

By the Committee on Health Regulation; and Senator Thrasher

588-03226-12

20121506c1

1 A bill to be entitled
2 An act relating to health care; amending s. 463.002,
3 F.S.; conforming provisions to changes made by the
4 act; amending s. 463.005, F.S.; authorizing the Board
5 of Optometry to adopt rules for the administration and
6 prescription of ocular pharmaceutical agents; amending
7 s. 463.0055, F.S.; authorizing certified optometrists
8 to administer and prescribe pharmaceutical agents
9 under certain circumstances; requiring that a
10 certified optometrist complete a course and subsequent
11 examination on general and ocular pharmacology;
12 providing requirements for the course; requiring that
13 the Florida Medical Association and the Florida
14 Optometric Association jointly develop and administer
15 the course and examination; revising qualifications of
16 certain members of the formulary committee; providing
17 for a formulary of topical ocular pharmaceutical
18 agents which the committee may modify; specifying the
19 agents that make up the statutory formulary of oral
20 pharmaceutical agents; authorizing the deletion of an
21 oral pharmaceutical agent listed in the statutory
22 formulary under certain circumstances; prohibiting the
23 board, the Department of Health, or the State Surgeon
24 General from deleting an oral pharmaceutical agent
25 listed in the statutory formulary; amending ss.
26 463.0057 and 463.006, F.S.; conforming provisions to
27 changes made by the act; amending s. 463.0135, F.S.;
28 requiring that a certified optometrist administer and
29 prescribe oral ocular pharmaceutical agents in a

588-03226-12

20121506c1

30 certain manner; requiring that a licensed practitioner
31 who diagnoses a patient who has a neovascular form of
32 glaucoma or progressive glaucoma immediately refer the
33 patient to a physician who is skilled in the diseases
34 of the eye; requiring that comanagement of
35 postoperative care be conducted pursuant to an
36 established protocol; requiring that the patient be
37 informed that a physician will be available for
38 emergency care throughout the postoperative period;
39 requiring that the patient consent in writing to the
40 comanagement relationship; amending s. 463.014, F.S.;
41 revising certain prohibited acts regarding an
42 optometrist conducting surgery and dispensing,
43 administering, ordering, supplying, or selling certain
44 drugs; creating s. 463.0141, F.S.; requiring that
45 adverse incidents in the practice of optometry be
46 reported to the Department of Health; providing
47 requirements for notifying the department of an
48 adverse incident; providing a definition; requiring
49 that the department review each incident and determine
50 whether it involved conduct that is subject to
51 disciplinary action; requiring that the Board of
52 Optometry take disciplinary action if necessary;
53 amending s. 483.035, F.S., relating to licensure and
54 regulation of clinical laboratories operated by
55 practitioners for exclusive use; providing
56 applicability to clinical laboratories operated by
57 practitioners licensed to practice optometry; amending
58 s. 483.041, F.S.; revising the definition of the term

588-03226-12

20121506c1

59 "licensed practitioner" to include a practitioner
60 licensed under ch. 463, F.S.; amending s. 483.181,
61 F.S.; requiring clinical laboratories to accept human
62 specimens submitted by practitioners licensed to
63 practice under ch. 463, F.S.; amending s. 766.102,
64 F.S.; providing that the claimant has the burden of
65 proving by clear and convincing evidence that the
66 actions of a health care provider represented a breach
67 of the prevailing professional standard of care in an
68 action for damages based on death or personal injury
69 which alleges that the death or injury resulted from
70 the failure of a health care provider to order,
71 perform, or administer supplemental diagnostic tests;
72 amending s. 766.106, F.S.; authorizing a prospective
73 defendant to obtain informal discovery by conducting
74 ex parte interviews of treating health care providers;
75 requiring advance notice to the claimant of an ex
76 parte interview; creating s. 766.1091, F.S.;

77 authorizing a health care provider or health care
78 clinic and a patient or prospective patient to agree
79 to submit a current or future claim of medical
80 negligence to arbitration; requiring that the
81 arbitration agreement be governed by ch. 682, F.S.;

82 authorizing the arbitration agreement to contain a
83 provision that limits an award of damages; amending s.
84 893.02, F.S.; revising the definition of the term
85 "practitioner" to include certified optometrists for
86 purposes of the Florida Comprehensive Drug Abuse
87 Prevention and Control Act; amending s. 893.05, F.S.;

588-03226-12

20121506c1

88 prohibiting certified optometrists from administering
89 and prescribing certain controlled substances;
90 providing an effective date.

