

By the Committee on Health Care and Senator Clary

317-1695-98

1 A bill to be entitled
2 An act relating to physician assistants;
3 amending ss. 39.01, 154.04, 232.465, 395.0191,
4 458.347, 459.022, 627.351, 627.357, 766.105,
5 766.1115, 984.03, 985.03, F.S.; providing for
6 licensure of physician assistants rather than
7 certification; prescribing qualifications for
8 licensure and revising provisions governing
9 examinations; conforming statutory provisions;
10 providing an effective date.

11
12 Be It Enacted by the Legislature of the State of Florida:

13
14 Section 1. Subsection (29) of section 39.01, Florida
15 Statutes, is amended to read:

16 39.01 Definitions.--When used in this chapter:
17 (29) "Licensed health care professional" means a
18 physician licensed under chapter 458, an osteopathic physician
19 licensed under chapter 459, a nurse licensed under chapter
20 464, a physician assistant licensed ~~certified~~ under chapter
21 458, or a dentist licensed under chapter 466.

22 Section 2. Paragraph (c) of subsection (1) of section
23 154.04, Florida Statutes, is amended to read:

24 154.04 Personnel of county health departments; duties;
25 compensation.--

26 (1)
27 (c)1. A registered nurse or licensed ~~certified~~
28 physician assistant working in a county health department is
29 authorized to assess a patient and order medications, provided
30 that:

31 a. No licensed physician is on the premises;

1 b. The patient is assessed and medication ordered in
2 accordance with rules promulgated by the department and
3 pursuant to a protocol approved by a physician who supervises
4 the patient care activities of the registered nurse or
5 licensed ~~certified~~ physician assistant;

6 c. The patient is being assessed by the registered
7 nurse or licensed ~~certified~~ physician assistant as a part of a
8 program approved by the department; and

9 d. The medication ordered appears on a formulary
10 approved by the department and is prepackaged and prelabeled
11 with dosage instructions and distributed from a source
12 authorized under chapter 499 to repackage and distribute
13 drugs, which source is under the supervision of a consultant
14 pharmacist employed by the department.

15 2. Each county health department shall adopt written
16 protocols which provide for supervision of the registered
17 nurse or licensed ~~certified~~ physician assistant by a physician
18 licensed pursuant to chapter 458 or chapter 459 and for the
19 procedures by which patients may be assessed, and medications
20 ordered and delivered, by the registered nurse or licensed
21 ~~certified~~ physician assistant. Such protocols shall be signed
22 by the supervising physician, the director of the county
23 health department, and the registered nurse or licensed
24 ~~certified~~ physician assistant.

25 3. Each county health department shall maintain and
26 have available for inspection by representatives of the
27 Department of Health all medical records and patient care
28 protocols, including records of medications delivered to
29 patients, in accordance with rules of the department.

30 4. The Department of Health shall adopt rules which
31 establish the conditions under which a registered nurse or

1 licensed ~~certified~~ physician assistant may assess patients and
2 order and deliver medications, based upon written protocols of
3 supervision by a physician licensed pursuant to chapter 458 or
4 chapter 459, and which establish the formulary from which
5 medications may be ordered.

6 5. The department shall require that a consultant
7 pharmacist conduct a periodic inspection of each county health
8 department in meeting the requirements of this paragraph.

9 6. A county health department may establish or
10 contract with peer review committees or organizations to
11 review the quality of communicable disease control and primary
12 care services provided by the county health department.

13 Section 3. Paragraph (a) of subsection (1) of section
14 232.46, Florida Statutes, is amended to read:

15 232.46 Administration of medication by school district
16 personnel.--

17 (1) Notwithstanding the provisions of the Nurse
18 Practice Act, chapter 464, school district personnel shall be
19 authorized to assist students in the administration of
20 prescription medication when the following conditions have
21 been met:

22 (a) Each district school board shall include in its
23 approved school health services plan a procedure to provide
24 training, by a registered nurse, a licensed practical nurse, a
25 physician licensed pursuant to chapter 458 or chapter 459, or
26 a physician assistant licensed ~~certified~~ pursuant to chapter
27 458 or chapter 459, to the school personnel designated by the
28 principal to assist students in the administration of
29 prescribed medication. Such training may be provided in
30 collaboration with other school districts, through contract
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1 with an education consortium, or by any other arrangement
2 consistent with the intent of this section.

3 Section 4. Subsections (2) and (3) of section 232.465,
4 Florida Statutes, are amended to read:

5 232.465 Provision of medical services; restrictions.--

6 (2) Nonmedical assistive personnel shall be allowed to
7 perform health-related services upon successful completion of
8 child-specific training by a registered nurse, a licensed
9 practical nurse, a physician licensed pursuant to chapter 458
10 or chapter 459, or a physician assistant licensed ~~certified~~
11 pursuant to chapter 458 or chapter 459. All procedures shall
12 be monitored periodically by the nurse. Those procedures
13 include, but are not limited to:

14 (a) Cleaning intermittent catheterization.

15 (b) Gastrostomy tube feeding.

16 (c) Monitoring blood glucose.

17 (d) Administering emergency injectable medication.

18 (3) For all other invasive medical services not listed
19 in subsection (1) or subsection (2), a registered nurse, a
20 licensed practical nurse, a physician licensed pursuant to
21 chapter 458 or chapter 459, or a physician assistant licensed
22 ~~certified~~ pursuant to chapter 458 or chapter 459 shall
23 determine if nonmedical school district personnel shall be
24 allowed to perform such service.

