



Date: 5/31/2013

L.D. 1134 (Filing No. S-//0/)

3	LABOR, COMMERCE, RESEARCH AND ECONOMIC DEVELOPMENT
4	Reproduced and distributed under the direction of the Secretary of the Senate.
5	STATE OF MAINE
6	SENATE
7	126TH LEGISLATURE
8	FIRST REGULAR SESSION
9 10 11	COMMITTEE AMENDMENT "A" to S.P. 395, L.D. 1134, Bill, "An Act To Allow Collaborative Practice Agreements between Authorized Practitioners and Pharmacists"
12 13 14	Amend the bill in section 1 in subsection 2-A in the 3rd line (page 1, line 5 in L.D.) by inserting after the following: " <u>pharmacist</u> " the following: ' <u>as authorized by a</u> <u>practitioner</u> '
15 16 17 18 19	Amend the bill in section 4 in §13841 in subsection 2 in paragraph D in the 2nd line (page 2, line 31 in L.D.) by striking out the following: " <u>the practitioner</u> " and inserting the following: 'a practitioner who is treating the patient, as long as the action is reported to the practitioner in a timely manner as determined by rules adopted pursuant to section 13846'
20 21	Amend the bill in section 4 in §13842 in subsection 2 in paragraph A in the 4th line (page 3, line 4 in L.D.) by striking out the following: "or" and inserting the following: 'of
22 23 24	Amend the bill in section 4 in §13842 in subsection 2 in paragraph A in the last line (page 3, line 5 in L.D.) by striking out the following: "the area" and inserting the following: 'each clinical area'
25 26	Amend the bill in section 4 in §13842 in subsection 2 in paragraph B in the 4th line (page 3, line 9 in L.D.) by striking out the following: " <u>or</u> " and inserting the following: ' <u>of</u> '
27 28 29	Amend the bill in section 4 in §13842 in subsection 2 in paragraph B in the 4th line (page 3, line 9 in L.D.) by striking out the following: "the area" and inserting the following: 'each clinical area'
30 31 32	Amend the bill in section 4 in $\$13842$ in subsection 2 in paragraph C in the 4th line (page 3, line 14 in L.D.) by striking out the following: "or" and inserting the following: <u>'of</u>
33 34 35	Amend the bill in section 4 in §13842 in subsection 2 in paragraph C in the 4th line (page 3, line 14 in L.D.) by striking out the following: "the area" and inserting the following: 'each clinical area'

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# **COMMITTEE AMENDMENT**

COMMITTEE AMENDMENT "A " to S.P. 395, L.D. 1134

Amend the bill in section 4 in §13843 in subsection 1 in the 2nd line (page 3, line 20 in L.D.) by inserting after the following: "board" the following: 'and the licensing board that licenses the practitioner'

Amend the bill in section 4 in §13843 by striking out all of subsection 6 and inserting the following:

'6. Contents of agreement. A practitioner and a pharmacist desiring to engage in collaborative practice in accordance with this subchapter shall execute a collaborative practice agreement that must contain, but is not limited to:

A. A provision that states that activity in the initial 3 months of a collaborative practice agreement is limited to monitoring drug therapy. After the initial 3 months, the practitioner and pharmacist shall meet to review the collaborative practice agreement and determine the scope of the agreement, which may after the initial 3 months include a pharmacist's initiating, monitoring, modifying and discontinuing a patient's drug therapy and reporting these actions to the practitioner in a timely manner in accordance with rules adopted pursuant to section 13846;

- B. Identification and signatures of the parties to the collaborative practice agreement,
   the dates the agreement is signed and the beginning and ending dates of the period of
   time during which the agreement is in effect;
- 19 C. A provision that allows either party to cancel the collaborative practice agreement
   20 by written notification;
- 21 D. Specification of the site and setting at which the collaborative practice will occur;
- E. Specification of the qualifications of the participants in the collaborative practice
   agreement;
- 24F. A detailed description of the types of diseases, drugs or drug categories involved25and collaborative drug therapy management allowed in each patient's case; and
- 26 G. A procedure for the referral of each patient to the practitioner.
- 27 Amend the bill in section 4 by striking out all of §13846 and inserting the following:
- 28 '<u>§13846. Rules</u>

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29 The board and the Board of Licensure in Medicine, after consultation with the 30 Department of Health and Human Services, shall adopt rules to implement this 31 subchapter. The rules must include rules establishing record-keeping and documentation 32 procedures and reporting requirements and must allow for electronic filing when possible. 33 Rules adopted pursuant to this section are routine technical rules as defined in Title 5, 34 chapter 375, subchapter 2-A.

### 35 §13847. Exemptions

36 Nothing in this subchapter may be construed to limit the scope of practice of a 37 pharmacist pursuant to this chapter or to apply to collaborative practice agreements 38 entered into between a pharmacist and a hospital solely for the treatment of inpatients at 39 the hospital.'

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# **COMMITTEE AMENDMENT**

COMMITTEE AMENDMENT "A " to S.P. 395, L.D. 1134

Amend the bill by relettering or renumbering any nonconsecutive Part letter or section number to read consecutively.

### SUMMARY

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This amendment makes the following changes to the bill.

1. It amends the definition of "collaborative drug therapy management" to require authorization by a practitioner in accordance with the collaborative practice agreement.

2. It amends the scope of authority for pharmacists engaging in collaborative drug therapy management by clarifying that the agreement must be with a practitioner who is treating the patient and that all actions must be reported to the practitioner in a timely manner according to rules jointly adopted by the Maine Board of Pharmacy and the Board of Licensure in Medicine.

12 3. It requires a pharmacist to submit a copy of the collaborative practice agreement
13 to the Maine Board of Pharmacy and the board that licenses the practitioner.

4. It requires that a collaborative practice agreement include a provision that states that activity in the initial 3 months of all collaborative practice agreements is limited to monitoring drug therapy. After the initial 3 months, the practitioner and pharmacist are required to meet to review the agreement and determine its scope, which may after the initial 3-month period include a pharmacist's initiating, monitoring, modifying and discontinuing a patient's drug therapy and reporting to the practitioner in a timely manner as determined by rule.

5. It requires the Maine Board of Pharmacy and the Board of Licensure in Medicine
 to jointly adopt rules to implement the subchapter on collaborative drug therapy
 management enacted by the bill.

6. It adds an exemption to clarify that the subchapter on collaborative drug therapy management enacted by the bill does not limit the scope of practice of a pharmacist under the Maine Pharmacy Act or prohibit a pharmacist that is employed by a hospital from participating in a collaborative practice agreement with the hospital solely for treatment of inpatients.

### FISCAL NOTE REQUIRED (See attached)

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**COMMITTEE AMENDMENT** 



# **126th MAINE LEGISLATURE**

# LD 1134

## LR 1206(02)

An Act To Allow Collaborative Practice Agreements between Authorized Practitioners and Pharmacists

> Fiscal Note for Bill as Amended by Committee Amendment 'A''(S-101) Committee: Labor, Commerce, Research and Economic Development Fiscal Note Required: Yes

## **Fiscal Note**

Minor cost increase - Other Special Revenue Funds

#### Fiscal Detail and Notes

Additional costs to the Maine Board of Pharmacy within the Office of Professional and Occupational Regulation, Department of Professional and Financial Regulation, and the Board of Licensure in Medicine, affiliated with the Department of Professional and Financial Regulation, associated with the rulemaking process can be absorbed within existing budgeted resources.