IN THE GENERAL ASSEMBLY STATE OF __________

An Act to Authorize Pharmacists to Perform
Collaborative Drug Therapy Management

Be it enacted by the People of the State of __________, represented in the General Assembly:

Section 1. Title. This act shall be known as and may be cited as the Collaborative Drug Therapy Management Act

Section 2. Purpose. The Legislature hereby finds and declares that:

A. When physicians of Medicine or Osteopathy and pharmacists decide to work together in a Collaborative Drug Therapy Management (CDTM), agreement they do so in order to complement each other’s unique roles and to make the most of their respective education and training for patients’ best interests.

B. Multiple studies, including the Asheville Project, have demonstrated the benefits of pharmacists in improving patients’ pharmacotherapy outcomes in the hospital, outpatient and other settings.

C. Pharmacists’ pharmacotherapy and patient care training combined with the extensive diagnostic and patient management training of physicians can lead to effective collaborative pharmacotherapy decision-making that improves patients’ medication-related outcomes.

Section 3. Definitions. For the purposes of this section:

A. “Collaborative Drug Therapy Management” or “CDTM” means the initiating, monitoring, modifying and discontinuing of a patient's drug therapy by an authorized pharmacist under the supervision of a physician in accordance with a collaborative practice agreement.
CDTM may include: collecting and reviewing patient histories; obtaining and checking vital signs, including pulse, temperature, blood pressure and respiration; and, under the supervision of, or in direct consultation with, a physician, ordering and evaluating the results of laboratory tests directly related to drug therapy when performed in accordance with approved protocols applicable to the practice setting and when the evaluation shall not include a diagnostic component.

B. “Collaborative Practice Agreement” or “CDTM Agreement” means a written and signed agreement between an authorized pharmacist with training and experience relevant to the scope of the collaborative practice and a supervising physician that defines the collaborative practice in which the authorized pharmacist and supervising physician propose to practice. The collaborative practice must be within the scope of the supervising physician’s practice. In the community pharmacy setting, the CDTM Agreement shall include a written referral of an identified patient from the supervising physician to an authorized pharmacist, and shall include a written consent to the CDTM Agreement by the named patient.

C. “Initiating, monitoring, modifying, and discontinuing” means that a pharmacist may perform specific acts as authorized by a Supervising Physician pursuant to the CDTM Agreement. This does not include the selection of drug products not prescribed by the Supervising Physician unless selection of a drug product is authorized by the written guidelines and protocols.

D. “Patient” means a person who is referred to a pharmacist by his or her Supervising Physician for the purpose of receiving CDTM services from the pharmacist. The Supervising Physician shall assess the patient and include a diagnosis when referring the patient to the collaborating pharmacist. The patient shall be notified of, and shall consent to, the CDTM
services. Individual referral and consent shall be recorded by the pharmacist and the Supervising Physician in the patient's record.

E. “Protocol” means a Supervising Physician’s written order, written standing medical order or other written order of protocol as defined by rules adopted by the __________ medical board or the board of osteopathic examiners in medicine and surgery. Protocol must be physician and pharmacist specific for prescriptions or orders given by the physician authorizing the written protocol. Protocol must be specific to a particular patient. It serves to guide a pharmacist’s conduct, direct the course of action, and delineate the functions, procedures, and decision criteria to be followed. It has been mutually agreed upon by the collaborating physician and pharmacist, and has been reviewed by an appropriate body responsible for quality assurance within the practitioners’ practice setting.

F. “Supervising Physician” means a physician who holds an active license to practice Medicine or Osteopathy in the State of __________. A Supervising Physician in a CDTM Agreement may only delegate to an authorized pharmacist (or licensed pharmacist working substituting the authorized pharmacist if unavailable) pursuant to the written agreement and protocols with the pharmacist.