25 Section 5. Paragraph (c) of subsection (2) of section
26 395.0191, Florida Statutes, is amended to read:

27 395.0191 Staff membership and clinical privileges.--

28 (2)

29 (c) Each licensed facility shall establish rules and
30 procedures for consideration of an application for clinical
31 privileges submitted by a physician assistant licensed

1 ~~certified~~ pursuant to s. 458.347 or s. 459.022. Clinical
2 privileges granted to a physician assistant pursuant to this
3 subsection shall automatically terminate upon termination of
4 staff membership of the physician assistant's supervising
5 physician.

6 Section 6. Section 458.347, Florida Statutes, is
7 amended to read:

8 458.347 Physician assistants.--

9 (1) LEGISLATIVE INTENT.--

10 (a) The purpose of this section is to encourage more
11 effective utilization of the skills of physicians or groups of
12 physicians by enabling them to delegate health care tasks to
13 qualified assistants when such delegation is consistent with
14 the patient's health and welfare.

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

20 (c) The purpose of this section is to encourage the
21 utilization of physician assistants by physicians and to allow
22 for innovative development of programs for the education of
23 physician assistants.

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

25 (a) "Approved program" means a program, formally
26 approved by the boards, for the education of physician
27 assistants.

28 (b) "Boards" means the Board of Medicine and the Board
29 of Osteopathic Medicine.

30 (c) "Council" means the Council on Physician
31 Assistants.

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

3 (e) "Physician assistant" means a person who is a
4 graduate of an approved program or its equivalent or meets
5 standards approved by the boards and is licensed ~~certified~~ to
6 perform medical services delegated by the supervising
7 physician.

8 (f) "Supervision" means responsible supervision and
9 control. Except in cases of emergency, supervision requires
10 the easy availability or physical presence of the licensed
11 physician for consultation and direction of the actions of the
12 physician assistant. For the purposes of this definition, the
13 term "easy availability" includes the ability to communicate
14 by way of telecommunication. The boards shall establish rules
15 as to what constitutes responsible supervision of the
16 physician assistant.

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

21 (h) "Continuing medical education" means courses
22 recognized and approved by the boards, the American Academy of
23 Physician Assistants, the American Medical Association, the
24 American Osteopathic Association, or the Accreditation Council
25 on Continuing Medical Education.

26 (3) PERFORMANCE OF SUPERVISING PHYSICIAN.--Each
27 physician or group of physicians supervising a licensed
28 ~~certified~~ physician assistant must be qualified in the medical
29 areas in which the physician assistant is to perform and shall
30 be individually or collectively responsible and liable for the
31 performance and the acts and omissions of the physician

1 assistant. A physician may not supervise more than four
2 currently licensed ~~certified~~ physician assistants at any one
3 time.

4 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.--

5 (a) The boards shall adopt, by rule, the general
6 principles that supervising physicians must use in developing
7 the scope of practice of a physician assistant under direct
8 supervision and under indirect supervision. These principles
9 shall recognize the diversity of both specialty and practice
10 settings in which physician assistants are used.

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

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

18 (d) A supervisory physician may delegate to a licensed
19 ~~certified~~ physician assistant, pursuant to a written protocol,
20 the authority to act according to s. 154.04(1)(c). Such
21 delegated authority is limited to the supervising physician's
22 practice in connection with a county health department as
23 defined and established pursuant to chapter 154. The boards
24 shall adopt rules governing the supervision of physician
25 assistants by physicians in county health departments.

26 (e) A supervisory physician may delegate to a fully
27 licensed ~~certified~~ physician assistant the authority to
28 prescribe any medication used in the supervisory physician's
29 practice if such medication is listed on the formulary created
30 pursuant to paragraph (f). A fully licensed ~~certified~~

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1 physician assistant may only prescribe such medication under
2 the following circumstances:

3 1. A physician assistant must clearly identify to the
4 patient that he or she is a physician assistant. Furthermore,
5 the physician assistant must inform the patient that the
6 patient has the right to see the physician prior to any
7 prescription being prescribed by the physician assistant.

8 2. The supervisory physician must notify the
9 department of his or her intent to delegate, on a
10 department-approved form, before delegating such authority and
11 notify the department of any change in prescriptive privileges
12 ~~of with each certification renewal application filed by the~~
13 physician assistant.

14 3. The physician assistant must file with the
15 department, before commencing to prescribe, evidence that he
16 or she has completed a continuing medical education course of
17 at least 3 classroom hours in prescriptive practice, conducted
18 by an accredited program approved by the boards, which course
19 covers the limitations, responsibilities, and privileges
20 involved in prescribing medicinal drugs, or evidence that he
21 or she has received education comparable to the continuing
22 education course as part of an accredited physician assistant
23 training program.

24 4. The physician assistant must file with the
25 department, before commencing to prescribe, evidence that the
26 physician assistant has a minimum of 3 months of clinical
27 experience in the specialty area of the supervising physician.

28 5. The physician assistant must file with the
29 department a signed affidavit that he or she has completed a
30 minimum of 10 continuing medical education hours in the
31 specialty practice in which the physician assistant has

1 prescriptive privileges with each licensure ~~certification~~
2 renewal application.

3 6. The department shall issue a license ~~certification~~
4 and a prescriber number to the physician assistant granting
5 authority for the prescribing of medicinal drugs authorized
6 within this paragraph upon completion of the foregoing
7 requirements.

8 7. The prescription must be written in a form that
9 complies with chapter 499 and must contain, in addition to the
10 supervisory physician's name, address, and telephone number,
11 the physician assistant's prescriber number. The prescription
12 must be filled in a pharmacy permitted under chapter 465 and
13 must be dispensed in that pharmacy by a pharmacist licensed
14 under chapter 465. The appearance of the prescriber number
15 creates a presumption that the physician assistant is
16 authorized to prescribe the medicinal drug and the
17 prescription is valid.

