



ALASKA STATE MEDICAL BOARD

Department of Commerce, Community, and Economic Development
 Division of Corporations, Business, and Professional Licensing
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PHYSICIAN / PHARMACIST COOPERATIVE PRACTICE AGREEMENT

Instructions: Please type or print this agreement and the accompanying protocol and submit to the board at the letterhead address for the board's approval. The board will consider the agreement at the next regularly scheduled board meeting. Please contact the board's office for a schedule of the meeting dates.

Physician:

Full Name of Physician	License No.
Primary Practice Address	Date First Issued
City, State, Zip	Email Address (optional)
Office Telephone	Fax Telephone
Specialty	

For agreements involving multiple physicians, please list their names, license numbers, and practice addresses, if different from the primary physician. A separate sheet may be used if necessary:

Name	Practice Address	Telephone	License No.
	City, State, Zip	Fax	
Name	Practice Address	Telephone	License No.
	City, State, Zip	Fax	

Pharmacist:

Full Name of Pharmacist	License No.
Primary Pharmacy Address	Date First Issued
City, State, Zip	Email Address (optional)
Pharmacy Telephone	Fax Telephone
Name of Pharmacy	Pharmacy License No.

For agreements involving multiple pharmacists, please list their names, license numbers, and pharmacy addresses, if different from the primary pharmacist. A separate sheet may be used if necessary:

Name	Pharmacy Address	Telephone	License No.
	City, State, Zip	Fax	
Name	Pharmacy Address	Telephone	License No.
	City, State, Zip	Fax	

Duration of this Agreement (Not to Exceed Two Years):

Effective Date of Agreement (MM/DD/YYYY)	Termination Date of Agreement (MM/DD/YYYY)
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PROTOCOL REQUIREMENTS

In accordance with regulation 12 AAC 40.983, the protocol to be attached to this application must, at a minimum, contain the following elements:

- 1 Types of cooperative practice decisions the physician is granting to the pharmacist including:
 - A The types of diseases, medications, or medication categories involved and the type of cooperative authority to be exercised by the pharmacist in each case; and
 - B The procedures, decision criteria, or plans the pharmacist must follow when making therapeutic decisions, particularly when initiating or modifying medications.
- 2 Requirements that the pharmacist must follow when exercising cooperative authority, including documentation of decisions made, and a plan for communication and feedback to the physician concerning specific decisions made.
- 3 A plan for the physician to review the decisions made by the pharmacist at least once every three months.
- 4 A plan for the pharmacist to provide to the physician any patient records created under the agreement.
- 5 A provision that allows the physician to override the agreement if the physician considers it medically necessary or appropriate.
- 6 An acknowledgement that the physician will not receive any compensation from the pharmacist or pharmacy as a result of the care or treatment of any patient under the agreement.
- 7 A prohibition against the administration or dispensing of any schedule I, II, III, or IV controlled substances.

Renewal of Protocol

To renew a protocol previously approved by the board, please complete this entire application. Has there been any change in the protocol which was previously approved by the board? No Yes
 (If Yes, please attach a copy of the amended protocol.)

Please Note:

- 1 Agreements and protocols must be maintained for at least two years.
- 2 Any modification to the approved protocol must be approved by the board. Complete this agreement and submit the new protocol for the board's approval.
- 3 The agreement may be terminated upon written notice at any time by either party. The physician is required to notify the board of such termination within 30 days from the date of the termination.
- 4 Regulation 12 AAC 40.983 does not apply to physicians on medical staff or a hospital or nursing facility licensed under AS 47.32 for treatment of patients of that facility.

All provisions of regulation 12 AAC 40.983, on page 3 of this application, apply.

 Signature, Primary Physician

 Signature, Primary Pharmacist

 Date

 Date

Alaska State Medical Board Approval of Agreement and Attached Protocol:

Signature, Board Member	Date Approved
Reviewed at Board Meeting of	Plan Number

12 AAC 40.983. COOPERATIVE PRACTICE AGREEMENTS WITH PHARMACISTS. (a) A physician may enter into a cooperative practice agreement with a pharmacist licensed under AS 08.80 as provided in this section. The initial agreement may not exceed two years and is subject to renewal under (j) of this section.

