

**CS/SB 160** by **HP, Richter (CO-INTRODUCERS) Dean, Benacquisto**; (Similar to CS/H 0115) Licensure Fee Exemptions for Military Veterans

|        |   |   |     |              |                   |                |
|--------|---|---|-----|--------------|-------------------|----------------|
| 477770 | A | S | RCS | AHS, Richter | Delete L.30 - 31: | 03/06 05:12 PM |
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**CS/SB 278** by **HP, Richter**; (Similar to CS/H 0239) Practice of Optometry

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| 236832 | A  | S | RCS | AHS, Richter | Delete L.238 - 239: | 03/06 05:13 PM |
| 645394 | A  | S | RCS | AHS, Richter | Delete L.291:       | 03/06 05:13 PM |
| 111242 | A  | S | RS  | AHS, Richter | btw L.49 - 50:      | 03/06 05:13 PM |
| 685992 | SA | S | RCS | AHS, Richter | btw L.49 - 50:      | 03/06 05:13 PM |
| 603788 | A  | S | RCS | AHS, Richter | Delete L.116:       | 03/06 05:13 PM |
| 611802 | A  | S | RCS | AHS, Richter | Delete L.183 - 187: | 03/06 05:13 PM |

**The Florida Senate**  
**COMMITTEE MEETING EXPANDED AGENDA**  
**APPROPRIATIONS SUBCOMMITTEE ON HEALTH AND**  
**HUMAN SERVICES**  
**Senator Grimsley, Chair**  
**Senator Flores, Vice Chair**

**MEETING DATE:** Wednesday, March 6, 2013  
**TIME:** 10:30 a.m.—12:30 p.m.  
**PLACE:** Pat Thomas Committee Room, 412 Knott Building

**MEMBERS:** Senator Grimsley, Chair; Senator Flores, Vice Chair; Senators Bean, Benacquisto, Galvano, Garcia, Gibson, Lee, Montford, Richter, Smith, Sobel, and Thrasher

| TAB | BILL NO. and INTRODUCER                                           | BILL DESCRIPTION and<br>SENATE COMMITTEE ACTIONS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | COMMITTEE ACTION         |
|-----|-------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------|
| 1   | <b>CS/SB 160</b><br>Health Policy / Richter<br>(Similar CS/H 115) | Licensure Fee Exemptions for Military Veterans;<br>Requiring that the Department of Health waive certain<br>licensure fees for veterans; limiting the time period a<br>veteran can apply to 24 months after discharge;<br>requiring applying veterans to be honorably<br>discharged; requiring that the department waive the<br>initial application fee for veterans who apply for a<br>radiological personnel certification; limiting the time<br>period a veteran can apply to 24 months after<br>honorable discharge; excluding a specific fee from the<br>waiver, etc.<br><br>MS 01/23/2013 Favorable<br>HP 02/06/2013 Fav/CS<br>AHS 03/06/2013 Fav/CS<br>AP                                              | Fav/CS<br>Yeas 13 Nays 0 |
| 2   | <b>CS/SB 278</b><br>Health Policy / Richter<br>(Similar CS/H 239) | Practice of Optometry; Requiring a licensed<br>practitioner who is not a certified optometrist to<br>display a specifically worded sign; requiring a certified<br>optometrist to complete a course and examination on<br>general and ocular pharmaceutical agents before<br>administering or prescribing oral ocular<br>pharmaceutical agents; authorizing a certified<br>optometrist to perform certain eye examinations;<br>prohibiting a certified optometrist from administering<br>or prescribing pharmaceutical agents listed in<br>Schedule I or Schedule II of the Florida<br>Comprehensive Drug Abuse Prevention and Control<br>Act, etc.<br><br>HP 02/21/2013 Fav/CS<br>AHS 03/06/2013 Fav/CS<br>AP | Fav/CS<br>Yeas 10 Nays 3 |

Other Related Meeting Documents

**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 Appropriations Subcommittee on Health and Human Services

BILL: CS/CS/SB 160

INTRODUCER: Appropriations Subcommittee on Health and Human Services; Health Policy Committee; and Senator Richter and others

