First Engrossed

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1	A bill to be entitled
2	An act relating to physician practice; amending s.
3	458.3312, F.S.; revising provisions regarding board
4	certification of a physician as a specialist; amending
5	ss. 458.347 and 459.022, F.S.; providing that a
6	supervising physician may not be required to review
7	and cosign a physician assistant's charts or medical
8	records; deleting certain supervisory physician
9	requirements related to prescribing and dispensing
10	medications noted in appropriate medical records;
11	amending s. 458.348, F.S.; exempting offices at which
12	laser hair removal is the exclusive service being
13	performed from certain provisions requiring direct
14	supervision by a physician; providing an effective
15	date.
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17	Be It Enacted by the Legislature of the State of Florida:
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19	Section 1. Section 458.3312, Florida Statutes, is amended
20	to read:
21	458.3312 SpecialtiesA physician licensed under this
22	chapter may not hold himself or herself out as a board-certified
23	specialist unless the physician has received formal recognition
24	as a specialist from a specialty board of the American Board of
25	Medical Specialties or other recognizing agency that has been
26	approved by the board. However, a physician may indicate the
27	services offered and may state that his or her practice is
28	limited to one or more types of services when this accurately
29	reflects the scope of practice of the physician. <u>A physician may</u>

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30	not hold himself or herself out as a board-certified specialist								
31	in dermatology unless the recognizing agency, whether authorized								
32	in statute or by rule, is triennially reviewed and reauthorized								
33	by the Board of Medicine.								
34	Section 2. Subsection (3) and paragraph (e) of subsection								
35	(4) of section 458.347, Florida Statutes, are amended to read:								
36	458.347 Physician assistants.—								
37	(3) PERFORMANCE OF SUPERVISING PHYSICIANEach physician or								
38	group of physicians supervising a licensed physician assistant								
39	must be qualified in the medical areas in which the physician								
40	assistant is to perform and shall be individually or								
41	collectively responsible and liable for the performance and the								
42	acts and omissions of the physician assistant. A physician may								
43	not supervise more than four currently licensed physician								
44	assistants at any one time. <u>A physician supervising a physician</u>								
45	assistant pursuant to this section may not be required to review								
46	and cosign charts or medical records prepared by such physician								
47	assistant.								
48	(4) PERFORMANCE OF PHYSICIAN ASSISTANTS								
49	(e) A supervisory physician may delegate to a fully								
50	licensed physician assistant the authority to prescribe or								
51	dispense any medication used in the supervisory physician's								
52	practice unless such medication is listed on the formulary								
53	created pursuant to paragraph (f). A fully licensed physician								
54	assistant may only prescribe or dispense such medication under								
55	the following circumstances:								

56 1. A physician assistant must clearly identify to the 57 patient that he or she is a physician assistant. Furthermore, 58 the physician assistant must inform the patient that the patient

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59 has the right to see the physician prior to any prescription60 being prescribed or dispensed by the physician assistant.

2. The supervisory physician must notify the department of his or her intent to delegate, on a department-approved form, before delegating such authority and notify the department of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a supervising physician who is registered as a dispensing practitioner in compliance with s. 465.0276.

68 3. The physician assistant must file with the department, 69 before commencing to prescribe or dispense, evidence that he or 70 she has completed a continuing medical education course of at 71 least 3 classroom hours in prescriptive practice, conducted by 72 an accredited program approved by the boards, which course 73 covers the limitations, responsibilities, and privileges 74 involved in prescribing medicinal drugs, or evidence that he or 75 she has received education comparable to the continuing 76 education course as part of an accredited physician assistant 77 training program.

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

5. The physician assistant must file with the department a signed affidavit that he or she has completed a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal application.

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6. The department shall issue a license and a prescriber

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number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the foregoing requirements. The physician assistant shall not be required to independently register pursuant to s. 465.0276.

7. The prescription must be written in a form that complies 93 94 with chapter 499 and must contain, in addition to the supervisory physician's name, address, and telephone number, the 95 96 physician assistant's prescriber number. Unless it is a drug or 97 drug sample dispensed by the physician assistant, the 98 prescription must be filled in a pharmacy permitted under 99 chapter 465 and must be dispensed in that pharmacy by a 100 pharmacist licensed under chapter 465. The appearance of the 101 prescriber number creates a presumption that the physician 102 assistant is authorized to prescribe the medicinal drug and the 103 prescription is valid.

