1	A bill to be entitled
2	An act relating to HIV infection prevention drugs;
3	providing a short title; creating s. 465.1861, F.S.;
4	defining terms; authorizing licensed pharmacists to
5	screen for HIV exposure and order and dispense HIV
6	infection prevention drugs under a collaborative
7	practice agreement; requiring pharmacists to be
8	certified by the Board of Pharmacy before ordering and
9	dispensing HIV infection prevention drugs; requiring
10	the board, in consultation with the Board of Medicine
11	and the Board of Osteopathic Medicine, to adopt rules
12	for such certification; specifying minimum
13	requirements for the certification; requiring the
14	board to adopt rules; providing an effective date.
15	
16	Be It Enacted by the Legislature of the State of Florida:
17	
18	Section 1. This act may be cited as the "John W. Rheay
19	Act."
20	Section 2. Section 465.1861, Florida Statutes, is created
21	to read:
22	465.1861 Ordering and dispensing HIV infection prevention
23	<u>drugs</u>
24	(1) As used in this section, the term:
25	(a) "HIV" means the human immunodeficiency virus.
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26	(b) "HIV infection prevention drug" means preexposure
27	prophylaxis, postexposure prophylaxis, and any other drug
28	approved by the United States Food and Drug Administration for
29	the prevention of HIV infection.
30	(c) "Postexposure prophylaxis" means a drug or drug
31	combination that meets the clinical eligibility recommendations
32	of the United States Centers for Disease Control and Prevention
33	guidelines for antiretroviral treatment following potential
34	exposure to HIV.
35	(d) "Preexposure prophylaxis" means a drug or drug
36	combination that meets the clinical eligibility recommendations
37	of the United States Centers for Disease Control and Prevention
38	guidelines for antiretroviral treatment for the prevention of
39	HIV transmission.
40	(2) A pharmacist may screen an adult for HIV exposure and
41	provide the results to the adult, with the advice that the
42	patient should seek further medical consultation or treatment
43	from a physician.
44	(3) A pharmacist may dispense HIV preexposure prophylaxis
45	drugs pursuant to a valid prescription issued by a licensed
46	health care practitioner authorized by law to prescribe such
47	drugs.
48	(4) A pharmacist who is certified under subsection (6) may
49	order and dispense HIV postexposure prophylaxis drugs pursuant
50	to a written collaborative practice agreement between the
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51	pharmacist and a physician licensed under chapter 458 or chapter
52	<u>459.</u>
53	(a) A written collaborative practice agreement between a
54	pharmacist and a physician under this section must include, at a
55	minimum, all of the following:
56	1. Terms and conditions relating to the screening for HIV
57	and the ordering and dispensing of HIV postexposure prophylaxis
58	drugs by the pharmacist. Such terms and conditions must be
59	appropriate for the pharmacist's training.
60	2. Specific categories of patients the pharmacist is
61	authorized to screen for HIV and for whom the pharmacist may
62	order and dispense HIV postexposure prophylaxis drugs.
63	3. The physician's instructions for obtaining relevant
64	patient medical history for the purpose of identifying
65	disqualifying health conditions, adverse reactions, and
66	contraindications to the use of HIV postexposure prophylaxis
67	drugs.
68	4. A process and schedule for the physician to review the
69	pharmacist's actions under the practice agreement.
70	5. Evidence of the pharmacist's current certification by
71	the board as provided in subsection (6).
72	6. Any other requirements as established by the board in
73	consultation with the Board of Medicine and the Board of
74	Osteopathic Medicine.
75	(b) A physician who has entered into a written
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76 collaborative practice agreement pursuant to this section is 77 responsible for reviewing the pharmacist's actions to ensure 78 compliance with the agreement. 79 (C) The pharmacist shall submit a copy of the written 80 collaborative practice agreement to the board. 81 (5) A pharmacist who orders and dispenses HIV postexposure 82 prophylaxis drugs pursuant to subsection (4) must provide the 83 patient with written information advising the patient to seek 84 follow-up care from his or her primary care physician. If the 85 patient indicates that he or she lacks regular access to primary 86 care, the pharmacist must comply with the procedures of the 87 pharmacy's approved access-to-care plan as provided in 88 subsection (7). 89 (6) To provide services under a collaborative practice 90 agreement pursuant to this section, a pharmacist must be 91 certified by the board, according to rules adopted by the board 92 in consultation with the Board of Medicine and the Board of 93 Osteopathic Medicine. To be certified, a pharmacist must, at a 94 minimum, meet all of the following criteria: 95 (a) Hold an active and unencumbered license to practice 96 pharmacy under this chapter. (b) Be engaged in the active practice of pharmacy. 97 98 (c) Have earned a degree of doctor of pharmacy or have 99 completed at least 3 years of experience as a licensed 100 pharmacist.

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101 Maintain at least \$250,000 of liability coverage. A (d) pharmacist who maintains liability coverage pursuant to s. 102 103 465.1865 or s. 465.1895 satisfies this requirement. 104 (e) Have completed a course approved by the board, in 105 consultation with the Board of Medicine and the Board of 106 Osteopathic Medicine, which includes, at a minimum, instruction 107 on all of the following: 108 1. Performance of patient assessments. 109 2. Point-of-care testing procedures. 3. Safe and effective treatment of HIV exposure with HIV 110 infection prevention drugs, including, but not limited to, 111 112 consideration of the side effects of the drug dispensed and the 113 patient's diet and activity levels. 114 4. Identification of contraindications. 115 5. Identification of patient comorbidities in individuals 116 with HIV requiring further medical evaluation and treatment, 117 including, but not limited to, cardiovascular disease, lung and 118 liver cancer, chronic obstructive lung disease, and diabetes 119 mellitus. 120 (7) (a) A pharmacy in which a pharmacist is providing 121 services under a written collaborative practice agreement 122 pursuant to subsection (4) must submit an access-to-care plan to 123 the board and department annually. 124 (b) An access-to-care plan shall assist patients in 125 gaining access to appropriate care settings when they present to

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126 a pharmacist for HIV screening and indicate that they lack 127 regular access to primary care. An access-to-care plan must 128 include: 129 1. Procedures to educate such patients about care that 130 would be best provided in a primary care setting and the 131 importance of receiving regular primary care. 132 2. The pharmacy's plan for collaborative partnership with 133 one or more nearby federally qualified health centers, county 134 health departments, or other primary care settings. The goals of 135 such partnership must include, but need not be limited to, 136 protocols for identifying and appropriately referring a patient 137 who has presented to the pharmacist for HIV screening or access to HIV infection prevention drugs and indicates that he or she 138 139 lacks regular access to primary care. 140 The board shall adopt rules to implement this section. (8) 141 Section 3. This act shall take effect July 1, 2024.

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