(b) A physician planning to enter into a cooperative practice agreement with a pharmacist must submit to the board a written proposed agreement that meets the requirements of this section. The proposed agreement must be approved by the board before cooperative practice under the agreement, if approved, begins. A proposed modification to an agreement must be submitted to the board for approval, before the modification, if approved, is implemented. The board will approve a proposed agreement or modification if it is medically appropriate and provides for the safety of the patient. If the board disapproves a proposed agreement or modification, the board shall state the reasons for its action.

(c) A cooperative practice agreement between a physician and a pharmacist must include

- (1) the physician's authorization to a pharmacist or group of pharmacists to manage a patient's medication therapy;
- (2) the full name, medical license number, date of issuance of license, and specialty, if any, of each physician who is a party to the agreement;
- (3) the full name, place of employment, mailing address, pharmacist license number, and date of issuance of license, of each pharmacist who is a party to the agreement;
- (4) a statement of the duration of the agreement, which may not exceed two years;
- (5) the types of cooperative practice decisions that the physician is authorizing the pharmacist to make under the agreement, including
 - (A) types of diseases, medications, or medication categories involved and the type of cooperative authority to be exercised in each case; and
 - (B) procedures, decision criteria, or plans the pharmacist must follow when making therapeutic decisions, particularly when initiating or modifying medication;
- (6) requirements that a pharmacist must follow when exercising cooperative authority, including documentation of decisions made, and a plan for communication and feedback to the physician concerning specific decisions made;
- (7) a plan for the physician to review the decisions made by the pharmacist at least once every three months;
- (8) a plan for providing to the physician patient records created under the agreement;
- (9) a provision that allows the physician to override the agreement if the physician considers it medically necessary or appropriate;
- (10) an acknowledgement that the physician will not receive any compensation from a pharmacist or pharmacy as a result of the care or treatment of any patient under the agreement;
- (11) a prohibition on the administration or dispensing of any schedule I, II, III, or IV controlled substances.

(d) The physician, or a physician assistant under the supervision of the physician, must physically examine and evaluate a patient before that patient may be included under a cooperative practice agreement to which that physician is a party. The physician must issue a prescription or medication order for each patient valid for up to one year. The physician, or a physician assistant under the supervision of the physician, must conduct a physical examination of a patient at least once a year while that patient is included under a cooperative practice agreement to which that physician is a party. The requirements of this subsection do not apply to a cooperative practice agreement allowing the administration of emergency contraception, immunizations of persons 18 years of age or older, and those immunizations recommended to be given on a yearly basis by the United States Department of Health and Human Services Centers for Disease Control and Prevention.

(e) Only a physician in active practice in this state may enter into a cooperative practice agreement under this section. An authority authorized by a physician must be within the physician's current scope of practice.

(f) A physician who enters into a cooperative practice agreement shall keep a copy of the written agreement and the records of all patients treated under it during the period of the agreement. The physician shall retain the agreement and records required by this subsection for at least seven years after the termination of the agreement.

(g) A cooperative practice agreement is terminated upon written notice by either the physician or the pharmacist. The physician shall notify the board in writing within 30 days after an agreement is terminated.

(h) The board may periodically review cooperative practice agreements approved under this section.

(i) The requirements of this section do not apply to cooperative practice agreements adopted by the physicians on medical staff of a hospital or nursing facility licensed under AS 47.32 for treatment of patients of that facility.

(j) The physician may seek renewal of a cooperative practice agreement for additional two-year periods.

(k) Notwithstanding the requirements of (b) of this section, a physician who, before the effective date of this section, has entered into a collaborative practice agreement with a pharmacist that has been approved by the Board of Pharmacy under 12 AAC 52.240 and is still current, must obtain the board's approval of that agreement under this section within six months after this section takes effect. After that time, a physician may not participate in a cooperative practice agreement with a pharmacist except as allowed under this section.

(l) In this section, "cooperative practice agreement" means an agreement between a physician and a pharmacist by which a physician authorizes the pharmacist to manage a patient's medication therapy as specified in the agreement.