

House \_\_\_\_\_ Amendment NO. \_\_\_\_\_

Offered By \_\_\_\_\_

1 AMEND House Committee Substitute for Senate Substitute for Senate Committee Substitute for  
2 Senate Bill No. 60, Page 20, Section 329.050, Line 81, by inserting after said section and line the  
3 following:  
4

5 "338.010. 1. The "practice of pharmacy" includes:

6 (1) The interpretation, implementation, and evaluation of medical prescription orders,  
7 including any legend drugs under 21 U.S.C. Section 353, and the receipt, transmission, or handling  
8 of such orders or facilitating the dispensing of such orders;

9 (2) The designing, initiating, implementing, and monitoring of a medication therapeutic plan  
10 in accordance with the provisions of this section;

11 (3) The compounding, dispensing, labeling, and administration of drugs and devices  
12 pursuant to medical prescription orders;

13 (4) The ordering and administration of vaccines approved or authorized by the U.S. Food  
14 and Drug Administration, excluding vaccines for cholera, monkeypox, Japanese encephalitis,  
15 typhoid, rabies, yellow fever, tick-borne encephalitis, anthrax, tuberculosis, dengue, Hib, polio,  
16 rotavirus, smallpox, chikungunya, and any vaccine approved after January 1, [2023] 2025, to  
17 persons at least seven years of age or the age recommended by the Centers for Disease Control and  
18 Prevention, whichever is older, pursuant to joint promulgation of rules established by the board of  
19 pharmacy and the state board of registration for the healing arts unless rules are established under a  
20 state of emergency as described in section 44.100;

21 (5) The participation in drug selection according to state law and participation in drug  
22 utilization reviews;

23 (6) The proper and safe storage of drugs and devices and the maintenance of proper records  
24 thereof;

25 (7) Consultation with patients and other health care practitioners, and veterinarians and their  
26 clients about legend drugs, about the safe and effective use of drugs and devices;

27 (8) The prescribing and dispensing of any nicotine replacement therapy product under  
28 section 338.665;

29 (9) The dispensing of HIV postexposure prophylaxis pursuant to section 338.730; and

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

1 (10) The offering or performing of those acts, services, operations, or transactions necessary  
2 in the conduct, operation, management and control of a pharmacy.

3 2. No person shall engage in the practice of pharmacy unless he or she is licensed under the  
4 provisions of this chapter.

5 3. This chapter shall not be construed to prohibit the use of auxiliary personnel under the  
6 direct supervision of a pharmacist from assisting the pharmacist in any of his or her duties. This  
7 assistance in no way is intended to relieve the pharmacist from his or her responsibilities for  
8 compliance with this chapter and he or she will be responsible for the actions of the auxiliary  
9 personnel acting in his or her assistance.

10 4. This chapter shall not be construed to prohibit or interfere with any legally registered  
11 practitioner of medicine, dentistry, or podiatry, or veterinary medicine only for use in animals, or the  
12 practice of optometry in accordance with and as provided in sections 195.070 and 336.220 in the  
13 compounding, administering, prescribing, or dispensing of his or her own prescriptions.

14 5. A pharmacist with a certificate of medication therapeutic plan authority may provide  
15 medication therapy services pursuant to a written protocol from a physician licensed under chapter  
16 334 to patients who have established a physician-patient relationship, as described in subdivision (1)  
17 of subsection 1 of section 191.1146, with the protocol physician. The written protocol authorized by  
18 this section shall come only from the physician and shall not come from a nurse engaged in a  
19 collaborative practice arrangement under section 334.104, or from a physician assistant engaged in a  
20 collaborative practice arrangement under section 334.735.

21 6. Nothing in this section shall be construed as to prevent any person, firm or corporation  
22 from owning a pharmacy regulated by sections 338.210 to 338.315, provided that a licensed  
23 pharmacist is in charge of such pharmacy.

24 7. Nothing in this section shall be construed to apply to or interfere with the sale of  
25 nonprescription drugs and the ordinary household remedies and such drugs or medicines as are  
26 normally sold by those engaged in the sale of general merchandise.

