

By the Committee on Business Regulation & Consumer Affairs
and Representatives Ogles, Chestnut and Dawson-White

1 A bill to be entitled
2 An act relating to physician assistants;
3 amending ss. 458.347 and 459.022, F.S.;
4 providing for licensure rather than
5 certification of physician assistants;
6 prescribing qualifications for licensure and
7 revising provisions governing examinations;
8 revising provisions relating to delegation of
9 prescriptive authority to a physician assistant
10 and requiring certain notice of any change in
11 prescriptive privileges; amending ss. 39.01,
12 154.04, 232.46, 232.465, 240.4067, 395.0191,
13 627.351, 627.357, 766.105, 766.1115, 984.03,
14 and 985.03, F.S.; conforming other statutory
15 provisions; providing an effective date.

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

18
19 Section 1. Section 458.347, Florida Statutes, is
20 amended to read:

21 458.347 Physician assistants.--

22 (1) LEGISLATIVE INTENT.--

23 (a) The purpose of this section is to encourage more
24 effective utilization of the skills of physicians or groups of
25 physicians by enabling them to delegate health care tasks to
26 qualified assistants when such delegation is consistent with
27 the patient's health and welfare.

28 (b) In order that maximum skills may be obtained
29 within a minimum time period of education, a physician
30 assistant shall be specialized to the extent that he or she

31

1 can operate efficiently and effectively in the specialty areas
2 in which he or she has been trained or is experienced.

3 (c) The purpose of this section is to encourage the
4 utilization of physician assistants by physicians and to allow
5 for innovative development of programs for the education of
6 physician assistants.

7 (2) DEFINITIONS.--As used in this section:

8 (a) "Approved program" means a program, formally
9 approved by the boards, for the education of physician
10 assistants.

11 (b) "Boards" means the Board of Medicine and the Board
12 of Osteopathic Medicine.

13 (c) "Council" means the Council on Physician
14 Assistants.

15 (d) "Trainee" means a person who is currently enrolled
16 in an approved program.

17 (e) "Physician assistant" means a person who is a
18 graduate of an approved program or its equivalent or meets
19 standards approved by the boards and is licensed ~~certified~~ to
20 perform medical services delegated by the supervising
21 physician.

22 (f) "Supervision" means responsible supervision and
23 control. Except in cases of emergency, supervision requires
24 the easy availability or physical presence of the licensed
25 physician for consultation and direction of the actions of the
26 physician assistant. For the purposes of this definition, the
27 term "easy availability" includes the ability to communicate
28 by way of telecommunication. The boards shall establish rules
29 as to what constitutes responsible supervision of the
30 physician assistant.

31

1 (g) "Proficiency examination" means an entry-level
2 examination approved by the boards, including, but not limited
3 to, those examinations administered by the National Commission
4 on Certification of Physician Assistants.

5 (h) "Continuing medical education" means courses
6 recognized and approved by the boards, the American Academy of
7 Physician Assistants, the American Medical Association, the
8 American Osteopathic Association, or the Accreditation Council
9 on Continuing Medical Education.

10 (3) PERFORMANCE OF SUPERVISING PHYSICIAN.--Each
11 physician or group of physicians supervising a licensed
12 ~~certified~~ physician assistant must be qualified in the medical
13 areas in which the physician assistant is to perform and shall
14 be individually or collectively responsible and liable for the
15 performance and the acts and omissions of the physician
16 assistant. A physician may not supervise more than four
17 currently licensed ~~certified~~ physician assistants at any one
18 time.

19 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.--

20 (a) The boards shall adopt, by rule, the general
21 principles that supervising physicians must use in developing
22 the scope of practice of a physician assistant under direct
23 supervision and under indirect supervision. These principles
24 shall recognize the diversity of both specialty and practice
25 settings in which physician assistants are used.

26 (b) This chapter does not prevent third-party payors
27 from reimbursing employers of physician assistants for covered
28 services rendered by licensed ~~certified~~ physician assistants.

29 (c) Licensed ~~Certified~~ physician assistants may not be
30 denied clinical hospital privileges, except for cause, so long
31

1 as the supervising physician is a staff member in good
2 standing.

3 (d) A supervisory physician may delegate to a licensed
4 ~~certified~~ physician assistant, pursuant to a written protocol,
5 the authority to act according to s. 154.04(1)(c). Such
6 delegated authority is limited to the supervising physician's
7 practice in connection with a county health department as
8 defined and established pursuant to chapter 154. The boards
9 shall adopt rules governing the supervision of physician
10 assistants by physicians in county health departments.

11 (e) A supervisory physician may delegate to a fully
12 licensed ~~certified~~ physician assistant the authority to
13 prescribe any medication used in the supervisory physician's
14 practice if such medication is listed on the formulary created
15 pursuant to paragraph (f). A fully licensed ~~certified~~
16 physician assistant may only prescribe such medication under
17 the following circumstances:

18 1. A physician assistant must clearly identify to the
19 patient that he or she is a physician assistant. Furthermore,
20 the physician assistant must inform the patient that the
21 patient has the right to see the physician prior to any
22 prescription being prescribed by the physician assistant.

23 2. The supervisory physician must notify the
24 department of his or her intent to delegate, on a
25 department-approved form, before delegating such authority and
26 notify the department of any change in prescriptive privileges
27 of ~~with each certification renewal application filed by the~~
28 physician assistant.

29 3. The physician assistant must file with the
30 department, before commencing to prescribe, evidence that he
31 or she has completed a continuing medical education course of

1 at least 3 classroom hours in prescriptive practice, conducted
2 by an accredited program approved by the boards, which course
3 covers the limitations, responsibilities, and privileges
4 involved in prescribing medicinal drugs, or evidence that he
5 or she has received education comparable to the continuing
6 education course as part of an accredited physician assistant
7 training program.

8 4. The physician assistant must file with the
9 department, before commencing to prescribe, evidence that the
10 physician assistant has a minimum of 3 months of clinical
11 experience in the specialty area of the supervising physician.

12 5. The physician assistant must file with the
13 department a signed affidavit that he or she has completed a
14 minimum of 10 continuing medical education hours in the
15 specialty practice in which the physician assistant has
16 prescriptive privileges with each licensure ~~certification~~
17 renewal application.

18 6. The department shall issue a license ~~certification~~
19 and a prescriber number to the physician assistant granting
20 authority for the prescribing of medicinal drugs authorized
21 within this paragraph upon completion of the foregoing
22 requirements.

23 7. The prescription must be written in a form that
24 complies with chapter 499 and must contain, in addition to the
25 supervisory physician's name, address, and telephone number,
26 the physician assistant's prescriber number. The prescription
27 must be filled in a pharmacy permitted under chapter 465 and
28 must be dispensed in that pharmacy by a pharmacist licensed
29 under chapter 465. The appearance of the prescriber number
30 creates a presumption that the physician assistant is
31

1 authorized to prescribe the medicinal drug and the
2 prescription is valid.

3 8. The physician assistant must note the prescription
4 in the appropriate medical record, and the supervisory
5 physician must review and sign each notation. For dispensing
6 purposes only, the failure of the supervisory physician to
7 comply with these requirements does not affect the validity of
8 the prescription.

