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 pharmacists to report certain information relating to 4 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 scope of practice of the physician; requiring 13 14 notification to the board upon practicing under a collaborative pharmacy practice agreement; requiring 15 pharmacists to submit a copy of the signed 16 17 collaborative pharmacy practice agreement to the Board of Pharmacy; providing for the maintenance of patient 18 19 records for a certain period of time; providing for renewal of such agreement; requiring a pharmacist and 20 21 the collaborating physician to maintain on file and 22 make available the collaborative pharmacy practice 23 agreement; prohibiting certain actions relating to 24 such agreement; requiring specified continuing 25 education for a pharmacist who practices under a

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26 collaborative pharmacy practice agreement; requiring 27 the Board of Pharmacy to adopt rules; amending s. 28 465.189, F.S.; revising the recommended immunizations 29 or vaccines a pharmacist or a certain registered 30 intern may administer; authorizing a certified 31 pharmacist to administer the influenza vaccine to 32 specified persons; amending s. 465.1893, F.S.; 33 authorizing pharmacists who meet certain requirements to administer certain extended release medications; 34 35 creating s. 465.1895, F.S.; requiring the board to 36 identify minor, nonchronic health conditions that a 37 pharmacist may test or screen for and treat; providing requirements for a pharmacist to test or screen for 38 39 and treat minor, nonchronic health conditions; 40 requiring the board to develop a formulary of 41 medicinal drugs that a pharmacist may prescribe; 42 providing requirements for the written protocol 43 between a pharmacist and a supervising physician; prohibiting a pharmacist from providing certain 44 45 services under certain circumstances; requiring a pharmacist to complete a specified amount of 46 47 continuing education; providing an effective date. 48 49 Be It Enacted by the Legislature of the State of Florida: 50

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51 Section 1. Subsection (2) of section 381.0031, Florida 52 Statutes, is amended to read:

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

55 (2) Any practitioner licensed in this state to practice 56 medicine, osteopathic medicine, chiropractic medicine, 57 naturopathy, or veterinary medicine; any licensed pharmacist 58 authorized under a protocol with a supervising physician under 59 s. 465.1895, or a collaborative pharmacy practice agreement, as 60 defined in s. 465.1865, to perform or order and evaluate laboratory and clinical tests; any hospital licensed under part 61 I of chapter 395; or any laboratory appropriately certified by 62 the Centers for Medicare and Medicaid Services under the federal 63 64 Clinical Laboratory Improvement Amendments and the federal rules adopted thereunder which diagnoses or suspects the existence of 65 66 a disease of public health significance shall immediately report 67 the fact to the Department of Health.

68 Section 2. Subsection (13) of section 465.003, Florida69 Statutes, is amended to read:

70 465.003 Definitions.—As used in this chapter, the term: 71 (13) "Practice of the profession of pharmacy" includes 72 compounding, dispensing, and consulting concerning contents, 73 therapeutic values, and uses of any medicinal drug; consulting 74 concerning therapeutic values and interactions of patent or 75 proprietary preparations, whether pursuant to prescriptions or

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

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101	persons authorized to prescribe medicinal drugs to their
102	patients. The practice of the profession of pharmacy also
103	includes the administration of vaccines to adults pursuant to s.
104	465.189; the administration of long-acting medication pursuant
105	to s. 465.1893; the testing or screening for and treatment of
106	minor, nonchronic health conditions pursuant to s. 465.1895; and
107	the preparation of prepackaged drug products in facilities
108	holding Class III institutional pharmacy permits.
109	Section 3. Section 465.1865, Florida Statutes, is created
110	to read:
111	465.1865 Collaborative pharmacy practice for chronic
112	health conditions
113	(1) For purposes of this section, the term:
114	(a) "Collaborative pharmacy practice agreement" means a
115	written agreement between a pharmacist who meets the
116	qualifications of this section and a physician licensed under
117	chapter 458 or chapter 459 in which a collaborating physician
118	authorizes a pharmacist to provide specified patient care
119	services to the collaborating physician's patients.
120	(b) "Chronic health condition" means a condition that
121	typically lasts more than 1 year and requires ongoing medical
122	attention, limits activities of daily living, or both. Such
123	condition may include, but is not limited to:
124	<u>1. Arthritis;</u>
125	2. Asthma;