91

92 Be It Enacted by the Legislature of the State of Florida:

93

94 Section 1. Subsections (3), (4), and (5) of section
95 463.002, Florida Statutes, are amended to read:

96 463.002 Definitions.—As used in this chapter, the term:

97 (3) (a) "Licensed practitioner" means a person who is a
98 primary health care provider licensed to engage in the practice
99 of optometry under the authority of this chapter.

100 (b) A licensed practitioner who is not a certified
101 optometrist shall be required to display at her or his place of
102 practice a sign which states, "I am a Licensed Practitioner, not
103 a Certified Optometrist, and I am not able to prescribe ~~topical~~
104 ocular pharmaceutical agents."

105 (c) All practitioners initially licensed after July 1,
106 1993, must be certified optometrists.

107 (4) "Certified optometrist" means a licensed practitioner
108 authorized by the board to administer and prescribe ~~topical~~
109 ocular pharmaceutical agents.

110 (5) "Optometry" means the diagnosis of conditions of the
111 human eye and its appendages; the employment of any objective or
112 subjective means or methods, including the administration of
113 ~~topical-ocular~~ pharmaceutical agents, for the purpose of
114 determining the refractive powers of the human eyes, or any
115 visual, muscular, neurological, or anatomic anomalies of the
116 human eyes and their appendages; and the prescribing and

588-03226-12

20121506c1

117 employment of lenses, prisms, frames, mountings, contact lenses,
118 orthoptic exercises, light frequencies, and any other means or
119 methods, including ~~topical-ocular~~ pharmaceutical agents, for the
120 correction, remedy, or relief of any insufficiencies or abnormal
121 conditions of the human eyes and their appendages.

122 Section 2. Paragraph (g) of subsection (1) of section
123 463.005, Florida Statutes, is amended to read:

124 463.005 Authority of the board.—

125 (1) The Board of Optometry has authority to adopt rules
126 pursuant to ss. 120.536(1) and 120.54 to implement the
127 provisions of this chapter conferring duties upon it. Such rules
128 shall include, but not be limited to, rules relating to:

129 (g) Administration and prescription of ~~topical~~ ocular
130 pharmaceutical agents.

131 Section 3. Section 463.0055, Florida Statutes, is amended
132 to read:

133 463.0055 Administration and prescription of ~~topical~~ ocular
134 pharmaceutical agents; committee.—

135 (1) (a) Certified optometrists may administer and prescribe
136 ~~topical-ocular~~ pharmaceutical agents as provided in this section
137 for the diagnosis and treatment of ocular conditions of the
138 human eye and its appendages without the use of surgery or other
139 invasive techniques. However, a licensed practitioner who is not
140 certified may use topically applied anesthetics solely for the
141 purpose of glaucoma examinations, but is otherwise prohibited
142 from administering or prescribing ~~topical-ocular~~ pharmaceutical
143 agents.

144 (b) Before a certified optometrist may administer or
145 prescribe oral ocular pharmaceutical agents, the certified

588-03226-12

20121506c1

146 optometrist must complete a course and subsequent examination on
147 general and ocular pharmacology which have a particular emphasis
148 on the ingestion of oral pharmaceutical agents and the side
149 effects of those agents. For certified optometrists licensed
150 before January 1, 1990, the course shall consist of 50 contact
151 hours and 25 of those hours shall be Internet-based. For
152 certified optometrists licensed on or after January 1, 1990, the
153 course shall consist of 20 contact hours and 10 of those hours
154 shall be Internet-based. The first course and examination shall
155 be presented by January 1, 2013, and shall thereafter be
156 administered at least annually. The Florida Medical Association
157 and the Florida Optometric Association shall jointly develop and
158 administer a course and examination for such purpose and jointly
159 determine the site or sites for the course and examination.

