

**SUBSTITUTE FOR
SENATE BILL NO. 920**

A bill to amend 1978 PA 368, entitled
"Public health code,"
(MCL 333.1101 to 333.25211) by adding section 17713.

THE PEOPLE OF THE STATE OF MICHIGAN ENACT:

1 **Sec. 17713. (1) Notwithstanding any provision of this article**
2 **or rule promulgated under this article to the contrary, beginning**
3 **on the effective date of the amendatory act that added this**
4 **section, all of the following apply:**

5 **(a) A pharmacist may dispense an emergency refill of up to a**
6 **60-day supply of a prescription drug other than a controlled**
7 **substance for a resident of this state if, in the pharmacist's**
8 **professional judgment, a failure to refill the prescription might**
9 **interrupt the patient's ongoing care and have a significant adverse**



1 effect on the patient's well-being. All of the following apply for
2 purposes of this subdivision:

3 (i) The pharmacist shall inform the patient that the
4 prescription was dispensed under this subdivision.

5 (ii) The pharmacist shall inform the prescriber, in writing and
6 within a reasonable period of time, of any refills that the
7 pharmacist dispensed under this subdivision.

8 (iii) Before refilling a prescription under this subdivision,
9 the pharmacist shall make a reasonable effort to communicate with
10 the prescriber regarding refilling the prescription and make a
11 record of the efforts made, including the reason for refilling a
12 prescription under this subdivision.

13 (iv) A prescriber is not subject to criminal prosecution, civil
14 liability, or administrative sanction as a result of a pharmacist
15 refilling a prescription under this subdivision.

16 (b) A pharmacist may temporarily operate a pharmacy in a
17 location that is not designated on a pharmacy license. However, the
18 pharmacy described in this subdivision may not prepare a sterile
19 drug product beyond a low-risk preparation, as defined by USP
20 standards, for immediate inpatient administration.

21 (c) A pharmacist may dispense and administer a drug as needed
22 to treat an individual with COVID-19 pursuant to protocols
23 established by the federal Centers for Disease Control and
24 Prevention or the National Institute of Health, or as determined by
25 the chief medical executive in the office of chief medical
26 executive created within the department of health and human
27 services or the chief medical executive's designee.

28 (d) A pharmacist may substitute a therapeutically equivalent
29 drug for a drug that is the subject of a critical shortage. A



1 pharmacist substituting a drug under this subdivision shall inform
2 the patient of the substitution and notify the prescriber of the
3 substitution within a reasonable period of time. A prescriber is
4 not subject to criminal prosecution, civil liability, or
5 administrative sanction as a result of a pharmacist's substitution
6 under this subdivision.

7 (e) A preceptor may supervise a student pharmacist remotely to
8 fulfill eligibility requirements for licensure and to avoid a delay
9 in graduation.

10 (f) A pharmacist may oversee a pharmacy technician and other
11 pharmacy staff remotely through the use of a real-time, continuous
12 audiovisual camera system that is capable of allowing the
13 pharmacist to visually identify the markings on tablets and
14 capsules. The pharmacist must have access to all relevant patient
15 information to accomplish remote oversight and must be available at
16 all times during the oversight to provide real-time patient
17 consultation. A pharmacy technician shall not perform sterile or
18 nonsterile compounding without a pharmacist on the premises.

19 (g) An out-of-state pharmacy that is in good standing is
20 considered licensed to do business in this state. An out-of-state
21 pharmacy shall not deliver a controlled substance into this state,
22 except that, notwithstanding article 7 or any rule promulgated
23 under that article, an out-of-state pharmacy may deliver a
24 controlled substance that is compounded for a drug shortage, as
25 determined by the FDA. An out-of-state pharmacy shall comply with
26 this part and the rules promulgated by this part, except that an
27 out-of-state pharmacy is not required to designate a pharmacist in
28 charge for the out-of-state pharmacy. To provide sterile
29 compounding services to a patient in this state, an out-of-state



1 pharmacy shall hold a current accreditation from a national
2 organization approved by the board.

3 (h) A manufacturer or wholesale distributor that is licensed
4 in another state is considered to be licensed to do business in
5 this state. Notwithstanding article 7 or any rule promulgated
6 under that article, a manufacturer or wholesale distributor that
7 holds a license in good standing in another state may temporarily
8 distribute a controlled substance in this state to a hospital or to
9 a manufacturer or wholesale distributor that is licensed under this
10 part. An out-of-state license described in this subdivision is not
11 considered to be in good standing for purposes of this subdivision
12 if it has been suspended or revoked or is the subject of pending
13 disciplinary action in another state. If an out-of-state license
14 described in this subdivision contains restrictions or conditions,
15 those restrictions or conditions apply in this state for purposes
16 of this subdivision.

17 (2) As used in this section:

18 (a) "COVID-19" means coronavirus disease 2019.

19 (b) "Out-of-state pharmacy" means a facility or part of a
20 facility that is located outside of this state and that is licensed
21 in another state to dispense prescription drugs or prepare
22 prescription drugs for delivery or distribution.

23 (3) This section does not apply after March 31, 2021.

24 Enacting section 1. This amendatory act does not take effect
25 unless Senate Bill No. 879 of the 100th Legislature is enacted into
26 law.