27 8. No health carrier as defined in chapter 376 shall require any physician with which they  
28 contract to enter into a written protocol with a pharmacist for medication therapeutic services.

29 9. This section shall not be construed to allow a pharmacist to diagnose or independently  
30 prescribe pharmaceuticals.

31 10. The state board of registration for the healing arts, under section 334.125, and the state  
32 board of pharmacy, under section 338.140, shall jointly promulgate rules regulating the use of  
33 protocols for medication therapy services. Such rules shall require protocols to include provisions  
34 allowing for timely communication between the pharmacist and the protocol physician or similar  
35 body authorized by this section, and any other patient protection provisions deemed appropriate by  
36 both boards. In order to take effect, such rules shall be approved by a majority vote of a quorum of  
37 each board. Neither board shall separately promulgate rules regulating the use of protocols for  
38 medication therapy services. Any rule or portion of a rule, as that term is defined in section  
39 536.010, that is created under the authority delegated in this section shall become effective only if it

1 complies with and is subject to all of the provisions of chapter 536 and, if applicable, section  
2 536.028. This section and chapter 536 are nonseverable and if any of the powers vested with the  
3 general assembly pursuant to chapter 536 to review, to delay the effective date, or to disapprove and  
4 annul a rule are subsequently held unconstitutional, then the grant of rulemaking authority and any  
5 rule proposed or adopted after August 28, 2007, shall be invalid and void.

6 11. The state board of pharmacy may grant a certificate of medication therapeutic plan  
7 authority to a licensed pharmacist who submits proof of successful completion of a board-approved  
8 course of academic clinical study beyond a bachelor of science in pharmacy, including but not  
9 limited to clinical assessment skills, from a nationally accredited college or university, or a  
10 certification of equivalence issued by a nationally recognized professional organization and  
11 approved by the board of pharmacy.

12 12. Any pharmacist who has received a certificate of medication therapeutic plan authority  
13 may engage in the designing, initiating, implementing, and monitoring of a medication therapeutic  
14 plan as defined by a written protocol from a physician that may be specific to each patient for care  
15 by a pharmacist.

16 13. Nothing in this section shall be construed to allow a pharmacist to make a therapeutic  
17 substitution of a pharmaceutical prescribed by a physician unless authorized by the written protocol  
18 or the physician's prescription order.

19 14. "Veterinarian", "doctor of veterinary medicine", "practitioner of veterinary medicine",  
20 "DVM", "VMD", "BVSe", "BVMS", "BSe (Vet Science)", "VMB", "MRCVS", or an equivalent  
21 title means a person who has received a doctor's degree in veterinary medicine from an accredited  
22 school of veterinary medicine or holds an Educational Commission for Foreign Veterinary  
23 Graduates (EDFVG) certificate issued by the American Veterinary Medical Association (AVMA).

24 15. In addition to other requirements established by the joint promulgation of rules by the  
25 board of pharmacy and the state board of registration for the healing arts:

26 (1) A pharmacist shall administer vaccines by protocol in accordance with treatment  
27 guidelines established by the Centers for Disease Control and Prevention (CDC);

28 (2) A pharmacist who is administering a vaccine shall request a patient to remain in the  
29 pharmacy a safe amount of time after administering the vaccine to observe any adverse reactions.  
30 Such pharmacist shall have adopted emergency treatment protocols.

31 16. In addition to other requirements by the board, a pharmacist shall receive additional  
32 training as required by the board and evidenced by receiving a certificate from the board upon  
33 completion, and shall display the certification in his or her pharmacy where vaccines are delivered.

34 17. A pharmacist shall inform the patient that the administration of a vaccine will be entered  
35 into the ShowMeVax system, as administered by the department of health and senior services. The  
36 patient shall attest to the inclusion of such information in the system by signing a form provided by  
37 the pharmacist. If the patient indicates that he or she does not want such information entered into  
38 the ShowMeVax system, the pharmacist shall provide a written report within fourteen days of

1 administration of a vaccine to the patient's health care provider, if provided by the patient,  
2 containing:

- 3 (1) The identity of the patient;
- 4 (2) The identity of the vaccine or vaccines administered;
- 5 (3) The route of administration;
- 6 (4) The anatomic site of the administration;
- 7 (5) The dose administered; and
- 8 (6) The date of administration.