104 8. The physician assistant must note the prescription or 105 dispensing of medication in the appropriate medical record, and 106 the supervisory physician must review and sign each notation. 107 For dispensing purposes only, the failure of the supervisory 108 physician to comply with these requirements does not affect the 109 validity of the prescription.

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

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115 This paragraph does not apply to facilities licensed pursuant to 116 chapter 395.

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Section 3. Subsection (3) of section 458.348, Florida Statutes is republished, and paragraph (e) of subsection (4) of that section is amended to read:

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

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

129 (4) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.-A 130 physician who supervises an advanced registered nurse 131 practitioner or physician assistant at a medical office other 132 than the physician's primary practice location, where the 133 advanced registered nurse practitioner or physician assistant is 134 not under the onsite supervision of a supervising physician, 135 must comply with the standards set forth in this subsection. For the purpose of this subsection, a physician's "primary practice 136 137 location" means the address reflected on the physician's profile 138 published pursuant to s. 456.041.

(e) This subsection does not apply to health care services
provided in facilities licensed under chapter 395 or in
conjunction with a college of medicine, a college of nursing, an
accredited graduate medical program, or a nursing education
program; offices where the only service being performed is hair
removal by an advanced registered nurse practitioner or
physician assistant; not-for-profit, family-planning clinics

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146 that are not licensed pursuant to chapter 390; rural and 147 federally qualified health centers; health care services 148 provided in a nursing home licensed under part II of chapter 149 400, an assisted living facility licensed under part I of 150 chapter 429, a continuing care facility licensed under chapter 151 651, or a retirement community consisting of independent living 152 units and a licensed nursing home or assisted living facility; 153 anesthesia services provided in accordance with law; health care 154 services provided in a designated rural health clinic; health 155 care services provided to persons enrolled in a program designed to maintain elderly persons and persons with disabilities in a 156 157 home or community-based setting; university primary care student 158 health centers; school health clinics; or health care services 159 provided in federal, state, or local government facilities. 160 Subsection (3) and this subsection do not apply to offices at 161 which the exclusive service being performed is laser hair 162 removal by an advanced registered nurse practitioner or 163 physician assistant.

Section 4. Subsection (3) and paragraph (e) of subsection (4) and of section 459.022, Florida Statutes, are amended to read:

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459.022 Physician assistants.-

(3) PERFORMANCE OF SUPERVISING PHYSICIAN.—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 shall 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

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175 assistants at any one time. <u>A physician supervising a physician</u> 176 <u>assistant pursuant to this section may not be required to review</u> 177 <u>and cosign charts or medical records prepared by such physician</u> 178 <u>assistant.</u>

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(4) PERFORMANCE OF PHYSICIAN ASSISTANTS.-

(e) A supervisory physician may delegate to a fully
licensed physician assistant the authority to prescribe or
dispense any medication used in the supervisory physician's
practice unless such medication is listed on the formulary
created pursuant to s. 458.347. A fully licensed physician
assistant may only prescribe or dispense such medication under
the following circumstances:

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

2. The supervisory physician must notify the department of her or his intent to delegate, on a department-approved form, before delegating such authority and notify the department of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a supervisory physician who is registered as a dispensing practitioner in compliance with s. 465.0276.

199 3. The physician assistant must file with the department, 200 before commencing to prescribe or dispense, evidence that she or 201 he has completed a continuing medical education course of at 202 least 3 classroom hours in prescriptive practice, conducted by 203 an accredited program approved by the boards, which course

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204 covers the limitations, responsibilities, and privileges 205 involved in prescribing medicinal drugs, or evidence that she or 206 he has received education comparable to the continuing education 207 course as part of an accredited physician assistant training 208 program.

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

5. The physician assistant must file with the department a signed affidavit that she or he has completed a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal application.

6. The department shall issue a license and a prescriber number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the foregoing requirements. The physician assistant shall not be required to independently register pursuant to s. 465.0276.

224 7. The prescription must be written in a form that complies 225 with chapter 499 and must contain, in addition to the supervisory physician's name, address, and telephone number, the 226 227 physician assistant's prescriber number. Unless it is a drug or 228 drug sample dispensed by the physician assistant, the 229 prescription must be filled in a pharmacy permitted under 230 chapter 465, and must be dispensed in that pharmacy by a 231 pharmacist licensed under chapter 465. The appearance of the prescriber number creates a presumption that the physician 232

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233	assistant is	authorized	to	prescribe	the	medicinal	drug	and	the
234	prescription	is valid.							

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

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

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

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Section 5. This act shall take effect July 1, 2009.