160 (2) (a) There is ~~hereby~~ created a committee composed of two
161 certified optometrists licensed pursuant to this chapter,
162 appointed by the Board of Optometry, two board-certified
163 ophthalmologists licensed pursuant to chapter 458 or chapter
164 459, appointed by the Board of Medicine, and one additional
165 person with a doctorate degree in pharmacology who is not
166 licensed pursuant to chapter 458, chapter 459, or this chapter,
167 appointed by the State Surgeon General. The committee shall
168 review requests for additions to, deletions from, or
169 modifications of a formulary of topical ocular pharmaceutical
170 agents for administration and prescription by certified
171 optometrists and shall provide to the board advisory opinions
172 and recommendations on such requests. The formulary of topical
173 ocular pharmaceutical agents shall consist of those topical
174 ~~ocular pharmaceutical~~ agents that are appropriate to treat and

588-03226-12

20121506c1

175 diagnose ocular diseases and disorders and that ~~which~~ the
176 certified optometrist is qualified to use in the practice of
177 optometry. The board shall establish, add to, delete from, or
178 modify the formulary by rule. Notwithstanding any provision of
179 chapter 120 to the contrary, the formulary rule shall become
180 effective 60 days from the date it is filed with the Secretary
181 of State.

182 (b) The topical formulary may be added to, deleted from, or
183 modified according to the procedure described in paragraph (a).
184 Any person who requests an addition, deletion, or modification
185 of an authorized topical ~~ocular pharmaceutical~~ agent shall have
186 the burden of proof to show cause why such addition, deletion,
187 or modification should be made.

188 (c) The State Surgeon General shall have standing to
189 challenge any rule or proposed rule of the board pursuant to s.
190 120.56. In addition to challenges for any invalid exercise of
191 delegated legislative authority, the administrative law judge,
192 upon such a challenge by the State Surgeon General, may declare
193 all or part of a rule or proposed rule invalid if it:

- 194 1. Does not protect the public from any significant and
195 discernible harm or damages;
- 196 2. Unreasonably restricts competition or the availability
197 of professional services in the state or in a significant part
198 of the state; or
- 199 3. Unnecessarily increases the cost of professional
200 services without a corresponding or equivalent public benefit.

201
202 However, there shall not be created a presumption of the
203 existence of any of the conditions cited in this subsection in

588-03226-12

20121506c1

204 the event that the rule or proposed rule is challenged.

205 (d) Upon adoption of the topical formulary required by this
206 section, and upon each addition, deletion, or modification to
207 the topical formulary, the board shall mail a copy of the
208 amended topical formulary to each certified optometrist and to
209 each pharmacy licensed by the state.

210 (3) In addition to the formulary of topical ocular
211 pharmaceutical agents in subsection (2), there is created a
212 statutory formulary of oral pharmaceutical agents, which include
213 the following agents:

214 (a) The following analgesics, or their generic or
215 therapeutic equivalents, which may not be administered or
216 prescribed for more than 72 hours without consultation with a
217 physician licensed under chapter 458 or chapter 459 who is
218 skilled in diseases of the eye:

219 1. Tramadol hydrochloride.

220 2. Acetaminophen 300 mg with No. 3 codeine phosphate 30 mg.

221 (b) The following antibiotics, or their generic or
222 therapeutic equivalents:

223 1. Amoxicillin.

224 2. Azithromycin.

225 3. Ciproflaxacin.

226 4. Dicloxacillin.

227 5. Doxycycline.

228 6. Keflex.

229 7. Minocycline.

230 (c) The following antivirals, or their generic or
231 therapeutic equivalents:

232 1. Acyclovir.

588-03226-12

20121506c1

233 2. Famciclovir.

234 3. Valacyclovir.

