SENATE BILL 617

By: Senator Klausmeier

Introduced and read first time: February 1, 2013

Assigned to: Finance and Education, Health, and Environmental Affairs

Committee Report: Favorable with amendments

Senate action: Adopted

Read second time: March 5, 2013

CHAPTER

1 AN ACT concerning

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Drug Therapy Management - Physician-Pharmacist Agreements

3 FOR the purpose of repealing certain provisions of law requiring certain 4 physician-pharmacist agreements to be approved by the State Board of 5 Pharmacy and the State Board of Physicians; requiring, in a group model health 6 maintenance organization, a licensed physician who has entered into a certain 7 physician-pharmacist agreement to provide drug therapy management to 8 submit a copy of the agreement, certain modifications to the agreement, and 9 certain protocols to the State Board of Physicians; requiring, in a group model 10 health maintenance organization, a licensed pharmacist who has entered into a 11 certain physician-pharmacist agreement to provide drug therapy management 12 to submit a copy of the agreement, certain modifications to the agreement, and 13 certain protocols to the State Board of Pharmacy; repealing certain provisions of 14 law relating to the approval, term, and renewal of certain physician-pharmacist 15 agreements; altering a certain definition; making stylistic and conforming 16 changes; and generally relating to physician-pharmacist agreements for drug 17 therapy management in a group model health maintenance organization.

- 18 BY repealing and reenacting, with amendments,
- 19 Article Health General
- 20 Section 19–713.6
- 21 Annotated Code of Maryland
- 22 (2009 Replacement Volume and 2012 Supplement)

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.



$\frac{1}{2}$	SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND, That the Laws of Maryland read as follows:
3	Article – Health – General
4	19–713.6.
5	(a) (1) In this section the following words have the meanings indicated.
6	(2) "Documented informed consent" means:
7	(i) A written consent form signed by a patient; or
8 9 10	(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.
11 12 13 14	(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.
15 16	(4) "Group model health maintenance organization" means a health maintenance organization that:
17 18	(i) Contracts with one multispecialty group of physicians who are employed by and shareholders of the multispecialty group; and
19 20	(ii) Provides and arranges for the provision of physician services to patients at medical facilities operated by the health maintenance organization.
21 22	(5) "Licensed pharmacist" means an individual who is licensed to practice pharmacy under Title 12 of the Health Occupations Article.
23 24	(6) "Licensed physician" means an individual who is licensed to practice medicine under Title 14 of the Health Occupations Article.
25	(7) "Patient" means:
26 27	(i) A patient who is a member of a group model health maintenance organization; or
28 29 30	(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.

- 1 (8) "Physician-pharmacist agreement" means an [approved] 2 agreement between a licensed physician and a licensed pharmacist that is 3 disease-state specific and specifies the protocols that may be used.
- 4 (9) "Protocol" means a course of treatment predetermined by the 5 licensed physician and licensed pharmacist according to generally accepted medical 6 practice for the proper completion of a particular therapeutic or diagnostic 7 intervention.
- 8 (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 [that is approved by the State Board of Pharmacy and the State Board of Physicians].
- 12 (2) Drug therapy management shall be provided under this section 13 only:
- 14 (i) In accordance with a physician–pharmacist agreement; and
- 15 (ii) Through the internal pharmacy operations of the group 16 model health maintenance organization.
- 17 A LICENSED PHYSICIAN WHO HAS ENTERED INTO A **(3)** 18 PHYSICIAN-PHARMACIST AGREEMENT SHALL SUBMIT TO THE STATE BOARD OF 19 PHYSICIANS A COPY OF THE PHYSICIAN-PHARMACIST AGREEMENT AND ANY 20 SUBSEQUENT **MODIFICATIONS MADE** TO THE PHYSICIAN-PHARMACIST 21AGREEMENT OR THE PROTOCOLS SPECIFIED IN THE PHYSICIAN-PHARMACIST 22 AGREEMENT.
- 23 **(4)** A LICENSED PHARMACIST WHO HAS ENTERED INTO A PHYSICIAN-PHARMACIST AGREEMENT SHALL SUBMIT TO THE STATE BOARD OF 24PHARMACY A COPY OF THE PHYSICIAN-PHARMACIST AGREEMENT AND ANY 25 26 SUBSEQUENT **MODIFICATIONS MADE** TO THE PHYSICIAN-PHARMACIST 27 AGREEMENT OR THE PROTOCOLS SPECIFIED IN THE PHYSICIAN-PHARMACIST 28 AGREEMENT.
- 29 (c) A licensed pharmacist is authorized to enter into a physician-pharmacist 30 agreement if the licensed pharmacist:
- 31 (1) Has a Doctor of Pharmacy Degree or equivalent training as 32 established in regulations adopted by the State Board of Pharmacy;
- 33 (2) Is approved by the State Board of Pharmacy to enter into a physician—pharmacist agreement with a licensed physician; and

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- 1 Meets any other requirements established by regulation by the (3) 2 State Board of Pharmacy. 3 A physician-pharmacist agreement shall prohibit the substitution of a chemically dissimilar drug product by the pharmacist for the product prescribed by the 4 physician, unless permitted in the protocol specified in the physician-pharmacist 5 6 agreement. 7 (e) The Board of Physicians and the Board of Pharmacy may not approve a 8 physician-pharmacist agreement if the boards find that there is: 9 Inadequate training, experience, or education of the physicians or (1) 10 pharmacists to implement the protocol or protocols specified the physician-pharmacist agreement; or 11 12 A failure to satisfy the requirements of: (2) 13 (i) This section or Title 14 of the Health Occupations Article; or 14 (ii) Any regulations adopted by the Board of Physicians and the Board of Pharmacy under this section. 15 16 A physician-pharmacist agreement under this section shall be valid for 2 17 years from the date of its final approval by the Board of Physicians and the Board of 18 Pharmacy and may be renewed for additional 2-year terms with approval from the 19 Board of Physicians and the Board of Pharmacy. 20 (g) A patient may decline to participate or withdraw from participating in drug therapy management in a group model health maintenance organization at any 2122time. 23 [(h)] **(F)** A licensed physician or licensed pharmacist or both shall inform a 24patient: 25(1) Regarding the procedures that will be utilized for drug therapy 26 management under the associated protocols;
- 27 (2) That the patient may decline to participate or withdraw from participating in the drug therapy management at any time; and
- 29 (3) That neither the physician nor the pharmacist has been coerced, 30 given economic incentives, excluding normal reimbursement for services rendered, or 31 involuntarily required to participate.
 - [(i)] (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 [(h)] (F) of this section.

	Speaker of the House of Delegates.
	President of the Senate.
	Governor.
approved:	