

By Senator Jones

13-01285-10

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1                   A bill to be entitled  
2           An act relating to physician assistants; amending ss.  
3           458.347 and 459.022, F.S.; deleting requirements that  
4           physician assistants file with the Department of  
5           Health evidence of having obtained certain clinical  
6           experience before prescribing or dispensing  
7           medication; amending ss. 458.348 and 459.025, F.S.;  
8           conforming cross-references; providing an effective  
9           date.

10  
11 Be It Enacted by the Legislature of the State of Florida:

12  
13           Section 1. Paragraph (e) of subsection (4) of section  
14           458.347, Florida Statutes, is amended to read:

15           458.347 Physician assistants.—

16           (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.—

17           (e) A supervisory physician may delegate to a fully  
18           licensed physician assistant the authority to prescribe or  
19           dispense any medication used in the supervisory physician's  
20           practice unless such medication is listed on the formulary  
21           created pursuant to paragraph (f). A fully licensed physician  
22           assistant may only prescribe or dispense such medication under  
23           the following circumstances:

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

29           2. The supervisory physician must notify the department of

13-01285-10

20101456

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

36 3. The physician assistant must file with the department,  
37 before commencing to prescribe or dispense, evidence that he or  
38 she has completed a continuing medical education course of at  
39 least 3 classroom hours in prescriptive practice, conducted by  
40 an accredited program approved by the boards, which course  
41 covers the limitations, responsibilities, and privileges  
42 involved in prescribing medicinal drugs, or evidence that he or  
43 she has received education comparable to the continuing  
44 education course as part of an accredited physician assistant  
45 training program.

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

50 4.5. The physician assistant must file with the department  
51 a signed affidavit that he or she has completed a minimum of 10  
52 continuing medical education hours in the specialty practice in  
53 which the physician assistant has prescriptive privileges with  
54 each licensure renewal application.

55 5.6. The department shall issue a license and a prescriber  
56 number to the physician assistant granting authority for the  
57 prescribing of medicinal drugs authorized within this paragraph  
58 upon completion of the foregoing requirements. The physician

13-01285-10

20101456\_\_

59 assistant shall not be required to independently register  
60 pursuant to s. 465.0276.

61 ~~6.7.~~ The prescription must be written in a form that  
62 complies with chapter 499 and must contain, in addition to the  
63 supervisory physician's name, address, and telephone number, the  
64 physician assistant's prescriber number. Unless it is a drug or  
65 drug sample dispensed by the physician assistant, the  
66 prescription must be filled in a pharmacy permitted under  
67 chapter 465 and must be dispensed in that pharmacy by a  
68 pharmacist licensed under chapter 465. The appearance of the  
69 prescriber number creates a presumption that the physician  
70 assistant is authorized to prescribe the medicinal drug and the  
71 prescription is valid.

72 ~~7.8.~~ The physician assistant must note the prescription or  
73 dispensing of medication in the appropriate medical record.

74 ~~8.9.~~ This paragraph does not prohibit a supervisory  
75 physician from delegating to a physician assistant the authority  
76 to order medication for a hospitalized patient of the  
77 supervisory physician.

78  
79 This paragraph does not apply to facilities licensed pursuant to  
80 chapter 395.

81 Section 2. Paragraph (e) of subsection (4) of section  
82 459.022, Florida Statutes, is amended to read:

83 459.022 Physician assistants.—

84 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.—

85 (e) A supervisory physician may delegate to a fully  
86 licensed physician assistant the authority to prescribe or  
87 dispense any medication used in the supervisory physician's

13-01285-10

20101456

88 practice unless such medication is listed on the formulary  
89 created pursuant to s. 458.347. A fully licensed physician  
90 assistant may only prescribe or dispense such medication under  
91 the following circumstances:

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

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

104 3. The physician assistant must file with the department,  
105 before commencing to prescribe or dispense, evidence that she or  
106 he has completed a continuing medical education course of at  
107 least 3 classroom hours in prescriptive practice, conducted by  
108 an accredited program approved by the boards, which course  
109 covers the limitations, responsibilities, and privileges  
110 involved in prescribing medicinal drugs, or evidence that she or  
111 he has received education comparable to the continuing education  
112 course as part of an accredited physician assistant training  
113 program.

114 ~~4. The physician assistant must file with the department,~~  
115 ~~before commencing to prescribe or dispense, evidence that the~~  
116 ~~physician assistant has a minimum of 3 months of clinical~~

13-01285-10

20101456

117 ~~experience in the specialty area of the supervising physician.~~

118 4.5. The physician assistant must file with the department  
119 a signed affidavit that she or he has completed a minimum of 10  
120 continuing medical education hours in the specialty practice in  
121 which the physician assistant has prescriptive privileges with  
122 each licensure renewal application.

123 5.6. The department shall issue a license and a prescriber  
124 number to the physician assistant granting authority for the  
125 prescribing of medicinal drugs authorized within this paragraph  
126 upon completion of the foregoing requirements. The physician  
127 assistant shall not be required to independently register  
128 pursuant to s. 465.0276.

129 6.7. The prescription must be written in a form that  
130 complies with chapter 499 and must contain, in addition to the  
131 supervisory physician's name, address, and telephone number, the  
132 physician assistant's prescriber number. Unless it is a drug or  
133 drug sample dispensed by the physician assistant, the  
134 prescription must be filled in a pharmacy permitted under  
135 chapter 465, and must be dispensed in that pharmacy by a  
136 pharmacist licensed under chapter 465. The appearance of the  
137 prescriber number creates a presumption that the physician  
138 assistant is authorized to prescribe the medicinal drug and the  
139 prescription is valid.

140 7.8. The physician assistant must note the prescription or  
141 dispensing of medication in the appropriate medical record.

