



# House of Representatives

General Assembly

**File No. 323**

February Session, 2012

Substitute House Bill No. 5516

*House of Representatives, April 10, 2012*

The Committee on Public Health reported through REP. RITTER, E. of the 38th Dist., Chairperson of the Committee on the part of the House, that the substitute bill ought to pass.

## ***AN ACT CONCERNING PRESCRIPTION DRUG ADMINISTRATION IN NURSING HOME FACILITIES.***

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

1       Section 1. (NEW) (*Effective October 1, 2012*) A medical director of a  
2       nursing home facility, as defined in section 19a-521 of the general  
3       statutes, may establish protocols for a prescription drug formulary  
4       system in accordance with guidelines established by the American  
5       Society of Health-System Pharmacists and any applicable collaborative  
6       drug therapy management agreement, as described in section 20-631 of  
7       the general statutes. The medical director of a nursing home facility  
8       that implements a prescription drug formulary system may make a  
9       substitution for a drug prescribed to a patient of the facility in  
10      accordance with the provisions of this section. Prior to making any  
11      substitution for a drug prescribed to a patient of the facility in  
12      accordance with the facility's protocols, the medical director, or the  
13      medical director's designee, shall notify the prescribing physician of  
14      the medical director's intention to make such substitution. If the

15 prescribing physician does not authorize the medical director or the  
 16 medical director's designee to make such substitution or objects to  
 17 such substitution, the medical director, or the medical director's  
 18 designee, shall not make the substitution. Notwithstanding the  
 19 provisions of this section, the facility's administration of prescription  
 20 drugs to a patient who receives benefits under a medical assistance  
 21 program administered by the Department of Social Services shall be in  
 22 accordance with the department's preferred drug lists, developed in  
 23 accordance with section 17b-274d of the general statutes.

This act shall take effect as follows and shall amend the following sections:		
Section 1	October 1, 2012	New section

**Statement of Legislative Commissioners:**

In the third sentence of section 1, "medical director or the director's designee" was changed to "medical director or the medical director's designee" for consistency.

**PH**      *Joint Favorable Subst.-LCO*

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The following Fiscal Impact Statement and Bill Analysis are prepared for the benefit of the members of the General Assembly, solely for purposes of information, summarization and explanation and do not represent the intent of the General Assembly or either chamber thereof for any purpose. In general, fiscal impacts are based upon a variety of informational sources, including the analyst's professional knowledge. Whenever applicable, agency data is consulted as part of the analysis, however final products do not necessarily reflect an assessment from any specific department.

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***OFA Fiscal Note***

***State Impact:*** None

***Municipal Impact:*** None

***Explanation***

The bill allows certain care facilities to establish protocols for a prescription drug formulary system. As the bill specifies that facilities must continue to use the Department of Social Services' preferred drug list for Medicaid clients, there is no fiscal impact to the state.

***The Out Years***

***State Impact:*** None

***Municipal Impact:*** None

**OLR Bill Analysis****sHB 5516*****AN ACT CONCERNING PRESCRIPTION DRUG ADMINISTRATION  
IN NURSING HOME FACILITIES.*****SUMMARY:**

This bill allows the medical director of a nursing home facility to establish protocols for a prescription drug formulary system. These protocols must comply with (1) American Society of Health-System Pharmacists guidelines and (2) any applicable collaborative drug therapy management agreement.

A medical director who implements such a system may make a substitution for a drug prescribed to a patient of the facility in accordance with the facility's protocols. Before making any substitution, the bill requires the medical director, or designee, to notify the prescribing physician. The bill prohibits the substitution if the prescribing physician objects or does not authorize it.

The bill specifies, notwithstanding its provisions, that a facility must use the Department of Social Services' preferred drug lists when administering prescription drugs to Medicaid beneficiaries.

The bill applies to nursing homes, residential care homes, rest homes with nursing supervision, and chronic and convalescent nursing homes.

EFFECTIVE DATE: October 1, 2012

**BACKGROUND*****Collaborative Drug Therapy Management Agreements***

The law permits physicians and pharmacists to enter collaborative agreements to manage the drug therapy of individual patients. These

collaborative agreements must be governed by patient-specific written protocols established by the treating physician in consultation with the pharmacist. These agreements can authorize a pharmacist to implement, modify, or discontinue a drug therapy that the physician prescribes; order associated lab tests; and administer drugs (CGS § 20-631).

**COMMITTEE ACTION**

Public Health Committee

Joint Favorable

Yea 26    Nay 0    (03/26/2012)