

A bill to be entitled

An act relating to physician supervision standards; amending s. 458.348, F.S.; defining the term "physician office practice setting"; providing requirements for supervisory relationships with advanced registered nurse practitioners or physician assistants practicing outside the physician office practice setting; providing rulemaking authority; providing grounds for discipline; exempting certain advanced registered nurse practitioners and physician assistants from certain supervisory relationships and requirements; creating s. 459.025, F.S.; requiring osteopathic physicians in a supervisory relationship with certain professionals to provide notice; providing for protocols requiring direct supervision; defining the term "osteopathic physician office practice setting"; providing requirements for supervisory relationships with advanced registered nurse practitioners or physician assistants practicing outside the osteopathic physician office practice setting; providing rulemaking authority; providing grounds for discipline; exempting certain advanced registered nurse practitioners and physician assistants from certain supervisory relationships and requirements; providing an effective date.

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

Section 1. Section 458.348, Florida Statutes, is amended

29 to read:

30 458.348 Formal supervisory relationships, standing orders,
 31 and established protocols; notice; standards; supervisory
 32 relationships outside the physician office practice setting;
 33 exemptions.--

34 (1) NOTICE.--

35 (a) When a physician enters into a formal supervisory
 36 relationship or standing orders with an emergency medical
 37 technician or paramedic licensed pursuant to s. 401.27, which
 38 relationship or orders contemplate the performance of medical
 39 acts, or when a physician enters into an established protocol
 40 with an advanced registered nurse practitioner, which protocol
 41 contemplates the performance of medical acts identified and
 42 approved by the joint committee pursuant to s. 464.003(3)(c) or
 43 acts set forth in s. 464.012(3) and (4), the physician shall
 44 submit notice to the board. The notice shall contain a statement
 45 in substantially the following form:

46
 47 I, (name and professional license number of physician) ,
 48 of (address of physician) have hereby entered into a formal
 49 supervisory relationship, standing orders, or an established
 50 protocol with (number of persons) emergency medical
 51 technician(s), (number of persons) paramedic(s), or
 52 (number of persons) advanced registered nurse practitioner(s).

53 (b) Notice shall be filed within 30 days after ~~of~~ entering
 54 into the relationship, orders, or protocol. Notice also shall be
 55 provided within 30 days after the physician has terminated any
 56 such relationship, orders, or protocol.

57 (2) ESTABLISHMENT OF STANDARDS BY JOINT COMMITTEE.--The
 58 joint committee created by s. 464.003(3)(c) shall determine
 59 minimum standards for the content of established protocols
 60 pursuant to which an advanced registered nurse practitioner may
 61 perform medical acts identified and approved by the joint
 62 committee pursuant to s. 464.003(3)(c) or acts set forth in s.
 63 464.012(3) and (4) and shall determine minimum standards for
 64 supervision of such acts by the physician, unless the joint
 65 committee determines that any act set forth in s. 464.012(3) or
 66 (4) is not a medical act. Such standards shall be based on risk
 67 to the patient and acceptable standards of medical care and
 68 shall take into account the special problems of medically
 69 underserved areas. The standards developed by the joint
 70 committee shall be adopted as rules by the Board of Nursing and
 71 the Board of Medicine for purposes of carrying out their
 72 responsibilities pursuant to part I of chapter 464 and this
 73 chapter, respectively, but neither board shall have disciplinary
 74 powers over the licensees of the other board.

75 (3) PROTOCOLS REQUIRING DIRECT SUPERVISION.--All protocols
 76 relating to electrolysis or electrology using laser or light-
 77 based hair removal or reduction by persons other than physicians
 78 licensed under this chapter or chapter 459 shall require the
 79 person performing such service to be appropriately trained and
 80 work only under the direct supervision and responsibility of a
 81 physician licensed under this chapter or chapter 459.