SUBJECT: Licensure Fee Exemptions for Military Veterans

DATE: March 4, 2013                      REVISED: \_\_\_\_\_

|    | ANALYST          | STAFF DIRECTOR | REFERENCE  | ACTION           |
|----|------------------|----------------|------------|------------------|
| 1. | <u>Spaulding</u> | <u>Ryon</u>    | <u>MS</u>  | <b>Favorable</b> |
| 2. | <u>McElheney</u> | <u>Stovall</u> | <u>HP</u>  | <b>Fav/CS</b>    |
| 3. | <u>Brown</u>     | <u>Pigott</u>  | <u>AHS</u> | <b>Fav/CS</b>    |
| 4. | _____            | _____          | <u>AP</u>  | _____            |
| 5. | _____            | _____          | _____      | _____            |
| 6. | _____            | _____          | _____      | _____            |

**Please see Section VIII. for Additional Information:**

- |                              |                                     |                                         |
|------------------------------|-------------------------------------|-----------------------------------------|
| A. COMMITTEE SUBSTITUTE..... | <input checked="" type="checkbox"/> | Statement of Substantial Changes        |
| B. AMENDMENTS.....           | <input type="checkbox"/>            | Technical amendments were recommended   |
|                              | <input type="checkbox"/>            | Amendments were recommended             |
|                              | <input type="checkbox"/>            | Significant amendments were recommended |

**I. Summary:**

CS/CS/SB 160 requires the Department of Health to waive certain licensure fees and initial certification fees for honorably discharged military veterans who apply for licensure within 24 months after discharge from any branch of the U.S. Armed Forces. Current law does not allow the Department of Health or its regulatory boards to distinguish applicants based on military service.

The bill will have an indeterminate, negative fiscal impact.

The bill substantially amends sections 456.013 and 468.304, Florida Statutes.

**II. Present Situation:**

**Military and Veteran Presence in Florida**

The United States currently has 1.4 million people serving in the U.S. Armed Forces, over 23 million veterans living in the U.S. and over 200 military installations in 46 states, District of

Columbia, and Puerto Rico.<sup>1</sup> The military operations of the United States touch every state in some way.

The State of Florida, with 20 major military installations, is home to a large population of active duty and reserve military members as well as veterans. Currently, there are more than 61,000 active duty military members<sup>2</sup> and 12,000 National Guard members<sup>3</sup> in Florida. The number of veterans living in Florida exceeds 1.6 million, second only to California.<sup>4</sup>

While the majority of programs and benefits for military personnel and veterans are administered by the Federal Government, states and state legislatures are playing an increasingly larger role in military issues.

### **Professional Licensure Benefits for Military Members, Veterans, and Spouses**

In recent years, the Legislature has enacted laws to assist current military personnel, their spouses, and veterans in obtaining and renewing professional licensure in Florida.

Current law<sup>5</sup> exempts military personnel from license renewal requirements for the duration of active duty while absent from the state of Florida, and for a period of 6 months after discharge or return to the state. This benefit applies to military members on active duty who hold certain professional licenses regulated by the Department of Business and Professional Regulation (DBPR) or the Department of Health (DOH), who are not practicing their profession in the private sector. This benefit is also available to the spouses of active duty military members.<sup>6</sup>

In order to address the obstacles military families face due to frequent moves, the Legislature enacted CS/CS/CS/HB 713 in 2010<sup>7</sup> and CS/CS/CS/HB 1319<sup>8</sup> in 2011 to allow the DBPR and the DOH, respectively, to issue a temporary professional license to the spouse of a military member. To obtain a temporary license, the spouse must submit proof of marriage to the military member, proof that he or she holds an active license in another state or jurisdiction, and proof that the military member is assigned to a duty station in Florida.

Most recently, in 2012, the Legislature enacted CS/CS/HB 887,<sup>9</sup> which waives the initial licensing fee, the initial application fee, and the initial unlicensed activity fee for a military veteran who applies to the DBPR for a license within 24 months of being honorably discharged. These licensure fee waivers apply only to professions regulated by the DBPR and does not apply to health professions under the DOH.