18 8. The physician assistant must note the prescription
19 in the appropriate medical record, and the supervisory
20 physician must review and sign each notation. For dispensing
21 purposes only, the failure of the supervisory physician to
22 comply with these requirements does not affect the validity of
23 the prescription.

24 9. This paragraph does not prohibit a supervisory
25 physician from delegating to a physician assistant the
26 authority to order medication for a hospitalized patient of
27 the supervisory physician.

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29 This paragraph does not apply to facilities licensed pursuant
30 to chapter 395.

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1 (f)1. There is created a five-member committee
2 appointed by the Secretary ~~Director~~ of Health ~~Care~~
3 ~~Administration~~. The committee must be composed of one fully
4 licensed ~~certified~~ physician assistant licensed ~~certified~~
5 pursuant to this section or s. 459.022, two physicians
6 licensed pursuant to this chapter, one of whom supervises a
7 fully licensed physician assistant, one osteopathic physician
8 licensed pursuant to chapter 459, and one pharmacist licensed
9 pursuant to chapter 465 who is not licensed pursuant to this
10 chapter or chapter 459. The committee shall establish a
11 formulary of medicinal drugs for which a fully licensed
12 ~~certified~~ physician assistant may prescribe. The formulary
13 may not include controlled substances as defined in chapter
14 893, antineoplastics, antipsychotics, radiopharmaceuticals,
15 general anesthetics or radiographic contrast materials, or any
16 parenteral preparations except insulin and epinephrine.

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

22 3. The boards shall adopt the formulary required by
23 this paragraph, and each addition, deletion, or modification
24 to the formulary, by rule. Notwithstanding any provision of
25 chapter 120 to the contrary, the formulary rule shall be
26 effective 60 days after the date it is filed with the
27 Secretary of State. Upon adoption of the formulary, the
28 department shall mail a copy of such formulary to each fully
29 licensed ~~certified~~ physician assistant and to each pharmacy
30 licensed by the state. The boards shall establish, by rule, a
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1 fee not to exceed \$200 to fund the provisions of this
2 paragraph and paragraph (e).

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

6 (6) PROGRAM APPROVAL.--

7 (a) The boards shall approve programs, based on
8 recommendations by the council, for the education and training
9 of physician assistants which meet standards established by
10 rule of the boards. The council may recommend only those
11 physician assistant programs that hold full accreditation or
12 provisional accreditation from the Commission on Accreditation
13 of Allied Health Programs or its successor organization. Any
14 educational institution offering a physician assistant program
15 approved by the boards pursuant to this paragraph may also
16 offer the physician assistant program authorized in paragraph
17 (c) for unlicensed physicians.

18 (b) The boards shall adopt and publish standards to
19 ensure that such programs operate in a manner that does not
20 endanger the health or welfare of the patients who receive
21 services within the scope of the programs. The boards shall
22 review the quality of the curricula, faculties, and facilities
23 of such programs and take whatever other action is necessary
24 to determine that the purposes of this section are being met.

25 (c) Any community college with the approval of the
26 State Board of Community Colleges may conduct a physician
27 assistant program which shall apply for national accreditation
28 through the American Medical Association's Committee on Allied
29 Health, Education, and Accreditation, or its successor
30 organization, and which may admit unlicensed physicians, as
31 authorized in subsection (7), who are graduates of foreign

1 | medical schools listed with the World Health Organization.
2 | The unlicensed physician must have been a resident of this
3 | state for a minimum of 12 months immediately prior to
4 | admission to the program. An evaluation of knowledge base by
5 | examination shall be required to grant advanced academic
6 | credit and to fulfill the necessary requirements to graduate.
7 | A minimum of one 16-week semester of supervised clinical and
8 | didactic education, which may be completed simultaneously,
9 | shall be required before graduation from the program. All
10 | other provisions of this section shall remain in effect.

11 | (7) PHYSICIAN ASSISTANT LICENSURE ~~CERTIFICATION~~.--

12 | (a) Any person desiring to be licensed ~~certified~~ as a
13 | physician assistant must apply to the department. The
14 | department shall issue a license ~~certificate~~ to any person
15 | certified by the council as having met the following
16 | requirements:

17 | 1. Is at least 18 years of age.

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

28 | 3. Has completed the application form and remitted an
29 | application fee not to exceed \$300 as set by the boards. An
30 | application for licensure ~~certification~~ made by a physician
31 | assistant must include:

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

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

4 c. A sworn statement of any previous revocation or
5 denial of licensure or certification in any state.

6 d. Two letters of recommendation.

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

10 a. Has completed the application form and remitted a
11 nonrefundable application fee not to exceed \$500 and an
12 examination fee not to exceed \$300, plus the actual cost to
13 the department to provide the examination. The examination
14 fee is refundable if the applicant is found to be ineligible
15 to take the examination. The department shall not require the
16 applicant to pass a practical component of the examination.

17 For examinations given after July 1, 1998, competencies
18 measured through practical examinations shall be incorporated
19 into the written examination through a multiple-choice format.
20 The department shall translate the examination into the native
21 language of any applicant who requests and agrees to pay all
22 costs of such translation, provided that the translation
23 request is filed with the board office no later than 9 months
24 before the scheduled examination and the applicant remits
25 translation fees as specified by the department no later than
26 6 months before the scheduled examination, and provided that
27 the applicant demonstrates to the department the ability to
28 communicate orally in basic English. If the applicant is
29 unable to pay translation costs, the applicant may take the
30 next available examination in English if the applicant submits
31 a request in writing by the application deadline and if the

1 applicant is otherwise eligible under this section. To
2 demonstrate the ability to communicate orally in basic
3 English, a passing score or grade is required, as determined
4 by the department or organization that developed it, on one of
5 the following English examinations:

6 (I) The test for spoken English (TSE) by the
7 Educational Testing Service (ETS);

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

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

11 (IV) The English examination for citizenship,
12 Immigration and Naturalization Service.

