

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 pharmacy practice agreement to the Board  
18 of 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  
24 such agreement; requiring specified continuing  
25 education for a pharmacist who practices under a

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

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

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

50 381.0031 Epidemiological research; report of diseases of

51 public health significance to department.—

52 (2) Any practitioner licensed in this state to practice  
53 medicine, osteopathic medicine, chiropractic medicine,  
54 naturopathy, or veterinary medicine; any licensed pharmacist  
55 authorized under a protocol with a supervising physician under  
56 s. 465.1895, or a collaborative pharmacy practice agreement, as  
57 defined in s. 465.1865, to perform or order and evaluate  
58 laboratory and clinical tests; any hospital licensed under part  
59 I of chapter 395; or any laboratory appropriately certified by  
60 the Centers for Medicare and Medicaid Services under the federal  
61 Clinical Laboratory Improvement Amendments and the federal rules  
62 adopted thereunder which diagnoses or suspects the existence of  
63 a disease of public health significance shall immediately report  
64 the fact to the 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 under a collaborative pharmacy practice  
86 | 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:

117 1. Arthritis;

118 2. Asthma;

119 3. Chronic obstructive pulmonary diseases;

120 4. Type 2 diabetes;

121 5. Human immunodeficiency virus or acquired immune  
 122 deficiency syndrome;

123 6. Obesity; or

124 7. Any other chronic condition adopted in rule by the  
 125 board, in consultation with the Board of Medicine and Board of

126 Osteopathic Medicine.

127 (2) To provide services under a collaborative pharmacy  
 128 practice agreement, a pharmacist must be certified by the board,  
 129 according to the rules adopted by the board in consultation with  
 130 the Board of Medicine and the Board of Osteopathic Medicine. To  
 131 be certified, a pharmacist must, at a minimum:

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

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

136 (c) Have completed an initial 20-hour course approved by  
 137 the board, in consultation with the Board of Medicine and Board  
 138 of Osteopathic Medicine, that includes, at a minimum,  
 139 instruction on the following:

140 1. Performance of patient assessments.

141 2. Ordering, performing, and interpreting clinical and  
 142 laboratory tests related to collaborative pharmacy practice.

143 3. Evaluating and managing diseases and health conditions  
 144 in collaboration with other health care practitioners.

145 4. Any other area required by board.

146 (d) Maintain at least \$250,000 of professional liability  
 147 insurance coverage. However, a pharmacist who maintains  
 148 professional liability insurance coverage pursuant to s.  
 149 465.1895 satisfies this requirement.

150 (e) Have established a system to maintain records of all

151 patients receiving services under a collaborative pharmacy  
152 practice agreement for a period of 5 years from each patient's  
153 most recent provision of service.

154 (3) The terms and conditions of the collaborative pharmacy  
155 practice agreement must be appropriate to the pharmacist's  
156 training and the services delegated to the pharmacist must be  
157 within the collaborating physician's scope of practice. A copy  
158 of the certification issued under subsection (2) must be  
159 included as an attachment to the collaborative pharmacy practice  
160 agreement.

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

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

165 2. Each chronic health condition to be collaboratively  
166 managed.

167 3. Specific medicinal drug or drugs to be managed by the  
168 pharmacist for each patient.

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

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

174 6. Beginning and ending dates for the collaborative  
175 pharmacy practice agreement and termination procedures,

176 including procedures for patient notification and medical  
177 records transfers.

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

181 (b) A collaborative pharmacy practice agreement shall  
182 automatically terminate 2 years after execution if not renewed.

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

188 (d) A pharmacist who enters into a collaborative pharmacy  
189 practice agreement must submit a copy of the signed agreement to  
190 the board before the agreement may be implemented.

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.



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, in consultation with the Board of Medicine  
212 and the Board of Osteopathic Medicine, shall adopt rules  
213 pursuant to ss. 120.536(1) and 120.54 to implement this section.

214       Section 4. Section 465.1895, Florida Statutes, is created  
215 to read:

216       465.1895 Testing or screening for and treatment of minor,  
217 nonchronic health conditions.—

218       (1) A pharmacist may test or screen for and treat minor,  
219 nonchronic health conditions within the framework of an  
220 established written protocol with a supervising physician  
221 licensed under chapter 458 or chapter 459. For purposes of this  
222 section, a minor, nonchronic health condition is typically a  
223 short-term condition that is generally managed with minimal  
224 treatment or self-care, and includes:

225       (a) Influenza.

