

CHAMBER ACTION

1 The Health & Families Council recommends the following:

2
3 **Council/Committee Substitute**

4 Remove the entire bill and insert:

5 A bill to be entitled

6 An act relating to health care practitioners; amending s.
7 456.041, F.S.; requiring advanced registered nurse
8 practitioners to submit protocols to the Department of
9 Health as part of practitioner profiles; amending s.
10 458.348, F.S.; providing requirements for the supervision
11 of certain health care practitioners by physicians;
12 providing definitions; providing exemptions; providing
13 notice and review requirements relating to the referral of
14 a patient by another practitioner; amending s. 459.008,
15 F.S.; eliminating an option for osteopathic physicians to
16 complete continuing education courses in end-of-life care
17 in lieu of continuing education in AIDS/HIV; creating s.
18 459.025, F.S.; providing requirements for the supervision
19 of certain health care practitioners by osteopathic
20 physicians; providing definitions; providing exemptions;
21 providing notice and review requirements relating to the
22 referral of a patient by another practitioner; amending s.
23 464.012, F.S.; requiring certain advanced registered nurse

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24 practitioners to file protocols with the Board of Nursing;
 25 specifying requirements relating to the protocols;
 26 providing an effective date.

27

28 Be It Enacted by the Legislature of the State of Florida:

29

30 Section 1. Paragraph (a) of subsection (1) of section
 31 456.041, Florida Statutes, is amended to read:

32 456.041 Practitioner profile; creation.--

33 (1)(a) The Department of Health shall compile the
 34 information submitted pursuant to s. 456.039 into a practitioner
 35 profile of the applicant submitting the information, except that
 36 the Department of Health shall develop a format to compile
 37 uniformly any information submitted under s. 456.039(4)(b).

38 Beginning July 1, 2001, the Department of Health may compile the
 39 information submitted pursuant to s. 456.0391 into a
 40 practitioner profile of the applicant submitting the
 41 information. The protocol submitted pursuant to s. 464.012(3)
 42 shall be included in the practitioner profile of the applicant
 43 submitting the information to obtain certification as an
 44 advanced registered nurse practitioner.

45 Section 2. Subsections (4) and (5) are added to section
 46 458.348, Florida Statutes, to read:

47 458.348 Formal supervisory relationships, standing orders,
 48 and established protocols; notice; standards.--

49 (4) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE
 50 SETTINGS.--A physician who supervises an advanced registered
 51 nurse practitioner or physician assistant at a medical office

52 | other than the physician's primary practice location, where the
53 | advanced registered nurse practitioner or physician assistant is
54 | not under the onsite supervision of a supervising physician,
55 | shall comply with the standards set forth in this subsection.
56 | For the purpose of this subsection, a physician's "primary
57 | practice location" means the address reflected on the
58 | physician's profile published under s. 456.041.

59 | (a) A physician who is engaged in providing primary health
60 | care services may not supervise more than four offices in
61 | addition to the physician's primary practice location. For the
62 | purpose of this subsection, "primary health care" means health
63 | care services that are commonly provided to patients without
64 | referral from another practitioner, including obstetrical and
65 | gynecological services, and excludes practices providing
66 | primarily dermatologic and skin care services, which include
67 | aesthetic skin care services.

68 | (b) A physician who is engaged in providing specialty
69 | health care services may not supervise more than two offices in
70 | addition to the physician's primary practice location. For the
71 | purpose of this subsection, "specialty health care" means health
72 | care services that are commonly provided to patients with a
73 | referral from another practitioner and excludes practices
74 | providing primarily dermatologic and skin care services, which
75 | include aesthetic skin care services.

76 | (c) A physician who supervises an advanced registered
77 | nurse practitioner or physician assistant at a medical office
78 | other than the physician's primary practice location, where the
79 | advanced registered nurse practitioner or physician assistant is

80 not under the onsite supervision of a supervising physician and
81 the services offered at the office are primarily dermatologic or
82 skin care services, which include aesthetic skin care services
83 other than plastic surgery, shall comply with the standards
84 listed in subparagraphs 1.-4. Notwithstanding s.

85 458.347(4)(e)8., a physician supervising a physician assistant
86 under this paragraph may not be required to review and cosign
87 charts or medical records prepared by the physician assistant.

