



General Assembly

Substitute Bill No. 6970

January Session, 2005

* HB06970GAE 050205 *

**AN ACT ESTABLISHING A COLLABORATIVE DRUG THERAPY
MANAGEMENT AGREEMENT PILOT PROGRAM.**

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

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2 repealed and the following is substituted in lieu thereof (*Effective*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

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

15 (2) One or more pharmacists licensed under this chapter who are
16 determined eligible in accordance with subsection (c) of this section
17 and employed by or under contract with a nursing home facility, as
18 defined in section 19a-521, may enter into a written protocol-based
19 collaborative drug therapy management agreement with one or more

20 physicians licensed under chapter 370 to manage the drug therapy of
21 individual patients receiving services in a nursing home facility, in
22 accordance with subsections (b) to (d), inclusive, of this section and
23 subject to the approval of the nursing home facility. Each patient's
24 collaborative drug therapy management shall be governed by a
25 written protocol specific to that patient established by the treating
26 physician in consultation with the pharmacist. Each such protocol shall
27 be reviewed and approved by the active organized medical staff of the
28 nursing home in accordance with the requirements of section 19-13-
29 D8t(i) of the Public Health Code.

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

46 Sec. 2. (*Effective from passage*) Not later than January 1, 2006, the
47 Commissioners of Public Health and Consumer Protection, in
48 consultation with the Commission of Pharmacy, shall establish and
49 operate a two-year pilot program to allow not more than ten
50 pharmacists licensed under chapter 400j of the general statutes who are
51 determined eligible in accordance with subsection (c) of this section
52 and employed by or under contract with a licensed community
53 pharmacy, to enter into a written protocol-based collaborative drug

54 therapy management agreement with one or more physicians licensed
55 under chapter 370 of the general statutes, to manage the drug therapy
56 of individual patients receiving drug therapy for diabetes, asthma,
57 hypertension, hyperlipidemia, osteoporosis, congestive heart failure or
58 smoking cessation, including patients who qualify as targeted
59 beneficiaries under the provisions of Section 1860D-4(c)(2)(A)(ii) of the
60 federal Social Security Act, in accordance with subsections (b) to (d),
61 inclusive, of this section and subject to the approval of the licensed
62 community pharmacy. Each patient's collaborative drug therapy
63 management shall be governed by a written protocol specific to that
64 patient established by the treating physician in consultation with the
65 pharmacist.

66 (b) A collaborative drug therapy management agreement may
67 authorize a pharmacist to implement, modify or discontinue a drug
68 therapy that has been prescribed for a patient, order associated
69 laboratory tests and administer drugs, all in accordance with a patient-
70 specific written protocol. Each protocol developed, pursuant to the
71 collaborative drug therapy management agreement, shall contain
72 detailed direction concerning the actions that the pharmacist may
73 perform for that patient. The protocol shall include, but need not be
74 limited to, (1) the specific drug or drugs to be managed by the
75 pharmacist, (2) the terms and conditions under which drug therapy
76 may be implemented, modified or discontinued, (3) the conditions and
77 events upon which the pharmacist is required to notify the physician,
78 and (4) the laboratory tests that may be ordered. All activities
79 performed by the pharmacist in conjunction with the protocol shall be
80 documented in the patient's medical record. The pharmacist shall
81 report to the physician through oral, written or electronic manner
82 regarding the implementation, administration, modification or
83 discontinuation of a drug therapy that has been prescribed for a
84 patient not later than twenty-four hours after such implementation,
85 administration, modification or discontinuation. The collaborative
86 drug therapy management agreement and protocols shall be available
87 for inspection by the Departments of Public Health and Consumer

88 Protection. A copy of the protocol shall be filed in the patient's medical
89 record.

90 (c) In order to be selected for participation in the program, a
91 pharmacist shall be responsible for demonstrating, in accordance with
92 this subsection, the competence necessary for participation in each
93 drug therapy management agreement into which such pharmacist may
94 enter. The pharmacist's competency shall be determined by the
95 Commission of Pharmacy using criteria based on the continuing
96 education requirements of sections 20-599 and 20-600 of the general
97 statutes.

98 (d) The Commissioner of Public Health, in consultation with the
99 Commissioner of Consumer Protection and the Commission of
100 Pharmacy, shall evaluate the pilot program established under this
101 section and shall submit a report of the commissioner's findings and
102 recommendations to the joint standing committees of the General
103 Assembly having cognizance of matters relating to public health,
104 human services and general law, not later than December 31, 2008, in
105 accordance with the provisions of section 11-4a of the general statutes.
106 Such report shall include an evaluation of the data collected with
107 respect to improved medication management and cost savings, based
108 on patient outcomes.

109 (e) Records or information collected or maintained pursuant to this
110 section shall not be disclosed pursuant to subsection (a) of section 1-
111 210 of the general statutes for a period of six months from the date
112 such records or information were created or collected and shall not be
113 subject to subpoena or discovery or introduced into evidence in any
114 judicial or administrative proceeding except as otherwise specifically
115 provided by law.

116 (f) For purposes of this section, "community pharmacy" means a
117 pharmacy licensed under section 20-594 of the general statutes that
118 stores and dispenses legend drugs, as defined by section 20-571 of the
119 general statutes, and legend devices, as defined by said section 20-571,

120 and from which related pharmaceutical care services are provided,
121 primarily to noninstitutionalized patients living in a community
122 setting.

This act shall take effect as follows and shall amend the following sections:		
Section 1	<i>October 1, 2005</i>	20-631(a)
Sec. 2	<i>from passage</i>	New section

PH *Joint Favorable Subst.*

GAE *Joint Favorable*