

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/SB 1224

INTRODUCER: Health Policy Committee and Senator Harrell

SUBJECT: Administration of Controlled Substances

DATE: April 18, 2025

REVISED: _____

ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1. Looke	Brown	HP	Fav/CS
2. Gerbrandt	McKnight	AHS	Favorable
3. Looke	Yeatman	RC	Favorable

Please see Section IX. for Additional Information:

COMMITTEE SUBSTITUTE - Substantial Changes

I. Summary:

CS/SB 1224 amends s. 893.05, F.S., to allow a practitioner¹ to delegate to a certified paramedic the administration of a controlled substance if the paramedic is working under the direction and supervision of the practitioner and is in the course of providing emergency services.

The bill has no fiscal impact on state expenditures or revenues. **See Section V., Fiscal Impact Statement.**

The bill takes effect upon becoming a law.

II. Present Situation:

Paramedics

A paramedic is an allied health professional whose primary focus is to provide advanced emergency medical care for critical and emergent patients who access the emergency medical

¹ Section 893.02(23), F.S., defines “practitioner” to include a physician licensed under chapter 458, F.S., a dentist licensed under chapter 466, F.S., a veterinarian licensed under chapter 474, F.S., an osteopathic physician licensed under chapter 459, F.S., an advanced practice registered nurse licensed under chapter 464, F.S., a naturopath licensed under chapter 462, F.S., a certified optometrist licensed under chapter 463, F.S., a psychiatric nurse as defined in s. 394.455, F.S., a podiatric physician licensed under chapter 461, F.S., or a physician assistant licensed under chapter 458 or chapter 459, F.S., provided such practitioner holds a valid federal controlled substance registry number.

system. A paramedic possesses the complex knowledge and skills necessary to provide patient care and transportation. Paramedics function as part of a comprehensive emergency medical system (EMS) response, under medical oversight. Paramedics perform interventions with the basic and advanced equipment typically found on an ambulance and are a link from the scene of an emergent encounter into the health care system.²

A paramedic in Florida is a person who is certified by the Department of Health (DOH) to perform both basic and advanced life support.^{3,4,5} DOH Rule 64J-1.009, F.A.C., establishes requirements for qualifications to become a paramedic, including:

- Completing an initial Florida paramedic training course using the 2009 U.S. Department of Transportation (DOT) National EMS Education Standards;⁶
- Submitting an application;
- Attest that he or she is not addicted to alcohol or any controlled substance and that he or she is free from any physical or mental defect that might impair his or her ability to perform his or her duties;⁷
- Passing a paramedic certification exam within two years of completing the initial training program; and
- Specific to certification renewals, either retake the certification exam within the two-year licensure period or have completed 30 hours of continuing education and (for either option) maintain a current Advanced Cardiac Life Support card.

Medication Administration Training for Paramedics

The 2009 U.S. DOT National EMS Education Standards requires training on pharmacology. A paramedic is required to integrate comprehensive knowledge of pharmacology to formulate a treatment plan intended to mitigate emergencies and improve the overall health of the patient.⁸ Paramedics are required to be trained in:

- Medication safety;
- Medication legislation;
- Naming;
- Classifications;
- Schedules;

² 2009 U.S. DOT National EMS Education Standards, p. 10, available at <https://www.ems.gov/assets/National-EMS-Education-Standards-FINAL-Jan-2009.pdf> (last visited Mar. 21, 2025).

³ Section 401.23(18), F.S.

⁴ Section 401.23(9), F.S., defines “basic life support” as the assessment or treatment by a person qualified under this part through the use of techniques described in the EMT (Emergency Medical Technician) -Basic National Standard Curriculum or the National EMS (Emergency Medical Services) Education Standards of the United States Department of Transportation and approved by the DOH. The term includes the administration of oxygen and other techniques that have been approved and are performed under conditions specified by rules of the DOH.

