

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Committee on Rules

BILL: CS/CS/SB 1474

INTRODUCER: Rules Committee; Health Policy Committee; and Senator Trumbull

SUBJECT: Chiropractic Medicine

DATE: February 27, 2024

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Rossitto-Van Winkle	Brown	HP	Fav/CS
2.	Rossitto-Van Winkle	Twogood	RC	Fav/CS

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/CS/SB 1474 expands the scope of practice for chiropractic physicians to treat the human body through the use of monofilament intramuscular stimulation, also known as dry needling, for trigger points or myofascial pain.

The bill requires the BCM to establish minimum practice standards and education requirements by which a chiropractic physician may perform dry needling on patients, within the scope of the practice of chiropractic medicine.

The bill creates exceptions to the dry needling practice standards and education requirements by authorizing the BCM to waive some or all of the educational requirements if a chiropractor presents satisfactory proof of having completed coursework that constitutes adequate training for dry needling.

The bill also gives the BCM the authority to recognize chiropractic physician applicants for licensure if they provide a credential evaluation report from a board-approved organization that deems the applicant's education equivalent to a bachelor's degree from a college or university accredited by an institutional accrediting agency recognized and approved by the U.S. Department of Education. The effect of this change is to create a licensure pathway for chiropractic physicians to practice in Florida when they obtained their bachelor's degree at a non-U.S. educational institution of higher education.

The bill provides an effective date of July 1, 2024.

II. Present Situation:

The Practice of Chiropractic Medicine

The BCM, in conjunction with the Department of Health (DOH), regulates the practice of chiropractic medicine pursuant to chs. 456 and 460, F.S.

Florida law defines the practice of chiropractic medicine as a noncombative principle and practice consisting of the science, philosophy, and art of the adjustment, manipulation, and treatment of the human body in which vertebral subluxations and other malpositioned articulations and structures that are interfering with the normal generation, transmission, and expression of nerve impulses between the brain, organs, and tissue cells of the body, thereby causing disease, are adjusted, manipulated, or treated, thus restoring the normal flow of nerve impulse which produces normal function and consequent health by chiropractic physicians using specific chiropractic adjustment or manipulation techniques taught in chiropractic colleges accredited by the Council on Chiropractic Education (CCE).¹

Licensed chiropractic physicians may examine, analyze, and diagnose the human living body and its diseases by the use of:²

- Any physical, chemical, electrical, or thermal method;
- X-ray for diagnosing;
- Phlebotomizing; and
- Any other general method of examination for diagnosis and analysis taught in any school of chiropractic.

Chiropractic physicians may adjust, manipulate, or treat the human body by:³

- Manual, mechanical, electrical, or natural methods;
- The use of physical means or physiotherapy, including light, heat, water, or exercise;
- The use of acupuncture, if certified;
- The administration of foods, food concentrates, food extracts, and items for which a prescription is not required and may apply first aid and hygiene;
- Analyze and diagnose abnormal bodily functions and to adjust the physical representative of the primary cause of disease;
- Caring for the sick and advising and instructing patients in all matters pertaining to hygiene and sanitary measures as taught and approved by recognized chiropractic schools and colleges.

Chiropractic physicians are expressly prohibited from:⁴

¹ Section 460.403(9)(a), F.S.

² Section 460.403(9)(b), F.S.

³ Section 460.403(9)(c)(f), F.S.

⁴ *Id.*

- Ordering, storing, or administering to any person any legend drug, except medical oxygen for emergency purposes only at the chiropractic physician's office or place of business, and the following topical aesthetics in aerosol form:
 - Any solution consisting of 25 percent ethylchloride and 75 percent dichlorodifluoromethane; and
 - Any solution consisting of 15 percent dichlorodifluoromethane and 85 percent trichloromonofluoromethane.
- Performing any surgery except as otherwise provided in the practice act;
- Practicing obstetrics;
- Using diagnostic or treatment instruments the use of which are not taught in the regular course of instruction in a college recognized by the Board of Chiropractic;⁵
- Treating Cancer, Leukemia, Tuberculosis, Syphilis, Gonorrhea, Hepatitis, Anthrax, Diphtheria, Hansen's Disease, Hookworm Disease, Malaria, Rabies, Typhoid Fever, and AIDS.⁶

