

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

1
 2 An act relating to physical therapy practice; amending
 3 s. 486.021, F.S.; revising and providing definitions;
 4 amending s. 486.025, F.S.; revising the powers and
 5 duties of the Board of Physical Therapy Practice;
 6 creating s. 486.117, F.S.; requiring the board to
 7 establish minimum standards of practice for the
 8 performance of dry needling, and additional
 9 supervision and training requirements for the
 10 performance of dry needling of specified areas, by
 11 physical therapists; requiring the Department of
 12 Health to submit a report to the Legislature by a
 13 specified date; providing construction; providing an
 14 effective date.

15
 16 Be It Enacted by the Legislature of the State of Florida:

17
 18 Section 1. Subsections (10) and (11) of section 486.021,
 19 Florida Statutes, are amended, and subsections (12) and (13) are
 20 added to that section, to read:

21 486.021 Definitions.—As used in this chapter, unless the
 22 context otherwise requires, the term:

23 (10) "Physical therapy assessment" means observational,
 24 verbal, or manual determinations of the function of the movement
 25 ~~musculoskeletal or neuromuscular~~ system relative to physical

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

26 | therapy, including, but not limited to, range of motion of a
 27 | joint, motor power, motor control, posture ~~postural attitudes,~~
 28 | biomechanical function, locomotion, or functional abilities, for
 29 | the purpose of physical therapy ~~making recommendations for~~
 30 | treatment.

31 | (11) "Practice of physical therapy" means the performance
 32 | of physical therapy assessments and the treatment of any
 33 | disability, injury, disease, or other health condition of human
 34 | beings, or the prevention of such disability, injury, disease,
 35 | or other health condition ~~of health,~~ and the rehabilitation of
 36 | such disability, injury, disease, or other health condition ~~as~~
 37 | ~~related thereto~~ by alleviating impairments, functional movement
 38 | limitations, and disabilities by designing, implementing, and
 39 | modifying treatment interventions through therapeutic exercise;
 40 | functional movement training in self-management and in-home,
 41 | community, or work integration or reintegration; manual therapy;
 42 | massage; airway clearance techniques; maintaining and restoring
 43 | the integumentary system and wound care; physical agent or
 44 | modality; mechanical or electrotherapeutic modality; patient-
 45 | related instruction ~~the use of the physical, chemical, and other~~
 46 | ~~properties of air; electricity; exercise; massage; the~~
 47 | ~~performance of acupuncture only upon compliance with the~~
 48 | ~~criteria set forth by the Board of Medicine, when no penetration~~
 49 | ~~of the skin occurs; the use of radiant energy, including~~
 50 | ~~ultraviolet, visible, and infrared rays; ultrasound; water; the~~

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

51 use of apparatus and equipment in the application of such
52 treatment, prevention, or rehabilitation ~~the foregoing or~~
53 ~~related thereto~~; the performance of tests of neuromuscular
54 functions as an aid to the diagnosis or treatment of any human
55 condition; or the performance of electromyography as an aid to
56 the diagnosis of any human condition only upon compliance with
57 the criteria set forth by the Board of Medicine.

58 (a) A physical therapist may implement a plan of treatment
59 developed by the physical therapist for a patient or provided
60 for a patient by a practitioner of record or by an advanced
61 practice registered nurse licensed under s. 464.012. The
62 physical therapist shall refer the patient to or consult with a
63 practitioner of record if the patient's condition is found to be
64 outside the scope of physical therapy. If physical therapy
65 treatment for a patient is required beyond 30 days for a
66 condition not previously assessed by a practitioner of record,
67 the physical therapist shall have a practitioner of record
68 review and sign the plan. The requirement that a physical
69 therapist have a practitioner of record review and sign a plan
70 of treatment does not apply when a patient has been physically
71 examined by a physician licensed in another state, the patient
72 has been diagnosed by the physician as having a condition for
73 which physical therapy is required, and the physical therapist
74 is treating the condition. For purposes of this paragraph, a
75 health care practitioner licensed under chapter 458, chapter

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

76 | 459, chapter 460, chapter 461, or chapter 466 and engaged in
 77 | active practice is eligible to serve as a practitioner of
 78 | record.

79 | (b) The use of roentgen rays and radium for diagnostic and
 80 | therapeutic purposes and the use of electricity for surgical
 81 | purposes, including cauterization, are not "physical therapy"
 82 | for purposes of this chapter.

83 | (c) The practice of physical therapy does not authorize a
 84 | physical therapy practitioner to practice chiropractic medicine
 85 | as defined in chapter 460, including specific spinal
 86 | manipulation, or acupuncture as defined in chapter 457. For the
 87 | performance of specific chiropractic spinal manipulation, a
 88 | physical therapist shall refer the patient to a health care
 89 | practitioner licensed under chapter 460.

