

CS/HB 573

2010

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 evidence of certain clinical
5 experience before prescribing or dispensing medication;
6 authorizing the electronic submission of physician
7 assistant license applications and other required
8 documentation; amending ss. 458.348 and 459.025, F.S.;
9 conforming cross-references; providing an effective 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, and paragraph (h) is
15 added to subsection (7) of that section, to read:

16 458.347 Physician assistants.—

17 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.—

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

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

29 being prescribed or dispensed by the physician assistant.

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

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

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

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

56 ~~5.6.~~ The department shall issue a license and a prescriber

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

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

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

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

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

82 | (7) PHYSICIAN ASSISTANT LICENSURE.—

83 | (h) An application or other documentation required to be
 84 | submitted to the department under this subsection may be

85 submitted electronically.

86 Section 2. Paragraph (c) of subsection (4) of section
87 458.348, Florida Statutes, is amended to read:

88 458.348 Formal supervisory relationships, standing orders,
89 and established protocols; notice; standards.—

90 (4) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.—

91 A physician who supervises an advanced registered nurse
92 practitioner or physician assistant at a medical office other
93 than the physician's primary practice location, where the
94 advanced registered nurse practitioner or physician assistant is
95 not under the onsite supervision of a supervising physician,
96 must comply with the standards set forth in this subsection. For
97 the purpose of this subsection, a physician's "primary practice
98 location" means the address reflected on the physician's profile
99 published pursuant to s. 456.041.

100 (c) A physician who supervises an advanced registered
101 nurse practitioner or physician assistant at a medical office
102 other than the physician's primary practice location, where the
103 advanced registered nurse practitioner or physician assistant is
104 not under the onsite supervision of a supervising physician and
105 the services offered at the office are primarily dermatologic or
106 skin care services, which include aesthetic skin care services
107 other than plastic surgery, must comply with the standards
108 listed in subparagraphs 1.-4. Notwithstanding s.
109 458.347(4)(e) ~~7.8~~, a physician supervising a physician assistant
110 pursuant to this paragraph may not be required to review and
111 cosign charts or medical records prepared by such physician
112 assistant.

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

117 2. The physician must be board certified or board eligible
 118 in dermatology or plastic surgery as recognized by the board
 119 pursuant to s. 458.3312.

120 3. All such offices that are not the physician's primary
 121 place of practice must be within 25 miles of the physician's
 122 primary place of practice or in a county that is contiguous to
 123 the county of the physician's primary place of practice.
 124 However, the distance between any of the offices may not exceed
 125 75 miles.

126 4. The physician may supervise only one office other than
 127 the physician's primary place of practice except that until July
 128 1, 2011, the physician may supervise up to two medical offices
 129 other than the physician's primary place of practice if the
 130 addresses of the offices are submitted to the board before July
 131 1, 2006. Effective July 1, 2011, the physician may supervise
 132 only one office other than the physician's primary place of
 133 practice, regardless of when the addresses of the offices were
 134 submitted to the board.

135 Section 3. Paragraph (e) of subsection (4) of section
 136 459.022, Florida Statutes, is amended, and paragraph (g) is
 137 added to subsection (7) of that section, to read:

138 459.022 Physician assistants.—

139 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.—

140 (e) A supervisory physician may delegate to a fully

141 licensed physician assistant the authority to prescribe or
142 dispense any medication used in the supervisory physician's
143 practice unless such medication is listed on the formulary
144 created pursuant to s. 458.347. A fully licensed physician
145 assistant may only prescribe or dispense such medication under
146 the following circumstances:

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

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

159 3. The physician assistant must file with the department,
160 before commencing to prescribe or dispense, evidence that she or
161 he has completed a continuing medical education course of at
162 least 3 classroom hours in prescriptive practice, conducted by
163 an accredited program approved by the boards, which course
164 covers the limitations, responsibilities, and privileges
165 involved in prescribing medicinal drugs, or evidence that she or
166 he has received education comparable to the continuing education
167 course as part of an accredited physician assistant training
168 program.

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

173 4.5. The physician assistant must file with the department
174 a signed affidavit that she or he has completed a minimum of 10
175 continuing medical education hours in the specialty practice in
176 which the physician assistant has prescriptive privileges with
177 each licensure renewal application.