The Board of Chiropractic Medicine

The BCM is created within the DOH and consist of seven members, appointed by the Governor and confirmed by the Senate. Five members must be licensed chiropractic physicians who are residents of the state and who have been licensed chiropractic physicians engaged in the practice of chiropractic medicine for at least four years. The remaining two members must be residents of the state who are not, and have never been, licensed chiropractic physicians or members of any closely related profession. At least one member of the board must be 60 years of age or older. As the terms of the members expire, the Governor appoint successors for terms of four years, and such members must serve until their successors are appointed.⁷

Chiropractic Education

The National Board of Chiropractic Examiners

The National Board of Chiropractic Examiners (NBCE), including the International Board of Chiropractic Examiners (IBCE), is the international testing agency for the chiropractic profession. The NBCE develops, administers and scores standardized exams that assess knowledge, higher-level cognitive abilities and problem-solving in various basic science and clinical science subjects.⁸

The purpose of the NBCE is to establish and maintain uniform high standards of excellence in the chiropractic profession and chiropractic education, primarily but not exclusively by preparing and administering to qualified applicants examinations of superior quality, whereby those legal agencies which govern the practice of chiropractic within each state and other countries may accept, at their discretion, those individuals who have successfully completed any part of the examinations of the NBCE, and by providing test and measurement services to the chiropractic

⁵ Fla. Admin. Code R. 64B2-17.001 (2023).

⁶ Fla. Admin. Code R. 64B2-17.002 (2023).

⁷ Section 460.404, F.S.

⁸ National Board of Chiropractic Examiners, *About the NBCE*, available at <https://www.nbce.org/about-nbce/> (last visited Feb. 1, 2024).

profession in all areas of demonstrated need, and to advance the chiropractic profession when in the best interests of the corporation and chiropractic testing.⁹

In addition, chiropractors may earn post-doctoral diplomate certifications from the International Chiropractors Association as well as various subspecialties, such as acupuncture, radiology, and neurology, through the American Chiropractic Association. Certifications are also available in veterinary chiropractic, spinal trauma, sport science and other niche disciplines.¹⁰

In the U.S., there are 15 NBCE-accredited chiropractic colleges and universities on 18 campuses:¹¹

- Campbellsville University School of Chiropractic in Harrodsburg, Kentucky;
- Cleveland Chiropractic College in Overland Park, Kansas;
- D'Youville College in Buffalo, New York;
- Keiser University in West Palm Beach, Florida;
- Life University, College of Chiropractic in Marietta, Georgia, and Hayward, California;
- National University of Health Sciences in Seminole, Florida;
- Northeast College of Health Sciences in Seneca Falls, New York;
- Northwestern Health Sciences University in Bloomington, Minnesota;
- Palmer College of Chiropractic in Port Orange, Florida, and San Jose, California;
- Parker College of Chiropractic in Dallas, Texas;
- Sherman College of Chiropractic in Spartanburg, South Carolina;
- Southern California University of Health Sciences in Whittier, California;
- Texas Chiropractic College in Pasadena, Texas;
- University of Bridgeport, School of Chiropractic in Bridgeport, Connecticut;
- University of Western States in Portland, Oregon.

To earn and maintain accreditation, chiropractic colleges must meet a variety of requirements. Each program's curriculum must include at least 4,200 instructional hours of course credits. Once a student is accepted into an accredited program, chiropractic students typically follow a curriculum similar to the following:¹²

- **First year**
 - General anatomy;
 - Histology;
 - Chiropractic principles;
 - Palpation;
 - Human physiology;
 - Chiropractic procedures;
 - Embryology;
 - Introduction to physical examination;
 - Human biochemistry;

⁹ *Id.*

¹⁰ National Board of Chiropractic Examiners, *Certification and Licensure*, available at <https://www.nbce.org/about-nbce/chiropractic-care/certification-and-licensure/> (last visited Feb. 1, 2024).