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<sup>1</sup> National Conference of State Legislatures, *Military and Veterans Affairs*, available at: <http://www.ncsl.org/issues-research/env-res/military-and-veterans-affairs.aspx> (Last viewed on January 21, 2013).

<sup>2</sup> University of West Florida: *Florida Defense Industry, Economic Impact Analysis*, 2013 Draft Report.

<sup>3</sup> E-mail correspondence with Florida Department of Military Affairs staff. January 22, 2013.

<sup>4</sup> United States Census Bureau, A Snapshot of Our Nation's Veterans, [http://www.census.gov/how/pdf/census\\_veterans.pdf](http://www.census.gov/how/pdf/census_veterans.pdf) (last visited January 22, 2013).

<sup>5</sup> Sections 455.02(1) and 456.024(1), F.S.

<sup>6</sup> Sections 455.02(2) and 456.024(2), F.S.

<sup>7</sup> Ch. 2010-106, LOF.

<sup>8</sup> Ch. 2011-95, LOF.

<sup>9</sup> Ch. 2012-72, LOF.

## Department of Health Regulated Professions

Section 20.43, F.S., creates several divisions under the DOH, including the Division of Medical Quality Assurance (MQA), which is responsible for the following boards and professions established within the division:

- The Board of Acupuncture, created under ch. 457, F.S.
- The Board of Medicine, created under ch. 458, F.S.
- The Board of Osteopathic Medicine, created under ch. 459, F.S.
- The Board of Chiropractic Medicine, created under ch. 460, F.S.
- The Board of Podiatric Medicine, created under ch. 461, F.S.
- The Board of Optometry, created under ch. 463, F.S.
- The Board of Nursing, created under part I of ch. 464, F.S.
- The Board of Pharmacy, created under ch. 465, F.S.
- The Board of Dentistry, created under ch. 466, F.S.
- The Board of Speech-Language Pathology and Audiology, created under part I of ch. 468, F.S.
- The Board of Nursing Home Administrators, created under part II of ch. 468, F.S.
- The Board of Occupational Therapy, created under part III of ch. 468, F.S.
- The Board of Athletic Training, created under part XIII of ch. 468, F.S.
- The Board of Orthotists and Prosthetists, created under part XIV of ch. 468, F.S.
- The Board of Massage Therapy, created under ch. 480, F.S.
- The Board of Clinical Laboratory Personnel, created under part III of ch. 483, F.S.
- The Board of Opticianry, created under part I of ch. 484, F.S.
- The Board of Hearing Aid Specialists, created under part II of ch. 484, F.S.
- The Board of Physical Therapy Practice, created under ch. 486, F.S.
- The Board of Psychology, created under ch. 490, F.S.
- The Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling, created under ch. 491, F.S.

In addition to the professions regulated by the various aforementioned boards, the MQA also regulates the following professions:

- Emergency medical technicians and paramedics, as provided under ch. 401, F.S.
- Naturopathy, as provided under ch. 462, F.S.
- Nursing assistants, as provided under part II of ch. 464, F.S.
- Midwifery, as provided under ch. 467, F.S.
- Respiratory therapy, as provided under part V of ch. 468, F.S.
- Dietetics and nutrition practice, as provided under part X of ch. 468, F.S.
- Electrolysis, as provided under ch. 478, F.S.
- Medical physicists, as provided under part IV of ch. 483, F.S.
- School psychologists, as provided under ch. 490, F.S.

All professions regulated by the MQA are subject to the general licensing provisions in s. 456.013, F.S.

The DOH also regulates and certifies radiological personnel under part IV of ch. 468, F.S. Certification provisions for radiological personnel are found in s. 468.304, F.S.