142 8.9. This paragraph does not prohibit a supervisory  
143 physician from delegating to a physician assistant the authority  
144 to order medication for a hospitalized patient of the  
145 supervisory physician.

13-01285-10

20101456\_\_

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

149 Section 3. Paragraph (c) of subsection (4) of section  
150 458.348, Florida Statutes, is amended to read:

151 458.348 Formal supervisory relationships, standing orders,  
152 and established protocols; notice; standards.—

153 (4) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.—A  
154 physician who supervises an advanced registered nurse  
155 practitioner or physician assistant at a medical office other  
156 than the physician's primary practice location, where the  
157 advanced registered nurse practitioner or physician assistant is  
158 not under the onsite supervision of a supervising physician,  
159 must comply with the standards set forth in this subsection. For  
160 the purpose of this subsection, a physician's "primary practice  
161 location" means the address reflected on the physician's profile  
162 published pursuant to s. 456.041.

163 (c) A physician who supervises an advanced registered nurse  
164 practitioner or physician assistant at a medical office other  
165 than the physician's primary practice location, where the  
166 advanced registered nurse practitioner or physician assistant is  
167 not under the onsite supervision of a supervising physician and  
168 the services offered at the office are primarily dermatologic or  
169 skin care services, which include aesthetic skin care services  
170 other than plastic surgery, must comply with the standards  
171 listed in subparagraphs 1.-4. Notwithstanding s. 458.347(4)(e)7.  
172 ~~s. 458.347(4)(e)8.~~, a physician supervising a physician  
173 assistant pursuant to this paragraph may not be required to  
174 review and cosign charts or medical records prepared by such

13-01285-10

20101456\_\_

175 physician assistant.

176 1. The physician shall submit to the board the addresses of  
177 all offices where he or she is supervising an advanced  
178 registered nurse practitioner or a physician's assistant which  
179 are not the physician's primary practice location.

180 2. The physician must be board certified or board eligible  
181 in dermatology or plastic surgery as recognized by the board  
182 pursuant to s. 458.3312.

183 3. All such offices that are not the physician's primary  
184 place of practice must be within 25 miles of the physician's  
185 primary place of practice or in a county that is contiguous to  
186 the county of the physician's primary place of practice.  
187 However, the distance between any of the offices may not exceed  
188 75 miles.

189 4. The physician may supervise only one office other than  
190 the physician's primary place of practice except that until July  
191 1, 2011, the physician may supervise up to two medical offices  
192 other than the physician's primary place of practice if the  
193 addresses of the offices are submitted to the board before July  
194 1, 2006. Effective July 1, 2011, the physician may supervise  
195 only one office other than the physician's primary place of  
196 practice, regardless of when the addresses of the offices were  
197 submitted to the board.

198 Section 4. Paragraph (c) of subsection (3) of section  
199 459.025, Florida Statutes, is amended to read:

200 459.025 Formal supervisory relationships, standing orders,  
201 and established protocols; notice; standards.—

202 (3) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.—  
203 An osteopathic physician who supervises an advanced registered

13-01285-10

20101456

204 nurse practitioner or physician assistant at a medical office  
205 other than the osteopathic physician's primary practice  
206 location, where the advanced registered nurse practitioner or  
207 physician assistant is not under the onsite supervision of a  
208 supervising osteopathic physician, must comply with the  
209 standards set forth in this subsection. For the purpose of this  
210 subsection, an osteopathic physician's "primary practice  
211 location" means the address reflected on the physician's profile  
212 published pursuant to s. 456.041.

213 (c) An osteopathic physician who supervises an advanced  
214 registered nurse practitioner or physician assistant at a  
215 medical office other than the osteopathic physician's primary  
216 practice location, where the advanced registered nurse  
217 practitioner or physician assistant is not under the onsite  
218 supervision of a supervising osteopathic physician and the  
219 services offered at the office are primarily dermatologic or  
220 skin care services, which include aesthetic skin care services  
221 other than plastic surgery, must comply with the standards  
222 listed in subparagraphs 1.-4. Notwithstanding s. 459.022(4)(e)7.  
223 ~~s. 459.022(4)(e)8.~~, an osteopathic physician supervising a  
224 physician assistant pursuant to this paragraph may not be  
225 required to review and cosign charts or medical records prepared  
226 by such physician assistant.

227 1. The osteopathic physician shall submit to the Board of  
228 Osteopathic Medicine the addresses of all offices where he or  
229 she is supervising or has a protocol with an advanced registered  
230 nurse practitioner or a physician's assistant which are not the  
231 osteopathic physician's primary practice location.

232 2. The osteopathic physician must be board certified or



13-01285-10

20101456\_\_

233 board eligible in dermatology or plastic surgery as recognized  
234 by the Board of Osteopathic Medicine pursuant to s. 459.0152.

235 3. All such offices that are not the osteopathic  
236 physician's primary place of practice must be within 25 miles of  
237 the osteopathic physician's primary place of practice or in a  
238 county that is contiguous to the county of the osteopathic  
239 physician's primary place of practice. However, the distance  
240 between any of the offices may not exceed 75 miles.

241 4. The osteopathic physician may supervise only one office  
242 other than the osteopathic physician's primary place of practice  
243 except that until July 1, 2011, the osteopathic physician may  
244 supervise up to two medical offices other than the osteopathic  
245 physician's primary place of practice if the addresses of the  
246 offices are submitted to the Board of Osteopathic Medicine  
247 before July 1, 2006. Effective July 1, 2011, the osteopathic  
248 physician may supervise only one office other than the  
249 osteopathic physician's primary place of practice, regardless of  
250 when the addresses of the offices were submitted to the Board of  
251 Osteopathic Medicine.

252 Section 5. This act shall take effect July 1, 2010.