SENATE BILL 791

J2, J3, J4 (9lr2470)

ENROLLED BILL

—Finance and Education, Health, and Environmental Affairs/Health and Government Operations—

Introduced by Senator Klausmeier

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	Read and	l Examined	by Proofread	lers:	
]	Proofreader.
]	Proofreader.
Sealed with the Great	at Seal and	l presented	to the Gove	ernor, for his ap	oproval this
day of		at		o'clock,	M.
					President.
		CHAPTER			
AN ACT concerning					
Group Model	Health Ma	intenance Managei	_	ons – Drug The	rapy
physician-phar and the State management to pharmacists to prohibit certain exceptions; pro- agreement under of a physician-p	therapy macist agree Board of be provided enter into the substitution of the contract of the c	anagement ements apper a	to certain proved by the sign of the circums that the circums that the circums that the circums are the circums of the circums	patients to have state Board or stances; authorizating certain agreed a physician-for the duration of the dura	ave certain f Pharmacy ug therapy zing certain reements to to certain pharmacist and renewal to decline to

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

<u>Underlining</u> indicates amendments to bill.

Strike out indicates matter stricken from the bill by amendment or deleted from the law by amendment.

Italics indicate opposite chamber/conference committee amendments.



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(2)

1	times; requiring certain physicians and certain pharmacists to make certain
2	disclosures to certain patients and to obtain certain consent from certain
3	patients following certain disclosures; defining certain terms; altering a certain
$\frac{4}{2}$	definition; requiring the Board of Pharmacy and the Board of Physicians to
5	submit a certain report to the Governor and the General Assembly on or before
6	a certain date; providing for the termination of this Act; and generally relating
7	to drug therapy management of patients in group model health maintenance
8	organizations.
9	BY repealing and reenacting, without amendments,
10	Article – Health – General
11	Section 19–701(g)
12	Annotated Code of Maryland
13	(2005 Replacement Volume and 2008 Supplement)
14	BY adding to
15	Article – Health – General
16	Section 19–713.6
17	Annotated Code of Maryland
18	(2005 Replacement Volume and 2008 Supplement)
19	BY repealing and reenacting, without amendments,
20	Article – Health Occupations
21	Section $12-101(a)$
22	Annotated Code of Maryland
23	(2005 Replacement Volume and 2008 Supplement)
24	BY repealing and reenacting, with amendments,
25	Article – Health Occupations
26	Section $\frac{12-6A-01}{12-101(s)(1)}$, $\frac{12-6A-01}{12-6A-02}$ and $\frac{12-6A-02}{12-6A-02}$
27	Annotated Code of Maryland
28	(2005 Replacement Volume and 2008 Supplement)
29	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF
30	MARYLAND, That the Laws of Maryland read as follows:
31	Article - Health - General
32	19–701.
20	(m) "II calth maintenance amonimation" making a mosti
33 34	(g) "Health maintenance organization" means any person, including a profit or nonprofit corporation organized under the laws of any state or country, that:
35	(1) Operates or proposes to operate in this State;

Except as provided in § 19-703(b) and (f) of this subtitle, provides

or otherwise makes available to its members health care services that include at least