¹¹ National Board of Chiropractic Examiners, *Links to Chiropractic Colleges*, available at <https://www.nbce.org/links-to-chiropractic-colleges/> (last visited Feb. 1, 2024).

¹² National Board of Chiropractic Examiners, *Chiropractic Education*, available at <https://www.nbce.org/about-nbce/chiropractic-care/chiropractic-education/> (last visited Feb. 1, 2024).

- Clinical chiropractic;
- Neuroanatomy and neurophysiology;
- Normal radiographic anatomy;
- Fundamentals of nutrition;
- Functional anatomy/biomechanics; and
- Spinal anatomy.
- **Second year**
 - Pharmacotoxicology;
 - Pathology;
 - Chiropractic procedures;
 - Clinical orthopedics and neurology;
 - Community and public health;
 - Clinical nutrition;
 - Practice management;
 - Differential diagnosis;
 - Emergency care;
 - Clinical microbiology;
 - Chiropractic principles;
 - Physics of clinical imaging;
 - Nutritional assessment;
 - Physiological therapeutics;
 - Research methods;
 - Imaging interpretation; and
 - Applied clinical chiropractic.
- **Third year**
 - Integrated chiropractic clinical application;
 - Chiropractic principles;
 - Radiologic positioning and technique;
 - Clinical application of manual procedures;
 - Clinical internship;
 - Clinical psychology;
 - Pediatrics;
 - Clinical laboratory clerkship;
 - Original research project;
 - Physiological therapeutics;
 - Practice management;
 - Diagnostic imaging interpretation;
 - Differential diagnosis;
 - Dermatology;
 - Obstetrics and gynecology;
 - Geriatrics; and
 - Ethics and jurisprudence.

In the fourth year of chiropractic college, students work a clinical internship in a chiropractor's office. In addition to treating patients under the supervision of an experienced chiropractor, many students also complete a clinical rotation at a hospital or veterans clinic.

Chiropractic Licensure by Examination

Any person desiring to be licensed as a chiropractic physician in Florida must apply to the DOH to take the licensure examination. The nonrefundable application fee is capped at \$100, and the NBCE administers the examination. The examination fee must not exceed \$500 plus the actual per applicant cost to the DOH for purchase of portions of the examination from NBCE.¹³

The DOH examines each applicant whom the BCM certifies has met all of the following criteria:¹⁴

- Completed the application form and remitted the appropriate fee;
- Submitted proof that the applicant is 18 years of age or older;
- Submitted proof that the applicant is a graduate of a chiropractic college which is accredited by CCE or its predecessor agency;
- Successfully completed the NBCE certification examination in parts I, II, III, and IV, and the physiotherapy examination of the NBCE and the NBCE Physiotherapy Examination with a score 375 on each section;¹⁵
- Successfully completed the NBCE Florida Laws and Rules examination with a score of 75 percent;¹⁶
- Submitted to the DOH a set of fingerprints on a form specified by the DOH and the fee for the criminal background check of the applicant.

For an applicant who has matriculated in a chiropractic college before July 2, 1990, to take the NBCE certification examination, he or she must have completed at least two years of residence college work, consisting of a minimum of one-half the work acceptable for a bachelor's degree granted on the basis of a 4-year period of study, in a college or university accredited by an institutional accrediting agency recognized and approved by the U.S. Department of Education (DOE).¹⁷

For an applicant who has matriculated in a chiropractic college after July 1, 1990, to take the NBCE certification examination, he or she must have:¹⁸

- Been granted a bachelor's degree, based upon four academic years of study, by a college or university accredited by an institutional accrediting agency that is a member of the Commission on Recognition of Postsecondary Accreditation;
- Effective July 1, 2000, completed, before matriculation in a chiropractic college, at least three years of residence college work, consisting of a minimum of 90 semester hours leading to a bachelor's degree in a liberal arts college or university accredited by an institutional accrediting agency recognized and approved by the U.S. DOE;
- Been granted a bachelor's degree from an institution holding accreditation for that degree from an institutional accrediting agency that is recognized by the U.S. DOE. The applicant's chiropractic degree must consist of credits earned in the chiropractic program and may not include academic credit for courses from the bachelor's degree.