178 ~~5.6.~~ The department shall issue a license and a prescriber
179 number to the physician assistant granting authority for the
180 prescribing of medicinal drugs authorized within this paragraph
181 upon completion of the foregoing requirements. The physician
182 assistant shall not be required to independently register
183 pursuant to s. 465.0276.

184 6.7. The prescription must be written in a form that
185 complies with chapter 499 and must contain, in addition to the
186 supervisory physician's name, address, and telephone number, the
187 physician assistant's prescriber number. Unless it is a drug or
188 drug sample dispensed by the physician assistant, the
189 prescription must be filled in a pharmacy permitted under
190 chapter 465, and must be dispensed in that pharmacy by a
191 pharmacist licensed under chapter 465. The appearance of the
192 prescriber number creates a presumption that the physician
193 assistant is authorized to prescribe the medicinal drug and the
194 prescription is valid.

195 ~~7.8.~~ The physician assistant must note the prescription or
196 dispensing of medication in the appropriate medical record.

197 ~~8.9.~~ This paragraph does not prohibit a supervisory
 198 physician from delegating to a physician assistant the authority
 199 to order medication for a hospitalized patient of the
 200 supervisory physician.

201
 202 This paragraph does not apply to facilities licensed pursuant to
 203 chapter 395.

204 (7) PHYSICIAN ASSISTANT LICENSURE.—

205 (g) An application or other documentation required to be
 206 submitted to the department under this subsection may be
 207 submitted electronically.

208 Section 4. Paragraph (c) of subsection (3) of section
 209 459.025, Florida Statutes, is amended to read:

210 459.025 Formal supervisory relationships, standing orders,
 211 and established protocols; notice; standards.—

212 (3) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.—

213 An osteopathic physician who supervises an advanced registered
 214 nurse practitioner or physician assistant at a medical office
 215 other than the osteopathic physician's primary practice
 216 location, where the advanced registered nurse practitioner or
 217 physician assistant is not under the onsite supervision of a
 218 supervising osteopathic physician, must comply with the
 219 standards set forth in this subsection. For the purpose of this
 220 subsection, an osteopathic physician's "primary practice
 221 location" means the address reflected on the physician's profile
 222 published pursuant to s. 456.041.

223 (c) An osteopathic physician who supervises an advanced
 224 registered nurse practitioner or physician assistant at a

225 | medical office other than the osteopathic physician's primary
226 | practice location, where the advanced registered nurse
227 | practitioner or physician assistant is not under the onsite
228 | supervision of a supervising osteopathic physician and the
229 | services offered at the office are primarily dermatologic or
230 | skin care services, which include aesthetic skin care services
231 | other than plastic surgery, must comply with the standards
232 | listed in subparagraphs 1.-4. Notwithstanding s.
233 | 459.022(4)(e) 7.8, an osteopathic physician supervising a
234 | physician assistant pursuant to this paragraph may not be
235 | required to review and cosign charts or medical records prepared
236 | by such physician assistant.

237 | 1. The osteopathic physician shall submit to the Board of
238 | Osteopathic Medicine the addresses of all offices where he or
239 | she is supervising or has a protocol with an advanced registered
240 | nurse practitioner or a physician's assistant which are not the
241 | osteopathic physician's primary practice location.

242 | 2. The osteopathic physician must be board certified or
243 | board eligible in dermatology or plastic surgery as recognized
244 | by the Board of Osteopathic Medicine pursuant to s. 459.0152.

245 | 3. All such offices that are not the osteopathic
246 | physician's primary place of practice must be within 25 miles of
247 | the osteopathic physician's primary place of practice or in a
248 | county that is contiguous to the county of the osteopathic
249 | physician's primary place of practice. However, the distance
250 | between any of the offices may not exceed 75 miles.

251 | 4. The osteopathic physician may supervise only one office
252 | other than the osteopathic physician's primary place of practice

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253 | except that until July 1, 2011, the osteopathic physician may
254 | supervise up to two medical offices other than the osteopathic
255 | physician's primary place of practice if the addresses of the
256 | offices are submitted to the Board of Osteopathic Medicine
257 | before July 1, 2006. Effective July 1, 2011, the osteopathic
258 | physician may supervise only one office other than the
259 | osteopathic physician's primary place of practice, regardless of
260 | when the addresses of the offices were submitted to the Board of
261 | Osteopathic Medicine.

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