House	Amendment NO
Offered By	
AMEND Senate Committee Substitute for Senate Bill No. 229, Finserting immediately after said section and line the following:	Page 1, Section A, Line 2, by
"338.010. 1. The "practice of pharmacy" means the interevaluation of medical prescription orders, including any legend of receipt, transmission, or handling of such orders or facilitating the designing, initiating, implementing, and monitoring of a medicat the prescription order so long as the prescription order is specific pharmacist; the compounding, dispensing, labeling, and administ pursuant to medical prescription orders and administration of viral hepatitis A, hepatitis B, diphtheria, tetanus, pertussis, and mening authorized by a physician for persons twelve years of age or olde administration of pneumonia, shingles, hepatitis A, hepatitis B, diphtherized by rule; the participation in drug selection according the drug utilization reviews; the proper and safe storage of drugs and proper records thereof; consultation with patients and other health veterinarians and their clients about legend drugs, about the safe devices; the prescribing and dispensing of self-administered oral section 338.660; and the offering or performing of those acts, sere necessary in the conduct, operation, management and control of a engage in the practice of pharmacy unless he is licensed under the chapter shall not be construed to prohibit the use of auxiliary persof a pharmacist from assisting the pharmacist in any of his or her is intended to relieve the pharmacist from his or her responsibilit and he or she will be responsible for the actions of the auxiliary passistance. This chapter shall also not be construed to prohibit or registered practitioner of medicine, dentistry, or podiatry, or vete animals, or the practice of optometry in accordance with and as passistance.	drugs under 21 U.S.C. Section 353; he dispensing of such orders; the nion therapeutic plan as defined by to each patient for care by a tration of drugs and devices al influenza, pneumonia, shingles, gitis vaccines by written protocol er as authorized by rule or the liphtheria, tetanus, pertussis, and in for a specific patient as to state law and participation in devices and the maintenance of high care practitioners, and and effective use of drugs and hormonal contraceptives under rices, operations, or transactions a pharmacy. No person shall be provisions of this chapter. This is sonnel under the direct supervision of duties. This assistance in no way hies for compliance with this chapter personnel acting in his or her interfere with any legally trinary medicine only for use in provided in sections 195.070 and
2. Any pharmacist who accepts a prescription order for a have a written protocol from the physician who refers the patient. The written protocol and the prescription order for a medication of the protocol.	for medication therapy services.

the physician only, and shall not come from a nurse engaged in a collaborative practice arrangement under section 334.104, or from a physician assistant engaged in a supervision agreement under

Action Taken\_\_\_\_\_\_ Date \_\_\_\_\_

section 334.735.

- 3. Nothing in this section shall be construed as to prevent any person, firm or corporation from owning a pharmacy regulated by sections 338.210 to 338.315, provided that a licensed pharmacist is in charge of such pharmacy.
- 4. Nothing in this section shall be construed to apply to or interfere with the sale of nonprescription drugs and the ordinary household remedies and such drugs or medicines as are normally sold by those engaged in the sale of general merchandise.
- 5. No health carrier as defined in chapter 376 shall require any physician with which they contract to enter into a written protocol with a pharmacist for medication therapeutic services.
- 6. This section shall not be construed to allow a pharmacist to diagnose or independently prescribe pharmaceuticals.
- 7. The state board of registration for the healing arts, under section 334.125, and the state board of pharmacy, under section 338.140, shall jointly promulgate rules regulating the use of protocols for prescription orders for medication therapy services and administration of viral influenza vaccines. Such rules shall require protocols to include provisions allowing for timely communication between the pharmacist and the referring physician, and any other patient protection provisions deemed appropriate by both boards. In order to take effect, such rules shall be approved by a majority vote of a quorum of each board. Neither board shall separately promulgate rules regulating the use of protocols for prescription orders for medication therapy services and administration of viral influenza vaccines. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2007, shall be invalid and void.
- 8. The state board of pharmacy may grant a certificate of medication therapeutic plan authority to a licensed pharmacist who submits proof of successful completion of a board-approved course of academic clinical study beyond a bachelor of science in pharmacy, including but not limited to clinical assessment skills, from a nationally accredited college or university, or a certification of equivalence issued by a nationally recognized professional organization and approved by the board of pharmacy.
- 9. Any pharmacist who has received a certificate of medication therapeutic plan authority may engage in the designing, initiating, implementing, and monitoring of a medication therapeutic plan as defined by a prescription order from a physician that is specific to each patient for care by a pharmacist.
- 10. Nothing in this section shall be construed to allow a pharmacist to make a therapeutic substitution of a pharmaceutical prescribed by a physician unless authorized by the written protocol or the physician's prescription order.
- 11. "Veterinarian", "doctor of veterinary medicine", "practitioner of veterinary medicine", "DVM", "VMD", "BVSe", "BVMS", "BSe (Vet Science)", "VMB", "MRCVS", or an equivalent title means a person who has received a doctor's degree in veterinary medicine from an accredited school of veterinary medicine or holds an Educational Commission for Foreign Veterinary Graduates (EDFVG) certificate issued by the American Veterinary Medical Association (AVMA).
- 12. In addition to other requirements established by the joint promulgation of rules by the board of pharmacy and the state board of registration for the healing arts:
- (1) A pharmacist shall administer vaccines in accordance with treatment guidelines established by the Centers for Disease Control and Prevention (CDC);