1 2 3 4 5	physician, hospitalization, laboratory, X-ray, emergency, and preventive services, out-of-area coverage, and any other health care services that the Commissioner determines to be available generally on an insured or prepaid basis in the area serviced by the health maintenance organization, and, at the option of the health maintenance organization, may provide additional coverage;
6 7 8	(3) Except for any copayment or deductible arrangement, is compensated only on a predetermined periodic rate basis for providing to members the minimum services that are specified in item (2) of this subsection;
9 10 11 12 13	(4) Assures its subscribers and members, the Commissioner, and the Department that one clearly specified legal and administrative focal point or element of the health maintenance organization has the responsibility of providing the availability, accessibility, quality, and effective use of comprehensive health care services; and
14	(5) Primarily provides services of physicians:
15 16	(i) Directly through physicians who are either employees or partners of the health maintenance organization; or
17 18 19	(ii) Under arrangements with one or more groups of physicians, who are organized on a group practice or individual practice basis, under which each group:
20 21	1. Is compensated for its services primarily on the basis of an aggregate fixed sum or on a per capita basis; and
22 23 24	2. Is provided with an effective incentive to avoid unnecessary inpatient use, whether the individual physician members of the group are paid on a fee–for–service or other basis.
25	19–713.6.
26 27	(A) (1) IN THIS SECTION THE FOLLOWING WORDS HAVE THE MEANINGS INDICATED.
28	(2) "DOCUMENTED INFORMED CONSENT" MEANS:
29	(I) A WRITTEN CONSENT FORM SIGNED BY A PATIENT; OR
30 31	(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.

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1	(3) "Drug therapy management" means treatment of a
2	PATIENT USING DRUG THERAPY, LABORATORY TESTS, OR MEDICAL DEVICES
3	UNDER CONDITIONS OR LIMITATIONS SET FORTH IN A PROTOCOL SPECIFIED IN
4	A PHYSICIAN-PHARMACIST AGREEMENT FOR THE PURPOSE OF IMPROVING
5	PATIENT OUTCOME.

- 6 **(4)** "GROUP MODEL HEALTH MAINTENANCE ORGANIZATION" 7 MEANS A HEALTH MAINTENANCE ORGANIZATION THAT PROVIDES FOR THE 8 DELIVERY OF COVERED SERVICES TO ITS MEMBERS BY PHYSICIANS WHO ARE 9 MEMBERS OF ONE OR MORE GROUP PRACTICES UNDER CONTRACT WITH THE 10 HEALTH MAINTENANCE ORGANIZATION TO PROVIDE HEALTH CARE SERVICES 11 TO THE MEMBERS OF THE HEALTH MAINTENANCE ORGANIZATION AT MEDICAL 12FACILITIES OWNED AND OPERATED BY THE HEALTH MAINTENANCE 13 **ORGANIZATION**:
- 14 <u>(I) CONTRACTS WITH ONE MULTISPECIALTY GROUP OF</u>
 15 <u>PHYSICIANS WHO ARE EMPLOYED BY AND SHAREHOLDERS OF THE</u>
 16 <u>MULTISPECIALTY GROUP; AND</u>
- 17 (II) PROVIDES AND ARRANGES FOR THE PROVISION OF
 18 PHYSICIAN SERVICES TO PATIENTS AT MEDICAL FACILITIES OPERATED BY THE
 19 HEALTH MAINTENANCE ORGANIZATION.
- 20 (5) "LICENSED PHARMACIST" MEANS AN INDIVIDUAL WHO IS 21 LICENSED TO PRACTICE PHARMACY UNDER TITLE 12 OF THE HEALTH 22 OCCUPATIONS ARTICLE.
- 23 (6) "LICENSED PHYSICIAN" MEANS AN INDIVIDUAL WHO IS 24 LICENSED TO PRACTICE MEDICINE UNDER TITLE 14 OF THE HEALTH 25 OCCUPATIONS ARTICLE.
- 26 (7) "PATIENT" MEANS A MEANS:
- 27 <u>(I) A</u> PATIENT WHO IS A MEMBER OF A GROUP MODEL 28 HEALTH MAINTENANCE ORGANIZATION; OR
- 29 (II) AN INDIVIDUAL TO WHOM THE GROUP MODEL HEALTH
 30 MAINTENANCE ORGANIZATION IS CONTRACTUALLY OR LEGALLY OBLIGATED TO
 31 PROVIDE, OR ARRANGE TO PROVIDE, HEALTH CARE SERVICES.
- 32 (8) "PHYSICIAN-PHARMACIST AGREEMENT" MEANS AN
 33 APPROVED AGREEMENT BETWEEN A LICENSED PHYSICIAN AND A LICENSED
 34 PHARMACIST THAT IS DISEASE-STATE SPECIFIC AND SPECIFIES THE
 35 PROTOCOLS THAT MAY BE USED.