Typical fees associated with obtaining an initial license for a profession within the jurisdiction of the DOH include an initial licensing fee,<sup>10</sup> an initial application fee,<sup>11</sup> an initial unlicensed activity fee of \$5 and fees associated with criminal background checks.<sup>12</sup> Each board within the jurisdiction of the DOH, or the DOH when there is no board, determines by rule the amount of license fees for the profession it regulates.<sup>13</sup>

The following chart displays the initial application and initial license fees for three of the top ten professions in terms of the number of applications received during the 2011-2012 fiscal year:

| PROFESSION       | FEE TYPE              | FEE   |
|------------------|-----------------------|-------|
| MASSAGE THERAPY  | APPLICATION THERAPIST | \$50  |
| MASSAGE THERAPY  | INITIAL               | \$100 |
| REGISTERED NURSE | APPLICATION EXAM      | \$90  |
| REGISTERED NURSE | INITIAL               | \$75  |
| PHARMACIST       | APPLICATION           | \$100 |
| PHARMACIST       | INITIAL               | \$190 |

**III. Effect of Proposed Changes:**

CS/SB 160 amends s. 456.013, F.S., to require the DOH to waive the initial licensing fee, the initial application fee, and the initial unlicensed activity fee for an honorably discharged military veteran who applies to the DOH for a license and the fee waiver, within 24 months after discharge from the U.S. Armed Forces.

The bill also amends s. 468.304, F.S., to require DOH to waive the initial application fee for an honorably discharged military veteran who applies to the DOH for one of the certifications applicable to radiological personnel and the fee waiver, within 24 months after discharge from the U.S. Armed Forces.

The effective date of the bill is July 1, 2013.

**IV. Constitutional Issues:**

**A. Municipality/County Mandates Restrictions:**

None.

<sup>10</sup> Pursuant to s. 456.013(2), F.S., before the issuance of any license, the DOH must charge an initial license fee as determined by the applicable board or, if there is no board, by rule of the DOH.

<sup>11</sup> Each DOH board, or the DOH when there is no board, determines by rule the amount of initial application fees for the profession it regulates.

<sup>12</sup> Pursuant to s. 456.065, F.S, the DOH imposes upon initial licensure and each licensure renewal, a special fee of \$5 per license to fund efforts to combat unlicensed activity.

<sup>13</sup> Section 456.025(3), F.S.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

**V. Fiscal Impact Statement:**

A. Tax/Fee Issues:

Under the bill, licensing fees for military veterans applying for DOH licensure within 24 months after being honorably discharged from the U. S. Armed Forces will be waived.

B. Private Sector Impact:

The bill eliminates fees associated with initial health care licensure for military veterans within 24 months of having been honorably discharged from the U.S. Armed Forces prior to applying for licensure.

C. Government Sector Impact:

The number of military veterans who will apply for licensure or certification within 24 months after being honorably discharged from the U.S. Armed Forces is unknown. Accordingly, the fiscal impact of the bill is unknown. The reduction of licensing fees associated with the bill is expected to have an insignificant impact on the MQA trust fund.<sup>14</sup>

However, a similar law enacted last year affected professions licensed by the DPBR. From July 1, 2012, to January 1, 2013, DBPR granted 38 military fee waivers and the fiscal impact to DBPR was \$5,830.

According to the DOH, the modification of the Customer Oriented Medical Practitioner Administration System licensing system to accommodate the requirements in the bill will produce a non-recurring workload increase. DOH has indicated that current resources are adequate to absorb this one-time workload increase.<sup>15</sup> Additionally, applicants who are denied a fee waiver are entitled to a hearing; however, that impact is expected to be minimal.

**VI. Technical Deficiencies:**

None.

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<sup>14</sup> Florida Department of Health, SB 160 Agency Bill Analysis. (January 3, 2013).

<sup>15</sup> *Id.*

**VII. Related Issues:**

None.

**VIII. Additional Information:**

- A. **Committee Substitute – Statement of Substantial Changes:**  
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

**Recommended CS by Appropriations Subcommittee on Health and Human Services on March 6, 2013:**

The committee substitute was amended to remove duplicative language from the bill.

**CS by Health Policy on February 6, 2013:**

The committee substitute requires the applicant for licensure to apply for the fee waiver. The waiver of initial application fees is expanded to include similarly situated veterans seeking radiological personnel certifications.

- B. **Amendments:**

None.