9 9. This paragraph does not prohibit a supervisory
10 physician from delegating to a physician assistant the
11 authority to order medication for a hospitalized patient of
12 the supervisory physician.

13
14 This paragraph does not apply to facilities licensed pursuant
15 to chapter 395.

16 (f)1. There is created a five-member committee
17 appointed by the Secretary ~~Director~~ of Health ~~Care~~
18 ~~Administration~~. The committee must be composed of one fully
19 licensed ~~certified~~ physician assistant licensed ~~certified~~
20 pursuant to this section or s. 459.022, two physicians
21 licensed pursuant to this chapter, one of whom supervises a
22 fully licensed physician assistant, one osteopathic physician
23 licensed pursuant to chapter 459, and one pharmacist licensed
24 pursuant to chapter 465 who is not licensed pursuant to this
25 chapter or chapter 459. The committee shall establish a
26 formulary of medicinal drugs for which a fully licensed
27 ~~certified~~ physician assistant may prescribe. The formulary
28 may not include controlled substances as defined in chapter
29 893, antineoplastics, antipsychotics, radiopharmaceuticals,
30 general anesthetics or radiographic contrast materials, or any
31 parenteral preparations except insulin and epinephrine.

1 2. Only the committee shall add to, delete from, or
2 modify the formulary. Any person who requests an addition,
3 deletion, or modification of a medicinal drug listed on such
4 formulary has the burden of proof to show cause why such
5 addition, deletion, or modification should be made.

6 3. The boards shall adopt the formulary required by
7 this paragraph, and each addition, deletion, or modification
8 to the formulary, by rule. Notwithstanding any provision of
9 chapter 120 to the contrary, the formulary rule shall be
10 effective 60 days after the date it is filed with the
11 Secretary of State. Upon adoption of the formulary, the
12 department shall mail a copy of such formulary to each fully
13 licensed ~~certified~~ physician assistant and to each pharmacy
14 licensed by the state. The boards shall establish, by rule, a
15 fee not to exceed \$200 to fund the provisions of this
16 paragraph and paragraph (e).

17 (5) PERFORMANCE BY TRAINEES.--Notwithstanding any
18 other law, a trainee may perform medical services when such
19 services are rendered within the scope of an approved program.

20 (6) PROGRAM APPROVAL.--

21 (a) The boards shall approve programs, based on
22 recommendations by the council, for the education and training
23 of physician assistants which meet standards established by
24 rule of the boards. The council may recommend only those
25 physician assistant programs that hold full accreditation or
26 provisional accreditation from the Commission on Accreditation
27 of Allied Health Programs or its successor organization. Any
28 educational institution offering a physician assistant program
29 approved by the boards pursuant to this paragraph may also
30 offer the physician assistant program authorized in paragraph
31 (c) for unlicensed physicians.

1 (b) The boards shall adopt and publish standards to
2 ensure that such programs operate in a manner that does not
3 endanger the health or welfare of the patients who receive
4 services within the scope of the programs. The boards shall
5 review the quality of the curricula, faculties, and facilities
6 of such programs and take whatever other action is necessary
7 to determine that the purposes of this section are being met.

8 (c) Any community college with the approval of the
9 State Board of Community Colleges may conduct a physician
10 assistant program which shall apply for national accreditation
11 through the American Medical Association's Committee on Allied
12 Health, Education, and Accreditation, or its successor
13 organization, and which may admit unlicensed physicians, as
14 authorized in subsection (7), who are graduates of foreign
15 medical schools listed with the World Health Organization.
16 The unlicensed physician must have been a resident of this
17 state for a minimum of 12 months immediately prior to
18 admission to the program. An evaluation of knowledge base by
19 examination shall be required to grant advanced academic
20 credit and to fulfill the necessary requirements to graduate.
21 A minimum of one 16-week semester of supervised clinical and
22 didactic education, which may be completed simultaneously,
23 shall be required before graduation from the program. All
24 other provisions of this section shall remain in effect.

25 (7) PHYSICIAN ASSISTANT LICENSURE ~~CERTIFICATION~~.--

26 (a) Any person desiring to be licensed ~~certified~~ as a
27 physician assistant must apply to the department. The
28 department shall issue a license ~~certificate~~ to any person
29 certified by the council as having met the following
30 requirements:

- 31 1. Is at least 18 years of age.

1 2. Has satisfactorily passed a proficiency examination
2 by an acceptable score established by the National Commission
3 on Certification of Physician Assistants. If an applicant
4 does not hold a current certificate issued by the National
5 Commission on Certification of Physician Assistants and has
6 not actively practiced as a physician assistant within the
7 immediately preceding 4 years, the applicant must retake and
8 successfully complete the entry-level examination of the
9 National Commission on Certification of Physician Assistants
10 to be eligible for licensure ~~certification~~.

11 3. Has completed the application form and remitted an
12 application fee not to exceed \$300 as set by the boards. An
13 application for licensure ~~certification~~ made by a physician
14 assistant must include:

15 a. A certificate of completion of a physician
16 assistant training program specified in subsection (6).

17 b. A sworn statement of any prior felony convictions.

18 c. A sworn statement of any previous revocation or
19 denial of licensure or certification in any state.

20 d. Two letters of recommendation.

21 (b)1. Notwithstanding subparagraph (a)2. and
22 sub-subparagraph (a)3.a., the department shall examine each
23 applicant who the Board of Medicine certifies:

24 a. Has completed the application form and remitted a
25 nonrefundable application fee not to exceed \$500 and an
26 examination fee not to exceed \$300, plus the actual cost to
27 the department to provide the examination. The examination
28 fee is refundable if the applicant is found to be ineligible
29 to take the examination. The department shall not require the
30 applicant to pass a separate practical component of the
31 examination. For examinations given after July 1, 1998,

1 competencies measured through practical examinations shall be
2 incorporated into the written examination through a
3 multiple-choice format.The department shall translate the
4 examination into the native language of any applicant who
5 requests and agrees to pay all costs of such translation,
6 provided that the translation request is filed with the board
7 office no later than 9 months before the scheduled examination
8 and the applicant remits translation fees as specified by the
9 department no later than 6 months before the scheduled
10 examination, and provided that the applicant demonstrates to
11 the department the ability to communicate orally in basic
12 English. If the applicant is unable to pay translation costs,
13 the applicant may take the next available examination in
14 English if the applicant submits a request in writing by the
15 application deadline and if the applicant is otherwise
16 eligible under this section. To demonstrate the ability to
17 communicate orally in basic English, a passing score or grade
18 is required, as determined by the department or organization
19 that developed it, on one of the following English
20 examinations:

21 (I) The test for spoken English (TSE), by the
22 Educational Testing Service (ETS);

23 (II) The test of English as a foreign language
24 (TOEFL), by ETS;

25 (III) A high school or college level English Course;
26 or

27 (IV) The English examination for citizenship, by the
28 United States Immigration and Naturalization Service.

29
30
31

1 A notarized copy of an Educational Commission for Foreign
2 Medical Graduates (ECFMG) certificate may also be used to
3 demonstrate the ability to communicate in basic English.