1	(9)	"PROTOCOL"	MEANS	\mathbf{A}	COURSE	\mathbf{OF}	TREATMENT
2	PREDETERMINED	BY THE LICEN	SED PHYS	ICIAN	AND LIC	ENSED	PHARMACIST
3	ACCORDING TO C	GENERALLY ACC	EPTED ME	DICA	L PRACTIO	E FOR	THE PROPER
1	COMDITECTION OF	A DADTICITI AD T		rta Ai	DIACNO	TOTAL TATE	PEDVENITION

- 5 **(1)** IN A GROUP MODEL HEALTH MAINTENANCE ORGANIZATION, A 6 LICENSED PHYSICIAN AND A LICENSED PHARMACIST WHO WISH TO PROVIDE 7 THERAPY MANAGEMENT TO **PATIENTS** SHALL HAVE 8 PHYSICIAN-PHARMACIST AGREEMENT THAT IS APPROVED BY THE STATE 9 BOARD OF PHARMACY AND THE STATE BOARD OF PHYSICIANS.
- 10 (2) DRUG THERAPY MANAGEMENT SHALL BE PROVIDED UNDER 11 THIS SECTION ONLY:
- 12 (I) IN ACCORDANCE WITH A PHYSICIAN-PHARMACIST 13 AGREEMENT; AND
- 14 (II) THROUGH THE INTERNAL PHARMACY OPERATIONS OF 15 THE GROUP MODEL HEALTH MAINTENANCE ORGANIZATION.
- 16 (C) A LICENSED PHARMACIST IS AUTHORIZED TO ENTER INTO A
 17 PHYSICIAN-PHARMACIST AGREEMENT IF THE LICENSED PHARMACIST:
- 18 (1) HAS A DOCTOR OF PHARMACY DEGREE OR EQUIVALENT
 19 TRAINING AS ESTABLISHED IN REGULATIONS ADOPTED BY THE STATE BOARD
 20 OF PHARMACY;
- 21 (2) IS APPROVED BY THE STATE BOARD OF PHARMACY TO ENTER 22 INTO A PHYSICIAN-PHARMACIST AGREEMENT WITH A LICENSED PHYSICIAN; 23 AND
- 24 (3) MEETS ANY OTHER REQUIREMENTS ESTABLISHED BY 25 REGULATION BY THE STATE BOARD OF PHARMACY.
- 26 (D) A PHYSICIAN-PHARMACIST AGREEMENT SHALL PROHIBIT THE
 27 SUBSTITUTION OF A CHEMICALLY DISSIMILAR DRUG PRODUCT BY THE
 28 PHARMACIST FOR THE PRODUCT PRESCRIBED BY THE PHYSICIAN, UNLESS
 29 PERMITTED IN THE PROTOCOL SPECIFIED IN THE PHYSICIAN-PHARMACIST
 30 AGREEMENT.
- 31 <u>(E) The Board of Physicians and the Board of Pharmacy May</u> 32 <u>Not approve a physician-pharmacist agreement if the boards find</u> 33 <u>That there is:</u>