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

17 b. Is an unlicensed physician who graduated from a
18 foreign medical school listed with the World Health
19 Organization who has not previously taken and failed the
20 examination of the National Commission on Certification of
21 Physician Assistants and who has been certified by the Board
22 of Medicine as having met the requirements for licensure as a
23 medical doctor by examination as set forth in s. 458.311(1),
24 (3), (4), and (5), with the exception that the applicant is
25 not required to have completed an approved residency of at
26 least 1 year and the applicant is not required to have passed
27 the licensing examination specified under s. 458.311 or hold a
28 valid, active certificate issued by the Educational Commission
29 for Foreign Medical Graduates.

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

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

7 2. The department may grant temporary licensure
8 ~~certification~~ to an applicant who meets the requirements of
9 subparagraph 1. Between meetings of the council, the
10 department may grant temporary licensure ~~certification~~ to
11 practice based on the completion of all temporary licensure
12 ~~certification~~ requirements. All such administratively issued
13 licenses ~~certifications~~ shall be reviewed and acted on at the
14 next regular meeting of the council. A temporary license
15 ~~certificate~~ expires upon receipt and notice of scores to the
16 licenseholder ~~certificateholder~~ from the first available
17 examination specified in subparagraph 1. following licensure
18 ~~certification~~ by the department. An applicant who fails the
19 proficiency examination is no longer temporarily licensed
20 ~~certified~~, but may apply for a one-time extension of temporary
21 licensure ~~certification~~ after reapplying for the next
22 available examination. Extended licensure ~~certification~~ shall
23 expire upon failure of the licenseholder ~~certificateholder~~ to
24 sit for the next available examination or upon receipt and
25 notice of scores to the licenseholder ~~certificateholder~~ from
26 such examination.

27 3. Notwithstanding any other provision of law, the
28 examination specified pursuant to subparagraph 1. shall be
29 administered by the department only five times. Applicants
30 certified by the board for examination shall receive at least
31 6 months' notice of eligibility prior to the administration of

1 the initial examination. Subsequent examinations shall be
2 administered at 1-year intervals following ~~determined by the~~
3 ~~department after~~ the reporting of the scores of the first and
4 subsequent examinations ~~examination~~. For the purposes of this
5 paragraph, the department may develop, contract for the
6 development of, purchase, or approve an examination, including
7 a practical component, that adequately measures an applicant's
8 ability to practice with reasonable skill and safety. The
9 minimum passing score on the examination shall be established
10 by the department, with the advice of the board. Those
11 applicants failing to pass that examination or any subsequent
12 examination shall receive notice of the administration of the
13 next examination with the notice of scores following such
14 examination. Any applicant who passes the examination and
15 meets the requirements of this section shall be licensed
16 ~~certified~~ as a physician assistant with all rights defined
17 thereby.

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

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

22 2. A sworn statement of no felony convictions in the
23 previous 2 years.

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

28 (e) Upon employment as a physician assistant, a
29 licensed ~~certified~~ physician assistant must notify the
30 department in writing within 30 days after such employment or
31 after any subsequent changes in the supervising physician. The

1 notification must include the full name, Florida medical
2 license number, specialty, and address of the supervising
3 physician.

4 (f) Notwithstanding subparagraph (a)2., the department
5 may grant to a recent graduate of an approved program, as
6 specified in subsection (6), a temporary license certification
7 to expire upon receipt of scores of the proficiency
8 examination administered by the National Commission on
9 Certification of Physician Assistants. Between meetings of
10 the council, the department may grant a temporary license
11 ~~certification~~ to practice based on the completion of all
12 temporary licensure certification requirements. All such
13 administratively issued licenses certifications shall be
14 reviewed and acted on at the next regular meeting of the
15 council. The recent graduate may be licensed certified prior
16 to employment, but must comply with paragraph (e). An
17 applicant who has passed the proficiency examination may be
18 granted permanent licensure certification. An applicant
19 failing the proficiency examination is no longer temporarily
20 licensed certified, but may reapply for a 1-year extension of
21 temporary licensure certification. An applicant may not be
22 granted more than two temporary licenses certificates and may
23 not be licensed certified as a physician assistant until he or
24 she passes the examination administered by the National
25 Commission on Certification of Physician Assistants. As
26 prescribed by board rule, the council may require an applicant
27 who does not pass the licensing examination after five or more
28 attempts to complete additional remedial education or
29 training. The council shall prescribe the additional
30 requirements in a manner that permits the applicant to
31 complete the requirements and be reexamined within 2 years

1 after the date the applicant petitions the council to retake
2 the examination a sixth or subsequent time.

3 (g) The Board of Medicine may impose any of the
4 penalties specified in ss. 455.227 and 458.331(2) upon a
5 physician assistant if the physician assistant or the
6 supervising physician has been found guilty of or is being
7 investigated for any act that constitutes a violation of this
8 chapter or chapter 455.

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

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

14 (a) The council shall consist of five members
15 appointed as follows:

16 1. The chairperson of the Board of Medicine shall
17 appoint three members who are physicians and members of the
18 Board of Medicine. One of the physicians must supervise a
19 physician assistant in the physician's practice.