4 b. Is an unlicensed physician who graduated from a
5 foreign medical school listed with the World Health
6 Organization who has not previously taken and failed the
7 examination of the National Commission on Certification of
8 Physician Assistants and who has been certified by the Board
9 of Medicine as having met the requirements for licensure as a
10 medical doctor by examination as set forth in s. 458.311(1),
11 (3), (4), and (5), with the exception that the applicant is
12 not required to have completed an approved residency of at
13 least 1 year and the applicant is not required to have passed
14 the licensing examination specified under s. 458.311 or hold a
15 valid, active certificate issued by the Educational Commission
16 for Foreign Medical Graduates.

17 c. Was eligible and made initial application for
18 certification as a physician assistant in this state between
19 July 1, 1990, and June 30, 1991.

20 d. Was a resident of this state on July 1, 1990, or
21 was licensed or certified in any state in the United States as
22 a physician assistant on July 1, 1990.

23 2. The department may grant temporary licensure
24 ~~certification~~ to an applicant who meets the requirements of
25 subparagraph 1. Between meetings of the council, the
26 department may grant temporary licensure ~~certification~~ to
27 practice based on the completion of all temporary licensure
28 ~~certification~~ requirements. All such administratively issued
29 licenses ~~certifications~~ shall be reviewed and acted on at the
30 next regular meeting of the council. A temporary license
31 ~~certificate~~ expires upon receipt and notice of scores to the

1 ~~licensee certificateholder~~ from the first available
2 examination specified in subparagraph 1. following licensure
3 ~~certification~~ by the department. An applicant who fails the
4 proficiency examination is no longer temporarily licensed
5 ~~certified~~, but may apply for a one-time extension of temporary
6 licensure certification after reapplying for the next
7 available examination. Extended licensure certification shall
8 expire upon failure of the ~~licensee certificateholder~~ to sit
9 for the next available examination or upon receipt and notice
10 of scores to the ~~licensee certificateholder~~ from such
11 examination.

12 3. Notwithstanding any other provision of law, the
13 examination specified pursuant to subparagraph 1. shall be
14 administered by the department only five times. Applicants
15 certified by the board for examination shall receive at least
16 6 months' notice of eligibility prior to the administration of
17 the initial examination. Subsequent examinations shall be
18 administered at 1-year intervals following ~~determined by the~~
19 ~~department after~~ the reporting of the scores of the first and
20 subsequent examinations ~~examination~~. For the purposes of this
21 paragraph, the department may develop, contract for the
22 development of, purchase, or approve an examination, including
23 a practical component, that adequately measures an applicant's
24 ability to practice with reasonable skill and safety. The
25 minimum passing score on the examination shall be established
26 by the department, with the advice of the board. Those
27 applicants failing to pass that examination or any subsequent
28 examination shall receive notice of the administration of the
29 next examination with the notice of scores following such
30 examination. Any applicant who passes the examination and
31 meets the requirements of this section shall be licensed

1 ~~certified~~ as a physician assistant with all rights defined
2 thereby.

3 (c) The license ~~certification~~ must be renewed
4 biennially. Each renewal must include:

5 1. A renewal fee not to exceed \$500 as set by the
6 boards.

7 2. A sworn statement of no felony convictions in the
8 previous 2 years.

9 (d) Each licensed ~~certified~~ physician assistant shall
10 biennially complete 100 hours of continuing medical education
11 or shall hold a current certificate issued by the National
12 Commission on Certification of Physician Assistants.

13 (e) Upon employment as a physician assistant, a
14 licensed ~~certified~~ physician assistant must notify the
15 department in writing within 30 days after such employment or
16 after any subsequent changes in the supervising physician. The
17 notification must include the full name, Florida medical
18 license number, specialty, and address of the supervising
19 physician.

20 (f) Notwithstanding subparagraph (a)2., the department
21 may grant to a recent graduate of an approved program, as
22 specified in subsection (6), a temporary license ~~certification~~
23 to expire upon receipt of scores of the proficiency
24 examination administered by the National Commission on
25 Certification of Physician Assistants. Between meetings of
26 the council, the department may grant a temporary license
27 ~~certification~~ to practice based on the completion of all
28 temporary licensure ~~certification~~ requirements. All such
29 administratively issued licenses ~~certifications~~ shall be
30 reviewed and acted on at the next regular meeting of the
31 council. The recent graduate may be licensed ~~certified~~ prior

1 to employment, but must comply with paragraph (e). An
2 applicant who has passed the proficiency examination may be
3 granted permanent licensure ~~certification~~. An applicant
4 failing the proficiency examination is no longer temporarily
5 licensed ~~certified~~, but may reapply for a 1-year extension of
6 temporary licensure ~~certification~~. An applicant may not be
7 granted more than two temporary licenses ~~certificates~~ and may
8 not be licensed ~~certified~~ as a physician assistant until he or
9 she passes the examination administered by the National
10 Commission on Certification of Physician Assistants. As
11 prescribed by board rule, the council may require an applicant
12 who does not pass the licensing examination after five or more
13 attempts to complete additional remedial education or
14 training. The council shall prescribe the additional
15 requirements in a manner that permits the applicant to
16 complete the requirements and be reexamined within 2 years
17 after the date the applicant petitions the council to retake
18 the examination a sixth or subsequent time.

19 (g) The Board of Medicine may impose any of the
20 penalties specified in ss. 455.227 and 458.331(2) upon a
21 physician assistant if the physician assistant or the
22 supervising physician has been found guilty of or is being
23 investigated for any act that constitutes a violation of this
24 chapter or chapter 455.

25 (8) DELEGATION OF POWERS AND DUTIES.--The boards may
26 delegate such powers and duties to the council as they may
27 deem proper.

28 (9) COUNCIL ON PHYSICIAN ASSISTANTS.--The Council on
29 Physician Assistants is created within the department.

30 (a) The council shall consist of five members
31 appointed as follows:

1 1. The chairperson of the Board of Medicine shall
2 appoint three members who are physicians and members of the
3 Board of Medicine. One of the physicians must supervise a
4 physician assistant in the physician's practice.

5 2. The chairperson of the Board of Osteopathic
6 Medicine shall appoint one member who is a physician and a
7 member of the Board of Osteopathic Medicine.

8 3. The secretary of the department or his or her
9 designee shall appoint a fully licensed ~~certified~~ physician
10 assistant licensed under this chapter or chapter 459.

11 (b) Two of the members appointed to the council must
12 be physicians who supervise physician assistants in their
13 practice. Members shall be appointed to terms of 4 years,
14 except that of the initial appointments, two members shall be
15 appointed to terms of 2 years, two members shall be appointed
16 to terms of 3 years, and one member shall be appointed to a
17 term of 4 years, as established by rule of the boards.
18 Council members may not serve more than two consecutive terms.
19 The council shall annually elect a chairperson from among its
20 members.

21 (c) The council shall:

22 1. Recommend to the department the licensure
23 ~~certification~~ of physician assistants.

24 2. Develop all rules regulating the use of physician
25 assistants by physicians under this chapter and chapter 459,
26 except for rules relating to the formulary developed under
27 paragraph (4)(f). The council shall also develop rules to
28 ensure that the continuity of supervision is maintained in
29 each practice setting. The boards shall consider adopting a
30 proposed rule developed by the council at the regularly
31 scheduled meeting immediately following the submission of the

1 proposed rule by the council. A proposed rule submitted by
2 the council may not be adopted by either board unless both
3 boards have accepted and approved the identical language
4 contained in the proposed rule. The language of all proposed
5 rules submitted by the council must be approved by both boards
6 pursuant to each respective board's guidelines and standards
7 regarding the adoption of proposed rules. If either board
8 rejects the council's proposed rule, that board must specify
9 its objection to the council with particularity and include
10 any recommendations it may have for the modification of the
11 proposed rule.