1	(1) INADEQUATE TRAINING, EXPERIENCE, OR EDUCATION OF THE
2	PHYSICIANS OR PHARMACISTS TO IMPLEMENT THE PROTOCOL OR PROTOCOLS
3	SPECIFIED IN THE PHYSICIAN-PHARMACIST AGREEMENT; OR
4	(2) A FAILURE TO SATISFY THE REQUIREMENTS OF:
5	(I) THIS SECTION OR TITLE 14 OF THE HEALTH
6	OCCUPATIONS ARTICLE; OR
Ü	Occimilations intribute, one
7	(II) ANY REGULATIONS ADOPTED BY THE BOARD OF
8	PHYSICIANS AND THE BOARD OF PHARMACY UNDER THIS SECTION.
9	(F) A PHYSICIAN-PHARMACIST AGREEMENT UNDER THIS SECTION
10	SHALL BE VALID FOR 2 YEARS FROM THE DATE OF ITS FINAL APPROVAL BY THE
11	BOARD OF PHYSICIANS AND THE BOARD OF PHARMACY AND MAY BE RENEWED
12	FOR ADDITIONAL 2-YEAR TERMS WITH APPROVAL FROM THE BOARD OF
13	PHYSICIANS AND THE BOARD OF PHARMACY.
14	$\stackrel{\text{(E)}}{}$ $\stackrel{\text{(G)}}{}$ A PATIENT MAY DECLINE TO PARTICIPATE OR WITHDRAW
15	FROM PARTICIPATING IN DRUG THERAPY MANAGEMENT IN A GROUP MODEL
16	HEALTH MAINTENANCE ORGANIZATION AT ANY TIME.
17	(F) (H) A LICENSED PHYSICIAN OR LICENSED PHARMACIST OR BOTH
18	SHALL INFORM A PATIENT:
19	(1) REGARDING THE PROCEDURES THAT WILL BE UTILIZED FOR
20	DRUG THERAPY MANAGEMENT UNDER THE ASSOCIATED PROTOCOLS;
21	(2) THAT THE PATIENT MAY DECLINE TO PARTICIPATE OF
22	WITHDRAW FROM PARTICIPATING IN THE DRUG THERAPY MANAGEMENT AT ANY
23	TIME; AND
	(0)
24	(3) THAT NEITHER THE PHYSICIAN NOR THE PHARMACIST HAS
25 26	BEEN COERCED, GIVEN ECONOMIC INCENTIVES, EXCLUDING NORMAI
26	REIMBURSEMENT FOR SERVICES RENDERED, OR INVOLUNTARILY REQUIRED TO
27	PARTICIPATE.
28	(G) (I) A LICENSED PHYSICIAN OR A LICENSED PHARMACIST OF
29	BOTH SHALL OBTAIN DOCUMENTED INFORMED CONSENT FROM A PATIENT
	ODIM, DOCUMINED MICHIGAN CONDUCTION IN THIRM

AFTER DISCLOSING THE INFORMATION REQUIRED TO BE DISCLOSED UNDER

SUBSECTION (F) (H) OF THIS SECTION.

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1	<u>12–101.</u>			
2	<u>(a)</u>	In thi	s title	the following words have the meanings indicated.
3 4	(s) activities:	<u>(1)</u>	<u>"Prac</u>	tice pharmacy" means to engage in any of the following
5			<u>(i)</u>	Providing pharmaceutical care;
6 7	or devices;		<u>(ii)</u>	Compounding, dispensing, or distributing prescription drugs
8 9	devices;		(iii)	Compounding or dispensing nonprescription drugs or
10 11	nonprescript	tion dr	(iv) rugs or	Monitoring prescriptions for prescription and devices;
12 13 14	patients and or nonprescr			Providing information, explanation, or recommendations to practitioners about the safe and effective use of prescription or devices;
15 16	monitoring of	of ther	(vi) apy wi	<u>Identifying and appraising problems concerning the use or th drugs or devices;</u>
17 18	contract, as	provid	(vii) ed und	Acting within the parameters of a therapy management ler Subtitle 6A of this title;
19 20	12–508 of th	is title	(viii) 2;	Administering an influenza vaccination in accordance with §
21 22 23		_	nacy s	Delegating a pharmacy act to a registered pharmacy student, or an individual engaged in a Board approved ining program; [or]
24 25 26			-	Supervising a delegated pharmacy act performed by a chnician, pharmacy student, or an individual engaged in a cy technician training program; OR
27 28	ACCORDAN	CE WI	(XI) TH § 1	PROVIDING DRUG THERAPY MANAGEMENT IN 9–713.6 OF THE HEALTH – GENERAL ARTICLE.
29	12–6A–01.			