477770

LEGISLATIVE ACTION

|            |   |       |
|------------|---|-------|
| Senate     | . | House |
| Comm: RCS  | . |       |
| 03/06/2013 | . |       |
|            | . |       |
|            | . |       |
|            | . |       |

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Appropriations Subcommittee on Health and Human Services  
(Richter) recommended the following:

**Senate Amendment (with title amendment)**

Delete lines 30 - 31  
and insert:  
documentation as required by the department.

===== T I T L E A M E N D M E N T =====

And the title is amended as follows:

Delete lines 8 - 9  
and insert:  
honorably discharge; amending s. 468.304, F.S.;  
requiring that

By the Committee on Health Policy; and Senators Richter and Dean

588-01569-13

2013160c1

A bill to be entitled

An act relating to licensure fee exemptions for military veterans; amending s. 456.013, F.S.; requiring that the Department of Health waive certain licensure fees for veterans; requiring the department to prescribe the format of the fee waivers; limiting the time period a veteran can apply to 24 months after discharge; requiring applying veterans to be honorably discharged; amending s. 468.304, F.S.; requiring that the department waive the initial application fee for veterans who apply for a radiological personnel certification; requiring the department to prescribe the form of the fee waiver; limiting the time period a veteran can apply to 24 months after honorable discharge; excluding a specific fee from the waiver; providing an effective date.

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

Section 1. Subsection (13) is added to section 456.013, Florida Statutes, to read:

456.013 Department; general licensing provisions.—

(13) The department shall waive the initial licensing fee, the initial application fee, and the initial unlicensed activity fee for a military veteran who applies to the department for an initial license within 24 months after being honorably discharged from any branch of the United States Armed Forces. The applicant must apply for the fee waiver using a form prescribed by the department and must submit supporting

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**CODING:** Words ~~stricken~~ are deletions; words underlined are additions.

588-01569-13

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documentation as required by the department. To qualify for these waivers, the veteran must be honorably discharged.

Section 2. Subsection (1) of section 468.304, Florida Statutes, is amended to read:

468.304 Certification.—The department shall certify any applicant who meets the following criteria:

(1) Pays to the department a nonrefundable fee that may not exceed \$100, plus the actual per-applicant cost to the department for purchasing the examination from a national organization. The department shall waive the initial application fee for a military veteran who applies to the department for an initial certification within 24 months after being honorably discharged from any branch of the United States Armed Forces. The applicant must apply for the fee waiver using a form prescribed by the department and must submit supporting documentation as required by the department. This waiver does not include the fee for purchasing the examination from a national organization.

The department may not certify any applicant who has committed an offense that would constitute a violation of any of the provisions of s. 468.3101 or applicable rules if the applicant had been certified by the department at the time of the offense. An application for a limited computed tomography certificate may not be accepted. A person holding a valid computed tomography certificate as of October 1, 1984, is subject to s. 468.309.

Section 3. This act shall take effect July 1, 2013.

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**CODING:** Words ~~stricken~~ are deletions; words underlined are additions.

**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 Appropriations Subcommittee on Health and Human Services

BILL: CS/CS/SB 278

INTRODUCER: Appropriations Subcommittee on Health and Human Services, Health Policy Committee, and Senator Richter

SUBJECT: Optometry

DATE: March 6, 2013 REVISED: \_\_\_\_\_

|    | ANALYST | STAFF DIRECTOR | REFERENCE | ACTION |
|----|---------|----------------|-----------|--------|
| 1. | Stovall | Stovall        | HP        | Fav/CS |
| 2. | Brown   | Pigott         | AHS       | Fav/CS |
| 3. |         |                | AP        |        |
| 4. |         |                |           |        |
| 5. |         |                |           |        |
| 6. |         |                |           |        |

**Please see Section VIII. for Additional Information:**

- A. COMMITTEE SUBSTITUTE.....  Statement of Substantial Changes  
 B. AMENDMENTS.....  Technical amendments were recommended  
 Amendments were recommended  
 Significant amendments were recommended

**I. Summary:**

CS/CS/SB 278 authorizes licensed certified optometrists to administer or prescribe oral ocular pharmaceutical agents, including controlled substances in Schedule III, Schedule IV, or Schedule V for the relief of pain due to ocular conditions of the eye and its appendages. The oral ocular pharmaceutical agents that may be administered or prescribed must be included in a formulary adopted by the Board of Optometry (board) in rule. Before administering or prescribing oral ocular pharmaceutical agents, the certified optometrist must complete a course and examination on general and ocular pharmaceutical agents, which are jointly developed and administered by the Florida Medical Association and the Florida Optometric Association. The first course and examination must be presented by July 1, 2013.