88 1. The physician shall submit to the board the addresses
89 of all offices where he or she is supervising or has a protocol
90 with an advanced registered nurse practitioner or a physician
91 assistant that are not the physician's primary practice
92 location.

93 2. The physician shall be board certified or board
94 eligible in dermatology or plastic surgery as recognized by the
95 board under s. 458.3312.

96 3. All offices in which the physician is supervising an
97 advanced registered nurse practitioner or a physician assistant
98 that are not the physician's primary place of practice shall be
99 within 25 miles of the physician's primary place of practice or
100 in a county that is contiguous to the county of the physician's
101 primary place of practice. However, the distance between any of
102 the offices may not exceed 75 miles.

103 4. The physician may supervise only one office other than
104 the physician's primary place of practice except that until July
105 1, 2011, the physician may supervise up to two medical offices
106 other than the physician's primary place of practice if the
107 addresses of the offices are submitted to the board prior to

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108 July 1, 2006. Effective July 1, 2011, the physician may
109 supervise only one office other than the physician's primary
110 place of practice, regardless of when the addresses of the
111 offices were submitted to the board.

112 (d) A physician who supervises an office in addition to
113 the physician's primary practice location shall conspicuously
114 post in each of the physician's offices a current schedule of
115 the regular hours that the physician is present in that office
116 and the hours that the office is open when the physician is not
117 present.

118 (e) This subsection shall not apply to health care
119 services provided in facilities licensed under chapter 395 or in
120 conjunction with a college of medicine, college of nursing,
121 accredited graduate medical program, or nursing education
122 program; offices in which the only service being performed is
123 hair removal by an advanced registered nurse practitioner or
124 physician assistant; not-for-profit, family planning clinics
125 that are not licensed pursuant to chapter 390; rural and
126 federally qualified health centers; health care services
127 provided in a nursing home licensed under part II of chapter
128 400, an assisted living facility licensed under part III of
129 chapter 400, a continuing care facility licensed under chapter
130 651, or a retirement community consisting of independent living
131 units and a licensed nursing home or assisted living facility;
132 anesthesia services provided in accordance with law; health care
133 services provided in a designated rural health clinic; health
134 care services provided to persons enrolled in a program designed
135 to maintain elderly persons and persons with disabilities in a

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136 home or community-based setting; university primary care student
 137 health centers; school health clinics; or health care services
 138 provided in federal or state facilities.

139 (5) REQUIREMENTS FOR NOTICE AND REVIEW.--Upon initial
 140 referral of a patient by another practitioner, the physician
 141 receiving the referral shall ensure that the patient is informed
 142 of the type of license held by the physician and the type of
 143 license held by any other practitioner who will be providing
 144 services to the patient. When scheduling the initial examination
 145 or consultation following the referral, the patient may decide
 146 to see the physician or any other licensed practitioner
 147 supervised by the physician and, prior to the initial
 148 examination or consultation, shall sign a form indicating the
 149 patient's choice of practitioner. The supervising physician
 150 shall review the medical record of the initial examination or
 151 consultation and ensure that a written report on the initial
 152 examination or consultation is furnished to the referring
 153 practitioner within 10 business days following the completion of
 154 the initial examination or consultation.

155 Section 3. Subsection (5) of section 459.008, Florida
 156 Statutes, is amended to read:

157 459.008 Renewal of licenses and certificates.--

158 ~~(5) Notwithstanding the provisions of s. 456.033, an~~
 159 ~~osteopathic physician may complete continuing education on end-~~
 160 ~~of-life and palliative care in lieu of continuing education in~~
 161 ~~AIDS/HIV, if that physician has completed the AIDS/HIV~~
 162 ~~continuing education in the immediately preceding biennium.~~

163 Section 4. Section 459.025, Florida Statutes, is created
164 to read:

165 459.025 Formal supervisory relationships, standing orders,
166 and established protocols; notice; standards.--