⁵ Section 401.23(2), F.S., defines “advanced life support” as assessment or treatment by a person qualified under this part through the use of techniques such as endotracheal intubation, the administration of drugs or intravenous fluids, telemetry, cardiac monitoring, cardiac defibrillation, and other techniques described in the EMT-Paramedic National Standard Curriculum or the National EMS Education Standards, pursuant to rules of the DOH.

⁶ Available at <https://www.ems.gov/assets/National-EMS-Education-Standards-FINAL-Jan-2009.pdf> (last visited Mar. 21, 2025).

⁷ Section 401.27(4)(b), and (c), F.S.

⁸ *Supra* n. 2 at p. 15

- Pharmacokinetics;
- Storage and security;
- Autonomic pharmacology;
- Metabolism and excretion;
- Mechanism of action;
- Phases of medication activity;
- Medication response relationships;
- Medication interactions;⁹
- Toxicity.

Paramedics are required to be trained to a complex depth and comprehensive breadth in medication administration including routes of administration and how to administer medications within the scope of his or her authorization.¹⁰

Controlled Substances

Chapter 893, F.S., establishes the Florida Comprehensive Drug Abuse Prevention and Control Act (act). The act categorizes certain drugs and substances into schedules I-V which pertain to their potential for abuse.

- Schedule I substances have a high potential for abuse and has no currently accepted medical use in treatment in the United States and in their use under medical supervision does not meet accepted safety standards.
- Schedule II substances have a high potential for abuse and have a currently accepted but severely restricted medical use in treatment in the United States, and abuse of the substance may lead to severe psychological or physical dependence.
- Schedule III substances have a potential for abuse less than the substances contained in Schedules I and II and have a currently accepted medical use in treatment in the United States, and abuse of the substance may lead to moderate or low physical dependence or high psychological dependence or, in the case of anabolic steroids, may lead to physical damage.
- Schedule IV substances have a low potential for abuse relative to the substances in Schedule III and have a currently accepted medical use in treatment in the United States, and abuse of the substance may lead to limited physical or psychological dependence relative to the substances in Schedule III.
- Schedule V substances have a low potential for abuse relative to the substances in Schedule IV and have a currently accepted medical use in treatment in the United States, and abuse of such compound, mixture, or preparation may lead to limited physical or psychological dependence relative to the substances in Schedule IV.¹¹

Unless specifically allowed under ch. 893 or ch. 499, F.S., a person may not sell, manufacture, deliver, or possess with the intent to sell, manufacture, deliver a controlled substance.¹² Health

⁹ 2009 U.S. DOT National EMS Education Standards, p. 15, available at <https://www.ems.gov/assets/National-EMS-Education-Standards-FINAL-Jan-2009.pdf> (last visited Mar. 21, 2025).

¹⁰ 2009 U.S. DOT National EMS Education Standards, p. 16, available at <https://www.ems.gov/assets/National-EMS-Education-Standards-FINAL-Jan-2009.pdf> (last visited Mar. 21, 2025).

¹¹ Section 893.03, F.S.

¹² Section 893.13, F.S.

care practitioners¹³ are authorized under s. 893.05, F.S., to prescribe, administer, dispense, mix, or otherwise prepare a controlled substance or may cause the controlled substance to be administered by a licensed nurse or an intern practitioner under the practitioner's direction and supervision. Currently, ch. 893, F.S., does not authorize a practitioner to delegate the administration of a controlled substance to a paramedic.

III. Effect of Proposed Changes:

The bill amends s. 893.05, F.S., to allow a practitioner to delegate the administration of a controlled substance to a certified paramedic who is working under the direction and supervision of the practitioner in the course of providing emergency services.

The bill takes effect upon becoming a law.

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.

¹³ As defined in s. 893.02, F.S. *See* n. 1.

C. Government Sector Impact:

The bill has no fiscal impact on state expenditures or revenues.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends section 893.05 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 by Health Policy on March 25, 2025:

The committee substitute specifies that a paramedic may only administer controlled substances when delegated the duty in the course of providing emergency services.

B. Amendments:

None.