LEGISLATIVE ACTION

Senate

House

The Committee on Health Policy (Diaz) recommended the following: Senate Amendment (with title amendment) Before line 14 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

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12 authorized pursuant to a written protocol to order and evaluate 13 laboratory and clinical tests; any hospital licensed under part 14 I of chapter 395; or any laboratory appropriately certified by the Centers for Medicare and Medicaid Services under the federal 15 16 Clinical Laboratory Improvement Amendments, and the federal 17 rules adopted thereunder, which diagnoses or suspects the existence of a disease of public health significance shall 18 19 immediately report the fact to the Department of Health.

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

22 465.003 Definitions.-As used in this chapter, the term: 23 (13) "Practice of the profession of pharmacy" includes 24 compounding, dispensing, and consulting concerning contents, 25 therapeutic values, and uses of any medicinal drug; consulting 26 concerning therapeutic values and interactions of patent or 27 proprietary preparations, whether pursuant to prescriptions or 28 in the absence and entirely independent of such prescriptions or 29 orders; and conducting other pharmaceutical services. For purposes of this subsection, "other pharmaceutical services" 30 means the monitoring of the patient's drug therapy and assisting 31 32 the patient in the management of his or her drug therapy, and 33 includes review of the patient's drug therapy and communication 34 with the patient's prescribing health care provider as licensed under chapter 458, chapter 459, chapter 461, or chapter 466, or 35 36 similar statutory provision in another jurisdiction, or such 37 provider's agent or such other persons as specifically 38 authorized by the patient, regarding the drug therapy. However, 39 nothing in this subsection may be interpreted to permit an alteration of a prescriber's directions, the diagnosis or 40



41 treatment of any disease, the initiation of any drug therapy, 42 the practice of medicine, or the practice of osteopathic 43 medicine, unless otherwise permitted by law. "Practice of the 44 profession of pharmacy" also includes any other act, service, operation, research, or transaction incidental to, or forming a 45 part of, any of the foregoing acts, requiring, involving, or 46 47 employing the science or art of any branch of the pharmaceutical profession, study, or training, and shall expressly permit a 48 49 pharmacist to transmit information from persons authorized to 50 prescribe medicinal drugs to their patients. The practice of the 51 profession of pharmacy also includes the administration of 52 vaccines to adults pursuant to s. 465.189, the testing for and 53 treatment of influenza and streptococcus pursuant to s. 54 465.1895, and the preparation of prepackaged drug products in 55 facilities holding Class III institutional pharmacy permits. 56 Section 3. Section 465.1895, Florida Statutes, is created 57 to read: 58 465.1895 Testing for and treatment of influenza and 59 streptococcus.-60 (1) A pharmacist may test for and treat influenza and 61 streptococcus if all of the following criteria are met: 62 (a) The pharmacist has entered into a written protocol with a supervising physician licensed under chapter 458 or chapter 63 64 459 and such protocol complies with the requirements as 65 specified in subsection (5) and board rules. 66 (b) The pharmacist uses an instrument and a waived test, as 67 that term is defined in 42 C.F.R. s. 493.2. 68 (c) The pharmacist uses a testing system that: 69 1. Provides automated readings in order to reduce user

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70 subjectivity or interpretation of results; 71 2. Is capable of directly or indirectly interfacing with 72 electronic medical records systems; and 73 3. Is capable of electronically reporting daily de-74 identified test results to the appropriate agencies. 75 (d) The pharmacist is certified to test for and treat 76 influenza and streptococcus pursuant to a certification program 77 approved by the board, in consultation with the Board of Medicine and the Board of Osteopathic Medicine, within 90 days 78 79 after the date this section becomes effective. The certification 80 program must require that the pharmacist attend, on a one-time 81 basis, 8 hours of continuing education courses approved by the 82 board. The continuing education curriculum must be provided by 83 an training organization approved by the Accreditation Council 84 for Pharmacy Education and must include, at a minimum, point-of-85 care testing for influenza and streptococcus and the safe and 86 effective treatment of influenza and streptococcus. 87 (2) A pharmacist may not enter into a written protocol under this section unless he or she maintains at least \$200,000 88 89 of professional liability insurance and is certified as required 90 in paragraph (1)(d). 91 (3) A pharmacist who tests for and treats influenza and 92 streptococcus shall maintain and make available patient records using the same standards for confidentiality and maintenance of 93 94 such records as those that are imposed on health care 95 practitioners under s. 456.057. Such records must be maintained 96 for at least 5 years. 97 (4) The decision by a supervising physician licensed under chapter 458 or chapter 459 to enter into a written protocol 98

COMMITTEE AMENDMENT

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99	under this section is a professional decision on the part of the
100	physician, and a person may not interfere with a physician's
101	decision regarding entering into such a protocol. A pharmacist
102	may not enter into a written protocol that is to be performed
103	while he or she is acting as an employee without the written
104	approval of the owner of the pharmacy.
105	(5) The board shall adopt rules establishing the
106	requirements for the written protocol within 90 days after the
107	date this section becomes effective. At a minimum, the written
108	protocol must include:
109	(a) The terms and conditions as required in s. 465.189(7);
110	(b) Specific categories of patients for whom the
111	supervising physician authorizes the pharmacist to test for and
112	treat influenza and streptococcus;
113	(c) The supervising physician's instructions for the
114	treatment of influenza and streptococcus, based on the patient's
115	age, symptoms, and test results, including negative results;
116	(d) A process and schedule for the supervising physician to
117	review the pharmacist's actions under the written protocol; and
118	(e) A process and schedule for the pharmacist to notify the
119	supervising physician of the patient's condition, tests
120	administered, test results, and course of treatment.
121	(6) A pharmacist who provides testing for or treatment of
122	influenza and streptococcus under this section shall notify the
123	patient's primary care provider within 2 business days after
124	providing any such testing or treatment.
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126	========== T I T L E A M E N D M E N T =================================
127	And the title is amended as follows:

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128 Delete line 2

129 and insert:

An act relating to pharmacy; amending s. 381.0031, 1.30 131 F.S.; requiring specified licensed pharmacists to 132 report certain information to the Department of 133 Health; amending s. 465.003, F.S.; revising the 134 definition of the term "practice of the profession of pharmacy"; creating s. 465.1895, F.S.; authorizing 135 pharmacists who meet certain criteria to test for and 136 137 treat influenza and streptococcus; providing 138 requirements relating thereto; specifying requirements 139 for the certification program and for certain 140 continuing education; requiring that the written 141 protocol between a pharmacist and supervising 142 physician contain certain information, terms, and 143 conditions; requiring the Board of Pharmacy to adopt 144 rules within a specified time; requiring that a 145 pharmacist notify a patient's primary care provider 146 within a specified time after providing any such 147 testing or treatment;