90 | (d) This subsection does not authorize a physical
 91 | therapist to implement a plan of treatment for a patient
 92 | currently being treated in a facility licensed pursuant to
 93 | chapter 395.

94 | (12) "Dry needling" means a skilled intervention, based on
 95 | Western medicine, that uses filiform needles and other apparatus
 96 | or equipment to stimulate a myofascial trigger point for the
 97 | evaluation and management of neuromusculoskeletal conditions,
 98 | pain, movement impairments, and disabilities.

99 | (13) "Myofascial trigger point" means an irritable section
 100 | of soft tissue often associated with palpable nodules in taut

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

101 bands of muscle fibers.

102 Section 2. Section 486.025, Florida Statutes, is amended
103 to read:

104 486.025 Powers and duties of the Board of Physical Therapy
105 Practice.—The board may administer oaths, summon witnesses, take
106 testimony in all matters relating to its duties under this
107 chapter, establish or modify minimum standards of practice of
108 physical therapy as defined in s. 486.021, including, but not
109 limited to, standards of practice for the performance of dry
110 needling by physical therapists, and adopt rules pursuant to ss.
111 120.536(1) and 120.54 to implement ~~the provisions of this~~
112 chapter. The board may also review the standing and reputability
113 of any school or college offering courses in physical therapy
114 and whether the courses of such school or college in physical
115 therapy meet the standards established by the appropriate
116 accrediting agency referred to in s. 486.031(3)(a). In
117 determining the standing and reputability of any such school and
118 whether the school and courses meet such standards, the board
119 may investigate and personally inspect the school and courses
120 ~~make personal inspection of the same.~~

121 Section 3. Section 486.117, Florida Statutes, is created
122 to read:

123 486.117 Physical therapist; performance of dry needling.—

124 (1) The board shall establish minimum standards of
125 practice for the performance of dry needling by physical

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

126 therapists, including, at a minimum, all of the following:
 127 (a) Completion of 2 years of licensed practice as a
 128 physical therapist.
 129 (b) Completion of 50 hours of face-to-face continuing
 130 education from an entity accredited in accordance with s.
 131 486.109 on the topic of dry needling which must include a
 132 determination by the physical therapist instructor that the
 133 physical therapist demonstrates the requisite psychomotor skills
 134 to safely perform dry needling. The continuing education must
 135 include instruction in all of the following areas:
 136 1. Theory of dry needling.
 137 2. Selection and safe handling of needles and other
 138 apparatus or equipment used in dry needling, including
 139 instruction on the proper handling of biohazardous waste.
 140 3. Indications and contraindications for dry needling.
 141 4. Psychomotor skills needed to perform dry needling.
 142 5. Postintervention care, including adverse responses,
 143 adverse event recordkeeping, and any reporting obligations.
 144 (c)1. Completion of at least 25 patient sessions of dry
 145 needling performed under the supervision of a physical therapist
 146 who holds an active license to practice physical therapy in any
 147 state or the District of Columbia, who has actively performed
 148 dry needling for at least 1 year, and who documents that he or
 149 she has met the supervision and competency requirements and
 150 needs no additional supervised sessions to perform dry needling;

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

151 or

152 2. Completion of 25 patient sessions of dry needling
153 performed as a physical therapist licensed in any state or in
154 the United States Armed Forces.

155 (d) A requirement that dry needling may not be performed
156 without patient consent and must be a part of a patient's
157 documented plan of care.

158 (e) A requirement that dry needling may not be delegated
159 to any person other than a physical therapist who is authorized
160 to engage in dry needling under this chapter.

161 (2) The board shall establish additional supervision and
162 training requirements before the performance of dry needling of
163 the head and neck or torso by a physical therapist if the board
164 deems it necessary for patient safety.

165 (3) The department shall, within existing resources,
166 submit a report to the President of the Senate and the Speaker
167 of the House of Representatives on or before December 31, 2022,
168 detailing the number of physical therapists in the state, the
169 number of physical therapists in the state performing dry
170 needling, any increases or decreases in the number of physical
171 therapists in the state by geographic area, and any adverse
172 medical incidents as defined by the board involving physical
173 therapists in the state performing dry needling.

174 (4) The performance of dry needling in the practice of
175 physical therapy may not be construed to limit the scope of

ENROLLED

CS/HB 467, Engrossed 1

2020 Legislature

176 | practice of other licensed health care practitioners not
177 | governed by this chapter.

178 | Section 4. This act shall take effect July 1, 2020.