

Mr. Speaker: I am instructed by the Senate to inform the House of Representatives that the Senate has taken up and passed

SS#2 SCS HB 273 _____ entitled:

AN ACT

To repeal sections 324.009, 324.012, 324.200, 324.206, 327.011, 327.091, 327.101, 327.131, 327.191, 327.241, 327.612, 337.068, 339.100, 339.150, 436.218, 436.224, 436.227, 436.230, 436.236, 436.242, 436.245, 436.248, 436.254, 436.257, 436.260, 436.263, and 436.266, RSMo, and to enact in lieu thereof twenty-nine new sections relating to professional registration, with penalty provisions.

With SA 1

In which the concurrence of the House is respectfully requested.

Respectfully,



Adriane D. Crouse
Secretary of the Senate

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MAY 3 2021

CHIEF CLERK

SENATE AMENDMENT NO. 1

Offered by

RAZER

of

7Amend SS/SCS/House Bill No. 273, Page 58, Section 337.068, Line 44,

2 by inserting after all of said line the following:

3 "338.010. 1. The "practice of pharmacy" means the
4 interpretation, implementation, and evaluation of medical
5 prescription orders, including any legend drugs under 21
6 U.S.C. Section 353; receipt, transmission, or handling of
7 such orders or facilitating the dispensing of such orders;
8 the designing, initiating, implementing, and monitoring of a
9 medication therapeutic plan as defined by the prescription
10 order so long as the prescription order is specific to each
11 patient for care by a pharmacist; the compounding,
12 dispensing, labeling, and administration of drugs and
13 devices pursuant to medical prescription orders and
14 administration of viral influenza, pneumonia, shingles,
15 hepatitis A, hepatitis B, diphtheria, tetanus, pertussis,
16 and meningitis vaccines by written protocol authorized by a
17 physician for persons at least seven years of age or the age
18 recommended by the Centers for Disease Control and
19 Prevention, whichever is higher, or the administration of
20 pneumonia, shingles, hepatitis A, hepatitis B, diphtheria,
21 tetanus, pertussis, meningitis, and viral influenza vaccines
22 by written protocol authorized by a physician for a specific
23 patient as authorized by rule; the participation in drug
24 selection according to state law and participation in drug
25 utilization reviews; the proper and safe storage of drugs
26 and devices and the maintenance of proper records thereof;

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Adopted 11

consultation with patients and other health care practitioners, and veterinarians and their clients about legend drugs, about the safe and effective use of drugs and devices; the prescribing and dispensing of any nicotine replacement therapy product under section 338.665; the dispensing of HIV postexposure prophylaxis pursuant to section 338.730; and the offering or performing of those acts, services, operations, or transactions necessary in the conduct, operation, management and control of a pharmacy. No person shall engage in the practice of pharmacy unless he or she is licensed under the provisions of this chapter. This chapter shall not be construed to prohibit the use of auxiliary personnel under the direct supervision of a pharmacist from assisting the pharmacist in any of his or her duties. This assistance in no way is intended to relieve the pharmacist from his or her responsibilities for compliance with this chapter and he or she will be responsible for the actions of the auxiliary personnel acting in his or her assistance. This chapter shall also not be construed to prohibit or interfere with any legally registered practitioner of medicine, dentistry, or podiatry, or veterinary medicine only for use in animals, or the practice of optometry in accordance with and as provided in sections 195.070 and 336.220 in the compounding, administering, prescribing, or dispensing of his or her own prescriptions.

2. Any pharmacist who accepts a prescription order for a medication therapeutic plan shall have a written protocol from the physician who refers the patient for medication therapy services. The written protocol and the prescription order for a medication therapeutic plan shall come from the physician only, and shall not come from a nurse engaged in a collaborative practice arrangement under section 334.104, or

60 from a physician assistant engaged in a collaborative
61 practice arrangement under section 334.735.

62 3. Nothing in this section shall be construed as to
63 prevent any person, firm or corporation from owning a
64 pharmacy regulated by sections 338.210 to 338.315, provided
65 that a licensed pharmacist is in charge of such pharmacy.

66 4. Nothing in this section shall be construed to apply
67 to or interfere with the sale of nonprescription drugs and
68 the ordinary household remedies and such drugs or medicines
69 as are normally sold by those engaged in the sale of general
70 merchandise.

71 5. No health carrier as defined in chapter 376 shall
72 require any physician with which they contract to enter into
73 a written protocol with a pharmacist for medication
74 therapeutic services.

75 6. This section shall not be construed to allow a
76 pharmacist to diagnose or independently prescribe
77 pharmaceuticals.

78 7. The state board of registration for the healing
79 arts, under section 334.125, and the state board of
80 pharmacy, under section 338.140, shall jointly promulgate
81 rules regulating the use of protocols for prescription
82 orders for medication therapy services and administration of
83 viral influenza vaccines. Such rules shall require
84 protocols to include provisions allowing for timely
85 communication between the pharmacist and the referring
86 physician, and any other patient protection provisions
87 deemed appropriate by both boards. In order to take effect,
88 such rules shall be approved by a majority vote of a quorum
89 of each board. Neither board shall separately promulgate
90 rules regulating the use of protocols for prescription
91 orders for medication therapy services and administration of
92 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 by protocol in accordance with treatment guidelines established by the Centers for Disease Control and Prevention (CDC);

(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 inform the patient that the administration of the vaccine will be entered into the ShowMeVax system, as administered by the department of health and senior services. The patient shall attest to the inclusion of such information in the system by signing a form provided by the pharmacist. If the patient indicates that he or she does not want such information entered into the ShowMeVax system, the 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:

- 159 (1) The identity of the patient;
160 (2) The identity of the vaccine or vaccines
161 administered;
162 (3) The route of administration;
163 (4) The anatomic site of the administration;
164 (5) The dose administered; and
165 (6) The date of administration.

166 338.730. 1. Notwithstanding any other law to the
167 contrary, a pharmacist may dispense HIV postexposure
168 prophylaxis in accordance with this section. Such
169 prophylaxis shall be dispensed only if the pharmacist
170 follows a written protocol authorized by a licensed
171 physician.

172 2. For purposes of this section, "postexposure
173 prophylaxis" shall mean any drug approved by the Food and
174 Drug Administration that meets the same clinical eligibility
175 recommendations provided in CDC guidelines.

176 3. For purposes of this section, "CDC guidelines"
177 shall mean the current HIV guidelines published by the
178 federal Centers for Disease Control and Prevention.

179 4. The state board of registration for the healing
180 arts and the state board of pharmacy shall jointly
181 promulgate rules and regulations for the administration of
182 this section. Neither board shall separately promulgate
183 rules governing a pharmacist's authority to dispense HIV
184 postexposure prophylaxis under this section.

185 5. Any rule or portion of a rule, as that term is
186 defined in section 536.010, that is created under the
187 authority delegated in this section shall become effective
188 only if it complies with and is subject to all of the
189 provisions of chapter 536 and, if applicable, section
190 536.028. This section and chapter 536 are nonseverable and
191 if any of the powers vested with the general assembly

192 pursuant to chapter 536 to review, to delay the effective
193 date, or to disapprove and annul a rule are subsequently
194 held unconstitutional, then the grant of rulemaking
195 authority and any rule proposed or adopted after August 28,
196 2021, shall be invalid and void."; and

197 Further amend the title and enacting clause accordingly.