12 3. Make recommendations to the boards regarding all
13 matters relating to physician assistants.

14 4. Address concerns and problems of practicing
15 physician assistants in order to improve safety in the
16 clinical practices of licensed ~~certified~~ physician assistants.

17 (10) INACTIVE AND DELINQUENT STATUS.--A license
18 ~~certificate~~ on inactive or delinquent status may be
19 reactivated only as provided in s. 455.271.

20 (11) PENALTY.--Any person who has not been licensed
21 ~~certified~~ by the council and approved by the department and
22 who holds himself or herself out as a physician assistant or
23 who uses any other term in indicating or implying that he or
24 she is a physician assistant commits a felony of the third
25 degree, punishable as provided in s. 775.082 or s. 775.084 or
26 by a fine not exceeding \$5,000.

27 (12) DENIAL, SUSPENSION, OR REVOCATION OF LICENSURE
28 ~~CERTIFICATION~~.--The boards may deny, suspend, or revoke a
29 physician assistant license ~~certification~~ if a board
30 determines that the physician assistant has violated this
31 chapter.

1 (13) RULES.--The boards shall adopt rules to implement
2 this section, including rules detailing the contents of the
3 application for licensure ~~certification~~ and notification
4 pursuant to subsection (7) and rules to ensure both the
5 continued competency of physician assistants and the proper
6 utilization of them by physicians or groups of physicians.

7 (14) EXISTING PROGRAMS.--This section does not
8 eliminate or supersede existing laws relating to other
9 paramedical professions or services and is supplemental to all
10 such existing laws relating to the licensure ~~certification~~ and
11 practice of paramedical professions.

12 (15) LIABILITY.--Each supervising physician using a
13 physician assistant is liable for any acts or omissions of the
14 physician assistant acting under the physician's supervision
15 and control.

16 (16) LEGAL SERVICES.--The Department of Legal Affairs
17 shall provide legal services to the council as authorized in
18 s. 455.221(1).

19 (17) FEES.--The department shall allocate the fees
20 collected under this section to the council.

21 Section 2. Section 459.022, Florida Statutes, is
22 amended to read:

23 459.022 Physician assistants.--

24 (1) LEGISLATIVE INTENT.--

25 (a) The purpose of this section is to encourage more
26 effective utilization of the skills of osteopathic physicians
27 or groups of osteopathic physicians by enabling them to
28 delegate health care tasks to qualified assistants when such
29 delegation is consistent with the patient's health and
30 welfare.

31

1 (b) In order that maximum skills may be obtained
2 within a minimum time period of education, a physician
3 assistant shall be specialized to the extent that she or he
4 can operate efficiently and effectively in the specialty areas
5 in which she or he has been trained or is experienced.

6 (c) The purpose of this section is to encourage the
7 utilization of physician assistants by osteopathic physicians
8 and to allow for innovative development of programs for the
9 education of physician assistants.

10 (2) DEFINITIONS.--As used in this section:

11 (a) "Approved program" means a program, formally
12 approved by the boards, for the education of physician
13 assistants.

14 (b) "Boards" means the Board of Medicine and the Board
15 of Osteopathic Medicine.

16 (c) "Council" means the Council on Physician
17 Assistants.

18 (d) "Trainee" means a person who is currently enrolled
19 in an approved program.

20 (e) "Physician assistant" means a person who is a
21 graduate of an approved program or its equivalent or meets
22 standards approved by the boards and is licensed ~~certified~~ to
23 perform medical services delegated by the supervising
24 physician.

25 (f) "Supervision" means responsible supervision and
26 control. Except in cases of emergency, supervision requires
27 the easy availability or physical presence of the licensed
28 physician for consultation and direction of the actions of the
29 physician assistant. For the purposes of this definition, the
30 term "easy availability" includes the ability to communicate
31 by way of telecommunication. The boards shall establish rules

1 as to what constitutes responsible supervision of the
2 physician assistant.

3 (g) "Proficiency examination" means an entry-level
4 examination approved by the boards, including, but not limited
5 to, those examinations administered by the National Commission
6 on Certification of Physician Assistants.

7 (h) "Continuing medical education" means courses
8 recognized and approved by the boards, the American Academy of
9 Physician Assistants, the American Medical Association, the
10 American Osteopathic Association, or the Accreditation Council
11 on Continuing Medical Education.

12 (3) PERFORMANCE OF SUPERVISING PHYSICIAN.--Each
13 physician or group of physicians supervising a licensed
14 ~~certified~~ physician assistant must be qualified in the medical
15 areas in which the physician assistant is to perform and shall
16 be individually or collectively responsible and liable for the
17 performance and the acts and omissions of the physician
18 assistant. A physician may not supervise more than four
19 currently licensed ~~certified~~ physician assistants at any one
20 time.

21 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.--

22 (a) The boards shall adopt, by rule, the general
23 principles that supervising physicians must use in developing
24 the scope of practice of a physician assistant under direct
25 supervision and under indirect supervision. These principles
26 shall recognize the diversity of both specialty and practice
27 settings in which physician assistants are used.

28 (b) This chapter does not prevent third-party payors
29 from reimbursing employers of physician assistants for covered
30 services rendered by licensed ~~certified~~ physician assistants.

31

1 (c) Licensed ~~Certified~~ physician assistants may not be
2 denied clinical hospital privileges, except for cause, so long
3 as the supervising physician is a staff member in good
4 standing.

5 (d) A supervisory physician may delegate to a licensed
6 ~~certified~~ physician assistant, pursuant to a written protocol,
7 the authority to act according to s. 154.04(1)(c). Such
8 delegated authority is limited to the supervising physician's
9 practice in connection with a county health department as
10 defined and established pursuant to chapter 154. The boards
11 shall adopt rules governing the supervision of physician
12 assistants by physicians in county health departments.

13 (e) A supervisory physician may delegate to a fully
14 licensed ~~certified~~ physician assistant the authority to
15 prescribe any medication used in the supervisory physician's
16 practice if such medication is listed on the formulary created
17 pursuant to s. 458.347. A fully licensed ~~certified~~ physician
18 assistant may only prescribe such medication under the
19 following circumstances:

20 1. A physician assistant must clearly identify to the
21 patient that she or he is a physician assistant. Furthermore,
22 the physician assistant must inform the patient that the
23 patient has the right to see the physician prior to any
24 prescription being prescribed by the physician assistant.

25 2. The supervisory physician must notify the
26 department of her or his intent to delegate, on a
27 department-approved form, before delegating such authority and
28 notify the department of any change in prescriptive privileges
29 ~~of with each certification renewal application filed by the~~
30 physician assistant.

31

1 3. The physician assistant must file with the
2 department, before commencing to prescribe, evidence that she
3 or he has completed a continuing medical education course of
4 at least 3 classroom hours in prescriptive practice, conducted
5 by an accredited program approved by the boards, which course
6 covers the limitations, responsibilities, and privileges
7 involved in prescribing medicinal drugs, or evidence that she
8 or he has received education comparable to the continuing
9 education course as part of an accredited physician assistant
10 training program.