9 18. A pharmacist licensed under this chapter may order and administer vaccines approved or  
10 authorized by the U.S. Food and Drug Administration to address a public health need, as lawfully  
11 authorized by the state or federal government, or a department or agency thereof, during a state or  
12 federally declared public health emergency."; and

13  
14 Further amend said bill, Page 69, Section 610.131, Line 18, by inserting after said section and line  
15 the following:

16  
17 "632.305. 1. An application for detention for evaluation and treatment at a mental health  
18 facility may be executed by any adult person, who need not be an attorney or represented by an  
19 attorney, on a form provided by the court for such purpose, and shall allege under oath~~[-without a~~  
20 ~~notarization requirement,]~~ that the applicant has reason to believe that the respondent is suffering  
21 from a mental disorder and presents a likelihood of serious harm to himself or herself or to others.  
22 The application shall specify the factual information on which such belief is based and should  
23 contain the names and addresses of all persons known to the applicant who have knowledge of such  
24 facts through personal observation.

25 2. The filing of a written application in court by any adult person, who need not be an  
26 attorney or represented by an attorney, shall authorize the applicant to bring the matter before the  
27 court on an ex parte basis to determine whether the respondent should be taken into custody and  
28 transported to a mental health facility. The application may be filed in the court having probate  
29 jurisdiction in any county where the respondent may be found. If the court finds that there is  
30 probable cause, either upon testimony under oath or upon a review of affidavits, declarations, or  
31 other supporting documentation, to believe that the respondent may be suffering from a mental  
32 disorder and presents a likelihood of serious harm to himself or herself or others, it shall direct a  
33 peace officer to take the respondent into custody and transport him or her to a mental health facility  
34 for detention for evaluation and treatment for a period not to exceed ninety-six hours unless further  
35 detention and treatment is authorized pursuant to this chapter. Nothing herein shall be construed to  
36 prohibit the court, in the exercise of its discretion, from giving the respondent an opportunity to be  
37 heard.

38 3. A peace officer may take a person into custody for detention for evaluation and treatment  
39 at a mental health facility for a period not to exceed ninety-six hours only when such peace officer  
40 has reasonable cause to believe that such person is suffering from a mental disorder and that the

likelihood of serious harm by such person to himself or herself or others is imminent unless such person is immediately taken into custody. Upon arrival at the mental health facility, the peace officer who conveyed such person or caused him or her to be conveyed shall either present the application for detention for evaluation and treatment upon which the court has issued a finding of probable cause and the respondent was taken into custody or complete an application for initial detention for evaluation and treatment for a period not to exceed ninety-six hours which shall be based upon his or her own personal observations or investigations and shall contain the information required in subsection 1 of this section.

4. If a person presents himself or herself or is presented by others to a mental health facility and a licensed physician, a registered professional nurse or a mental health professional designated by the head of the facility and approved by the department for such purpose has reasonable cause to believe that the person is mentally disordered and presents an imminent likelihood of serious harm to himself or herself or others unless he or she is accepted for detention, the licensed physician, the mental health professional or the registered professional nurse designated by the facility and approved by the department may complete an application for detention for evaluation and treatment for a period not to exceed ninety-six hours. The application shall be based on his or her own personal observations or investigation and shall contain the information required in subsection 1 of this section.

5. (1) No notarization shall be required for an application, or for any affidavits, declarations, or other documents supporting an application, completed or executed by:

(a) A peace officer under subsection 3 of this section;

(b) A licensed physician, mental health professional, or registered professional nurse under subsection 4 of this section; or

(c) An employee acting on behalf of a hospital, as defined in section 197.020, under subsections 1 and 2 of this section.

(2) The application and any affidavits, declarations, or other documents supporting the application shall be subject to the provisions of section 492.060 allowing for declaration under penalty of perjury."; and

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