¹³ Section 460.406(1), F.S.

¹⁴ Section 460.406(1), F.S.

¹⁵ Fla. Admin. Code R. 64B2-11.001(2023).

¹⁶ *Id.*

¹⁷ Section 460.406(1)(d)1., F.S.

¹⁸ Section 460.406(1)(d)2., F.S.

The above matriculation requirements for applicants to have a bachelor's degree from a school accredited by an agency recognized and approved by the U.S. DOE may prevent persons who have obtained their bachelor's degree at a non-U.S. educational institution of higher education from being considered for licensure in Florida, even if they graduated from a U.S. chiropractic college or university.

An application for a license to practice chiropractic medicine may not be denied solely because the applicant is a graduate of a chiropractic college that subscribes to one philosophy of chiropractic medicine as distinguished from another.¹⁹

The BCM may require an applicant who graduated from an institution accredited by the CCE more than 10 years before the date of application to the BCM to take the NBCE Special Purposes Examination for Chiropractic, or its equivalent, and determine the passing score by board rule.²⁰

Dry Needling

Monofilament intermuscular stimulation treatment, a.k.a. dry needling, is a technique that acupuncturists, physical therapists, and other trained health care providers use to treat musculoskeletal pain and movement issues. Health care providers may incorporate dry needling as a part of a larger pain management treatment plan that could include exercise, stretching, massage, and other techniques. With dry needling, a health care provider inserts thin, sharp needles through a patient's skin, through the subcutaneous tissue, through the fascia, and into the muscle underlying the myofascial²¹ trigger points. Trigger points are knotted, tender areas that develop in muscles which are highly sensitive and can be painful when touched.²²

When health providers apply dry needling to muscles and tissues, the needles may decrease tightness, increase blood flow, and reduce local and referred pain. Providers use solid needles that do not contain any kind of medication – hence “dry” needling. Dry needling may also be known as intramuscular stimulation.²³

When a patient overexerts a muscle, the muscle experiences an energy crisis where the muscle fibers cannot access an adequate supply of blood. Without normal blood supply to the muscle, the muscle cannot get the oxygen and nutrients that allow the muscle to return to its normal resting state. Dry needling may stimulate the trigger point to help draw normal blood supply back to flush out the area and release tension.²⁴

Dry needling may help relieve pain and increase range of motion. Conditions that dry needling may treat include:²⁵

- Joint issues;

¹⁹ Section 460.406(1)(c), F.S.

²⁰ Section 460.406(1)(f), F.S.

²¹ In the word “myofascial,” “myo” means “muscle.” Fascia is the thin, white connective tissue that wraps around muscles.

²² The Cleveland Clinic, *Dry Needling*, (last reviewed Feb. 20, 2023) available at <https://my.clevelandclinic.org/health/treatments/16542-dry-needling> (last visited Feb. 1, 2024).

²³ *Id.*

²⁴ *Id.*

²⁵ *Id.*

- Disk issues;
- Tendonitis;
- Migraine and tension-type headaches;
- Jaw and mouth problems, such as temporomandibular joint (TMJ) disorders;
- Whiplash;
- Repetitive motion disorders, such as carpal tunnel syndrome;
- Spinal issues;
- Pelvic pain;
- Night cramps; and
- Phantom limb pain; and
- Postherpetic neuralgia, a complication of shingles.

There are certain groups of people who should not receive dry needling. Providers do not recommend the procedure for children under the age of 12 because it can be painful. Other groups who should consult with their physician before receiving dry needling include people who:²⁶

- Are pregnant;
- Are not able to understand the treatment;
- Are very afraid of needles (trypanophobia);
- Have compromised immune systems;
- Have just had surgery; and
- Are on blood thinners.