11 4. The physician assistant must file with the
12 department, before commencing to prescribe, evidence that the
13 physician assistant has a minimum of 3 months of clinical
14 experience in the specialty area of the supervising physician.

15 5. The physician assistant must file with the
16 department a signed affidavit that she or he has completed a
17 minimum of 10 continuing medical education hours in the
18 specialty practice in which the physician assistant has
19 prescriptive privileges with each licensure ~~certification~~
20 renewal application.

21 6. The department shall issue a license ~~certification~~
22 and a prescriber number to the physician assistant granting
23 authority for the prescribing of medicinal drugs authorized
24 within this paragraph upon completion of the foregoing
25 requirements.

26 7. The prescription must be written in a form that
27 complies with chapter 499 and must contain, in addition to the
28 supervisory physician's name, address, and telephone number,
29 the physician assistant's prescriber number. The prescription
30 must be filled in a pharmacy permitted under chapter 465, and
31 must be dispensed in that pharmacy by a pharmacist licensed

1 under chapter 465. The appearance of the prescriber number
2 creates a presumption that the physician assistant is
3 authorized to prescribe the medicinal drug and the
4 prescription is valid.

5 8. The physician assistant must note the prescription
6 in the appropriate medical record, and the supervisory
7 physician must review and sign each notation. For dispensing
8 purposes only, the failure of the supervisory physician to
9 comply with these requirements does not affect the validity of
10 the prescription.

11 9. This paragraph does not prohibit a supervisory
12 physician from delegating to a physician assistant the
13 authority to order medication for a hospitalized patient of
14 the supervisory physician.

15
16 This paragraph does not apply to facilities licensed pursuant
17 to chapter 395.

18 (f)1. There is created a five-member committee
19 appointed by the Secretary ~~Director~~ of Health ~~Care~~
20 ~~Administration~~. The committee must be composed of one fully
21 licensed ~~certified~~ physician assistant licensed ~~certified~~
22 pursuant to this section or s. 458.347, two physicians
23 licensed pursuant to chapter 458, one of whom supervises a
24 fully licensed physician assistant, one osteopathic physician
25 licensed pursuant to this chapter, and one pharmacist licensed
26 pursuant to chapter 465 who is not licensed pursuant to this
27 chapter or chapter 458. The committee shall establish a
28 formulary of medicinal drugs for which a fully licensed
29 ~~certified~~ physician assistant may prescribe. The formulary
30 may not include controlled substances as defined in chapter
31 893, antineoplastics, antipsychotics, radiopharmaceuticals,

1 general anesthetics or radiographic contrast materials, or any
2 parenteral preparations except insulin and epinephrine.

3 2. Only the committee shall add to, delete from, or
4 modify the formulary. Any person who requests an addition,
5 deletion, or modification of a medicinal drug listed on such
6 formulary has the burden of proof to show cause why such
7 addition, deletion, or modification should be made.

8 3. The boards shall adopt the formulary required by
9 this paragraph, and each addition, deletion, or modification
10 to the formulary, by rule. Notwithstanding any provision of
11 chapter 120 to the contrary, the formulary rule shall be
12 effective 60 days after the date it is filed with the
13 Secretary of State. Upon adoption of the formulary, the
14 department shall mail a copy of such formulary to each fully
15 licensed ~~certified~~ physician assistant and to each pharmacy
16 licensed by the state. The boards shall establish, by rule, a
17 fee not to exceed \$200 to fund the provisions of this
18 paragraph and paragraph (e).

19 (5) PERFORMANCE BY TRAINEES.--Notwithstanding any
20 other law, a trainee may perform medical services when such
21 services are rendered within the scope of an approved program.

22 (6) PROGRAM APPROVAL.--

23 (a) The boards shall approve programs, based on
24 recommendations by the council, for the education and training
25 of physician assistants which meet standards established by
26 rule of the boards. The council may recommend only those
27 physician assistant programs that hold full accreditation or
28 provisional accreditation from the Commission on Accreditation
29 of Allied Health Programs or its successor organization.

30 (b) The boards shall adopt and publish standards to
31 ensure that such programs operate in a manner that does not

1 endanger the health or welfare of the patients who receive
2 services within the scope of the programs. The boards shall
3 review the quality of the curricula, faculties, and facilities
4 of such programs and take whatever other action is necessary
5 to determine that the purposes of this section are being met.

6 (7) PHYSICIAN ASSISTANT LICENSURE ~~CERTIFICATION~~.--

7 (a) Any person desiring to be licensed ~~certified~~ as a
8 physician assistant must apply to the department. The
9 department shall issue a license ~~certificate~~ to any person
10 certified by the council as having met the following
11 requirements:

12 1. Is at least 18 years of age.

13 2. Has satisfactorily passed a proficiency examination
14 by an acceptable score established by the National Commission
15 on Certification of Physician Assistants. If an applicant
16 does not hold a current certificate issued by the National
17 Commission on Certification of Physician Assistants and has
18 not actively practiced as a physician assistant within the
19 immediately preceding 4 years, the applicant must retake and
20 successfully complete the entry-level examination of the
21 National Commission on Certification of Physician Assistants
22 to be eligible for licensure ~~certification~~.

23 3. Has completed the application form and remitted an
24 application fee not to exceed \$300 as set by the boards. An
25 application for licensure ~~certification~~ made by a physician
26 assistant must include:

27 a. A certificate of completion of a physician
28 assistant training program specified in subsection (6).

29 b. A sworn statement of any prior felony convictions.

30 c. A sworn statement of any previous revocation or
31 denial of licensure or certification in any state.

1 d. Two letters of recommendation.

2 (b) The licensure ~~certification~~ must be renewed
3 biennially. Each renewal must include:

4 1. A renewal fee not to exceed \$500 as set by the
5 boards.

6 2. A sworn statement of no felony convictions in the
7 previous 2 years.

8 (c) Each licensed ~~certified~~ physician assistant shall
9 biennially complete 100 hours of continuing medical education
10 or shall hold a current certificate issued by the National
11 Commission on Certification of Physician Assistants.

12 (d) Upon employment as a physician assistant, a
13 licensed ~~certified~~ physician assistant must notify the
14 department in writing within 30 days after such employment or
15 after any subsequent changes in the supervising physician.
16 The notification must include the full name, Florida medical
17 license number, specialty, and address of the supervising
18 physician.

19 (e) Notwithstanding subparagraph (a)2., the department
20 may grant to a recent graduate of an approved program, as
21 specified in subsection (6), a temporary license ~~certification~~
22 to expire upon receipt of scores of the proficiency
23 examination administered by the National Commission on
24 Certification of Physician Assistants. Between meetings of
25 the council, the department may grant a temporary license
26 ~~certification~~ to practice to physician assistant applicants
27 based on the completion of all temporary licensure
28 ~~certification~~ requirements. All such administratively issued
29 licenses ~~certifications~~ shall be reviewed and acted on at the
30 next regular meeting of the council. The recent graduate may
31 be licensed ~~certified~~ prior to employment, but must comply

1 with paragraph (d). An applicant who has passed the
2 proficiency examination may be granted permanent licensure
3 ~~certification~~. An applicant failing the proficiency
4 examination is no longer temporarily licensed ~~certified~~, but
5 may reapply for a 1-year extension of temporary licensure
6 ~~certification~~. An applicant may not be granted more than two
7 temporary licenses ~~certificates~~ and may not be licensed
8 ~~certified~~ as a physician assistant until she or he passes the
9 examination administered by the National Commission on
10 Certification of Physician Assistants. As prescribed by board
11 rule, the council may require an applicant who does not pass
12 the licensing examination after five or more attempts to
13 complete additional remedial education or training. The
14 council shall prescribe the additional requirements in a
15 manner that permits the applicant to complete the requirements
16 and be reexamined within 2 years after the date the applicant
17 petitions the council to retake the examination a sixth or
18 subsequent time.