82 (4) SUPERVISORY RELATIONSHIPS WITH ADVANCED REGISTERED
 83 NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS PRACTICING OUTSIDE
 84 THE PHYSICIAN OFFICE PRACTICE SETTING.--

85 (a) For purposes of this subsection, the term "physician
 86 office practice setting" means a business location where a
 87 physician delivers medical services regardless of whether the
 88 business is physician owned or nonphysician owned. A physician
 89 office practice setting includes a location where medical
 90 services are performed other than a hospital, an ambulatory
 91 surgical center, an abortion clinic, or any other medical
 92 facility licensed by the Department of Health, the Agency for
 93 Health Care Administration, the Department of Corrections, a
 94 successor agency, or a certified rural health clinic. A business
 95 location is a physician office practice setting if a physician
 96 is physically present at the business location during the
 97 provision of care for more than 40 hours during every 21
 98 consecutive calendar days. A business location that does not
 99 meet this requirement shall be considered outside a physician
 100 office practice setting, irrespective of the ownership or
 101 business name of the location.

102 (b) A physician who is in a supervisory relationship with
 103 an advanced registered nurse practitioner as described in s.
 104 464.012(4)(c) or a physician assistant as described in s.
 105 458.347(2)(f) who is practicing outside a physician office
 106 practice setting of the supervising physician shall:

107 1. Maintain a valid and unrestricted active Florida
 108 license pursuant to this chapter and a valid federal controlled
 109 substance registry number pursuant to chapter 893.

110 2. Provide indirect supervision as defined by the Board of
 111 Medicine to the advanced registered nurse practitioner or
 112 physician assistant.

113 3. Notwithstanding the number of supervisory relationships
114 authorized in s. 458.347(3), maintain no more than four
115 supervisory relationships with any combination of advanced
116 registered nurse practitioners or physician assistants outside
117 the physician office practice setting at any one time.

118 4. Delegate only tasks and procedures to the advanced
119 registered nurse practitioner or physician assistant which are
120 within the supervising physician's practice and medical
121 specialty area.

122 5. Ensure that the advanced registered nurse practitioner
123 or physician assistant has been actively practicing within the
124 medical specialty area for a minimum of 4 years prior to
125 providing care in a practice setting outside the physician
126 office practice setting of the supervising physician.

127 6. Ensure that the advanced registered nurse practitioner
128 or physician assistant under supervision wears identification
129 that clearly identifies to the patient that he or she is an
130 advanced registered nurse practitioner or a physician assistant.

131 7. Document consultation, at least every 21 calendar days,
132 with the advanced registered nurse practitioner or physician
133 assistant, during which patient medical files and care plans
134 managed by the advanced registered nurse practitioner or
135 physician assistant during the preceding 21 calendar days are
136 evaluated.

137 (5) RULES.--The Board of Medicine may adopt rules to
138 administer this section. The Board of Medicine shall take into
139 consideration existing rules and laws governing supervision, as
140 well as assessment, diagnosis, treatment, and procedures that

141 are safely performed by an advanced registered nurse
 142 practitioner or physician assistant under indirect supervision.

143 (6) FAILURE TO COMPLY.--Any licensee failing to comply
 144 with this section or any rule adopted pursuant to this section
 145 is in violation of s. 458.331(1)(w) or (dd), and such violation
 146 constitutes grounds for denial of license or disciplinary action
 147 as specified in s. 456.072(2).

148 (7) EXEMPTIONS.--The requirements of this section shall
 149 not apply to advanced registered nurse practitioners or
 150 physician assistants providing services in a nursing home
 151 licensed under part II of chapter 400, an assisted living
 152 facility licensed under part III of chapter 400, a continuing
 153 care facility licensed under chapter 651, or a retirement
 154 community consisting of independent living units and either a
 155 licensed nursing home or assisted living facility. The
 156 requirements of this section shall not apply to advanced
 157 registered nurse practitioners or physician assistants providing
 158 services to persons enrolled in a program designed to maintain
 159 elders and persons with disabilities in a home and community-
 160 based setting.

161 Section 2. Section 459.025, Florida Statutes, is created
 162 to read:

163 459.025 Formal supervisory relationships, standing orders,
 164 and established protocols; notice; standards; supervisory
 165 relationships outside the osteopathic physician office practice
 166 setting; exemptions.--

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 persons)
 185 emergency medical technician(s), (number of persons)
 186 paramedic(s), or (number of persons) advanced registered
 187 nurse practitioner(s).

188 (b) Notice shall be filed within 30 days after entering
 189 into 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 shall require
 196 the person performing such service to be appropriately trained

197 and work only under the direct supervision and responsibility of
 198 an osteopathic physician licensed under this chapter.

