

By the Committees on Rules; Banking and Insurance; and Health Policy; and Senators Albritton and Harrell

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1 A bill to be entitled
2 An act relating to physical therapy practice; amending
3 s. 486.021, F.S.; revising and defining terms;
4 amending s. 486.025, F.S.; revising the powers and
5 duties of the Board of Physical Therapy Practice;
6 creating s. 486.117, F.S.; requiring the board to
7 establish minimum standards of practice for the
8 performance of dry needling by physical therapists;
9 requiring the Department of Health to submit a report
10 detailing certain information to the Legislature on or
11 before a specified date; providing construction;
12 providing an effective date.

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

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16 Section 1. Subsections (10) and (11) of section 486.021,
17 Florida Statutes, are amended, and subsections (12) and (13) are
18 added to that section, to read:

19 486.021 Definitions.—In this chapter, unless the context
20 otherwise requires, the term:

21 (10) "Physical therapy assessment" means observational,
22 verbal, or manual determinations of the function of the movement
23 ~~musculoskeletal or neuromuscular~~ system relative to physical
24 therapy, including, but not limited to, range of motion of a
25 joint, motor power, motor control, posture ~~postural attitudes~~,
26 biomechanical function, locomotion, or functional abilities, for
27 the purpose of physical therapy ~~making recommendations for~~
28 treatment.

29 (11) "Practice of physical therapy" means the performance

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30 of physical therapy assessments and the treatment of any
31 disability, injury, disease, or other health condition of human
32 beings, or the prevention of such disability, injury, disease,
33 or other health condition ~~of health~~, and the rehabilitation of
34 such disability, injury, disease, or other health condition ~~as~~
35 ~~related thereto~~ by alleviating impairments, functional movement
36 limitations, and disabilities by designing, implementing, and
37 modifying treatment interventions through therapeutic exercise;
38 functional movement training in self-management and in-home,
39 community, or work integration or reintegration; manual therapy;
40 massage; airway clearance techniques; maintaining and restoring
41 the integumentary system and wound care; physical agent or
42 modality; mechanical or electrotherapeutic modality; patient-
43 related instruction ~~the use of the physical, chemical, and other~~
44 ~~properties of air; electricity; exercise; massage; the~~
45 ~~performance of acupuncture only upon compliance with the~~
46 ~~criteria set forth by the Board of Medicine, when no penetration~~
47 ~~of the skin occurs; the use of radiant energy, including~~
48 ~~ultraviolet, visible, and infrared rays; ultrasound; water; the~~
49 ~~use of apparatus and equipment in the application of~~ such
50 treatment, prevention, or rehabilitation ~~the foregoing or~~
51 ~~related thereto~~; the performance of tests of neuromuscular
52 functions as an aid to the diagnosis or treatment of any human
53 condition; or the performance of electromyography as an aid to
54 the diagnosis of any human condition only upon compliance with
55 the criteria set forth by the Board of Medicine.

56 (a) A physical therapist may implement a plan of treatment
57 developed by the physical therapist for a patient or provided
58 for a patient by a practitioner of record or by an advanced

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59 practice registered nurse licensed under s. 464.012. The
60 physical therapist shall refer the patient to or consult with a
61 practitioner of record if the patient's condition is found to be
62 outside the scope of physical therapy. If physical therapy
63 treatment for a patient is required beyond 30 days for a
64 condition not previously assessed by a practitioner of record,
65 the physical therapist shall have a practitioner of record
66 review and sign the plan. The requirement that a physical
67 therapist have a practitioner of record review and sign a plan
68 of treatment does not apply when a patient has been physically
69 examined by a physician licensed in another state, the patient
70 has been diagnosed by the physician as having a condition for
71 which physical therapy is required, and the physical therapist
72 is treating the condition. For purposes of this paragraph, a
73 health care practitioner licensed under chapter 458, chapter
74 459, chapter 460, chapter 461, or chapter 466 and engaged in
75 active practice is eligible to serve as a practitioner of
76 record.

77 (b) The use of roentgen rays and radium for diagnostic and
78 therapeutic purposes and the use of electricity for surgical
79 purposes, including cauterization, are not "physical therapy"
80 for purposes of this chapter.

81 (c) The practice of physical therapy does not authorize a
82 physical therapy practitioner to practice chiropractic medicine
83 as defined in chapter 460, including specific spinal
84 manipulation, or acupuncture as defined in chapter 457. For the
85 performance of specific chiropractic spinal manipulation, a
86 physical therapist shall refer the patient to a health care
87 practitioner licensed under chapter 460.