226        (b) Streptococcus.  
 227        (c) Lice.  
 228        (d) Skin conditions, such as ringworm and athlete's foot.  
 229        (e) Minor, uncomplicated infections.  
 230        (2) A pharmacist who tests or screens for and treats  
 231 minor, nonchronic health conditions under this section must:  
 232        (a) Hold an active and unencumbered license to practice  
 233 pharmacy in the state.  
 234        (b) Hold a certification issued by the board to test and  
 235 screen for and treat minor, nonchronic health conditions, in  
 236 accordance with requirements established by the board in rule in  
 237 consultation with the Board of Medicine and Board of Osteopathic  
 238 Medicine. The certification must require a pharmacist to  
 239 complete, on a one-time basis, a 20-hour education course  
 240 approved by the board in consultation with the Board of Medicine  
 241 and the Board of Osteopathic Medicine. The course, at a minimum,  
 242 must address patient assessments; point-of-care testing  
 243 procedures; safe and effective treatment of minor, nonchronic  
 244 health conditions; and identification of contraindications.  
 245        (c) Maintain at least \$250,000 of liability coverage. A  
 246 pharmacist who maintains liability coverage pursuant to s.  
 247 465.1865 satisfies this requirement.  
 248        (d) Report a diagnosis or suspected existence of a disease  
 249 of public health significance to the department pursuant to s.  
 250 381.0031.

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

253 (f) Maintain records of all patients receiving services  
254 under this section for a period of 5 years from each patient's  
255 most recent provision of service.

256 (3) The board shall adopt, by rule, a formulary of  
257 medicinal drugs that a pharmacist may prescribe for the minor,  
258 nonchronic health conditions approved under subsection (1). The  
259 formulary must include medicinal drugs approved by the United  
260 States Food and Drug Administration which are indicated for  
261 treatment of the minor, nonchronic health condition. The  
262 formulary may not include any controlled substance as described  
263 in s. 893.03 or 21 U.S.C. s. 812.

264 (4) A pharmacist who tests or screens for and treats  
265 minor, nonchronic health conditions under this section may use  
266 any tests that may guide diagnosis or clinical decisionmaking  
267 which the Centers for Medicare and Medicaid Services has  
268 determined qualifies for a waiver under the federal Clinical  
269 Laboratory Improvement Amendments of 1988, or the federal rules  
270 adopted thereunder, or any established screening procedures that  
271 can safely be performed by a pharmacist.

272 (5) The written protocol between a pharmacist and  
273 supervising physician under this subsection must include  
274 particular terms and conditions imposed by the supervising  
275 physician relating to the testing and screening for and

276 treatment of minor, nonchronic health conditions under this  
277 section. The terms and conditions must be appropriate to the  
278 pharmacist's training. A pharmacist who enters into such a  
279 protocol with a supervising physician must submit the protocol  
280 to the board.

281 (a) At a minimum, the protocol shall include:

282 1. Specific categories of patients who the pharmacist is  
283 authorized to test or screen for and treat minor, nonchronic  
284 health conditions.

285 2. The physician's instructions for obtaining relevant  
286 patient medical history for the purpose of identifying  
287 disqualifying health conditions, adverse reactions, and  
288 contraindications to the approved course of treatment.

289 3. The physician's instructions for the treatment of  
290 minor, nonchronic health conditions based on the patient's age,  
291 symptoms, and test results, including negative results.

292 4. A process and schedule for the physician to review the  
293 pharmacist's actions under the protocol.

294 5. A process and schedule for the pharmacist to notify the  
295 physician of the patient's condition, tests administered, test  
296 results, and course of treatment.

297 6. Any other requirements as established by the board in  
298 consultation with the Board of Medicine and the Board of  
299 Osteopathic Medicine.

300 (b) A pharmacist authorized to test and screen for and

301 treat minor, nonchronic conditions under a protocol shall  
302 provide evidence of current certification by the board to the  
303 supervising physician. A supervising physician shall review the  
304 pharmacist's actions in accordance with the protocol.

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

308 (7) A pharmacist providing services under this section  
309 must complete a 3-hour continuing education course approved by  
310 the board addressing issues related to minor, nonchronic health  
311 conditions each biennial licensure renewal in addition to the  
312 continuing education requirements under s. 465.009. Each  
313 pharmacist must submit confirmation of having completed the  
314 course when applying for licensure renewal. A pharmacist who  
315 fails to comply with this subsection may not provide testing,  
316 screening, or treatment services.

317 (8) A pharmacist providing services under this section  
318 must provide a patient with written information to advise the  
319 patient to seek followup care from his or her primary care  
320 physician. The board, by rule, shall adopt guidelines for the  
321 circumstances under which the information required under this  
322 subsection shall be provided.

323 (9) The pharmacy in which a pharmacist tests and screens  
324 for and treats minor, nonchronic health conditions must  
325 prominently display signage indicating that any patient

326 | receiving testing, screening, or treatment services under this  
 327 | section is advised to seek followup care from his or her primary  
 328 | care physician.

329 | (10) A pharmacist providing services under this section  
 330 | must comply with applicable state and federal laws and  
 331 | regulations.

332 | (11) The requirements of the section do not apply with  
 333 | respect to minor, nonchronic health conditions when treated with  
 334 | over-the-counter products.

335 | Section 5. This act shall take effect July 1, 2020.  
 336 |