19 (f) The Board of Osteopathic Medicine may impose any
20 of the penalties specified in ss. 455.227 and 459.015(2) upon
21 a physician assistant if the physician assistant or the
22 supervising physician has been found guilty of or is being
23 investigated for any act that constitutes a violation of this
24 chapter or chapter 455.

25 (8) DELEGATION OF POWERS AND DUTIES.--The boards may
26 delegate such powers and duties to the council as they may
27 deem proper.

28 (9) COUNCIL ON PHYSICIAN ASSISTANTS.--The Council on
29 Physician Assistants is created within the department.

30 (a) The council shall consist of five members
31 appointed as follows:

1 1. The chairperson of the Board of Medicine shall
2 appoint three members who are physicians and members of the
3 Board of Medicine. One of the physicians must supervise a
4 physician assistant in the physician's practice.

5 2. The chairperson of the Board of Osteopathic
6 Medicine shall appoint one member who is a physician and a
7 member of the Board of Osteopathic Medicine.

8 3. The secretary of the department or her or his
9 designee shall appoint a fully licensed ~~certified~~ physician
10 assistant licensed under chapter 458 or this chapter.

11 (b) Two of the members appointed to the council must
12 be physicians who supervise physician assistants in their
13 practice. Members shall be appointed to terms of 4 years,
14 except that of the initial appointments, two members shall be
15 appointed to terms of 2 years, two members shall be appointed
16 to terms of 3 years, and one member shall be appointed to a
17 term of 4 years, as established by rule of the boards.
18 Council members may not serve more than two consecutive terms.
19 The council shall annually elect a chairperson from among its
20 members.

21 (c) The council shall:

22 1. Recommend to the department the licensure
23 ~~certification~~ of physician assistants.

24 2. Develop all rules regulating the use of physician
25 assistants by physicians under chapter 458 and this chapter,
26 except for rules relating to the formulary developed under s.
27 458.347(4)(f). The council shall also develop rules to ensure
28 that the continuity of supervision is maintained in each
29 practice setting. The boards shall consider adopting a
30 proposed rule developed by the council at the regularly
31 scheduled meeting immediately following the submission of the

1 proposed rule by the council. A proposed rule submitted by
2 the council may not be adopted by either board unless both
3 boards have accepted and approved the identical language
4 contained in the proposed rule. The language of all proposed
5 rules submitted by the council must be approved by both boards
6 pursuant to each respective board's guidelines and standards
7 regarding the adoption of proposed rules. If either board
8 rejects the council's proposed rule, that board must specify
9 its objection to the council with particularity and include
10 any recommendations it may have for the modification of the
11 proposed rule.

12 3. Make recommendations to the boards regarding all
13 matters relating to physician assistants.

14 4. Address concerns and problems of practicing
15 physician assistants in order to improve safety in the
16 clinical practices of licensed ~~certified~~ physician assistants.

17 (10) INACTIVE AND DELINQUENT STATUS.--A license
18 ~~certificate~~ on inactive or delinquent status may be
19 reactivated only as provided in s. 455.271.

20 (11) PENALTY.--Any person who has not been licensed
21 ~~certified~~ by the council and approved by the department and
22 who holds herself or himself out as a physician assistant or
23 who uses any other term in indicating or implying that she or
24 he is a physician assistant commits a felony of the third
25 degree, punishable as provided in s. 775.082 or s. 775.084 or
26 by a fine not exceeding \$5,000.

27 (12) DENIAL, SUSPENSION, OR REVOCATION OF LICENSURE
28 ~~CERTIFICATION~~.--The boards may deny, suspend, or revoke a
29 physician assistant license ~~certification~~ if a board
30 determines that the physician assistant has violated this
31 chapter.

1 (13) RULES.--The boards shall adopt rules to implement
2 this section, including rules detailing the contents of the
3 application for licensure ~~certification~~ and notification
4 pursuant to subsection (7) and rules to ensure both the
5 continued competency of physician assistants and the proper
6 utilization of them by physicians or groups of physicians.

7 (14) EXISTING PROGRAMS.--This section does not
8 eliminate or supersede existing laws relating to other
9 paramedical professions or services and is supplemental to all
10 such existing laws relating to the licensure ~~certification~~ and
11 practice of paramedical professions.

12 (15) LIABILITY.--Each supervising physician using a
13 physician assistant is liable for any acts or omissions of the
14 physician assistant acting under the physician's supervision
15 and control.

16 (16) LEGAL SERVICES.--The Department of Legal Affairs
17 shall provide legal services to the council as authorized in
18 s. 455.221(1).

19 (17) FEES.--The department shall allocate the fees
20 collected under this section to the council.

21 Section 3. Subsection (29) of section 39.01, Florida
22 Statutes, is amended to read:

23 39.01 Definitions.--When used in this chapter:

24 (29) "Licensed health care professional" means a
25 physician licensed under chapter 458, an osteopathic physician
26 licensed under chapter 459, a nurse licensed under chapter
27 464, a physician assistant licensed ~~certified~~ under chapter
28 458 or chapter 459, or a dentist licensed under chapter 466.

29 Section 4. Paragraph (c) of subsection (1) of section
30 154.04, Florida Statutes, is amended to read:

31

1 154.04 Personnel of county health departments; duties;
2 compensation.--
3 (1)
4 (c)1. A registered nurse or licensed ~~certified~~
5 physician assistant working in a county health department is
6 authorized to assess a patient and order medications, provided
7 that:
8 a. No licensed physician is on the premises;
9 b. The patient is assessed and medication ordered in
10 accordance with rules promulgated by the department and
11 pursuant to a protocol approved by a physician who supervises
12 the patient care activities of the registered nurse or
13 licensed ~~certified~~ physician assistant;
14 c. The patient is being assessed by the registered
15 nurse or licensed ~~certified~~ physician assistant as a part of a
16 program approved by the department; and
17 d. The medication ordered appears on a formulary
18 approved by the department and is prepackaged and prelabeled
19 with dosage instructions and distributed from a source
20 authorized under chapter 499 to repackage and distribute
21 drugs, which source is under the supervision of a consultant
22 pharmacist employed by the department.
23 2. Each county health department shall adopt written
24 protocols which provide for supervision of the registered
25 nurse or licensed ~~certified~~ physician assistant by a physician
26 licensed pursuant to chapter 458 or chapter 459 and for the
27 procedures by which patients may be assessed, and medications
28 ordered and delivered, by the registered nurse or licensed
29 ~~certified~~ physician assistant. Such protocols shall be signed
30 by the supervising physician, the director of the county
31

1 health department, and the registered nurse or licensed
2 ~~certified~~ physician assistant.

