

26 approved by the United States Food and Drug Administration for
 27 the prevention of HIV infection.

28 (c) "Postexposure prophylaxis" means a drug or drug
 29 combination that meets the clinical eligibility recommendations
 30 of the United States Centers for Disease Control and Prevention
 31 guidelines for antiretroviral treatment following potential
 32 exposure to HIV.

33 (d) "Preexposure prophylaxis" means a drug or drug
 34 combination that meets the clinical eligibility recommendations
 35 of the United States Centers for Disease Control and Prevention
 36 guidelines for antiretroviral treatment for the prevention of
 37 HIV transmission.

38 (2) A pharmacist may screen an adult for HIV exposure and
 39 provide the results to the adult, with the advice that the
 40 patient should seek further medical consultation or treatment
 41 from a physician.

42 (3) A pharmacist may dispense HIV preexposure prophylaxis
 43 drugs pursuant to a valid prescription issued by a licensed
 44 health care practitioner authorized by law to prescribe such
 45 drugs.

46 (4) A pharmacist who is certified under subsection (6) may
 47 order and dispense HIV postexposure prophylaxis drugs pursuant
 48 to a written collaborative practice agreement between the
 49 pharmacist and a physician licensed under chapter 458 or chapter
 50 459.

51 (a) A written collaborative practice agreement between a
52 pharmacist and a physician under this section must include, at a
53 minimum, all of the following:

54 1. Terms and conditions relating to the screening for HIV
55 and the ordering and dispensing of HIV postexposure prophylaxis
56 drugs by the pharmacist. Such terms and conditions must be
57 appropriate for the pharmacist's training.

58 2. Specific categories of patients the pharmacist is
59 authorized to screen for HIV and for whom the pharmacist may
60 order and dispense HIV postexposure prophylaxis drugs.

61 3. The physician's instructions for obtaining relevant
62 patient medical history for the purpose of identifying
63 disqualifying health conditions, adverse reactions, and
64 contraindications to the use of HIV postexposure prophylaxis
65 drugs.

66 4. A process and schedule for the physician to review the
67 pharmacist's actions under the practice agreement.

68 5. Evidence of the pharmacist's current certification by
69 the board as provided in subsection (6).

70 6. Any other requirements as established by the board in
71 consultation with the Board of Medicine and the Board of
72 Osteopathic Medicine.

73 (b) A physician who has entered into a written
74 collaborative practice agreement pursuant to this section is
75 responsible for reviewing the pharmacist's actions to ensure

76 | compliance with the agreement.

77 | (c) The pharmacist shall submit a copy of the written
 78 | collaborative practice agreement to the board.

79 | (5) A pharmacist who orders and dispenses HIV postexposure
 80 | prophylaxis drugs pursuant to subsection (4) must provide the
 81 | patient with written information advising the patient to seek
 82 | follow-up care from his or her primary care physician. If the
 83 | patient indicates that he or she lacks regular access to primary
 84 | care, the pharmacist must comply with the procedures of the
 85 | pharmacy's approved access-to-care plan as provided in
 86 | subsection (7).

87 | (6) To provide services under a collaborative practice
 88 | agreement pursuant to this section, a pharmacist must be
 89 | certified by the board, according to rules adopted by the board
 90 | in consultation with the Board of Medicine and the Board of
 91 | Osteopathic Medicine. To be certified, a pharmacist must, at a
 92 | minimum, meet all of the following criteria:

93 | (a) Hold an active and unencumbered license to practice
 94 | pharmacy under this chapter.

95 | (b) Be engaged in the active practice of pharmacy.

96 | (c) Have earned a degree of doctor of pharmacy or have
 97 | completed at least 3 years of experience as a licensed
 98 | pharmacist.

99 | (d) Maintain at least \$250,000 of liability coverage. A
 100 | pharmacist who maintains liability coverage pursuant to s.

101 465.1865 or s. 465.1895 satisfies this requirement.

102 (e) Have completed a course approved by the board, in
 103 consultation with the Board of Medicine and the Board of
 104 Osteopathic Medicine, which includes, at a minimum, instruction
 105 on all of the following:

106 1. Performance of patient assessments.

107 2. Point-of-care testing procedures.

108 3. Safe and effective treatment of HIV exposure with HIV
 109 infection prevention drugs, including, but not limited to,
 110 consideration of the side effects of the drug dispensed and the
 111 patient's diet and activity levels.

112 4. Identification of contraindications.

113 5. Identification of patient comorbidities in individuals
 114 with HIV requiring further medical evaluation and treatment,
 115 including, but not limited to, cardiovascular disease, lung and
 116 liver cancer, chronic obstructive lung disease, and diabetes
 117 mellitus.

118 (7)(a) A pharmacy in which a pharmacist is providing
 119 services under a written collaborative practice agreement
 120 pursuant to subsection (4) must submit an access-to-care plan to
 121 the board and department annually.

122 (b) An access-to-care plan shall assist patients in
 123 gaining access to appropriate care settings when they present to
 124 the pharmacy for HIV screening and indicate that they lack
 125 regular access to primary care. An access-to-care plan must

126 | include:

127 | 1. Procedures to educate such patients about care that
 128 | would be best provided in a primary care setting and the
 129 | importance of receiving regular primary care.

130 | 2. The pharmacy's plan for collaborative partnership with
 131 | one or more nearby federally qualified health centers, county
 132 | health departments, or other primary care settings. The goals of
 133 | such partnership must include, but need not be limited to,
 134 | protocols for identifying and appropriately referring a patient
 135 | who has presented to the pharmacy for HIV screening or access to
 136 | HIV infection prevention drugs and indicates that he or she
 137 | lacks regular access to primary care.

138 | (8) The board shall adopt rules to implement this section.

139 | Section 2. This act shall take effect July 1, 2024.