235 (d) The following oral anti-glaucoma agents, or their
236 generic or therapeutic equivalents, which may not be
237 administered or prescribed for more than 72 hours without
238 consultation with a physician licensed under chapter 458 or
239 chapter 459 who is skilled in diseases of the eye:

240 1. Acetazolamide.

241 2. Methazolamide.

242
243 Any oral pharmaceutical agent that is listed in the statutory
244 formulary set forth in this subsection and that is subsequently
245 determined by the United States Food and Drug Administration to
246 be unsafe for administration or prescription shall be considered
247 to have been deleted from the formulary of oral pharmaceutical
248 agents. The oral pharmaceutical agents on the statutory
249 formulary set forth in this subsection may not otherwise be
250 deleted by the board, the department, or the State Surgeon
251 General.

252 (4)-(3) A certified optometrist shall be issued a prescriber
253 number by the board. Any prescription written by a certified
254 optometrist for a ~~topical ocular~~ pharmaceutical agent pursuant
255 to this section shall have the prescriber number printed
256 thereon.

257 Section 4. Subsection (3) of section 463.0057, Florida
258 Statutes, is amended to read:

259 463.0057 Optometric faculty certificate.—

260 (3) The holder of a faculty certificate may engage in the
261 practice of optometry as permitted by this section, but may not

588-03226-12

20121506c1

262 administer or prescribe ~~topical~~ ocular pharmaceutical agents
263 unless the certificateholder has satisfied the requirements of
264 ss. 463.0055(1)(b) and ~~s.~~ 463.006(1)(b)4. and 5.

265 Section 5. Subsections (2) and (3) of section 463.006,
266 Florida Statutes, are amended to read:

267 463.006 Licensure and certification by examination.—

268 (2) The examination shall consist of the appropriate
269 subjects, including applicable state laws and rules and general
270 and ocular pharmacology with emphasis on the use ~~topical~~
271 ~~application~~ and side effects of ocular pharmaceutical agents.
272 The board may by rule substitute a national examination as part
273 or all of the examination and may by rule offer a practical
274 examination in addition to the written examination.

275 (3) Each applicant who successfully passes the examination
276 and otherwise meets the requirements of this chapter is entitled
277 to be licensed as a practitioner and to be certified to
278 administer and prescribe ~~topical-ocular~~ pharmaceutical agents in
279 the diagnosis and treatment of ocular conditions.

280 Section 6. Subsections (1) and (2) of section 463.0135,
281 Florida Statutes, are amended, and subsection (10) is added to
282 that section, to read:

283 463.0135 Standards of practice.—

284 (1) A licensed practitioner shall provide that degree of
285 care which conforms to that level of care provided by medical
286 practitioners in the same or similar communities. A certified
287 optometrist shall administer and prescribe oral ocular
288 pharmaceutical agents in a manner consistent with applicable
289 preferred practice patterns of the American Academy of
290 Ophthalmology. A licensed practitioner shall advise or assist

588-03226-12

20121506c1

291 her or his patient in obtaining further care when the service of
292 another health care practitioner is required.

293 (2) A licensed practitioner diagnosing angle closure,
294 neovascular, infantile, or congenital forms of glaucoma shall
295 promptly and without unreasonable delay refer the patient to a
296 physician skilled in diseases of the eye and licensed under
297 chapter 458 or chapter 459. In addition, a licensed practitioner
298 shall timely refer any patient who experiences progressive
299 glaucoma due to failed pharmaceutical intervention to a
300 physician who is skilled in diseases of the eye and licensed
301 under chapter 458 or chapter 459.

302 (10) Comanagement of postoperative care shall be conducted
303 pursuant to an established protocol that governs the
304 relationship between the operating surgeon and the optometrist.
305 The patient shall be informed that either physician will be
306 available for emergency care throughout the postoperative
307 period, and the patient shall consent in writing to the
308 comanagement relationship.