3 3. Each county health department shall maintain and
4 have available for inspection by representatives of the
5 Department of Health all medical records and patient care
6 protocols, including records of medications delivered to
7 patients, in accordance with rules of the department.

8 4. The Department of Health shall adopt rules which
9 establish the conditions under which a registered nurse or
10 licensed ~~certified~~ physician assistant may assess patients and
11 order and deliver medications, based upon written protocols of
12 supervision by a physician licensed pursuant to chapter 458 or
13 chapter 459, and which establish the formulary from which
14 medications may be ordered.

15 5. The department shall require that a consultant
16 pharmacist conduct a periodic inspection of each county health
17 department in meeting the requirements of this paragraph.

18 6. A county health department may establish or
19 contract with peer review committees or organizations to
20 review the quality of communicable disease control and primary
21 care services provided by the county health department.

22 Section 5. Paragraph (a) of subsection (1) of section
23 232.46, Florida Statutes, is amended to read:

24 232.46 Administration of medication by school district
25 personnel.--

26 (1) Notwithstanding the provisions of the Nurse
27 Practice Act, chapter 464, school district personnel shall be
28 authorized to assist students in the administration of
29 prescription medication when the following conditions have
30 been met:

31

1 (a) Each district school board shall include in its
2 approved school health services plan a procedure to provide
3 training, by a registered nurse, a licensed practical nurse, a
4 physician licensed pursuant to chapter 458 or chapter 459, or
5 a physician assistant licensed ~~certified~~ pursuant to chapter
6 458 or chapter 459, to the school personnel designated by the
7 principal to assist students in the administration of
8 prescribed medication. Such training may be provided in
9 collaboration with other school districts, through contract
10 with an education consortium, or by any other arrangement
11 consistent with the intent of this section.

12 Section 6. Subsections (2) and (3) of section 232.465,
13 Florida Statutes, are amended to read:

14 232.465 Provision of medical services; restrictions.--

15 (2) Nonmedical assistive personnel shall be allowed to
16 perform health-related services upon successful completion of
17 child-specific training by a registered nurse, a licensed
18 practical nurse, a physician licensed pursuant to chapter 458
19 or chapter 459, or a physician assistant licensed ~~certified~~
20 pursuant to chapter 458 or chapter 459. All procedures shall
21 be monitored periodically by the nurse. Those procedures
22 include, but are not limited to:

23 (a) Cleaning intermittent catheterization.

24 (b) Gastrostomy tube feeding.

25 (c) Monitoring blood glucose.

26 (d) Administering emergency injectable medication.

27 (3) For all other invasive medical services not listed
28 in subsection (1) or subsection (2), a registered nurse, a
29 licensed practical nurse, a physician licensed pursuant to
30 chapter 458 or chapter 459, or a physician assistant licensed
31 ~~certified~~ pursuant to chapter 458 or chapter 459 shall

1 determine if nonmedical school district personnel shall be
2 allowed to perform such service.

3 Section 7. Section 240.4067, Florida Statutes, is
4 amended to read:

5 240.4067 Medical Education Reimbursement and Loan
6 Repayment Program.--

7 (1) To encourage qualified medical professionals to
8 practice in underserved locations where there are shortages of
9 such personnel, there is established the Medical Education
10 Reimbursement and Loan Repayment Program. The function of the
11 program is to make payments that offset loans and educational
12 expenses incurred by students for studies leading to a medical
13 or nursing degree, medical or nursing licensure, or advanced
14 registered nurse practitioner ~~or physician's assistant~~
15 certification or physician assistant licensure. The following
16 licensed or certified health care professionals are eligible
17 to participate in this program: medical doctors with primary
18 care specialties, doctors of osteopathic medicine with primary
19 care specialties, physician's assistants, licensed practical
20 nurses and registered nurses, and advanced registered nurse
21 practitioners with primary care specialties such as certified
22 nurse midwives. Primary care medical specialties for
23 physicians include obstetrics, gynecology, general and family
24 practice, internal medicine, pediatrics, and other specialties
25 which may be identified by the Department of Health ~~and~~
26 ~~Rehabilitative Services~~.

27 (2) From the funds available, the Department of Health
28 ~~and Rehabilitative Services~~ shall make payments to selected
29 medical professionals as follows:

30 (a) Up to \$4,000 per year for licensed practical
31 nurses and registered nurses, up to \$10,000 per year for

1 advanced registered nurse practitioners and physician's
2 assistants, and up to \$20,000 per year for physicians.
3 Penalties for noncompliance shall be the same as those in the
4 National Health Services Corps Loan Repayment Program.
5 Educational expenses include costs for tuition, matriculation,
6 registration, books, laboratory and other fees, other
7 educational costs, and reasonable living expenses as
8 determined by the Department of Health ~~and Rehabilitative~~
9 ~~Services~~.

10 (b) All payments shall be contingent on continued
11 proof of primary care practice in an area defined in s.
12 395.602(2)(e), or an underserved area designated by the
13 Department of Health ~~and Rehabilitative Services~~, provided the
14 practitioner accepts Medicaid reimbursement if eligible for
15 such reimbursement. Correctional facilities, state hospitals,
16 and other state institutions that employ medical personnel
17 shall be designated by the Department of Health ~~and~~
18 ~~Rehabilitative Services~~ as underserved locations. Locations
19 with high incidences of infant mortality, high morbidity, or
20 low Medicaid participation by health care professionals may be
21 designated as underserved.

22 (c) The Department of Health ~~and Rehabilitative~~
23 ~~Services~~ may use funds appropriated for the Medical Education
24 Reimbursement and Loan Repayment Program as matching funds for
25 federal loan repayment programs such as the National Health
26 Service Corps State Loan Repayment Program.

27 (3) The Department of Health ~~and Rehabilitative~~
28 ~~Services~~ may adopt any rules necessary for the administration
29 of the Medical Education Reimbursement and Loan Repayment
30 Program. The department may also solicit technical advice
31 regarding conduct of the program from the Department of

1 Education and Florida universities and community colleges.
2 The Department of Health ~~and Rehabilitative Services~~ shall
3 submit a budget request for an amount sufficient to fund
4 medical education reimbursement, loan repayments, and program
5 administration.

6 Section 8. Paragraph (c) of subsection (2) of section
7 395.0191, Florida Statutes, is amended to read:

8 395.0191 Staff membership and clinical privileges.--
9 (2)

10 (c) Each licensed facility shall establish rules and
11 procedures for consideration of an application for clinical
12 privileges submitted by a physician assistant licensed
13 ~~certified~~ pursuant to s. 458.347 or s. 459.022. Clinical
14 privileges granted to a physician assistant pursuant to this
15 subsection shall automatically terminate upon termination of
16 staff membership of the physician assistant's supervising
17 physician.

