



General Assembly

January Session, 2005

Raised Bill No. 6970

LCO No. 4850

04850_____PH_

Referred to Committee on Public Health

Introduced by:
(PH)

**AN ACT CONCERNING COLLABORATIVE DRUG THERAPY
MANAGEMENT AGREEMENTS BETWEEN PHYSICIANS AND
PHARMACISTS.**

Be it enacted by the Senate and House of Representatives in General Assembly convened:

1 Section 1. Section 20-631 of the general statutes is repealed and the
2 following is substituted in lieu thereof (*Effective October 1, 2005*):

3 (a) (1) One or more pharmacists licensed under this chapter who are
4 determined eligible in accordance with subsection (c) of this section,
5 and employed by or under contract with a hospital, state mental
6 hospital or federally qualified health center may enter into a written
7 protocol-based collaborative drug therapy management agreement
8 with one or more physicians licensed under chapter 370 to manage the
9 drug therapy of individual patients receiving inpatient services in a
10 hospital licensed under chapter 368v or receiving services from a state
11 mental hospital or federally qualified health center, in accordance with
12 subsections (b) to (d), inclusive, of this section and subject to the
13 approval of the hospital, state mental hospital or federally qualified
14 health center. Each patient's collaborative drug therapy management
15 shall be governed by a written protocol specific to that patient

16 established by the treating physician in consultation with the
17 pharmacist.

18 (2) One or more pharmacists licensed under this chapter who are
19 determined eligible in accordance with subsection (c) of this section
20 and employed by or under contract with a nursing home facility, as
21 defined in section 19a-521, may enter into a written protocol-based
22 collaborative drug therapy management agreement with one or more
23 physicians licensed under chapter 370 to manage the drug therapy of
24 individual patients receiving services in a nursing home facility, in
25 accordance with subsections (b) to (d), inclusive, of this section and
26 subject to the approval of the nursing home facility. Each patient's
27 collaborative drug therapy management shall be governed by a
28 written protocol specific to that patient established by the treating
29 physician in consultation with the pharmacist. Each such protocol shall
30 be reviewed and approved by the active organized medical staff of the
31 nursing home in accordance with the requirements of section 19-13-
32 D8t(i) of the Public Health Code.

33 (3) One or more pharmacists licensed under this chapter who are
34 determined eligible in accordance with subsection (c) of this section
35 and employed by or under contract with a hospital licensed under
36 chapter 368v may enter into a written protocol-based collaborative
37 drug therapy management agreement with one or more physicians
38 licensed under chapter 370 to manage the drug therapy of individual
39 patients receiving outpatient hospital care or services for diabetes,
40 asthma, hypertension, hyperlipidemia, osteoporosis, congestive heart
41 failure or smoking cessation, including patients who qualify as
42 targeted beneficiaries under the provisions of Section 1860D-
43 4(c)(2)(A)(ii) of the federal Social Security Act, in accordance with
44 subsections (b) to (d), inclusive, of this section and subject to the
45 approval of the hospital. Each patient's collaborative drug therapy
46 management shall be governed by a written protocol specific to that
47 patient established by the treating physician in consultation with the
48 pharmacist.

49 (b) A collaborative drug therapy management agreement may
50 authorize a pharmacist to implement, modify or discontinue a drug
51 therapy that has been prescribed for a patient, order associated
52 laboratory tests and administer drugs, all in accordance with a patient-
53 specific written protocol. In instances where drug therapy is
54 discontinued, the pharmacist shall notify the treating physician of such
55 discontinuance no later than twenty-four hours from the time of such
56 discontinuance. Each protocol developed, pursuant to the collaborative
57 drug therapy management agreement, shall contain detailed direction
58 concerning the actions that the pharmacist may perform for that
59 patient. The protocol shall include, but need not be limited to, (1) the
60 specific drug or drugs to be managed by the pharmacist, (2) the terms
61 and conditions under which drug therapy may be implemented,
62 modified or discontinued, (3) the conditions and events upon which
63 the pharmacist is required to notify the physician, and (4) the
64 laboratory tests that may be ordered. All activities performed by the
65 pharmacist in conjunction with the protocol shall be documented in
66 the patient's medical record. The pharmacist shall report at least every
67 thirty days to the physician regarding the patient's drug therapy
68 management. The collaborative drug therapy management agreement
69 and protocols shall be available for inspection by the Departments of
70 Public Health and Consumer Protection. A copy of the protocol shall
71 be filed in the patient's medical record.

72 (c) A pharmacist shall be responsible for demonstrating, in
73 accordance with this subsection, the competence necessary for
74 participation in each drug therapy management agreement into which
75 such pharmacist enters. The pharmacist's competency shall be
76 determined by the hospital, [or] nursing home facility, state mental
77 hospital or federally qualified health center for which the pharmacist is
78 employed or by the licensed physician with whom the pharmacist
79 enters a collaborative drug therapy management agreement. A copy of
80 the criteria upon which the hospital, [or] nursing home facility, state
81 mental hospital, federally qualified health center or licensed physician
82 determines competency shall be filed with the Commission of

83 Pharmacy.

84 (d) The Commissioner of Public Health, in consultation with the
85 Commissioner of Consumer Protection, may adopt regulations, in
86 accordance with chapter 54, concerning the minimum content of the
87 collaborative drug therapy management agreement and the written
88 protocol and as otherwise necessary to carry out the purpose of this
89 section.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2005	20-631

Statement of Purpose:

To allow pharmacists employed by or under contract with hospitals to enter into collaborative drug therapy management agreements with licensed physicians to manage the drug therapy of individual patients receiving outpatient care or services.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]