

## **BILL ANALYSIS**

Senate Research Center  
86R19764 JCG-F

C.S.S.B. 1056  
By: Zaffirini  
Health & Human Services  
4/10/2019  
Committee Report (Substituted)

### **AUTHOR'S / SPONSOR'S STATEMENT OF INTENT**

Collaborative practice is an advanced healthcare approach that shifts from a single-provider care model to a team-based care model. A collaborative practice agreement (CPA) creates a formal practice relationship between a pharmacist and a physician. The agreement specifies what medication management activities the collaborating physician delegates to the pharmacist to treat their patients, such as the ability to initiate or modify medication therapy and extend refills of a patient's medication. The goal of collaborative practice is to optimize patient outcomes, improve medication adherence, reduce delays in receiving therapy, and reduce healthcare costs for the benefit of patients, healthcare systems, and the taxpayer.

Pharmacists and physicians have engaged in collaborative practice in Texas since 1999. In 2009 the legislature unintentionally passed confusing and conflicting statutory language. The bill provided pharmacists in a hospital, hospital-based clinic, or academic healthcare institution with the authority to sign prescriptions for dangerous drugs. Unfortunately, that language caused confusion and took precedence over the previous language, which allowed pharmacists to work collaboratively with physicians to modify non-dangerous drug treatments.

S.B. 1056 would clarify that under the delegation of a physician, pharmacists have the authority to implement or modify a patient's non-dangerous drug therapy regardless of whether they practice in a hospital setting. (Original Author's/Sponsor's Statement of Intent)

C.S.S.B. 1056 amends current law the authority of physicians to delegate to certain pharmacists the implementation and modification of a patient's drug therapy.

### **RULEMAKING AUTHORITY**

Rulemaking authority is expressly granted to the Texas State Board of Pharmacy in SECTION 2 of this bill.

### **SECTION BY SECTION ANALYSIS**

SECTION 1. Amends Section 157.101(b-1), Occupations Code, as follows:

(b-1) Authorizes a delegation under Subsection (b) (relating to authorizing a physician to delegate to a pharmacist certain tasks under certain conditions), to include:

(1) creates this subdivision from existing text and authorizes a delegation under Subsection (b) to include the implementation or modification of a patient's drug therapy under a protocol if:

(A) the delegation follows a diagnosis, initial patient assessment, and drug therapy order by the physician; and

(B) the pharmacist maintains a copy of the protocol for inspection until at least the seventh anniversary of the expiration date of the protocol; or

(2) creates this subdivision from existing text and authorizes a delegation under Subsection (b) to include the authority to sign a prescription drug order for dangerous drugs for a patient if:

(A)-(E) redesignates existing Subdivisions (1)-(5) as Paragraphs (A)-(E).  
Makes no further changes to these paragraphs.

SECTION 3. Requires the Texas State Board of Pharmacy to, not later than December 1, 2019, adopt rules to implement Section 554.057, Occupations Code.

SECTION 3. Effective date: September 1, 2019.