In this subtitle the following words have the meanings indicated.

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(a)

1	(B)	"GROUP	MODEL H	EALTH MA	INTENANCE	ORGANIZA	TION"	MEANS A
2	HEALTH M	IAINTENAN (CE ORGAN	HZATION T	HAT PROVI	DES FOR TI	E DELI	VERY OF
3	COVERED	SERVICES '	FO ITS M I	EMBERS BY	Y PHYSICIA	NS WHO AR	E MEM	BERS OF
4	ONE OR	MORE GRO	UP PRAC	TICES UN	DER CONT	RACT WITI	I THE	HEALTH
5	MAINTENA	NCE ORGA	NIZATION	TO PROV	IDE HEALT	H CARE SE	RVICES	TO THE
6	MEMBERS	OF THE	HEALTH	MAINTEN	ANCE ORO	CANIZATION	AT	MEDICAL
7	FACILITIES	S OWNED	AND (PERATED	BY THE	HEALTH	MAIN	FENANCE
8	ORGANIZA	TION HAS	THE MEA	NING STAT	ED IN § 19	–713.6 OF	THE H	EALTH -
9	GENERAL	ARTICLE.						

- 10 (C) "HEALTH MAINTENANCE ORGANIZATION" HAS THE MEANING 11 STATED IN § 19–701(G) OF THE HEALTH GENERAL ARTICLE.
- [(b)] (D) (1) "Institutional facility" means a facility other than a nursing home whose primary purpose is to provide a physical environment for patients to obtain inpatient or emergency care.
- 15 (2) "Institutional facility" does not include an urgent care facility that 16 is not part of a facility.
- [(c)] (E) "Licensed physician" means an individual who is licensed to practice medicine under Title 14 of this article.
- 19 [(d)] (F) "Physician-pharmacist agreement" means an approved agreement 20 between a licensed physician and a licensed pharmacist that is disease-state specific 21 and specifies the protocols that may be used.
- [(e)] (G) "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.
- [(f)] (H) (1) "Therapy management contract" means a voluntary, written arrangement that is disease—state specific signed by each party to the arrangement between:
- 29 (i) One licensed pharmacist and the licensed pharmacist's 30 designated alternate licensed pharmacists;
- 31 (ii) One licensed physician and alternate designated licensed 32 physicians involved directly in patient care; and

$\begin{matrix} 1 \\ 2 \\ 3 \end{matrix}$	(iii) One patient receiving care from a licensed physician and a licensed pharmacist pursuant to a physician-pharmacist agreement and protocol under this subtitle.
4 5 6	(2) A therapy management contract shall be related to treatment using drug therapy, laboratory tests, or medical devices, under defined conditions or limitations for the purpose of improving patient outcomes.
7	12–6A–02.
8 9 10	A therapy management contract is not required for the management of patients in an institutional facility OR IN A GROUP MODEL HEALTH MAINTENANCE ORGANIZATION .
11	SECTION 2. AND BE IT FURTHER ENACTED, That:
12 13 14	On or before December 1, 2012, the Board of Pharmacy and the Board of Physicians shall report to the Governor and, in accordance with § 2–1246 of the State Government Article, the General Assembly on:
15 16	(1) the effect of this Act and any recommendations for legislative or regulatory action; and
17 18	$\frac{(2)}{\text{for under this Act.}}$ the outcomes achieved by drug therapy management as provided
19 20 21 22	SECTION 2. 3. 2. AND BE IT FURTHER ENACTED, That this Act shall take effect October 1, 2009. It shall remain in effect for a period of 4 years and, at the end of September 30, 2013, with no further action required by the General Assembly, this Act shall be abrogated and of no further force and effect.
	Approved:
	Governor.
	President of the Senate.

Speaker of the House of Delegates.