



## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. HOUSE PRINCIPLES ANALYSIS:

Provide limited government – this bill will authorize physician assistants to dispense medicinal drugs directly to patients, rather than through a pharmacy.

#### B. EFFECT OF PROPOSED CHANGES:

##### Present Situation

##### *Physician Assistants*

Sections 458.347(7), and 459.022(7), F.S., govern the licensure of physician assistants (“PA”) in Florida. Physician assistants are licensed by the Department of Health (“department”) and are regulated by the Council on Physician Assistants and either the Florida Board of Medicine or the Florida Board of Osteopathic Medicine. Among other requirements, an applicant for licensure as a physician assistant must demonstrate passage of the National Commission on Certification of Physician Assistants examination and submit certification of completion of a physician assistant training program. Fees for licensure and renewal are set in statute and renewal occurs biennially.<sup>1</sup> Applicants for renewal must complete 100 hours of continuing medical education every two years or hold a current certification issued by the National Commission on Certification of Physician Assistants.

A supervising physician may only delegate tasks and procedures to the physician assistant that are within the supervising physician’s scope of practice. The supervising physician is responsible and liable for any and all acts of the PA and may only supervise up to four PAs at any time.

Sections 458.347(4) and 459.022(4), F.S. authorize a supervisory physician to delegate to a PA the authority to prescribe any medication used in the supervisory physician's practice. The department must be notified by the supervising physician of the intent to delegate prescribing authority to the PA and the PA must be licensed to prescribe by the department. Licensure for a PA to prescribe is predicated upon completion of a three hour medical education course in prescriptive practice and at least three months of clinical experience in the specialty area of the supervising physician. Further, prescriptions written by PAs must be written in a form that complies with Chapter 499, F.S., and, with the exception of a drug sample, may only be filled in a pharmacy permitted under Chapter 465, F.S. Section 458.347(4)(F)(1) directs the Council on Physician Assistants to establish a formulary of medications that a PA may not prescribe. Medications that are prohibited in the formulary include controlled substances as defined in Chapter 893, F.S., antipsychotics, spinal or epidural anesthetics, radiographic contrast materials, and any parenteral preparation except insulin and epinephrine.

There are currently 3,675 active, licensed physician assistants practicing in the state of Florida.<sup>2</sup>

##### *Dispensing of Medications*

Section 465.0276, F.S., provides that practitioners who are authorized by law to prescribe drugs may dispense medicinal drugs, if they register with their applicable licensing boards. Approved practitioners are subject to all of the same laws and regulations as licensed pharmacists and pharmacies, including premises inspection by the department. A practitioner who only dispenses manufacturer drug samples is not required to register under this section. Currently, allopathic and osteopathic physicians and advanced register nurse practitioners may register as dispensing practitioners.

##### Effect of Proposed Changes

<sup>1</sup> ss. 458.347(7) and 459.022(7), F.S.

<sup>2</sup> Florida Department of Health, Division of Medical Quality Assurance Annual Report 2005-2006.

The bill authorizes a physician assistant to dispense medicinal drugs if the physician assistant is supervised by a physician registered to dispense medical drugs.

C. SECTION DIRECTORY:

Section 1. Amends s. 458.347, F.S., relating to physician assistants.

Section 2. Provides for an effective date of July 1, 2007.

## II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

According to department staff, the fiscal impact is insignificant as there is minimal cost to the department for enforcement and compliance functions associated with this bill.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

## III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not appear to require counties or municipalities to take an action requiring the expenditure of funds, reduce the authority that counties or municipalities have to raise revenue in the aggregate, nor reduce the percentage of state tax shared with counties or municipalities.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

No additional rule-making authority is required as a result of this bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

Physician assistants are supervised by both allopathic and osteopathic physicians. However, the bill only authorizes physician assistants practicing under allopathic physicians to dispense medicinal drugs. Further, the bill only inserts dispensing authority in one subsection of the statute, while multiple subsections apply to the prescribing of medicinal drugs by a physician assistant.

D. STATEMENT OF THE SPONSOR

No statement submitted.

**IV. AMENDMENTS/COUNCIL SUBSTITUTE CHANGES**

On March 13, 2007, the Health Quality Committee adopted one strike-all amendment to the bill. The strike-all amendment corrects a number of drafting errors and clarifies that a PA may dispense medicinal drugs only if his or her supervising physician is registered to dispense medicinal drugs.

The bill was reported favorably with recommended Council Substitute.