The bill is expected to result in a small savings for the Medicaid program; create a need for three full-time equivalent positions (FTEs) in the Agency for Health Care Administration (AHCA); generate a small amount of new trust fund revenue due to an increase in laboratory licensing fees; and create workload demands within the Department of Health (DOH) that can be absorbed by existing resources.

The bill defines the term “ocular pharmaceutical agent” to mean a pharmaceutical agent that is administered topically or orally for the diagnosis or treatment of ocular conditions of the human eye and its appendages without the use of surgery or other invasive techniques. The formulary committee is required to submit specific findings of fact and grounds for recommendations for additions and modifications to, or deletions from the formulary of ocular pharmaceutical agents that certain optometrists may use in their practice. The board is bound by the formulary committee’s recommendations on oral ocular pharmaceutical agents that certified optometrists may administer and prescribe unless competent substantial evidence is presented to the board sufficient to rebut the committee’s recommendation.

The bill prohibits an optometrist from prescribing, ordering, dispensing, administering, supplying, selling, or giving any drug for the purpose of treating a systemic disease.

A certified optometrist is authorized to perform eye examinations, including a dilated examination, related to pugilistic exhibitions (boxing, kickboxing, or mixed martial arts matches). The bill authorizes an optometrist to operate a clinical laboratory to treat his or her own patients and requires other clinical laboratories to accept specimens submitted for examination by an optometrist.

The bill is effective July 1, 2013.

This bill substantially amends the following sections of the Florida Statutes: 456.44, 463.002, 463.005, 463.0055, 463.0057, 463.006, 463.0135, 463.014, 483.035, 483.041, 483.181, 893.02, and 893.05.

## II. Present Situation:

Optometry is the diagnosis of conditions of the human eye and its appendages (eyelids, eyebrows, the conjunctiva, and the lacrimal apparatus).<sup>1</sup> An optometrist is a primary health care provider licensed to engage in the practice of optometry.<sup>2</sup>

In Florida, certified optometrists may administer topical ocular pharmaceutical agents to assist in determining refractive powers of the human eyes, or any visual, muscular, neurological, or anatomic anomalies of the human eyes and their appendages. Certified optometrists may prescribe vision therapy, corrective lenses, and topical pharmaceutical agents for the eyes and appendages, but may not perform surgical procedures in Florida.<sup>3</sup> A certified optometrist may remove superficial foreign bodies (foreign matter that is embedded in the conjunctiva or cornea but which has not penetrated the globe).<sup>4</sup>

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<sup>1</sup> See s. 463.002(5), F.S.

<sup>2</sup> As of January 30, 2013, there were 3,137 active licenses in Florida. 3,019 were certified optometrists and 118 were optometrists according to the Department of Health, *2013 Bill Analysis, Economic Statement, and Fiscal Note for SB 278*, dated February 1, 2013. A copy is on file with the Senate Health Policy Committee

<sup>3</sup> See s. 463.014(4), F.S.

<sup>4</sup> *Ibid.*

To be licensed as a certified optometrist<sup>5</sup> in Florida, the applicant must:<sup>6</sup>

- Be at least 18 years of age.
- Submit satisfactory proof that the applicant is of good moral character.
- Have graduated from a 4-year program at an accredited school or college of optometry.
- Have completed at least 110 hours of transcript-quality coursework and clinical training in general and ocular pharmacology at an institution that:
  - has facilities for both didactic and clinical instructions in pharmacology; and
  - is accredited by a regional or professional accrediting organization that is recognized and approved by the Commission of Postsecondary Accreditation of the U.S. Department of Education.
- Have completed at least one year of supervised experience in differential diagnosis of eye disease or disorders as part of the optometric training or in a clinical setting as part of the optometric experience.
- Pass the Florida Examination, which consists of
  - Part I – a written examination on applicable Florida laws and rules governing the practice of optometry;
  - Part II – a practical examination containing a clinical portion and a pharmacology/ocular disease portion;
  - Part III – the Applied Basic Science portion of the examination developed by the National Board of Examiners in Optometry (NBEO); and
  - Part IV – the Clinical Science portion of the examination developed by the NBEO.
- Complete a two-hour course relating to prevention of medical errors.