The most common side effect of dry needling is soreness during and after treatment. Other side effects may include:²⁷

- Stiffness;
- Bruising at or near the insertion site;
- Fainting;
- Fatigue; and
- Infection.

Dry Needling Versus Acupuncture

While both dry needling and acupuncture use needles to treat pain, acupuncture treats musculoskeletal pain along meridians, or nerve pathways, and dry needling treats deeper muscle tissue with the goal of pain mitigation, deactivating trigger points, and improving movement.²⁸ Depending on the state, dry needling is performed by licensed physical therapists, athletic trainers, chiropractors, or medical doctors who have been trained in the procedure.

According to a 2020 Montana Department of Labor and Industry survey of chiropractic colleges regarding dry needling instruction, of the 14 chiropractic colleges surveyed, only one provided instruction in dry needling in the D.C. degree program (Parker University) and only three

²⁶ *Id.*

²⁷ *Id.*

²⁸ *Id.*

universities offered continuing education or graduate courses in the modality (Western States, Texas, and National University of Health Sciences).²⁹

Florida BCM rules expressly provide that “Chiropractors in Florida are not authorized by law to use diagnostic instruments or instruments for treatment, the use of which are not taught in the regular course of instruction in a college recognized by the Board of Chiropractic.”³⁰

On November 9, 2023, the BCM convened a board meeting to discuss, in part, the Florida Chiropractic Association’s (FCA) petition for a declaratory statement³¹ asking whether dry needling is within the scope of practice for chiropractic physicians. The Florida Chiropractic Physician Association (FCPA) appeared in support of adding drying needling to the scope of practice. The Florida Chiropractic Society (FCS) appeared in opposition to adding dry needling to the scope of practice.

The question before the BCM, presented by board counsel was, “[I]f a chiropractor is competent to do so, and they are properly trained in dry needling, is that a permitted activity within the scope of your practice act?”

The vote was four to two that it was not within the scope of practice of chiropractic medicine, as follows:

- “Yes, it is.” – Walter Melton, Jr. D.C.; and Michael Roberts, D.C.
- “No, it is not.” – Jason Comerford, D.C., Board Chair; Gretchen Saunders, Consumer Member and Vice-Chair; Todd Cielo, D.C.; and Anthony Oliverio, D.C.

Board counsel then advised the board that it was required to specify the reason why dry needling is not within the scope of practice of chiropractic medicine, but was interrupted by counsel for the FCA with a request to withdraw the Petition for Declaratory Statement. A motion was made to permit the withdrawal, which was seconded and unanimously approved.^{32, 33}

Athletic Trainers

Sections 468.70 through 468.723, F.S., govern the practice of athletic training in Florida. The Board of Athletic Training (BAT), within the DOH, regulates the practice of athletic trainers.

²⁹ Bragg, Kevin, EO, Montana Department of Labor and Industry, *Dry Needling, Survey of Chiropractic Colleges*, (Mar. 12, 2020), available at <https://leg.mt.gov/content/Committees/Interim/2019-2020/Economic-Affairs/Meetings/June-July2020/CHIRO-course-research2020.pdf> (last visited Feb. 1, 2024).

³⁰ Fla. Admin. Code R. 64B2-17.001 (2023).

³¹ *Florida Chiropractic Association’s Petition for Declaratory Statement Before the Department of Health / Board of Chiropractic Medicine* (Oct. 30, 2023) available at <https://www.fcachiro.org/wp-content/uploads/2023/08/Petition-for-Declaratory-Statement-dry-needling-1.pdf> (last visited Feb. 1, 2024).

³² Florida Board of Chiropractic Medicine, *Board Meeting Minutes, November 9, 2023*, Florida Department of Health (Nov. 9, 2023) available at <https://ww10.doh.state.fl.us/pub/hcpr/Chiropractor/2023/Chiro%20Draft%20Minutes%2011.9.23.pdf> (last visited Feb. 1, 2024).

³³ Board of Chiropractic Medicine, Recording of the Board meeting, Nov. 9, 2023, at 1:23:48 through 1:47:01, available at <https://floridaschiropracticmedicine.gov/meeting-information/past-meetings/> (last visited Feb. 7, 2024).