199 (3) SUPERVISORY RELATIONSHIPS WITH ADVANCED REGISTERED
 200 NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS PRACTICING OUTSIDE
 201 THE PHYSICIAN OFFICE PRACTICE SETTING.--

202 (a) For purposes of this subsection, the term "osteopathic
 203 physician office practice setting" means a business location
 204 where an osteopathic physician delivers medical services
 205 regardless of whether the business is osteopathic physician
 206 owned or nonphysician owned. An osteopathic physician office
 207 practice setting includes a location where medical services are
 208 performed other than a hospital, an ambulatory surgical center,
 209 an abortion clinic, or any other medical facility licensed by
 210 the Department of Health, the Agency for Health Care
 211 Administration, the Department of Corrections, a successor
 212 agency, or a certified rural health clinic. A business location
 213 is an osteopathic physician office practice setting if an
 214 osteopathic physician is physically present at the business
 215 location during the provision of care for more than 40 hours
 216 during every 21 consecutive calendar days. A business location
 217 that does not meet this requirement shall be considered outside
 218 an osteopathic physician office practice setting, irrespective
 219 of the ownership or business name of the location.

220 (b) An osteopathic physician who is in a supervisory
 221 relationship with an advanced registered nurse practitioner as
 222 described in s. 464.012(4)(c) or a physician assistant as
 223 described in s. 459.022(2)(f) who is practicing outside an
 224 osteopathic physician office practice setting of the supervising

HB 851

2006

225 osteopathic physician shall:

226 1. Maintain a valid and unrestricted active Florida
227 license pursuant to this chapter and a valid federal controlled
228 substance registry number pursuant to chapter 893.

229 2. Provide indirect supervision as defined by the Board of
230 Osteopathic Medicine to the advanced registered nurse
231 practitioner or physician assistant.

232 3. Notwithstanding the number of supervisory relationships
233 authorized in s. 459.022(3), maintain no more than four
234 supervisory relationships with any combination of advanced
235 registered nurse practitioners or physician assistants outside
236 the osteopathic physician office practice setting at any one
237 time.

238 4. Delegate only tasks and procedures to the advanced
239 registered nurse practitioner or physician assistant which are
240 within the supervising osteopathic physician's practice and
241 medical specialty area.

242 5. Ensure that the advanced registered nurse practitioner
243 or physician assistant has been actively practicing within the
244 medical specialty area for a minimum of 4 years prior to
245 providing care in a practice setting outside the osteopathic
246 physician office practice setting of the supervising osteopathic
247 physician.

248 6. Ensure that the advanced registered nurse practitioner
249 or physician assistant under supervision wears identification
250 that clearly identifies to the patient that he or she is an
251 advanced registered nurse practitioner or a physician assistant.

252 7. Document consultation, at least every 21 calendar days,

253 with the advanced registered nurse practitioner or physician
 254 assistant, during which patient medical files and care plans
 255 managed by the advanced registered nurse practitioner or
 256 physician assistant during the preceding 21 calendar days are
 257 evaluated.

258 (4) RULES.--The Board of Osteopathic Medicine may adopt
 259 rules to administer this section. The Board of Osteopathic
 260 Medicine shall take into consideration existing rules and laws
 261 governing supervision, as well as assessment, diagnosis,
 262 treatment, and procedures that are safely performed by an
 263 advanced registered nurse practitioner or physician assistant
 264 under indirect supervision.

265 (5) FAILURE TO COMPLY.--Any licensee failing to comply
 266 with this section or any rule adopted pursuant to this section
 267 is in violation of s. 459.015(1)(aa) or (hh), and such violation
 268 constitutes grounds for denial of license or disciplinary action
 269 as specified in s. 456.072(2).

270 (6) EXEMPTIONS.--The requirements of this section shall
 271 not apply to advanced registered nurse practitioners or
 272 physician assistants providing services in a nursing home
 273 licensed under part II of chapter 400, an assisted living
 274 facility licensed under part III of chapter 400, a continuing
 275 care facility licensed under chapter 651, or a retirement
 276 community consisting of independent living units and either a
 277 licensed nursing home or assisted living facility. The
 278 requirements of this section shall not apply to advanced
 279 registered nurse practitioners or physician assistants providing
 280 services to persons enrolled in a program designed to maintain

HB 851

2006

281 elders and persons with disabilities in a home and community-
282 based setting.

283 Section 3. This act shall take effect upon becoming a law.