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126	3. Congestive heart failure;
127	4. Chronic obstructive pulmonary diseases;
128	5. Diabetes;
129	6. Emphysema;
130	7. Human immunodeficiency virus or acquired
131	immunodeficiency syndrome;
132	8. Hypertension;
133	9. Obesity;
134	10. Renal disease; or
135	11. Any other chronic condition or comorbidity identified
136	by the collaborating physician.
137	(2) To provide services under a collaborative pharmacy
138	practice agreement, a pharmacist must:
139	(a) Hold an active and unencumbered license to practice
140	pharmacy in the state.
141	(b) Have earned a degree of doctor of pharmacy or have
142	completed 5 years of experience as a licensed pharmacist.
143	(c) Complete an initial 20-hour course approved by the
144	board that includes, at a minimum, instruction on the following:
145	1. Performance of patient assessments.
146	2. Ordering, performing, and interpreting clinical and
147	laboratory tests related to collaborative pharmacy practice.
148	3. Evaluating and managing diseases and health conditions
149	in collaboration with other health care practitioners.
150	4. Any other area required by board rule.
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151	(d) Maintain at least \$250,000 of professional liability
152	insurance coverage. However, a pharmacist who maintains
153	professional liability insurance coverage pursuant to s.
154	465.1895 satisfies this requirement.
155	(e) Submit a copy of the signed collaborative pharmacy
156	practice agreement and proof of satisfying the conditions of
157	this section to the board before commencing practice.
158	(f) Maintain records of all patients receiving services
159	under a collaborative pharmacy practice agreement for a period
160	<u>of 5 years.</u>
161	(3) The terms and conditions of the collaborative pharmacy
162	practice agreement must be appropriate to the pharmacist's
163	training and the services delegated to the pharmacist must be
164	within the collaborating physician's scope of practice.
165	(a) A collaborative pharmacy practice agreement must
166	include the following:
167	1. Name of the patient or patients for whom a pharmacist
168	may provide services.
169	2. Each chronic health condition to be collaboratively
170	managed.
171	3. Specific medicinal drug or drugs to be managed by the
172	pharmacist.
173	4. Circumstances under which the pharmacist may order or
174	perform and evaluate laboratory or clinical tests.
175	5. Conditions and events upon which the pharmacist must
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176	notify the collaborating physician and the manner and timeframe
177	in which such notification must occur.
178	6. Beginning and ending dates for the collaborative
179	pharmacy practice agreement and termination procedures,
180	including procedures for patient notification and medical
181	records transfers.
182	7. A statement that the collaborative pharmacy practice
183	agreement may be terminated, in writing, by either party at any
184	time.
185	(b) A collaborative pharmacy practice agreement must be
186	renewed at least every 2 years.
187	(c) The pharmacist, along with the collaborating
188	physician, must maintain on file the collaborative pharmacy
189	practice agreement at his or her practice location, and must
190	make such agreements available upon request or inspection.
191	(4) A pharmacist may not:
192	(a) Modify or discontinue medicinal drugs prescribed by a
193	health care practitioner with whom he or she does not have a
194	collaborative pharmacy practice agreement.
195	(b) Enter into a collaborative pharmacy practice agreement
196	while acting as an employee without the written approval of the
197	owner of the pharmacy.
198	(5) A physician may not delegate the authority to initiate
199	or prescribe a controlled substance as described in s. 893.03 or
200	21 U.S.C. s. 812 to a pharmacist.