**Section 4. Requirements.**

A. A pharmacist licensed pursuant to this chapter may implement, monitor and modify drug therapy and use only under the following circumstances:

a. The patient's drug therapy and use are pursuant to a CDTM Agreement and Protocol with a Supervising Physician.

b. The pharmacist follows the written CDTM protocols prescribed by the Supervising Physician who made the diagnosis and implements, monitors or modifies a patient’s drug therapy and use only pursuant to those protocols.
B. A CDTM Agreement must include:

   a. specific disease state(s) being co managed, with each disease state identified as either primary or co morbid;
   b. specific pharmacist prescribing authority pursuant to the agreement;
   c. detailed practice Protocols;
   d. description of risk management activities;
   e. documentation of any initiation, modification or discontinuation of a patient's medication in the patient's medical record in the custody of the supervising physician;
   f. description of outcome measurements;
   g. detailed informed consent procedures that are appropriate to the practice setting;
   h. detailed procedures and periods by which time any test results, copies of initial prescriptions, modifications or discontinuations, copies of the patient consent and the CDTM Agreement, and other patient information will be forwarded from the authorized pharmacist to the Supervising Physician, and a specific procedure for the pharmacist to identify and transmit any urgent communications; and description of the nature and form of the supervision of the authorized pharmacist by the Supervising Physician, and a description of the procedure to follow when either the authorized pharmacist or the supervising physician is unavailable or absent;

C. A collaborative practice agreement must be reviewed and renewed by the authorized pharmacist and supervising physician at least every two years.

D. A physician who enters into a CDTM Agreement must have an ongoing legitimate physician-patient relationship with the patient. For purposes of this subsection, a “physician-patient relationship” is a relationship based on:
a. the patient making a medical complaint,

b. the patient providing a medical history,

c. the patient receiving a physical examination, and

d. a logical connection existing between the medical complaint, the medical history, the physical examination and any drug prescribed for the patient.

E. A pharmacist is responsible for the pharmacist's negligent acts that are the result of the pharmacist's change of medication or that relate to patient drug usage pursuant to drug therapy management protocols. This subsection does not limit a physician’s liability for negligent acts that are not related to a pharmacist’s change of medication pursuant to the protocols.

F. Nothing in this Section may be interpreted to permit an alteration of a physician’s directions, the diagnosis or treatment of any disease, the initiation of any drug therapy, the practice of medicine, or the practice of osteopathic medicine, unless otherwise permitted by protocol.

G. The Boards of Medicine and Pharmacy shall within ____ days, jointly develop and promulgate regulations to implement the provisions of this section and to facilitate the development and implementation of safe and effective collaborative agreements between the appropriate providers and pharmacists.

H. A licensee who violates this section commits an act of unprofessional conduct.

I. A physician or a physician group may hire pharmacists for the purpose of practicing CDTM under a CDTM Agreement, as defined in subsection 3, for the benefit of a patient of that physician or physician group. No retail pharmacy may employ a physician for the purpose of maintaining, establishing or entering into a CDTM Agreement with a patient. Nothing shall prohibit a retail pharmacy from hiring a physician or licensed medical practitioner for the
Section 5. Termination. Prior to the termination or nonrenewal of a CDTM Agreement, the Supervising Physician and the authorized pharmacist shall arrange for an uninterrupted continuation of the patient's drug therapy, in accordance with the terms of the CDTM Agreement. When a CDTM Agreement is not renewed or CDTM is otherwise terminated, the authorized pharmacist and the Supervising Physician shall inform the patient in writing of the termination and of the procedures in place for continuation of the patient's drug therapy, in accordance with the terms of the CDTM Agreement. The Supervising Physician has an ongoing responsibility for patient care unless and until the physician patient relationship is terminated.

Section 6. Effective. This Act shall become effective immediately upon being enacted into law.

Section 7. Severability. If any provision of this Act is held by a court to be invalid, such invalidity shall not affect the remaining provisions of this Act, and to this end the provisions of this Act are hereby declared severable.

Adopted DATE 2013