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§19–713.6.

- (a) (1) In this section the following words have the meanings indicated.
- (2) “Documented informed consent” means:
- (i) A written consent form signed by a patient; or
 - (ii) Verbal or otherwise communicated consent signified by a notation in a patient’s electronic medical record maintained by a group model health maintenance organization.
- (3) “Drug therapy management” means treatment of a patient using drug therapy, laboratory tests, or medical devices under conditions or limitations set forth in a protocol specified in a physician–pharmacist agreement for the purpose of improving patient outcome.
- (4) “Group model health maintenance organization” means a health maintenance organization that:
- (i) Contracts with one multispecialty group of physicians who are employed by and shareholders of the multispecialty group; and
 - (ii) Provides and arranges for the provision of physician services to patients at medical facilities operated by the health maintenance organization.
- (5) “Licensed pharmacist” means an individual who is licensed to practice pharmacy under Title 12 of the Health Occupations Article.
- (6) “Licensed physician” means an individual who is licensed to practice medicine under Title 14 of the Health Occupations Article.
- (7) “Patient” means:
- (i) A patient who is a member of a group model health maintenance organization; or
 - (ii) An individual to whom the group model health maintenance organization is contractually or legally obligated to provide, or arrange to provide, health care services.
- (8) “Physician–pharmacist agreement” means an agreement between a licensed physician and a licensed pharmacist that is disease–state specific and specifies the protocols that may be used.

(9) “Protocol” means a course of treatment predetermined by the licensed physician and licensed pharmacist according to generally accepted medical practice for the proper completion of a particular therapeutic or diagnostic intervention.

(b) (1) In a group model health maintenance organization, a licensed physician and a licensed pharmacist who wish to provide drug therapy management to patients shall have a physician–pharmacist agreement.

(2) Drug therapy management shall be provided under this section only:

(i) In accordance with a physician–pharmacist agreement; and

(ii) Through the internal pharmacy operations of the group model health maintenance organization.

(3) A licensed physician who has entered into a physician–pharmacist agreement shall submit to the State Board of Physicians a copy of the physician–pharmacist agreement and any subsequent modifications made to the physician–pharmacist agreement or the protocols specified in the physician–pharmacist agreement.

(4) A licensed pharmacist who has entered into a physician–pharmacist agreement shall submit to the State Board of Pharmacy a copy of the physician–pharmacist agreement and any subsequent modifications made to the physician–pharmacist agreement or the protocols specified in the physician–pharmacist agreement.

(c) A licensed pharmacist is authorized to enter into a physician–pharmacist agreement if the licensed pharmacist:

(1) Has a Doctor of Pharmacy Degree or equivalent training as established in regulations adopted by the State Board of Pharmacy;

(2) Is approved by the State Board of Pharmacy to enter into a physician–pharmacist agreement with a licensed physician; and

(3) Meets any other requirements established by regulation by the State Board of Pharmacy.

(d) A physician–pharmacist agreement shall prohibit the substitution of a chemically dissimilar drug product by the pharmacist for the product prescribed by the physician, unless permitted in the protocol specified in the physician–pharmacist agreement.

(e) A patient may decline to participate or withdraw from participating in drug therapy management in a group model health maintenance organization at any time.

(f) A licensed physician or licensed pharmacist or both shall inform a patient:

(1) Regarding the procedures that will be utilized for drug therapy management under the associated protocols;

(2) That the patient may decline to participate or withdraw from participating in the drug therapy management at any time; and

(3) That neither the physician nor the pharmacist has been coerced, given economic incentives, excluding normal reimbursement for services rendered, or involuntarily required to participate.

(g) A licensed physician or a licensed pharmacist or both shall obtain documented informed consent from a patient after disclosing the information required to be disclosed under subsection (f) of this section.

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