18 Section 9. Paragraph (h) of subsection (4) of section
19 627.351, Florida Statutes, is amended to read:

20 627.351 Insurance risk apportionment plans.--

21 (4) MEDICAL MALPRACTICE RISK APPORTIONMENT.--

22 (h) As used in this subsection:

23 1. "Health care provider" means hospitals licensed
24 under chapter 395; physicians licensed under chapter 458;
25 osteopathic physicians licensed under chapter 459; podiatrists
26 licensed under chapter 461; dentists licensed under chapter
27 466; chiropractors licensed under chapter 460; naturopaths
28 licensed under chapter 462; nurses licensed under chapter 464;
29 midwives licensed under chapter 467; clinical laboratories
30 registered under chapter 483; physician assistants licensed
31 ~~certified~~ under chapter 458 or chapter 459; physical

1 therapists and physical therapist assistants licensed under
2 chapter 486; health maintenance organizations certificated
3 under part I of chapter 641; ambulatory surgical centers
4 licensed under chapter 395; other medical facilities as
5 defined in subparagraph 2.; blood banks, plasma centers,
6 industrial clinics, and renal dialysis facilities; or
7 professional associations, partnerships, corporations, joint
8 ventures, or other associations for professional activity by
9 health care providers.

10 2. "Other medical facility" means a facility the
11 primary purpose of which is to provide human medical
12 diagnostic services or a facility providing nonsurgical human
13 medical treatment, to which facility the patient is admitted
14 and from which facility the patient is discharged within the
15 same working day, and which facility is not part of a
16 hospital. However, a facility existing for the primary
17 purpose of performing terminations of pregnancy or an office
18 maintained by a physician or dentist for the practice of
19 medicine shall not be construed to be an "other medical
20 facility."

21 3. "Health care facility" means any hospital licensed
22 under chapter 395, health maintenance organization
23 certificated under part I of chapter 641, ambulatory surgical
24 center licensed under chapter 395, or other medical facility
25 as defined in subparagraph 2.

26 Section 10. Paragraph (b) of subsection (1) of section
27 627.357, Florida Statutes, is amended to read:

28 627.357 Medical malpractice self-insurance.--

29 (1) DEFINITIONS.--As used in this section, the term:

30 (b) "Health care provider" means any:

31 1. Hospital licensed under chapter 395.

- 1 2. Physician ~~licensed~~, or physician assistant licensed
2 ~~certified~~, under chapter 458.
- 3 3. Osteopathic physician or physician assistant
4 licensed under chapter 459.
- 5 4. Podiatrist licensed under chapter 461.
- 6 5. Health maintenance organization certificated under
7 part I of chapter 641.
- 8 6. Ambulatory surgical center licensed under chapter
9 395.
- 10 7. Chiropractor licensed under chapter 460.
- 11 8. Psychologist licensed under chapter 490.
- 12 9. Optometrist licensed under chapter 463.
- 13 10. Dentist licensed under chapter 466.
- 14 11. Pharmacist licensed under chapter 465.
- 15 12. Registered nurse, licensed practical nurse, or
16 advanced registered nurse practitioner licensed or registered
17 under chapter 464.
- 18 13. Other medical facility.
- 19 14. Professional association, partnership,
20 corporation, joint venture, or other association established
21 by the individuals set forth in subparagraphs 2., 3., 4., 7.,
22 8., 9., 10., 11., and 12. for professional activity.
- 23 Section 11. Paragraph (b) of subsection (1) of section
24 766.105, Florida Statutes, is amended to read:
- 25 766.105 Florida Patient's Compensation Fund.--
- 26 (1) DEFINITIONS.--The following definitions apply in
27 the interpretation and enforcement of this section:
- 28 (b) The term "health care provider" means any:
- 29 1. Hospital licensed under chapter 395.
- 30 2. Physician ~~licensed~~, or physician assistant licensed
31 ~~certified~~, under chapter 458.

- 1 3. Osteopathic physician or physician assistant
2 licensed under chapter 459.
- 3 4. Podiatrist licensed under chapter 461.
- 4 5. Health maintenance organization certificated under
5 part I of chapter 641.
- 6 6. Ambulatory surgical center licensed under chapter
7 395.
- 8 7. "Other medical facility" as defined in paragraph
9 (c).
- 10 8. Professional association, partnership, corporation,
11 joint venture, or other association by the individuals set
12 forth in subparagraphs 2., 3., and 4. for professional
13 activity.
- 14 Section 12. Paragraph (d) of subsection (3) of section
15 766.1115, Florida Statutes, is amended to read:
- 16 766.1115 Health care providers; creation of agency
17 relationship with governmental contractors.--
- 18 (3) DEFINITIONS.--As used in this section, the term:
- 19 (d) "Health care provider" or "provider" means:
- 20 1. A birth center licensed under chapter 383.
- 21 2. An ambulatory surgical center licensed under
22 chapter 395.
- 23 3. A hospital licensed under chapter 395.
- 24 4. A physician ~~licensed~~, or physician assistant
25 licensed ~~certified~~, under chapter 458.
- 26 5. An osteopathic physician ~~licensed~~, or osteopathic
27 physician assistant licensed ~~certified~~, under chapter 459.
- 28 6. A chiropractic physician licensed under chapter
29 460.
- 30 7. A podiatrist licensed under chapter 461.
- 31

1 8. A registered nurse, nurse midwife, licensed
2 practical nurse, or advanced registered nurse practitioner
3 licensed or registered under chapter 464 or any facility which
4 employs nurses licensed or registered under chapter 464 to
5 supply all or part of the care delivered under this section.

6 9. A midwife licensed under chapter 467.

7 10. A health maintenance organization certificated
8 under part I of chapter 641.

9 11. A health care professional association and its
10 employees or a corporate medical group and its employees.

11 12. Any other medical facility the primary purpose of
12 which is to deliver human medical diagnostic services or which
13 delivers nonsurgical human medical treatment, and which
14 includes an office maintained by a provider.

15 13. Any other health care professional, practitioner,
16 provider, or facility under contract with a governmental
17 contractor.

18
19 The term includes any nonprofit corporation qualified as
20 exempt from federal income taxation under s. 501(c) of the
21 Internal Revenue Code which delivers health care services
22 provided by licensed professionals listed in this paragraph,
23 any federally funded community health center, and any
24 volunteer corporation or volunteer health care provider that
25 delivers health care services.

26 Section 13. Subsection (36) of section 984.03, Florida
27 Statutes, is amended to read:

28 984.03 Definitions.--When used in this chapter, the
29 term:

30 (36) "Licensed health care professional" means a
31 physician licensed under chapter 458, an osteopathic physician

1 licensed under chapter 459, a nurse licensed under chapter
2 464, a physician assistant licensed ~~certified~~ under chapter
3 458 or chapter 459, or a dentist licensed under chapter 466.

4 Section 14. Subsection (36) of section 985.03, Florida
5 Statutes, is amended to read:

6 985.03 Definitions.--When used in this chapter, the
7 term:

8 (36) "Licensed health care professional" means a
9 physician licensed under chapter 458, an osteopathic physician
10 licensed under chapter 459, a nurse licensed under chapter
11 464, a physician assistant licensed ~~certified~~ under chapter
12 458 or chapter 459, or a dentist licensed under chapter 466.

13 Section 15. This act shall take effect upon becoming a
14 law.

15 *****

16 HOUSE SUMMARY

17 Provides for licensure rather than certification of
18 physician assistants. Prescribes qualifications for
19 licensure and revises provisions governing examinations.
20 Revises provisions relating to delegation of prescriptive
21 authority to a physician assistant and requires certain
22 notice of any change in prescriptive privileges. Conforms
23 other statutory provisions.