167 (1) NOTICE.--

168 (a) When an osteopathic physician enters into a formal
169 supervisory relationship or standing orders with an emergency
170 medical technician or paramedic licensed pursuant to s. 401.27,
171 which relationship or orders contemplate the performance of
172 medical acts, or when an osteopathic physician enters into an
173 established protocol with an advanced registered nurse
174 practitioner, which protocol contemplates the performance of
175 medical acts identified and approved by the joint committee
176 pursuant to s. 464.003(3)(c) or acts set forth in s. 464.012(3)
177 and (4), the osteopathic physician shall submit notice to the
178 board. The notice shall contain a statement in substantially the
179 following form:

180
181 I, ...(name and professional license number of osteopathic
182 physician)..., of ...(address of osteopathic physician)... have
183 hereby entered into a formal supervisory relationship, standing
184 orders, or an established protocol with ...(number of
185 persons)... emergency medical technician(s), ...(number of
186 persons)... paramedic(s), or ...(number of persons)... advanced
187 registered nurse practitioner(s).

188 (b) Notice shall be filed within 30 days of entering into
189 the relationship, orders, or protocol. Notice also shall be

190 provided within 30 days after the osteopathic physician has
 191 terminated any such relationship, orders, or protocol.

192 (2) PROTOCOLS REQUIRING DIRECT SUPERVISION.--All protocols
 193 relating to electrolysis or electrology using laser or light-
 194 based hair removal or reduction by persons other than
 195 osteopathic physicians licensed under this chapter or physicians
 196 licensed under chapter 458 shall require the person performing
 197 such service to be appropriately trained and work only under the
 198 direct supervision and responsibility of an osteopathic
 199 physician licensed under this chapter or a physician licensed
 200 under chapter 458.

201 (3) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE
 202 SETTINGS.--An osteopathic physician who supervises an advanced
 203 registered nurse practitioner or physician assistant at a
 204 medical office other than the osteopathic physician's primary
 205 practice location, where the advanced registered nurse
 206 practitioner or physician assistant is not under the onsite
 207 supervision of a supervising osteopathic physician, shall comply
 208 with the standards set forth in this subsection. For the purpose
 209 of this subsection, an osteopathic physician's "primary practice
 210 location" means the address reflected on the osteopathic
 211 physician's profile published under s. 456.041.

212 (a) An osteopathic physician who is engaged in providing
 213 primary health care services may not supervise more than four
 214 offices in addition to the osteopathic physician's primary
 215 practice location. For the purpose of this subsection, "primary
 216 health care" means health care services that are commonly
 217 provided to patients without referral from another practitioner,

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218 including obstetrical and gynecological services, and excludes
219 practices providing primarily dermatologic and skin care
220 services, which include aesthetic skin care services.

221 (b) An osteopathic physician who is engaged in providing
222 specialty health care services may not supervise more than two
223 offices in addition to the osteopathic physician's primary
224 practice location. For the purpose of this subsection,
225 "specialty health care" means health care services that are
226 commonly provided to patients with a referral from another
227 practitioner and excludes practices providing primarily
228 dermatologic and skin care services, which include aesthetic
229 skin care services.

230 (c) An osteopathic physician who supervises an advanced
231 registered nurse practitioner or physician assistant at a
232 medical office other than the osteopathic physician's primary
233 practice location, where the advanced registered nurse
234 practitioner or physician assistant is not under the onsite
235 supervision of a supervising osteopathic physician and the
236 services offered at the office are primarily dermatologic or
237 skin care services, which include aesthetic skin care services
238 other than plastic surgery, shall comply with the standards
239 listed in subparagraphs 1.-4. Notwithstanding s.
240 459.022(4)(e)8., an osteopathic physician supervising a
241 physician assistant under this paragraph may not be required to
242 review and cosign charts or medical records prepared by the
243 physician assistant.

244 1. The osteopathic physician shall submit to the board the
245 addresses of all offices where he or she is supervising or has a

246 protocol with an advanced registered nurse practitioner or a
247 physician's assistant that are not the osteopathic physician
248 primary practice location.

249 2. The osteopathic physician shall be board certified or
250 board eligible in dermatology or plastic surgery as recognized
251 by the board under s. 459.0152.