309 Section 7. Subsections (3) and (4) of section 463.014,
310 Florida Statutes, are amended to read:

311 463.014 Certain acts prohibited.-

312 (3) Prescribing, ordering, dispensing, administering,
313 supplying, selling, or giving any ~~systemic~~ systemic drugs for the purpose
314 of treating a systemic disease by a licensed practitioner is
315 prohibited. However, a certified optometrist is permitted to use
316 commonly accepted means or methods to immediately address
317 incidents of anaphylaxis.

318 (4) Surgery of any kind, including the use of lasers, is
319 expressly prohibited. For purposes of this subsection, the term

588-03226-12

20121506c1

320 "surgery" means a procedure using an instrument, including
321 lasers, scalpels, or needles, in which human tissue is cut,
322 burned, or vaporized by incision, injection, ultrasound, laser,
323 or radiation. The term includes procedures using instruments
324 that require closing by suturing, clamping, or another such
325 device. Certified optometrists may remove superficial foreign
326 bodies. For the purposes of this subsection, the term
327 "superficial foreign bodies" means any foreign matter that is
328 embedded in the conjunctiva or cornea but which has not
329 penetrated the globe.

330 Section 8. Section 463.0141, Florida Statutes, is created
331 to read:

332 463.0141 Reports of adverse incidents in the practice of
333 optometry.-

334 (1) Any adverse incident that occurs on or after January 1,
335 2013, in the practice of optometry must be reported to the
336 department in accordance with this section.

337 (2) The required notification to the department must be
338 submitted in writing by certified mail and postmarked within 15
339 days after the occurrence of the adverse incident.

340 (3) For purposes of notification to the department, the
341 term "adverse incident," as used in this section, means an event
342 that is associated in whole or in part with the prescribing of
343 an oral ocular pharmaceutical agent and that results in one of
344 the following:

345 (a) Any condition that requires the transfer of a patient
346 to a hospital licensed under chapter 395;

347 (b) Any condition that requires the patient to obtain care
348 from a physician licensed under chapter 458 or chapter 459,

588-03226-12

20121506c1

349 other than a referral or a consultation required under this
350 chapter;

351 (c) Permanent physical injury to the patient;

352 (d) Partial or complete permanent loss of sight by the
353 patient; or

354 (e) Death of the patient.

355 (4) The department shall review each incident and determine
356 whether it potentially involved conduct by the licensed
357 practitioner which may be subject to disciplinary action, in
358 which case s. 456.073 applies. Disciplinary action, if any,
359 shall be taken by the board.

360 Section 9. Subsection (1) of section 483.035, Florida
361 Statutes, is amended to read:

362 483.035 Clinical laboratories operated by practitioners for
363 exclusive use; licensure and regulation.—

364 (1) A clinical laboratory operated by one or more
365 practitioners licensed under chapter 458, chapter 459, chapter
366 460, chapter 461, chapter 462, chapter 463, or chapter 466,
367 exclusively in connection with the diagnosis and treatment of
368 their own patients, must be licensed under this part and must
369 comply with the provisions of this part, except that the agency
370 shall adopt rules for staffing, for personnel, including
371 education and training of personnel, for proficiency testing,
372 and for construction standards relating to the licensure and
373 operation of the laboratory based upon and not exceeding the
374 same standards contained in the federal Clinical Laboratory
375 Improvement Amendments of 1988 and the federal regulations
376 adopted thereunder.

377 Section 10. Subsection (7) of section 483.041, Florida

588-03226-12

20121506c1

378 Statutes, is amended to read:

379 483.041 Definitions.—As used in this part, the term:

380 (7) "Licensed practitioner" means a physician licensed
381 under chapter 458, chapter 459, chapter 460, ~~or~~ chapter 461, or
382 chapter 463; a dentist licensed under chapter 466; a person
383 licensed under chapter 462; or an advanced registered nurse
384 practitioner licensed under part I of chapter 464; or a duly
385 licensed practitioner from another state licensed under similar
386 statutes who orders examinations on materials or specimens for
387 nonresidents of the State of Florida, but who reside in the same
388 state as the requesting licensed practitioner.