20 2. The chairperson of the Board of Osteopathic
21 Medicine shall appoint one member who is a physician and a
22 member of the Board of Osteopathic Medicine.

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

26 (b) Two of the members appointed to the council must
27 be physicians who supervise physician assistants in their
28 practice. Members shall be appointed to terms of 4 years,
29 except that of the initial appointments, two members shall be
30 appointed to terms of 2 years, two members shall be appointed
31 to terms of 3 years, and one member shall be appointed to a

1 term of 4 years, as established by rule of the boards.
2 Council members may not serve more than two consecutive terms.
3 The council shall annually elect a chairperson from among its
4 members.

5 (c) The council shall:

6 1. Recommend to the department the licensure
7 ~~certification~~ of physician assistants.

8 2. Develop all rules regulating the use of physician
9 assistants by physicians under this chapter and chapter 459,
10 except for rules relating to the formulary developed under
11 paragraph (4)(f). The council shall also develop rules to
12 ensure that the continuity of supervision is maintained in
13 each practice setting. The boards shall consider adopting a
14 proposed rule developed by the council at the regularly
15 scheduled meeting immediately following the submission of the
16 proposed rule by the council. A proposed rule submitted by
17 the council may not be adopted by either board unless both
18 boards have accepted and approved the identical language
19 contained in the proposed rule. The language of all proposed
20 rules submitted by the council must be approved by both boards
21 pursuant to each respective board's guidelines and standards
22 regarding the adoption of proposed rules. If either board
23 rejects the council's proposed rule, that board must specify
24 its objection to the council with particularity and include
25 any recommendations it may have for the modification of the
26 proposed rule.

27 3. Make recommendations to the boards regarding all
28 matters relating to physician assistants.

29 4. Address concerns and problems of practicing
30 physician assistants in order to improve safety in the
31 clinical practices of licensed ~~certified~~ physician assistants.

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

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

11 (12) DENIAL, SUSPENSION, OR REVOCATION OF LICENSURE
12 ~~CERTIFICATION~~.--The boards may deny, suspend, or revoke a
13 physician assistant license ~~certification~~ if a board
14 determines that the physician assistant has violated this
15 chapter.

16 (13) RULES.--The boards shall adopt rules to implement
17 this section, including rules detailing the contents of the
18 application for licensure ~~certification~~ and notification
19 pursuant to subsection (7) and rules to ensure both the
20 continued competency of physician assistants and the proper
21 utilization of them by physicians or groups of physicians.

22 (14) EXISTING PROGRAMS.--This section does not
23 eliminate or supersede existing laws relating to other
24 paramedical professions or services and is supplemental to all
25 such existing laws relating to the licensure ~~certification~~ and
26 practice of paramedical professions.

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

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

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

6 Section 7. Section 459.022, Florida Statutes, is
7 amended to read:

8 459.022 Physician assistants.--

9 (1) LEGISLATIVE INTENT.--

10 (a) The purpose of this section is to encourage more
11 effective utilization of the skills of osteopathic physicians
12 or groups of osteopathic physicians by enabling them to
13 delegate health care tasks to qualified assistants when such
14 delegation is consistent with the patient's health and
15 welfare.

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

21 (c) The purpose of this section is to encourage the
22 utilization of physician assistants by osteopathic physicians
23 and to allow for innovative development of programs for the
24 education of physician assistants.

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

26 (a) "Approved program" means a program, formally
27 approved by the boards, for the education of physician
28 assistants.

29 (b) "Boards" means the Board of Medicine and the Board
30 of Osteopathic Medicine.

31

1 (c) "Council" means the Council on Physician
2 Assistants.

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

5 (e) "Physician assistant" means a person who is a
6 graduate of an approved program or its equivalent or meets
7 standards approved by the boards and is licensed ~~certified~~ to
8 perform medical services delegated by the supervising
9 physician.

10 (f) "Supervision" means responsible supervision and
11 control. Except in cases of emergency, supervision requires
12 the easy availability or physical presence of the licensed
13 physician for consultation and direction of the actions of the
14 physician assistant. For the purposes of this definition, the
15 term "easy availability" includes the ability to communicate
16 by way of telecommunication. The boards shall establish rules
17 as to what constitutes responsible supervision of the
18 physician assistant.

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

23 (h) "Continuing medical education" means courses
24 recognized and approved by the boards, the American Academy of
25 Physician Assistants, the American Medical Association, the
26 American Osteopathic Association, or the Accreditation Council
27 on Continuing Medical Education.

28 (3) PERFORMANCE OF SUPERVISING PHYSICIAN.--Each
29 physician or group of physicians supervising a licensed
30 ~~certified~~ physician assistant must be qualified in the medical
31 areas in which the physician assistant is to perform and shall

1 be individually or collectively responsible and liable for the
2 performance and the acts and omissions of the physician
3 assistant. A physician may not supervise more than four
4 currently licensed ~~certified~~ physician assistants at any one
5 time.

6 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.--

7 (a) The boards shall adopt, by rule, the general
8 principles that supervising physicians must use in developing
9 the scope of practice of a physician assistant under direct
10 supervision and under indirect supervision. These principles
11 shall recognize the diversity of both specialty and practice
12 settings in which physician assistants are used.

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

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

20 (d) A supervisory physician may delegate to a licensed
21 ~~certified~~ physician assistant, pursuant to a written protocol,
22 the authority to act according to s. 154.04(1)(c). Such
23 delegated authority is limited to the supervising physician's
24 practice in connection with a county health department as
25 defined and established pursuant to chapter 154. The boards
26 shall adopt rules governing the supervision of physician
27 assistants by physicians in county health departments.

