Credentialing Office Policy and Procedure

<table>
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<th>Title: PHYSICIAN DELEGATION TO PHARMACIST</th>
<th>Policy Number: CO 1.15</th>
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<tbody>
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<td>Regulation Reference:</td>
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<tr>
<td>Texas Occupations Code: Chapter 157.101, 22 TAC 15, Chapter 295</td>
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Policy Statement:

It is the policy of Texas Tech University Health Sciences Center El Paso, Paul L. Foster School of Medicine (TTUHSCEP PLFSOM) that TTUHSCEP PLFSOM physicians who delegate drug therapy management, including authority to sign a prescription drug order, to a TTUHSCEP PLFSOM Pharmacist have established written protocols and otherwise comply with state and federal laws and regulations.

Scope and Distribution:

This policy applies to TTUHSCEP PLFSOM Ambulatory Clinics to the extent the Professional Staff Bylaws allow physician delegation of authority to a Pharmacist to sign a prescription for dangerous drugs as part of drug therapy management.

Procedure:

1. Definitions:

   a. “Delegating Physician” means a physician employed or contracted by TTUHSCEP PLFSOM to provide services in a TTUHSCEP clinic, who delegates drug therapy management, including the authority to sign a prescription drug order for dangerous drugs, to a TTUHSCEP Pharmacist pursuant to a written protocol.

   b. “Written Protocol” means a physician’s written order, standing medical order, standing delegation order, or other order or protocol as defined by rule of the Texas Medical Board (TMB) under the Medical Practice Act.

   c. “Clinical Pharmacist” means an individual licensed to practice pharmacy in the state of Texas and has completed a Residency program in a Clinical Pharmacy specialty or equivalent training and is credentialed and privileged by the TTUHSCEP PLFSOM, to provide drug therapy management in a TTUHSCEP clinic. Licensed Pharmacists that have not completed such training and are not in a training program may be credentialed to assist Physicians in patient medication review and education, and providing medication advice, but not participate in drug therapy management as described below.

   d. “Dangerous drug” means a device or drug that is unsafe for self-medication and that is not included in the Texas Health and Safety Code, Schedules I-V or Penalty Groups I-IV of chapter 481 (Texas Controlled Substances Act). It includes a device or drug that has or is
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required to have any of the following legend:

i. “Caution: federal law prohibits dispensing without prescription” or “RX only” or another legend that complies with federal law;
ii. See Tex. H & S Code, §483.001.

2. General:

a. Physicians and Clinical Pharmacists shall not sign any blank prescriptions in advance of a patient visit.
b. Delegation of authority to sign prescriptions shall only be to TTUHSCEP PLFSOM credentialed Clinical Pharmacists and shall be limited to dangerous drugs.

3. Physician Delegation of Authority to Sign Prescriptions for Dangerous Drugs:

a. The delegating physician shall, at all times, have a valid DEA (Drug Enforcement Administration) and active Texas Medical Board (TMB) license number.
b. The Pharmacist given delegated authority to sign prescriptions pursuant to this policy shall have, at all times, an active Texas State Board of Pharmacy (TSBP) license number.
c. A Pharmacist shall not sign a prescription for dangerous drugs under a physician’s delegated authority until all of the following has occurred:

i. A written protocol, as required by Texas law (see #4 below), has been agreed upon and signed by the delegating physician and Pharmacist, a copy of which is maintained by the Delegating physician’s Department and the Pharmacist;
ii. The Pharmacist has completed, signed and submitted to the TSBP “Notification of Drug Therapy Management by a Pharmacist under Written Protocol of a Physician” form along with a signed copy of the written protocol. A copy of which shall be maintained by the Department and submitted to Medical Staff Office.
iii. The Pharmacist has made a copy of the relevant portion of the list of Pharmacists Authorized to sign Prescriptions (containing the Pharmacist’s and Delegating Physician’s (a/k/a Supervising Physician) names) maintained online by the TSBP. This shall be maintained with the written protocol.

d. A Pharmacist’s authority to sign a prescription shall be suspended at any time the delegating physician or pharmacist does not have a valid DEA (physician only) or active license to practice in the state of Texas. This suspension shall be considered a non-adverse action.

