

BILL ANALYSIS

C.S.H.B. 4297
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Public Health
Committee Report (Substituted)

BACKGROUND AND PURPOSE

Collaborative practice is an advanced health care approach that shifts from the single-provider care model to the team-based care model. The model allows for a formalized practice relationship between a single pharmacist and a single physician, including delegation of certain medication management activities to the pharmacist. Recent legislative changes have resulted in some confusion regarding when the signing of a prescriptive drug order may be delegated to a pharmacist. C.S.H.B. 4297 seeks to address this concern by revising the conditions under which the delegation by a physician to a properly qualified and trained pharmacist acting under adequate physician supervision of specific acts of drug therapy management may include the implementation or modification of a patient's drug therapy.

CRIMINAL JUSTICE IMPACT

It is the committee's opinion that this bill does not expressly create a criminal offense, increase the punishment for an existing criminal offense or category of offenses, or change the eligibility of a person for community supervision, parole, or mandatory supervision.

RULEMAKING AUTHORITY

It is the committee's opinion that rulemaking authority is expressly granted to the Texas State Board of Pharmacy in SECTION 2 of this bill.

ANALYSIS

C.S.H.B. 4297 amends the Occupations Code to include among the conditions under which a delegation by a physician to a properly qualified and trained pharmacist acting under adequate physician supervision of the performance of specific acts of drug therapy management may include the implementation or modification of a patient's drug therapy under a protocol that the delegation follows a diagnosis, initial patient assessment, and drug therapy order by the physician and that the pharmacist maintains a copy of a protocol for inspection until at least the seventh anniversary of the expiration date of the protocol. The bill requires the Texas State Board of Pharmacy, not later than December 1, 2019, to adopt rules necessary to implement statutory provisions relating to rulemaking for the implementation of drug therapy under a protocol.

EFFECTIVE DATE

September 1, 2019.

COMPARISON OF ORIGINAL AND SUBSTITUTE

While C.S.H.B. 4297 may differ from the original in minor or nonsubstantive ways, the following summarizes the substantial differences between the introduced and committee substitute versions of the bill.

The substitute does not include a provision clarifying that a physician is authorized to delegate to a properly qualified and trained pharmacist the implementation or modification of a patient's drug therapy but does include a provision including certain conditions among the conditions under which a delegation by a physician to such a pharmacist of the performance of specific acts of drug therapy management may include the implementation or modification of a patient's drug therapy under a protocol.

The substitute does not include a provision requiring the Texas State Board of Pharmacy to adopt rules with the advice of the Texas Medical Board that allow a pharmacist to implement or modify a patient's drug therapy pursuant to a physician's delegation.

The substitute changes the date by which the board is required to adopt rules necessary to implement certain statutory provisions.