28 (e) A supervisory physician may delegate to a fully
29 licensed ~~certified~~ physician assistant the authority to
30 prescribe any medication used in the supervisory physician's
31 practice if such medication is listed on the formulary created

1 pursuant to s. 458.347. A fully licensed ~~certified~~ physician
2 assistant may only prescribe such medication under the
3 following circumstances:

4 1. A physician assistant must clearly identify to the
5 patient that she or he is a physician assistant. Furthermore,
6 the physician assistant must inform the patient that the
7 patient has the right to see the physician prior to any
8 prescription being prescribed by the physician assistant.

9 2. The supervisory physician must notify the
10 department of her or his intent to delegate, on a
11 department-approved form, before delegating such authority and
12 notify the department of any change in prescriptive privileges
13 ~~of with each certification renewal application filed by the~~
14 physician assistant.

15 3. The physician assistant must file with the
16 department, before commencing to prescribe, evidence that she
17 or he has completed a continuing medical education course of
18 at least 3 classroom hours in prescriptive practice, conducted
19 by an accredited program approved by the boards, which course
20 covers the limitations, responsibilities, and privileges
21 involved in prescribing medicinal drugs, or evidence that she
22 or he has received education comparable to the continuing
23 education course as part of an accredited physician assistant
24 training program.

25 4. The physician assistant must file with the
26 department, before commencing to prescribe, evidence that the
27 physician assistant has a minimum of 3 months of clinical
28 experience in the specialty area of the supervising physician.

29 5. The physician assistant must file with the
30 department a signed affidavit that she or he has completed a
31 minimum of 10 continuing medical education hours in the

1 specialty practice in which the physician assistant has
2 prescriptive privileges with each licensure ~~certification~~
3 renewal application.

4 6. The department shall issue a license ~~certification~~
5 and a prescriber number to the physician assistant granting
6 authority for the prescribing of medicinal drugs authorized
7 within this paragraph upon completion of the foregoing
8 requirements.

9 7. The prescription must be written in a form that
10 complies with chapter 499 and must contain, in addition to the
11 supervisory physician's name, address, and telephone number,
12 the physician assistant's prescriber number. The prescription
13 must be filled in a pharmacy permitted under chapter 465, and
14 must be dispensed in that pharmacy by a pharmacist licensed
15 under chapter 465. The appearance of the prescriber number
16 creates a presumption that the physician assistant is
17 authorized to prescribe the medicinal drug and the
18 prescription is valid.

19 8. The physician assistant must note the prescription
20 in the appropriate medical record, and the supervisory
21 physician must review and sign each notation. For dispensing
22 purposes only, the failure of the supervisory physician to
23 comply with these requirements does not affect the validity of
24 the prescription.

25 9. This paragraph does not prohibit a supervisory
26 physician from delegating to a physician assistant the
27 authority to order medication for a hospitalized patient of
28 the supervisory physician.

29

30 This paragraph does not apply to facilities licensed pursuant
31 to chapter 395.

1 (f)1. There is created a five-member committee
2 appointed by the Secretary ~~Director~~ of Health ~~Care~~
3 ~~Administration~~. The committee must be composed of one fully
4 licensed ~~certified~~ physician assistant licensed ~~certified~~
5 pursuant to this section or s. 458.347, two physicians
6 licensed pursuant to chapter 458, one of whom supervises a
7 fully licensed physician assistant, one osteopathic physician
8 licensed pursuant to this chapter, and one pharmacist licensed
9 pursuant to chapter 465 who is not licensed pursuant to this
10 chapter or chapter 458. The committee shall establish a
11 formulary of medicinal drugs for which a fully licensed
12 ~~certified~~ physician assistant may prescribe. The formulary
13 may not include controlled substances as defined in chapter
14 893, antineoplastics, antipsychotics, radiopharmaceuticals,
15 general anesthetics or radiographic contrast materials, or any
16 parenteral preparations except insulin and epinephrine.

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

22 3. The boards shall adopt the formulary required by
23 this paragraph, and each addition, deletion, or modification
24 to the formulary, by rule. Notwithstanding any provision of
25 chapter 120 to the contrary, the formulary rule shall be
26 effective 60 days after the date it is filed with the
27 Secretary of State. Upon adoption of the formulary, the
28 department shall mail a copy of such formulary to each fully
29 licensed ~~certified~~ physician assistant and to each pharmacy
30 licensed by the state. The boards shall establish, by rule, a
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1 fee not to exceed \$200 to fund the provisions of this
2 paragraph and paragraph (e).

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

6 (6) PROGRAM APPROVAL.--

7 (a) The boards shall approve programs, based on
8 recommendations by the council, for the education and training
9 of physician assistants which meet standards established by
10 rule of the boards. The council may recommend only those
11 physician assistant programs that hold full accreditation or
12 provisional accreditation from the Commission on Accreditation
13 of Allied Health Programs or its successor organization.

14 (b) The boards shall adopt and publish standards to
15 ensure that such programs operate in a manner that does not
16 endanger the health or welfare of the patients who receive
17 services within the scope of the programs. The boards shall
18 review the quality of the curricula, faculties, and facilities
19 of such programs and take whatever other action is necessary
20 to determine that the purposes of this section are being met.

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

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

- 27 1. Is at least 18 years of age.
- 28 2. Has satisfactorily passed a proficiency examination
29 by an acceptable score established by the National Commission
30 on Certification of Physician Assistants. If an applicant
31 does not hold a current certificate issued by the National

1 Commission on Certification of Physician Assistants and has
2 not actively practiced as a physician assistant within the
3 immediately preceding 4 years, the applicant must retake and
4 successfully complete the entry-level examination of the
5 National Commission on Certification of Physician Assistants
6 to be eligible for licensure ~~certification~~.