389 Section 11. Subsection (5) of section 483.181, Florida
390 Statutes, is amended to read:

391 483.181 Acceptance, collection, identification, and
392 examination of specimens.—

393 (5) A clinical laboratory licensed under this part must
394 accept a human specimen submitted for examination by a
395 practitioner licensed under chapter 458, chapter 459, chapter
396 460, chapter 461, chapter 462, chapter 463, s. 464.012, or
397 chapter 466, if the specimen and test are the type performed by
398 the clinical laboratory. A clinical laboratory may only refuse a
399 specimen based upon a history of nonpayment for services by the
400 practitioner. A clinical laboratory shall not charge different
401 prices for tests based upon the chapter under which a
402 practitioner submitting a specimen for testing is licensed.

403 Section 12. Subsection (4) of section 766.102, Florida
404 Statutes, is amended to read:

405 766.102 Medical negligence; standards of recovery; expert
406 witness.—

588-03226-12

20121506c1

407 (4) (a) The Legislature is cognizant of the changing trends
408 and techniques for the delivery of health care in this state and
409 the discretion that is inherent in the diagnosis, care, and
410 treatment of patients by different health care providers. The
411 failure of a health care provider to order, perform, or
412 administer supplemental diagnostic tests is ~~shall~~ not be
413 actionable if the health care provider acted in good faith and
414 with due regard for the prevailing professional standard of
415 care.

416 (b) The claimant has the burden of proving by clear and
417 convincing evidence that the alleged actions of the health care
418 provider represent a breach of the prevailing professional
419 standard of care in an action for damages based on death or
420 personal injury which alleges that the death or injury resulted
421 from the failure of a health care provider to order, perform, or
422 administer supplemental diagnostic tests.

423 Section 13. Paragraph (b) of subsection (6) of section
424 766.106, Florida Statutes, is amended to read:

425 766.106 Notice before filing action for medical negligence;
426 presuit screening period; offers for admission of liability and
427 for arbitration; informal discovery; review.—

428 (6) INFORMAL DISCOVERY.—

429 (b) Informal discovery may be used by a party to obtain
430 unsworn statements, the production of documents or things, ~~and~~
431 physical and mental examinations, and ex parte interviews, as
432 follows:

433 1. Unsworn statements.—Any party may require other parties
434 to appear for the taking of an unsworn statement. Such
435 statements may be used only for the purpose of presuit screening

588-03226-12

20121506c1

436 and are not discoverable or admissible in any civil action for
437 any purpose by any party. A party desiring to take the unsworn
438 statement of any party must give reasonable notice in writing to
439 all parties. The notice must state the time and place for taking
440 the statement and the name and address of the party to be
441 examined. Unless otherwise impractical, the examination of any
442 party must be done at the same time by all other parties. Any
443 party may be represented by counsel at the taking of an unsworn
444 statement. An unsworn statement may be recorded electronically,
445 stenographically, or on videotape. The taking of unsworn
446 statements is subject to the provisions of the Florida Rules of
447 Civil Procedure and may be terminated for abuses.

448 2. Documents or things.—Any party may request discovery of
449 documents or things. The documents or things must be produced,
450 at the expense of the requesting party, within 20 days after the
451 date of receipt of the request. A party is required to produce
452 discoverable documents or things within that party's possession
453 or control. Medical records shall be produced as provided in s.
454 766.204.

455 3. Physical and mental examinations.—A prospective
456 defendant may require an injured claimant to appear for
457 examination by an appropriate health care provider. The
458 prospective defendant shall give reasonable notice in writing to
459 all parties as to the time and place for examination. Unless
460 otherwise impractical, a claimant is required to submit to only
461 one examination on behalf of all potential defendants. The
462 practicality of a single examination must be determined by the
463 nature of the claimant's condition, as it relates to the
464 liability of each prospective defendant. Such examination report

588-03226-12

20121506c1

465 is available to the parties and their attorneys upon payment of
466 the reasonable cost of reproduction and may be used only for the
467 purpose of presuit screening. Otherwise, such examination report
468 is confidential and exempt from the provisions of s. 119.07(1)
469 and s. 24(a), Art. I of the State Constitution.