4. Written Protocol:

a. A written protocol shall contain, at a minimum, the following:

i. A statement identifying the individual physician authorized to prescribe drugs and responsible for the delegation of drug therapy management, including any authority to sign prescriptions for dangerous drugs;
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ii. A statement identifying the individual pharmacist authorized to dispense drugs and to engage in drug therapy management, including any authority to sign prescriptions for dangerous drugs, as delegated by the physician;

iii. A statement identifying the types of drug therapy management decisions that the pharmacist is authorized to make which shall include:

1. A statement of the ailments or diseases involved, drugs, and types of drug therapy management authorized; and
2. A specific statement of the procedures, decision criteria, or plan the pharmacist shall follow when exercising drug therapy management authority.

iv. A statement of the activities the pharmacist shall follow in the course of exercising drug therapy management authority, including the method for documenting decisions made and a plan for communication or feedback to the authorizing physician concerning specific decisions made. Documentation shall be recorded within a reasonable time of each intervention and may be performed on the patient medical record, patient medical chart, or in a separate log book;

v. A statement that describes appropriate mechanisms and time schedule for the pharmacist to report to the physician monitoring the pharmacist’s exercise of delegated drug therapy management and results of the drug therapy management; and

vi. The expiration date of the protocol.

b. The written protocol may be a standard protocol or patient specific. If a standard protocol is used, the delegating physician shall document what deviations, if any, from the standard protocol are ordered for the patient.

5. Responsibilities of Delegating Physician

a. The delegating physician shall:

i. Approve the written protocol and any patient-specific deviations from the protocol;
ii. Annually review the written protocol and any patient-specific deviations from the protocol;
iii. Be geographically located so as to be able to be physically present daily to provide medical care and supervision;
iv. Verify that the Pharmacist establishes and maintains a pharmacist-patient relation to each patient.

b. The delegating physician is responsible for the services provided to a patient under
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the protocol and shall review them in accordance with the schedule defined in the written protocol.

c. The delegating physician shall maintain a physician-patient relationship with each patient and shall inform the patient that drug therapy will be managed by a pharmacist under the written protocol.

d. The delegating physician must provide an initial assessment of the patient, diagnosis and drug therapy order for each patient.

e. The delegating physician receives, as appropriate, a periodic status report on each patient, including any problem or complication encountered; and is available through direct telecommunication for consultation, assistance, and direction. Texas Occupations Code Sec. 157.101 SUBCHAPTER C DELEGATION TO PHARMACIST

6. Responsibilities of Pharmacist

a. The Pharmacist who has received delegated authority to sign prescriptions for dangerous drugs shall schedule the annual review with each delegating physician.

b. The Pharmacist shall include the name, address and telephone number of the Pharmacist and Delegating physician on each prescription for a dangerous drug signed by the Pharmacist.

c. The Pharmacist shall annually complete at least six (6) hours of continuing education related to drug therapy offered by a provider approved by the Accreditation Council for Pharmacy Education (ACPE).

d. The Pharmacist shall maintain every record required to be kept under 22 TAC 295, for at least two (2) years and shall make such records available for inspection and copying by the TSBP or its representatives and to other authorized local, state or federal law enforcement or regulatory agencies.

e. The Pharmacist, with respect to patient care, shall:

   i. Establish and maintain a pharmacist-patient relationship with each patient;
   
   ii. In accordance with the schedule defined in written protocol, provide the delegating physician with periodic status reports on each patient, including any problem or complication encountered;
   
   iii. Document all interventions undertaken under the written protocol within a reasonable time of each intervention; such documentation shall be in the patient medical record;
   
   iv. Maintain a copy of any deviations from the standard protocol ordered and documented by the delegating physician.

Attachments:

1. TSBP Notification of Physician Delegation to a Pharmacist (Limited Authority for a Pharmacist to Sign a Prescription for a Dangerous Drug While Engaged in Drug Therapy Management)

2. Blank Attachment A of TTUHSC and UTEP for Pharmacy Residents Agreement – Collaborative Practice Agreement (CPA)
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Policy Number: CO 1.15

Signatory approval on file by:

Approved: Juan B. Figueroa, M.D., Chair, TTUHSC EP PLFSOM Credentials Committee and Director of Clinical Operations

Revision History

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