Ophthalmologists are medical physicians<sup>7</sup> who specialize in diseases of the eye.

Ophthalmologists provide a full spectrum of eye care, from prescribing corrective lenses and medications to performing eye surgery. In addition, ophthalmologists care for patients with more advanced and complicated diseases than do optometrists. The training for ophthalmologists involves an undergraduate degree, four years of medical school, completion of one year of an internship, and at least three years of residency training in ophthalmology.<sup>8</sup>

Florida law requires optometrists who diagnose patients with certain diseases to refer such patients to ophthalmologists for further treatment.<sup>9</sup> Optometrists are also required to maintain the names of at least three physicians, clinics, or hospitals to which they may refer patients who experience adverse drug reactions.<sup>10</sup>

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<sup>5</sup> All practitioners initially licensed after July 1, 1993, must be certified optometrists. *See* s. 463.002(3)(c), F.S.

<sup>6</sup> *See* Rule 64B13-4.004, F.A.C.

<sup>7</sup> Ophthalmologists are licensed under ch. 458, F.S., relating to Medical Practice or ch. 459, F.S., relating to Osteopathic Medicine.

<sup>8</sup> American Academy of Ophthalmology, *About Ophthalmology and Eye M.D.s.*, available at: <http://www.aao.org/about/eyemds.cfm> (last visited Feb. 17, 2013).

<sup>9</sup> Diagnoses which mandate a referral to an ophthalmologist include acute angle glaucoma, congenital or infantile glaucoma, infectious corneal diseases refractory to standard treatment, and retinal detachment. *See* s. 463.0135(2), F.S.

<sup>10</sup> *See* s. 463.0135, F.S.

## Administration of Medications by Optometrists

Licensed certified optometrists may administer and prescribe topical ocular pharmaceutical agents that are included in a formulary adopted by rule<sup>11</sup> by the board. Such pharmaceuticals must be related to the diagnosis and treatment of ocular conditions and must not require surgery or other invasive techniques for administration.

To be certified for prescribing privileges, an optometrist must:<sup>12</sup>

- Complete at least 110 hours of board-approved coursework and clinical training in general and ocular pharmacology at an accredited institution. Such training may have been part of an optometry training program;
- Complete at least one year of supervised experience in differential diagnosis of eye disorders, which may occur during training or clinical practice;
- Pass part II of the National Board of Examiners in Optometry examination;<sup>13</sup> and
- Pay a \$500 fee.<sup>14</sup>

Certification for prescribing privileges is a required component of the general licensure process for optometrists and has been so for over 25 years.<sup>15</sup> Optometrists who are not certified may use topical anesthetics solely for glaucoma examinations.<sup>16</sup>

## Formulary Committee and Formulary

A committee of five members reviews requests for additions to, deletions from, or modifications to a formulary of topical ocular pharmaceutical agents (TOPA) for administration and prescription by certified optometrists. The formulary committee provides to the board advisory opinions and recommendations on such requests. The formulary committee is comprised of two optometrists, appointed by the Board of Optometry; two ophthalmologists, appointed by the Board of Medicine; and one person with a doctorate degree in pharmacology, appointed by the State Surgeon General.<sup>17</sup> Currently, the two optometrists on the formulary committee are certified optometrists.<sup>18</sup>

The board adopts the TOPA by rule. The State Surgeon General may challenge any rule or proposed rule for the TOPA formulary on the grounds that it:<sup>19</sup>

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<sup>11</sup> The formulary is listed in Rule 64B13-18.002, F.A.C., and includes agents to dilate and constrict pupils, local anesthetics, antibiotics, anti-inflammatory agents, antihistamines, anti-viral medications, and anti-glaucoma medications. All medications are for topical ocular use only.

