

AN ACT

relating to the performance of pharmacy services in certain rural areas.

BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF TEXAS:

SECTION 1. Subchapter C, Chapter 562, Occupations Code, is amended by adding Section 562.1011 to read as follows:

Sec. 562.1011. OPERATION OF CLASS C PHARMACY IN CERTAIN RURAL HOSPITALS. (a) In this section:

(1) "Nurse" has the meaning assigned by Section 301.002. The term includes a nurse who is also registered as a pharmacy technician.

(2) "Rural hospital" means a licensed hospital with 75 beds or fewer that:

(A) is located in a county with a population of 50,000 or less; or

(B) has been designated by the Centers for Medicare and Medicaid Services as a critical access hospital, rural referral center, or sole community hospital.

(b) If a practitioner orders a prescription drug or device for a patient in a rural hospital when the hospital pharmacist is not on duty or when the institutional pharmacy is closed, a nurse or practitioner may withdraw the drug or device from the pharmacy in sufficient quantity to fill the order.

(c) The hospital pharmacist shall verify the withdrawal of a

1 drug or device under Subsection (b) and perform a drug regimen
2 review not later than the seventh day after the date of the
3 withdrawal.

4 (d) In a rural hospital that uses a floor stock method of
5 drug distribution, a nurse or practitioner may withdraw a
6 prescription drug or device from the institutional pharmacy in the
7 original manufacturer's container or a prepackaged container.

8 (e) The hospital pharmacist shall verify the withdrawal of a
9 drug or device under Subsection (d) and perform a drug regimen
10 review not later than the seventh day after the date of the
11 withdrawal.

12 (f) A rural hospital may allow a pharmacy technician to
13 perform the duties specified in Subsection (g) if:

14 (1) the pharmacy technician is registered and meets
15 the training requirements specified by the board;

16 (2) a pharmacist is accessible at all times to respond
17 to any questions and needs of the pharmacy technician or other
18 hospital employees, by telephone, answering or paging service,
19 e-mail, or any other system that makes a pharmacist accessible; and

20 (3) a nurse or practitioner or a pharmacist by remote
21 access verifies the accuracy of the actions of the pharmacy
22 technician.

23 (g) If the requirements of Subsection (f) are met, the
24 pharmacy technician may, during the hours that the institutional
25 pharmacy in the hospital is open, perform the following duties in
26 the pharmacy without the direct supervision of a pharmacist:

27 (1) enter medication order and drug distribution

1 information into a data processing system;

2 (2) prepare, package, or label a prescription drug
3 according to a medication order if a licensed nurse or practitioner
4 verifies the accuracy of the order before administration of the
5 drug to the patient;

6 (3) fill a medication cart used in the rural hospital;

7 (4) distribute routine orders for stock supplies to
8 patient care areas;

9 (5) access and restock automated medication supply
10 cabinets; and

11 (6) perform any other duty specified by the board by
12 rule.

13 (h) The pharmacist-in-charge of an institutional pharmacy
14 in a rural hospital shall develop and implement policies and
15 procedures for the operation of the pharmacy when a pharmacist is
16 not on-site.

17 (i) On or after September 1, 2011, the board may establish,
18 by rule, a requirement for prospective and retrospective drug use
19 review by a pharmacist for each new drug order. A drug use review is
20 not required when a delay in administration of the drug would harm
21 the patient in an urgent or emergency situation, including sudden
22 changes in a patient's clinical status.

23 (j) Rural hospitals may establish standing orders and
24 protocols, to be developed jointly by the pharmacist and medical
25 staff, that may include additional exceptions to instances in which
26 prospective drug use review is required.

27 (k) This section does not restrict or prohibit the board

1 from adopting a rule related to authorizing the withdrawal of a drug
2 or device by a nurse or practitioner from, or the supervision of a
3 pharmacy technician in, an institutional pharmacy not located in a
4 rural hospital. As part of the rulemaking process, the board shall
5 consider the effect that a proposed rule, if adopted, would have on
6 access to pharmacy services in hospitals that are not rural
7 hospitals.

8 (1) The board shall adopt rules to implement this section,
9 including rules specifying:

10 (1) the records that must be maintained under this
11 section;

12 (2) the requirements for policies and procedures for
13 operation of a pharmacy when a pharmacist is not on-site; and

14 (3) the training requirements for pharmacy
15 technicians.

16 SECTION 2. Chapter 568, Occupations Code, is amended by
17 adding Section 568.008 to read as follows:

18 Sec. 568.008. TECHNICIANS IN HOSPITALS WITH CLINICAL
19 PHARMACY PROGRAM. (a) In this section, "clinical pharmacy program"
20 means a program that provides pharmaceutical care services as
21 specified by board rule.

22 (b) A Class C pharmacy that has an ongoing clinical pharmacy
23 program may allow a pharmacy technician to verify the accuracy of
24 work performed by another pharmacy technician relating to the
25 filling of floor stock and unit dose distribution systems for a
26 patient admitted to the hospital if the patient's orders have
27 previously been reviewed and approved by a pharmacist.

1 (c) The pharmacist-in-charge of the clinical pharmacy
2 program shall adopt policies and procedures for the verification
3 process authorized by this section.

4 (d) A hospital must notify the board before implementing the
5 verification process authorized by this section.

6 (e) The board shall adopt rules to implement this section,
7 including rules specifying:

8 (1) the duties that may be verified by another
9 pharmacy technician;

10 (2) the records that must be maintained for the
11 verification process; and

12 (3) the training requirements for pharmacy
13 technicians who verify the accuracy of the work of other pharmacy
14 technicians.

15 SECTION 3. This Act takes effect immediately if it receives
16 a vote of two-thirds of all the members elected to each house, as
17 provided by Section 39, Article III, Texas Constitution. If this
18 Act does not receive the vote necessary for immediate effect, this
19 Act takes effect September 1, 2009.

President of the Senate

Speaker of the House

I certify that H.B. No. 1924 was passed by the House on April 24, 2009, by the following vote: Yeas 140, Nays 0, 1 present, not voting; that the House refused to concur in Senate amendments to H.B. No. 1924 on May 29, 2009, and requested the appointment of a conference committee to consider the differences between the two houses; and that the House adopted the conference committee report on H.B. No. 1924 on May 31, 2009, by the following vote: Yeas 145, Nays 0, 1 present, not voting.

Chief Clerk of the House

H.B. No. 1924

I certify that H.B. No. 1924 was passed by the Senate, with amendments, on May 25, 2009, by the following vote: Yeas 31, Nays 0; at the request of the House, the Senate appointed a conference committee to consider the differences between the two houses; and that the Senate adopted the conference committee report on H.B. No. 1924 on May 31, 2009, by the following vote: Yeas 31, Nays 0.

Secretary of the Senate

APPROVED: _____

Date

Governor