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CS/HB 389, Engrossed 1

2020 Legislature

1  
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

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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"

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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.

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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,

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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.



ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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.

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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.

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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

ENROLLED

CS/HB 389, Engrossed 1

2020 Legislature

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 |