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- (2) A pharmacist who is administering a vaccine shall request a patient to remain in the pharmacy a safe amount of time after administering the vaccine to observe any adverse reactions. Such pharmacist shall have adopted emergency treatment protocols;
- (3) In addition to other requirements by the board, a pharmacist shall receive additional training as required by the board and evidenced by receiving a certificate from the board upon completion, and shall display the certification in his or her pharmacy where vaccines are delivered.
- 13. A pharmacist shall provide a written report within fourteen days of administration of a vaccine to the patient's primary health care provider, if provided by the patient, containing:
  - (1) The identity of the patient;

- (2) The identity of the vaccine or vaccines administered;
- (3) The route of administration;
- (4) The anatomic site of the administration;
- (5) The dose administered; and
- (6) The date of administration.
- 338.660. 1. For purposes of this chapter, "self-administered oral hormonal contraceptive" shall mean a drug composed of a combination of hormones that is approved by the Food and Drug Administration to prevent pregnancy and that the patient to whom the drug is prescribed may take orally.
- 2. A pharmacist may prescribe and dispense self-administered oral hormonal contraceptives to a person who is:
- (1) Eighteen years of age or older, regardless of whether the person has evidence of a previous prescription from a primary care practitioner or women's health care practitioner for a self-administered oral hormonal contraceptive; or
- (2) Under eighteen years of age, if the person has evidence of a previous prescription from a primary care practitioner or women's health care practitioner for a self-administered oral hormonal contraceptive.
- 3. The board of pharmacy shall adopt rules, in consultation with the board of registration for the healing arts, board of nursing, and department of health and senior services, and in consideration of guidelines established by the American Congress of Obstetricians and Gynecologists, to establish standard procedures for the prescribing of self-administered oral hormonal contraceptives by pharmacists. The board of pharmacy shall adopt rules and regulations to implement the provisions of this section. Any rule or portion of a rule, as that term is defined in section 536.010, that is created under the authority delegated in this section shall become effective only if it complies with and is subject to all of the provisions of chapter 536 and, if applicable, section 536.028. This section and chapter 536 are nonseverable, and if any of the powers vested with the general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any rule proposed or adopted after August 28, 2017, shall be invalid and void.
  - 4. The rules adopted under this section shall require a pharmacist to:
- (1) Complete a training program approved by the board of pharmacy that is related to prescribing self-administered oral hormonal contraceptives;
- (2) Provide a self-screening risk assessment tool that the patient shall use prior to the pharmacist's prescribing the self-administered oral hormonal contraceptive;
- (3) Refer the patient to the patient's primary care practitioner or women's health care practitioner upon prescribing and dispensing the self-administered oral hormonal contraceptive;
- (4) Provide the patient with a written record of the self-administered oral hormonal contraceptive prescribed and dispensed and advise the patient to consult with a primary care practitioner or women's health care practitioner; and

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- (5) Dispense the self-administered oral hormonal contraceptive to the patient as soon as practicable after the pharmacist issues the prescription.
  - 5. The rules adopted under this section shall prohibit a pharmacist from:

- (1) Requiring a patient to schedule an appointment with the pharmacist for the prescribing or dispensing of a self-administered oral hormonal contraceptive; and
- (2) Prescribing and dispensing a self-administered oral hormonal contraceptive to a patient who does not have evidence of a clinical visit for women's health within the three years immediately following the initial prescription and dispensation of a self-administered oral hormonal contraceptive by a pharmacist to the patient.
- 6. All state and federal laws governing insurance coverage of contraceptive drugs, devices, products, and services shall apply to self-administered oral hormonal contraceptives prescribed by a pharmacist under this section.
- 376.1240. 1. For purposes of this section, the terms "health carrier" and "health benefit plan" shall have the same meaning as defined in section 376.1350. The term "prescription contraceptive" shall mean a drug or device that requires a prescription and is approved by the Food and Drug Administration to prevent pregnancy.
- 2. Each health carrier or health benefit plan that offers or issues health benefit plans which are delivered, issued for delivery, continued, or renewed in this state on or after January 1, 2018, and that provides coverage for prescription contraceptives shall provide coverage to reimburse a health care provider or dispensing entity for a dispensing of prescription contraceptives intended to last for a:
- (1) Three-month period for the first dispensing of the prescription contraceptive to an insured; and
- (2) Three-month period for subsequent dispensations of the same contraceptive to the insured regardless of whether the insured was enrolled in the health benefit plan or policy at the time of the first dispensing.
- 3. The coverage required by this section shall not be subject to any greater deductible or copayment than other similar health care services provided by the health benefit plan.
- 4. The provisions of this section shall not apply to a supplemental insurance policy including a life care contract, accident-only policy, specified disease policy, hospital policy providing a fixed daily benefit only, Medicare supplement policy, long-term care policy, short-term major medical policies of six months' or less duration, or any other supplemental policy as determined by the director of the department of insurance, financial institutions and professional registration."; and

Further amend said bill by amending the title, enacting clause, and intersectional references accordingly.

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