Responsibilities of Athletic Trainers

Section 468.713, F.S., permits an athletic trainer to practice only under the direction of an allopathic, osteopathic, or chiropractic physician. The physician must communicate his or her direction through oral or written prescriptions or protocols as deemed appropriate by the physician for the provision of services and care by the athletic trainer. An athletic trainer must provide services or care in the manner dictated by the physician.

An athletic trainer must work within his or her allowable scope of practice as specified by BAT rule under s. 468.705, F.S. An athletic trainer may not provide, offer to provide, or represent that he or she is qualified to provide any care or services that he or she lacks the education, training, or experience to provide or that he or she is otherwise prohibited by law from providing.

An athletic trainer has statutory authority to provide service and care under the direction of a physician relating to the prevention, recognition, evaluation, management, disposition, treatment, or rehabilitation of a physically active person who sustained an injury, illness, or other condition involving exercise, sport, recreation, or related physical activity. For the provision of such care and services, an athletic trainer may use physical modalities, including, but not limited to, heat, light, sound, cold, electricity, and mechanical devices.³⁴

Florida Administrative Code Rule 64B33-4.001,(4) - (9), *Protocols; Scope of Practice*, (2023), eff., Dec. 4, 2022, promulgated by the BAT, permits an athletic trainer to apply the following therapeutic interventions only at the specific direction of a physician:

- Apply topical prescription medications;
- Apply emergency prescription medications and treatments;
- Treat abnormal, acute or chronic joint dislocation injuries using joint reduction techniques;
- Wound management techniques, including debridement and wound closure;
- Administer monofilament intramuscular stimulation treatment for trigger points or myofascial pain, i.e. dry needling;
- Obtain necessary and appropriate diagnostic or laboratory tests to facilitate diagnosis, referral, and treatment planning; and
- Report new or recurring injuries or conditions to a physician in the manner requested by the physician.

The BAT, not the Board of Medicine, the Board of Osteopathic Medicine, the BCM, nor the Legislature, has specifically authorized an athletic trainer to perform dry needling at the direction of an allopathic, osteopathic, or chiropractic physician.

III. Effect of Proposed Changes:

Dry Needling

CS/CS/SB 1474 creates s. 460.4085, F.S., to expand the scope of practice for chiropractic physicians to treat the human body by the use of monofilament intramuscular stimulation, also known as dry needling, for trigger points or myofascial pain. The bill requires the BCM to

³⁴ Section 468.701(2), F.S.

establish minimum standards of practice for the performance of dry needling by chiropractic physicians, including, at minimum, all of the following:

- Completion of 40 hours of in-person continuing education (CE) on the topic of dry needling for chiropractic physicians not certified in chiropractic acupuncture;
- Completion of 24 hours of in-person CE on the topic of dry needling for chiropractic physicians who *are* certified in chiropractic acupuncture;
- Passage of a written and practical examination;
- Completion of at least 10 patient sessions of dry needling performed under the supervision of a licensed chiropractic physician, allopathic or osteopathic physician, or physical therapist holding a Doctor of Physical Therapy degree who has actively performed dry needling for at least one year. A chiropractic physician must provide satisfactory documentation to the BCM demonstrating that he or she has met the supervision and competency requirements and does not need additional supervised sessions to perform dry needling;
- A requirement that dry needling may not be performed without patient consent and education on the risks and adverse events that could occur. Such patient consent and education must be included as part of the patient's documented plan of care; and
- A requirement that dry needling may not be delegated to any person other than a chiropractic physician who is authorized to engage in dry needling.

The bill requires that the course content be approved by one or more of the following entities before a chiropractic physician may take such course for purposes of meeting the CE requirements to lawfully perform dry needling within the scope of his or her practice:

- An entity accredited in accordance with s. 460.408, F.S.;
- The BCM;
- The American Chiropractic Association;
- The International Chiropractic Association;
- Providers of approved CE;
- The American Medical Association; and
- The American Osteopathic Association.