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

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

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

14 c. A sworn statement of any previous revocation or
15 denial of licensure or certification in any state.

16 d. Two letters of recommendation.

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

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

21 2. A sworn statement of no felony convictions in the
22 previous 2 years.

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

27 (d) Upon employment as a physician assistant, a
28 licensed ~~certified~~ physician assistant must notify the
29 department in writing within 30 days after such employment or
30 after any subsequent changes in the supervising physician.

31 The notification must include the full name, Florida medical

1 license number, specialty, and address of the supervising
2 physician.

3 (e) Notwithstanding subparagraph (a)2., the department
4 may grant to a recent graduate of an approved program, as
5 specified in subsection (6), a temporary license ~~certification~~
6 to expire upon receipt of scores of the proficiency
7 examination administered by the National Commission on
8 Certification of Physician Assistants. Between meetings of
9 the council, the department may grant a temporary license
10 ~~certification~~ to practice to physician assistant applicants
11 based on the completion of all temporary licensure
12 ~~certification~~ requirements. All such administratively issued
13 licenses ~~certifications~~ shall be reviewed and acted on at the
14 next regular meeting of the council. The recent graduate may
15 be licensed ~~certified~~ prior to employment, but must comply
16 with paragraph (d). An applicant who has passed the
17 proficiency examination may be granted permanent licensure
18 ~~certification~~. An applicant failing the proficiency
19 examination is no longer temporarily licensed ~~certified~~, but
20 may reapply for a 1-year extension of temporary licensure
21 ~~certification~~. An applicant may not be granted more than two
22 temporary licenses ~~certificates~~ and may not be licensed
23 ~~certified~~ as a physician assistant until she or he passes the
24 examination administered by the National Commission on
25 Certification of Physician Assistants. As prescribed by board
26 rule, the council may require an applicant who does not pass
27 the licensing examination after five or more attempts to
28 complete additional remedial education or training. The
29 council shall prescribe the additional requirements in a
30 manner that permits the applicant to complete the requirements
31 and be reexamined within 2 years after the date the applicant

1 petitions the council to retake the examination a sixth or
2 subsequent time.

3 (f) The Board of Osteopathic Medicine may impose any
4 of the penalties specified in ss. 455.227 and 459.015(2) upon
5 a physician assistant if the physician assistant or the
6 supervising physician has been found guilty of or is being
7 investigated for any act that constitutes a violation of this
8 chapter or chapter 455.

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

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

14 (a) The council shall consist of five members
15 appointed as follows:

16 1. The chairperson of the Board of Medicine shall
17 appoint three members who are physicians and members of the
18 Board of Medicine. One of the physicians must supervise a
19 physician assistant in the physician's practice.

20 2. The chairperson of the Board of Osteopathic
21 Medicine shall appoint one member who is a physician and a
22 member of the Board of Osteopathic Medicine.

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

26 (b) Two of the members appointed to the council must
27 be physicians who supervise physician assistants in their
28 practice. Members shall be appointed to terms of 4 years,
29 except that of the initial appointments, two members shall be
30 appointed to terms of 2 years, two members shall be appointed
31 to terms of 3 years, and one member shall be appointed to a

1 term of 4 years, as established by rule of the boards.
2 Council members may not serve more than two consecutive terms.
3 The council shall annually elect a chairperson from among its
4 members.

5 (c) The council shall:

6 1. Recommend to the department the licensure
7 ~~certification~~ of physician assistants.

8 2. Develop all rules regulating the use of physician
9 assistants by physicians under chapter 458 and this chapter,
10 except for rules relating to the formulary developed under s.
11 458.347(4)(f). The council shall also develop rules to ensure
12 that the continuity of supervision is maintained in each
13 practice setting. The boards shall consider adopting a
14 proposed rule developed by the council at the regularly
15 scheduled meeting immediately following the submission of the
16 proposed rule by the council. A proposed rule submitted by
17 the council may not be adopted by either board unless both
18 boards have accepted and approved the identical language
19 contained in the proposed rule. The language of all proposed
20 rules submitted by the council must be approved by both boards
21 pursuant to each respective board's guidelines and standards
22 regarding the adoption of proposed rules. If either board
23 rejects the council's proposed rule, that board must specify
24 its objection to the council with particularity and include
25 any recommendations it may have for the modification of the
26 proposed rule.

27 3. Make recommendations to the boards regarding all
28 matters relating to physician assistants.

29 4. Address concerns and problems of practicing
30 physician assistants in order to improve safety in the
31 clinical practices of licensed ~~certified~~ physician assistants.

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

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

11 (12) DENIAL, SUSPENSION, OR REVOCATION OF LICENSURE
12 ~~CERTIFICATION~~.--The boards may deny, suspend, or revoke a
13 physician assistant license ~~certification~~ if a board
14 determines that the physician assistant has violated this
15 chapter.

16 (13) RULES.--The boards shall adopt rules to implement
17 this section, including rules detailing the contents of the
18 application for licensure ~~certification~~ and notification
19 pursuant to subsection (7) and rules to ensure both the
20 continued competency of physician assistants and the proper
21 utilization of them by physicians or groups of physicians.

22 (14) EXISTING PROGRAMS.--This section does not
23 eliminate or supersede existing laws relating to other
24 paramedical professions or services and is supplemental to all
25 such existing laws relating to the licensure ~~certification~~ and
26 practice of paramedical professions.

