 creating s. 465.1865, F.S.; providing definitions; providing
358 requirements for pharmacists to provide services under a
359 collaborative pharmacy practice agreement; requiring the terms

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360 and conditions of such agreement to be appropriate to the
361 training of the pharmacist and the scope of practice of the
362 physician; requiring notification to the board upon practicing
363 under a collaborative pharmacy practice agreement; requiring
364 pharmacists to submit a copy of the signed collaborative
365 practice agreement to the Board of Pharmacy; providing for the
366 maintenance of patient records for a certain period of time;
367 providing for renewal of such agreement; requiring a pharmacist
368 and the collaborating physician to maintain on file and make
369 available the collaborative pharmacy practice agreement;
370 prohibiting certain actions relating to the collaborative
371 pharmacy practice agreement; requiring specified continuing
372 education for a pharmacist who practices under a collaborative
373 pharmacy practice agreement; requiring the Board of Pharmacy to
374 adopt rules; amending s. 465.189, F.S.; revising the recommended
375 immunizations or vaccines a pharmacist, or a registered intern
376 under certain conditions, may administer; authorizing a
377 certified pharmacist to administer the influenza vaccine to
378 specified individuals; amending s. 465.1893, F.S.; authorizing
379 pharmacists who meet certain requirements to administer certain
380 extended release medications; creating s. 465.1895, F.S.;
381 requiring the board to identify minor, nonchronic health
382 conditions that a pharmacist may test or screen for and treat;
383 providing requirements for a pharmacist to test or screen for
384 and treat minor, nonchronic health conditions; requiring the

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385 board to develop a formulary of medicinal drugs that a
386 pharmacist may prescribe; providing requirements for the written
387 protocol between a pharmacist and a supervising physician;
388 prohibiting a pharmacist from providing certain services under
389 certain circumstances; requiring a pharmacist to complete a
390 specified amount of continuing education; providing an effective
391 date.