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201	(6) A pharmacist who practices under a collaborative
202	pharmacy practice agreement must complete an 8-hour continuing
203	education course approved by the board that addresses issues
204	related to collaborative pharmacy practice each biennial
205	licensure renewal in addition to the continuing education
206	requirements under s. 465.009. A pharmacist must submit
207	confirmation of having completed such course when applying for
208	licensure renewal. A pharmacist who fails to comply with this
209	subsection shall be prohibited from practicing under a
210	collaborative pharmacy practice agreement under this section.
211	(7) The board shall adopt rules pursuant to ss. 120.536(1)
212	and 120.54 to implement this section.
213	Section 4. Subsections (2) through (8) of section 465.189,
214	Florida Statutes, are renumbered as sections (3) through (9),
215	respectively, subsection (1) and present subsection (6) are
216	amended, and a new subsection (2) is added to that section, to
217	read:
218	465.189 Administration of vaccines and epinephrine
219	autoinjection
220	(1) In accordance with guidelines of the Centers for
221	Disease Control and Prevention for each recommended immunization
222	or vaccine, a pharmacist, or a registered intern under the
223	supervision of a pharmacist who is certified under subsection
224	(7) (6), may administer the following vaccines to an adult
225	within the framework of an established protocol under a
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226	supervising physician licensed under chapter 458 or chapter 459:
227	(a) Immunizations or vaccines listed in the Adult
228	Immunization Schedule as of February 1, 2015, by the United
229	States Centers for Disease Control and Prevention's Recommended
230	Prevention. The board may authorize, by rule, additional
231	immunizations or vaccines as they are added to the Adult
232	Immunization Schedule, the Centers for Disease Control and
233	Prevention's Health Information for International Travel, or the
234	United States Food and Drug Administration's Vaccines Licensed
235	for Use in the United States.
236	(b) Immunizations or vaccines recommended by the United
237	States Centers for Disease Control and Prevention for
238	international travel as of July 1, 2015. The board may
239	authorize, by rule, additional immunizations or vaccines as they
240	are recommended by the United States Centers for Disease Control
241	and Prevention for international travel.
242	(b) (c) Immunizations or vaccines approved by the board in
243	response to a state of emergency declared by the Governor
244	pursuant to s. 252.36.
245	
246	A registered intern who administers an immunization or vaccine
247	under this subsection must be supervised by a certified
248	pharmacist at a ratio of one pharmacist to one registered
249	intern.
250	(2) A pharmacist who is certified under subsection (7) may
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251 <u>administer influenza vaccines to persons 7 years of age and</u> 252 <u>older within the framework of an established protocol under a</u> 253 <u>supervising physician licensed under chapter 458 or chapter 459.</u>

254 (7) (6) Any pharmacist or registered intern seeking to 255 administer vaccines to adults under this section must be certified to administer such vaccines pursuant to a 256 257 certification program approved by the Board of Pharmacy in consultation with the Board of Medicine and the Board of 258 259 Osteopathic Medicine. The certification program shall, at a 260 minimum, require that the pharmacist attend at least 20 hours of 261 continuing education classes approved by the board and the 262 registered intern complete at least 20 hours of coursework 263 approved by the board. The program shall have a curriculum of 264 instruction concerning the safe and effective administration of 265 such vaccines, including, but not limited to, potential allergic 266 reactions to such vaccines.

267 Section 5. Section 465.1893, Florida Statutes, is amended 268 to read:

269 465.1893 Administration of <u>long-acting</u> antipsychotic 270 medication by injection.—

(1) (a) A pharmacist, at the direction of a physician
licensed under chapter 458 or chapter 459, may administer a
long-acting antipsychotic medication <u>and extended-release</u>
<u>medications, including controlled substances, to treat substance</u>
<u>abuse disorder or dependency which have been</u> approved by the

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276 United States Food and Drug Administration by injection to a 277 patient if the pharmacist:

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

280 2. Practices at a facility that accommodates privacy for 281 nondeltoid injections and conforms with state rules and 282 regulations regarding the appropriate and safe disposal of 283 medication and medical waste.

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

(b) A separate prescription from a physician is required
for each injection administered by a pharmacist under this
subsection.

(2) (a) A pharmacist seeking to administer a long-acting antipsychotic medication <u>as described in paragraph (1)(a)</u> by injection must complete an 8-hour continuing education course 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 (AMA PRA) Category 1 Credit or the American
 Osteopathic Association (AOA) Category 1-A continuing medical
 education (CME) credit; and

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2. A statewide association of pharmacists.