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

31

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

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

6 Section 8. Paragraph (h) of subsection (4) of section
7 627.351, Florida Statutes, is amended to read:

8 627.351 Insurance risk apportionment plans.--

9 (4) MEDICAL MALPRACTICE RISK APPORTIONMENT.--

10 (h) As used in this subsection:

11 1. "Health care provider" means hospitals licensed
12 under chapter 395; physicians licensed under chapter 458;
13 osteopathic physicians licensed under chapter 459; podiatrists
14 licensed under chapter 461; dentists licensed under chapter
15 466; chiropractors licensed under chapter 460; naturopaths
16 licensed under chapter 462; nurses licensed under chapter 464;
17 midwives licensed under chapter 467; clinical laboratories
18 registered under chapter 483; physician assistants licensed
19 ~~certified~~ under chapter 458; physical therapists and physical
20 therapist assistants licensed under chapter 486; health
21 maintenance organizations certificated under part I of chapter
22 641; ambulatory surgical centers licensed under chapter 395;
23 other medical facilities as defined in subparagraph 2.; blood
24 banks, plasma centers, industrial clinics, and renal dialysis
25 facilities; or professional associations, partnerships,
26 corporations, joint ventures, or other associations for
27 professional activity by health care providers.

28 2. "Other medical facility" means a facility the
29 primary purpose of which is to provide human medical
30 diagnostic services or a facility providing nonsurgical human
31 medical treatment, to which facility the patient is admitted

1 and from which facility the patient is discharged within the
2 same working day, and which facility is not part of a
3 hospital. However, a facility existing for the primary
4 purpose of performing terminations of pregnancy or an office
5 maintained by a physician or dentist for the practice of
6 medicine shall not be construed to be an "other medical
7 facility."

8 3. "Health care facility" means any hospital licensed
9 under chapter 395, health maintenance organization
10 certificated under part I of chapter 641, ambulatory surgical
11 center licensed under chapter 395, or other medical facility
12 as defined in subparagraph 2.

13 Section 9. Paragraph (b) of subsection (1) of section
14 627.357, Florida Statutes, is amended to read:

15 627.357 Medical malpractice self-insurance.--

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

17 (a) "Fund" means a group or association of health care
18 providers authorized to self-insure.

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

20 1. Hospital licensed under chapter 395.

21 2. Physician licensed, or physician assistant licensed
22 ~~certified~~, under chapter 458.

23 3. Osteopathic physician licensed under chapter 459.

24 4. Podiatrist licensed under chapter 461.

25 5. Health maintenance organization certificated under
26 part I of chapter 641.

27 6. Ambulatory surgical center licensed under chapter
28 395.

29 7. Chiropractor licensed under chapter 460.

30 8. Psychologist licensed under chapter 490.

31 9. Optometrist licensed under chapter 463.

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

1 Section 11. Paragraph (d) of subsection (3) of section
2 766.1115, Florida Statutes, is amended to read:

3 766.1115 Health care providers; creation of agency
4 relationship with governmental contractors.--

5 (3) DEFINITIONS.--As used in this section, the term:

6 (d) "Health care provider" or "provider" means:

7 1. A birth center licensed under chapter 383.

8 2. An ambulatory surgical center licensed under
9 chapter 395.

10 3. A hospital licensed under chapter 395.

11 4. A physician ~~licensed~~, or physician assistant
12 licensed ~~certified~~, under chapter 458.

13 5. An osteopathic physician ~~licensed~~, or osteopathic
14 physician assistant licensed ~~certified~~, under chapter 459.

15 6. A chiropractic physician licensed under chapter
16 460.

17 7. A podiatrist licensed under chapter 461.

18 8. A registered nurse, nurse midwife, licensed
19 practical nurse, or advanced registered nurse practitioner
20 licensed or registered under chapter 464 or any facility which
21 employs nurses licensed or registered under chapter 464 to
22 supply all or part of the care delivered under this section.

23 9. A midwife licensed under chapter 467.

24 10. A health maintenance organization certificated
25 under part I of chapter 641.

26 11. A health care professional association and its
27 employees or a corporate medical group and its employees.

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

1 13. Any other health care professional, practitioner,
2 provider, or facility under contract with a governmental
3 contractor.

4
5 The term includes any nonprofit corporation qualified as
6 exempt from federal income taxation under s. 501(c) of the
7 Internal Revenue Code which delivers health care services
8 provided by licensed professionals listed in this paragraph,
9 any federally funded community health center, and any
10 volunteer corporation or volunteer health care provider that
11 delivers health care services.

12 Section 12. Subsection (36) of section 984.03, Florida
13 Statutes, is amended to read:

14 984.03 Definitions.--When used in this chapter, the
15 term:

16 (36) "Licensed health care professional" means a
17 physician licensed under chapter 458, an osteopathic physician
18 licensed under chapter 459, a nurse licensed under chapter
19 464, a physician assistant licensed ~~certified~~ under chapter
20 458, or a dentist licensed under chapter 466.

21 Section 13. Subsection (36) of section 985.03, Florida
22 Statutes, is amended to read:

23 985.03 Definitions.--When used in this chapter, the
24 term:

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

30 Section 14. This act shall take effect July 1, 1998.
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STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
COMMITTEE SUBSTITUTE FOR
Senate Bill 776

The committee substitute changes references to "certified physician assistant" throughout the Florida Statutes to "licensed physician assistant." The committee substitute revises the procedures for a supervisory physician to notify the Department of Health of his or her intent to delegate prescriptive authority to a physician assistant and requires the physician to notify the department regarding any change in the prescriptive privileges delegated to a physician assistant.