The bill requires that the course instructor must be a licensed chiropractic physician, allopathic or osteopathic physician, or physical therapist holding a Doctor of Physical Therapy degree who has practiced dry needling for at least five years, either by instructing dry needling coursework at an accredited institution of higher education or treating patients using dry needling treatment in a professional office setting.

The CE must include instruction in all of the following areas:

- Theory of dry needling;
- Selection and safe handling of needles and other apparatus or equipment used in dry needling, including instruction on the proper handling of biohazardous waste;
- Indications and contraindications for dry needling;
- Psychomotor skills needed to perform dry needling; and
- Postintervention care, including adverse responses, adverse event recordkeeping, and any reporting obligations.

The bill authorizes a licensee to request the BCM to do any of the following:

- Review coursework completed by the licensee before July 1, 2024, to be approved to satisfy the coursework requirements;
- Waive some or all of the hours or requirements if the licensee presents satisfactory proof of completing coursework that constitutes adequate training of dry needling or of the components of education and training required for dry needling; or
- Determine whether the licensee has received adequate training to be eligible to perform dry needling;

When a chiropractic physician submits documentation to the BCM verifying completion of the required hours of education and training, the BCM must issue the chiropractic physician a letter certifying that the he or she is authorized to practice dry needling within the scope of his or her practice.

Bachelor's Degree

The bill also gives the BCM authority to recognize chiropractic physician applicants for licensure if they provide a credential evaluation report from a board-approved organization that deems the applicant's education equivalent to a bachelor's degree from a college or university accredited by an institutional accrediting agency recognized and approved by the U.S. DOE. The effect of this change is to create a licensure pathway for chiropractic physicians to practice in Florida when they obtained their bachelor's degree at a non-U.S. educational institution of higher education.

The bill provides an effective date of July 1, 2024.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None.

V. Fiscal Impact Statement:**A. Tax/Fee Issues:**

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The DOH advises that current data from its Division of Medical Quality Assurance (MQA) show that 1,397 chiropractic physicians have acupuncture certification. The DOH estimates that all 1,397 will apply for authority to practice dry needling under the bill. Currently, one staff within the BCM can process 1,115 applications per year.

The DOH estimates that one FTE is needed to process the dry needling certifications and that the total FTE cost is \$127,544.

The DOH further estimates it would incur costs associated with communicating changes to licensed chiropractors via website updates and electronic correspondence in addition to other technology requirements associated with the provisions of this bill. Updates to fully integrate the bill are estimated to take six months. This reflects a minimum of 927 of initial non-recurring contracted hours at a rate of \$120 per hour for a cost of \$111,240.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 460.403 and 460.406.

This bill creates section 460.4085 of the Florida Statutes.

IX. Additional Information:**A. Committee Substitute – Statement of Substantial Changes:**
(Summarizing differences between the Committee Substitute and the prior version of the bill.)**CS/CS by Rules on February 26, 2024:**

The CS/CS creates s. 460.4085, F.S., which requires the BCM to establish minimum practice standards and education requirements by which a chiropractic physician may

perform dry needling on patients, within the scope of the practice of chiropractic medicine. The minimum standards and educational requirements include, among other provisions:

- Completion of 40 hours of in-person continuing education for a chiropractor who is not certified to perform acupuncture; or
- Completion of 24 hours of in-person continuing education for a chiropractor who is certified to perform acupuncture;
- Passage of a written and practical examination; and
- Completion of at least 10 patient dry needling sessions performed under supervision.

The CS/CS creates exceptions to the new practice standards education requirements to practice dry needling by authorizing the BCM to waive some or all of the hours or educational requirements if a chiropractor presents satisfactory proof of having completed coursework that constitutes adequate training for dry needling.

CS by Health Policy on February 6, 2024:

The CS brings monofilament intramuscular stimulation into the scope of chiropractic practice and permits a chiropractic physician to treat patients with the use of monofilament intramuscular stimulation after demonstrating to the satisfaction of the BCM the completion of training in the modality of a board-approved number of credit hours in a board-approved education program.

B. Amendments:

None.