

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Health Policy Committee

BILL: SB 1106

INTRODUCER: Senator Saunders

SUBJECT: Physician Assistants

DATE: February 29, 2008 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Munroe	Wilson	HR	Favorable
2.	Munroe	Wilson	HP	Favorable
3.			HA	
4.				
5.				
6.				

I. Summary:

The bill deletes antipsychotics and parenteral preparations from the formulary of drugs that physician assistants are prohibited from prescribing.

This bill amends section 458.347, Florida Statutes:

II. Present Situation:

Chapter 458, Florida Statutes, governs the practice of medicine in Florida. Chapter 459, F.S., similarly governs the practice of osteopathic medicine. Physician assistants licensed under ch. 458 and ch. 459, F.S.,¹ are authorized to provide health care services under the supervision of a medical physician or osteopathic physician. A supervising physician is authorized to delegate to a physician assistant that he or she supervises the authority to perform medical acts of diagnosis, treatment, and prescription. A supervisory physician may delegate to a fully licensed physician assistant the authority to prescribe any medication used in the supervisory physician's practice unless the medication is listed on the formulary established under s. 458.347(4)(f), F.S.

Each physician or group of physicians supervising a licensed physician assistant must be qualified in the medical areas in which the physician assistant is to perform and must be individually or collectively responsible and liable for the performance and the acts and omissions of the physician assistant. A physician may not supervise more than four currently licensed physician assistants at any one time.

¹ See sections 458.347 and 459.022, F.S.

For purposes of the regulation of physician assistants, “supervision” is defined in ss. 458.347 and 459.022, F.S., to mean responsible supervision and control. Except for cases of emergency, supervision requires the easy availability or physical presence of the licensed physician for consultation and direction of the actions of the physician assistant. “Easy availability” is defined to include the ability to communicate by way of telecommunication. The Board of Medicine and the Board of Osteopathic Medicine must establish rules as to what constitutes responsible supervision of the physician assistant. The Board of Medicine and the Board of Osteopathic Medicine have adopted identical administrative rules that define “direct supervision” to mean the presence of the supervising physician on the premises so that the supervising physician is immediately available to the physician assistant when needed.² “Indirect supervision” is defined under the rules to mean the easy availability of the supervising physician to the physician assistant, which includes the ability to communicate by telecommunications and the supervising physician must be within reasonable physical proximity.³

A five-member council, the Council on Physician Assistants, must develop all rules relating to the practice of physician assistants, except for rules relating to the formulary of drugs that a physician assistant may not prescribe. Physician assistants are authorized to prescribe any drug that is not listed in the formulary established under s. 458.347(4)(f), F.S. The formulary must include controlled substances, antipsychotics, general anesthetics, radiographic contrast materials, and all parenteral preparations (drugs administered via means other than the digestive tract such as intramuscular or intravenous injections) except insulin and epinephrine.

III. Effect of Proposed Changes:

The bill amends s. 458.347, F.S., to delete antipsychotics and parenteral preparations from the formulary of drugs that physician assistants are prohibited from prescribing.

The effective date of the bill is July 1, 2008.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Article VII, Section 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Article I, Section 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Article VII, Section 18 of the Florida Constitution.

² See Rules 64B8-30.001(3) and 64B15-6.001(4), Florida Administrative Code.

³ See Rules 64B8-30.001(5) and 64B15-6.001(5), F.A.C.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The Department of Health may incur minimal expenses to develop rules to implement the bill.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Additional Information:

A. Committee Substitute – Statement of Substantial Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.