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88 (d) This subsection does not authorize a physical therapist
89 to implement a plan of treatment for a patient currently being
90 treated in a facility licensed pursuant to chapter 395.

91 (12) "Dry needling" means a skilled technique based on
92 western medical concepts using apparatus or equipment of
93 filiform needles to stimulate a myofascial trigger point for the
94 evaluation and management of neuromusculoskeletal conditions,
95 pain, movement impairments, and disabilities.

96 (13) "Myofascial trigger point" means an irritable section
97 of the tissue often associated with palpable taut bands of
98 muscle fibers.

99 Section 2. Section 486.025, Florida Statutes, is amended to
100 read:

101 486.025 Powers and duties of the Board of Physical Therapy
102 Practice.—The board may administer oaths, summon witnesses, take
103 testimony in all matters relating to its duties under this
104 chapter, establish or modify minimum standards of practice of
105 physical therapy as defined in s. 486.021, including, but not
106 limited to, standards of practice for the performance of dry
107 needling by physical therapists, and adopt rules pursuant to ss.
108 120.536(1) and 120.54 to implement ~~the provisions of~~ this
109 chapter. The board may also review the standing and reputability
110 of any school or college offering courses in physical therapy
111 and whether the courses of such school or college in physical
112 therapy meet the standards established by the appropriate
113 accrediting agency referred to in s. 486.031(3)(a). In
114 determining the standing and reputability of any such school and
115 whether the school and courses meet such standards, the board
116 may investigate and personally inspect the school and courses

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117 ~~make personal inspection of the same.~~

118 Section 3. Section 486.117, Florida Statutes, is created to
119 read:

120 486.117 Physical therapists; performance of dry needling.-

121 (1) The board shall establish minimum standards of practice
122 for the performance of dry needling by physical therapists, to
123 include, at a minimum, all of the following:

124 (a) Completion of 2 years of licensed practice as a
125 physical therapist.

126 (b) Completion of 50 hours of face-to-face continuing
127 education from an entity accredited in accordance with s.
128 486.109 on the topic of dry needling which must include a
129 determination by the physical therapist instructor that the
130 physical therapist demonstrates the requisite psychomotor skills
131 to safely perform dry needling. The continuing education must
132 include instruction on all of the following areas:

133 1. Theory of dry needling.

134 2. Selection and safe handling of needles and other
135 apparatus and equipment used in dry needling, including
136 instruction on the proper handling of biohazardous waste.

137 3. Indications and contraindications for dry needling.

138 4. Psychomotor skills needed to perform dry needling.

139 5. Postintervention care, including adverse responses,
140 adverse event recordkeeping, and any reporting obligations.

141 (c)1. Completion of at least 25 patient sessions of dry
142 needling performed under the supervision of a physical therapist
143 who holds an active license to practice physical therapy in any
144 state or the District of Columbia, who has actively practiced
145 dry needling for at least 1 year, and who will document that the

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146 physical therapist has met the supervision and competency
147 requirements and needs no additional supervised sessions to
148 perform dry needling; or

149 2. Completion of 25 patient sessions of dry needling
150 performed as a physical therapist licensed in another state or
151 in the United States Armed Forces.

152 (d) A requirement that dry needling may not be performed
153 without patient consent and must be a part of a patient's
154 documented plan of care.

155 (e) A requirement that dry needling may not be delegated to
156 any person other than a physical therapist who is authorized to
157 engage in dry needling under this chapter.

158 (2) The board shall require additional supervision and
159 training before a physical therapist's performance of dry
160 needling of the head and neck or torso if the board deems it
161 necessary for patient safety.

162 (3) The department shall, within existing resources, submit
163 a report to the President of the Senate and the Speaker of the
164 House of Representatives on or before December 31, 2022,
165 detailing the number of physical therapists in this state, the
166 number of physical therapists in this state performing dry
167 needling, increases or decreases in the number of physical
168 therapists in this state by geographic area, and any adverse
169 medical incidents as defined in s. 381.028 involving physical
170 therapists performing dry needling.

171 (4) The performance of dry needling in the practice of
172 physical therapy may not be construed to limit the scope of
173 practice of other licensed health care practitioners not
174 governed by this chapter.

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Section 4. This act shall take effect July 1, 2020.