470 4. Written questions.—Any party may request answers to
471 written questions, the number of which may not exceed 30,
472 including subparts. A response must be made within 20 days after
473 receipt of the questions.

474 5. Unsworn statements of treating health care providers.—A
475 prospective defendant or his or her legal representative may
476 also take unsworn statements of the claimant's treating health
477 care providers. The statements must be limited to those areas
478 that are potentially relevant to the claim of personal injury or
479 wrongful death. Subject to the procedural requirements of
480 subparagraph 1., a prospective defendant may take unsworn
481 statements from a claimant's treating physicians. Reasonable
482 notice and opportunity to be heard must be given to the claimant
483 or the claimant's legal representative before taking unsworn
484 statements. The claimant or claimant's legal representative has
485 the right to attend the taking of such unsworn statements.

486 6. Ex parte interviews of treating health care providers.—A
487 prospective defendant or his or her legal representative may
488 interview the claimant's treating health care providers without
489 the presence of the claimant or the claimant's legal
490 representative. If a prospective defendant or his or her legal
491 representative intends to interview a claimant's health care
492 providers, the prospective defendant must provide the claimant
493 with notice of such interview at least 10 days before the date

588-03226-12

20121506c1

494 of the interview.

495 Section 14. Section 766.1091, Florida Statutes, is created
496 to read:

497 766.1091 Voluntary binding arbitration; damages.—

498 (1) A health care provider licensed under chapter 458,
499 chapter 459, chapter 463, or chapter 466; any entity owned in
500 whole or in part by a health care provider licensed under
501 chapter 458, chapter 459, chapter 463, or chapter 466; or any
502 health care clinic licensed under part X of chapter 400, and a
503 patient or prospective patient, may agree in writing to submit
504 to arbitration any claim for medical negligence which may
505 currently exist or may accrue in the future and would otherwise
506 be brought pursuant to this chapter. Any arbitration agreement
507 entered into pursuant to this section shall be governed by
508 chapter 682.

509 (2) Any arbitration agreement entered into pursuant to
510 subsection (1) may contain a provision that limits the available
511 damages in an arbitration award.

512 Section 15. Subsection (21) of section 893.02, Florida
513 Statutes, is amended to read:

514 893.02 Definitions.—The following words and phrases as used
515 in this chapter shall have the following meanings, unless the
516 context otherwise requires:

517 (21) "Practitioner" means a physician licensed pursuant to
518 chapter 458, a dentist licensed pursuant to chapter 466, a
519 veterinarian licensed pursuant to chapter 474, an osteopathic
520 physician licensed pursuant to chapter 459, a naturopath
521 licensed pursuant to chapter 462, a certified optometrist
522 licensed under chapter 463, or a podiatric physician licensed

588-03226-12

20121506c1

523 pursuant to chapter 461, provided such practitioner holds a
524 valid federal controlled substance registry number.

525 Section 16. Subsection (1) of section 893.05, Florida
526 Statutes, is amended to read:

527 893.05 Practitioners and persons administering controlled
528 substances in their absence.—

529 (1) A practitioner, in good faith and in the course of his
530 or her professional practice only, may prescribe, administer,
531 dispense, mix, or otherwise prepare a controlled substance, or
532 the practitioner may cause the same to be administered by a
533 licensed nurse or an intern practitioner under his or her
534 direction and supervision only. A veterinarian may so prescribe,
535 administer, dispense, mix, or prepare a controlled substance for
536 use on animals only, and may cause it to be administered by an
537 assistant or orderly under the veterinarian's direction and
538 supervision only. A certified optometrist licensed under chapter
539 463 may not administer or prescribe pharmaceutical agents in
540 Schedule I or Schedule II of the Florida Comprehensive Drug
541 Abuse Prevention and Control Act.

542 Section 17. This act shall take effect July 1, 2012.