(b) The course may be offered in a distance learningformat and must be included in the 30 hours of continuing

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301	professional pharmaceutical education required under s.
302	465.009(1). The course shall have a curriculum of instruction
303	that concerns the safe and effective administration of
304	behavioral health and antipsychotic medications by injection,
305	including, but not limited to, potential allergic reactions to
306	such medications.
307	Section 6. Section 465.1895, Florida Statutes, is created
308	to read:
309	465.1895 Testing or screening for and treatment of minor,
310	nonchronic health conditions
311	(1) The board, in consultation with the Board of Medicine
312	and the Board of Osteopathic Medicine, shall adopt rules
313	identifying the minor, nonchronic health conditions for which a
314	pharmacist may test or screen for and treat. For purposes of
315	this section a minor, nonchronic health condition is typically a
316	short-term condition that is generally managed with minimal
317	treatment or self-care, including, but not limited to, the
318	following:
319	(a) Influenza.
320	(b) Streptococcus.
321	(c) Lice.
322	(d) Skin conditions, such as ringworm and athlete's foot.
323	(e) Minor, uncomplicated infections.
324	(2) A pharmacist who tests or screens for and treats
325	minor, nonchronic health conditions under this section must:

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326	(a) Hold an active and unencumbered license to practice
327	pharmacy in the state.
328	(b) Complete an initial 20-hour education course approved
329	by the board. The course, at a minimum, must address patient
330	assessments; point-of-care testing procedures; safe and
331	effective treatment of minor, nonchronic health conditions; and
332	identification of contraindications.
333	(c) Maintain at least \$250,000 of liability coverage. A
334	pharmacist who maintains liability coverage pursuant to s.
335	465.1865 satisfies this requirement.
336	(d) Report a diagnosis or suspected existence of a disease
337	of public health significance to the department pursuant to s.
338	381.0031.
339	(e) Upon request of a patient, furnish patient records to
340	a health care practitioner designated by the patient.
341	(f) Maintain records of all patients receiving services
342	under this section for a period of 5 years.
343	(3) The board shall adopt, by rule, a formulary of
344	medicinal drugs that a pharmacist may prescribe for the minor,
345	nonchronic health conditions approved under subsection (1). The
346	formulary must include medicinal drugs approved by the United
347	States Food and Drug Administration which are indicated for
348	treatment of the minor, nonchronic health condition, including
349	any over-the-counter medication. The formulary may not include
350	any controlled substance as described in s. 893.03 or 21 U.S.C.
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351	<u>s. 812.</u>
352	(4) A pharmacist who tests or screens for and treats
353	minor, nonchronic health conditions under this section may use
354	any tests that may guide diagnosis or clinical decisionmaking
355	which the Centers for Medicare and Medicaid Services has
356	determined qualifies for a waiver under the federal Clinical
357	Laboratory Improvement Amendments of 1988, or the federal rules
358	adopted thereunder, or any established screening procedures that
359	can safely be performed by a pharmacist.
360	(5) A pharmacist who tests for and treats influenza or
361	streptococcus under this section may only provide such services
362	within the framework of an established written protocol with a
363	supervising physician licensed under chapter 458 or chapter 459,
364	and must submit the protocol to the board.
365	(a) The protocol between a pharmacist and supervising
366	physician under this subsection must include particular terms
367	and conditions imposed by the supervising physician relating to
368	the testing for and treatment of influenza and streptococcus
369	under this section. The terms and conditions must be appropriate
370	to the pharmacist's training. At a minimum, the protocol shall
371	include:
372	1. Specific categories of patients who the pharmacist is
373	authorized to test for and treat influenza and streptococcus.
374	2. The supervising physician's instructions for the
375	treatment of influenza and streptococcus based on the patient's
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age, symptoms, and test results, including negative results. 3. A process and schedule for the supervising physician to review the pharmacist's actions under the protocol. 4. A process and schedule for the pharmacist to notify the supervising physician of the patient's condition, tests administered, test results, and course of treatment. 5. Any other requirements as established by board rule. (b) A pharmacist authorized to test for and treat influenza and streptococcus under the protocol shall provide evidence of current certification by the board to the supervising physician. A supervising physician shall review the pharmacist's actions in accordance with the protocol. (6) A pharmacist providing services under this section may

388 389 not perform such services while acting as an employee without 390 the written approval of the owner of the pharmacy.

391 (7) A pharmacist providing services under this section 392 must complete a 3-hour continuing education course approved by 393 the board addressing issues related to minor, nonchronic health 394 conditions each biennial licensure renewal in addition to the 395 continuing education requirements under s. 465.009. Each 396 pharmacist must submit confirmation of having completed the course when applying for licensure renewal. A pharmacist who 397 398 fails to comply with this subsection may not provide testing, screening, or treatment services. 399 Section 7. This act shall take effect July 1, 2020. 400

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