252 3. All offices in which the osteopathic physician is
253 supervising an advanced registered nurse practitioner or a
254 physician assistant that are not the osteopathic physician's
255 primary place of practice shall be within 25 miles of the
256 osteopathic physician's primary place of practice or in a county
257 that is contiguous to the county of the osteopathic physician's
258 primary place of practice. However, the distance between any of
259 the offices may not exceed 75 miles.

260 4. The osteopathic physician may supervise only one office
261 other than the osteopathic physician's primary place of practice
262 except that until July 1, 2011, the osteopathic physician may
263 supervise up to two medical offices other than the osteopathic
264 physician's primary place of practice if the addresses of the
265 offices are submitted to the board prior to July 1, 2006.

266 Effective July 1, 2011, the osteopathic physician may supervise
267 only one office other than the osteopathic physician's primary
268 place of practice, regardless of when the addresses of the
269 offices were submitted to the board.

270 (d) An osteopathic physician who supervises an office in
271 addition to the osteopathic physician's primary practice
272 location shall conspicuously post in each of the osteopathic
273 physician's offices a current schedule of the regular hours that

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274 the osteopathic physician is present in that office and the
275 hours that the office is open when the osteopathic physician is
276 not present.

277 (e) This subsection shall not apply to health care
278 services provided in facilities licensed under chapter 395 or in
279 conjunction with a college of medicine, college of nursing,
280 accredited graduate medical program, or nursing education
281 program; offices in which the only service being performed is
282 hair removal by an advanced registered nurse practitioner or
283 physician assistant; not-for-profit, family planning clinics
284 that are not licensed pursuant to chapter 390; rural and
285 federally qualified health centers; health care services
286 provided in a nursing home licensed under part II of chapter
287 400, an assisted living facility licensed under part III of
288 chapter 400, a continuing care facility licensed under chapter
289 651, or a retirement community consisting of independent living
290 units and a licensed nursing home or assisted living facility;
291 anesthesia services provided in accordance with law; health care
292 services provided in a designated rural health clinic; health
293 care services provided to persons enrolled in a program designed
294 to maintain elderly persons and persons with disabilities in a
295 home or community-based setting; university primary care student
296 health centers; school health clinics; or health care services
297 provided in federal or state facilities.

298 (4) REQUIREMENTS FOR NOTICE AND REVIEW.--Upon initial
299 referral of a patient by another practitioner, the osteopathic
300 physician receiving the referral shall ensure that the patient
301 is informed of the type of license held by the osteopathic

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302 physician and the type of license held by any other practitioner
 303 who will be providing services to the patient. When scheduling
 304 the initial examination or consultation following the referral,
 305 the patient may decide to see the osteopathic physician or any
 306 other licensed practitioner supervised by the osteopathic
 307 physician and, prior to the initial examination or consultation,
 308 shall sign a form indicating the patient's choice of
 309 practitioner. The supervising osteopathic physician shall review
 310 the medical record of the initial examination or consultation
 311 and ensure that a written report on the initial examination or
 312 consultation is furnished to the referring practitioner within
 313 10 business days following the completion of the initial
 314 examination or consultation.

315 Section 5. Subsection (3) of section 464.012, Florida
 316 Statutes, is amended to read:

317 464.012 Certification of advanced registered nurse
 318 practitioners; fees.--

319 (3) An advanced registered nurse practitioner shall
 320 perform those functions authorized in this section within the
 321 framework of an established protocol that shall be filed with
 322 the board upon biennial license renewal and within 30 days of
 323 entering into a supervisory relationship with a physician or
 324 changes to the protocol. The board shall review the protocol to
 325 ensure compliance with applicable regulatory standards for
 326 protocols. The board shall refer to the department licensees
 327 submitting protocols that are not compliant with the regulatory
 328 standards for protocols. A practitioner currently licensed under
 329 chapter 458, chapter 459, or chapter 466 shall maintain

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330 supervision for directing the specific course of medical
331 treatment. Within the established framework, an advanced
332 registered nurse practitioner may:

- 333 (a) Monitor and alter drug therapies.
- 334 (b) Initiate appropriate therapies for certain conditions.
- 335 (c) Perform additional functions as may be determined by
336 rule in accordance with s. 464.003(3)(c).
- 337 (d) Order diagnostic tests and physical and occupational
338 therapy.

339 Section 6. This act shall take effect July 1, 2006.