<sup>12</sup> Rule 64B13-10.001, F.A.C.

<sup>13</sup> This examination consists of 60 simulated patient cases to assess the examinee's performance in clinical practice situations available at: [http://www.optometry.org/part\\_2\\_pam.cfm](http://www.optometry.org/part_2_pam.cfm) (last visited Feb. 17, 2013).

<sup>14</sup> Rule 64B13-6.001(9), F.A.C.

<sup>15</sup> See s. 463.006, F.S.; and Department of Health, *2013 Bill Analysis, Economic Statement, and Fiscal Note for SB 278*, dated February 1, 2013. A copy is on file with the Senate Health Policy Committee.

<sup>16</sup> See s. 463.0055(1), F.S.

<sup>17</sup> See s. 463.0055, F.S.

<sup>18</sup> *Supra* 14.

<sup>19</sup> See s. 463.0055(4)(c), F.S.

- Is an invalid exercise of delegated legislative authority.
- Does not protect the public from any significant and discernible harm or damage.
- Unreasonably restricts competition or the availability of professional services in the state or in a significant part of the state.
- Unnecessarily increases the cost of professional services without a corresponding or equivalent public benefit.

### **Prescribing Controlled Substances**

The Drug Enforcement Administration (DEA) within the U.S. Department of Justice is tasked with monitoring controlled substances and preventing their abuse. Controlled substances fall into five categories, or schedules, depending on their addictive potential. Drug schedules are specified by the United States Department of Justice Drug Enforcement Administration in 21 C.F.R. §§ 1308.11-15 and in s. 893.03, F.S.

- Schedule I controlled substances currently have no accepted medical use in treatment in the United States and therefore may not be prescribed, administered, or dispensed for medical use. These substances have a high potential for abuse and include heroin, lysergic acid diethylamide (LSD), and marijuana.
- Schedule II controlled substances have a high potential for abuse which may lead to severe psychological or physical dependence, including morphine and its derivatives, amphetamines, cocaine, and pentobarbital.
- Schedule III controlled substances have lower abuse potential than Schedule II substances but may still cause psychological or physical dependence. Schedule III substances include products containing less than 15 milligrams (mg) of hydrocodone (such as Vicodin) or less than 90 mg of codeine per dose (such as Tylenol #3), ketamine, and anabolic steroids.
- Schedule IV substances have a low potential for abuse and include propoxyphene (Darvocet), alprazolam (Xanax), and lorazepam (Ativan).
- Schedule V controlled substances have an extremely low potential for abuse and primarily consist of preparations containing limited quantities of certain narcotics, such as cough syrup.<sup>20</sup>

Any health care professional wishing to prescribe controlled substances must apply for a prescribing number from the DEA. Prescribing numbers are linked to state licenses and may be suspended or revoked upon any disciplinary action taken against a licensee. The DEA will grant prescribing numbers to a wide range of health care professionals, including physicians, nurse practitioners, physician assistants, optometrists, dentists, and veterinarians, but such professionals may only prescribe controlled substances that have been authorized to them under state law. The DEA prescribing numbers must be renewed every three years.<sup>21</sup>

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<sup>20</sup> DEA, Office of Diversion Control, *Controlled Substance Schedules*, available at: <http://www.deadiversion.usdoj.gov/schedules/index.html> (last visited Feb. 17, 2013).

<sup>21</sup> DEA, *Questions and Answers* available at: <http://www.deadiversion.usdoj.gov/drugreg/faq.htm#3> (last visited Feb. 17, 2013).

In Florida, only licensed physicians, dentists, veterinarians, naturopaths, and podiatrists are currently permitted to prescribe controlled substances, and they may only prescribe medications within the scope of their own practices.<sup>22</sup>

### **Clinical Laboratories**

A clinical laboratory is a location in which body fluids or tissues are analyzed for purposes of the diagnosis, assessment, or prevention of a medical condition. Clinical laboratories may be free-standing facilities, may be part of a hospital, or may be part of a private practitioner's office.<sup>23</sup> Practitioners authorized to operate their own clinical laboratories exclusively to diagnose and treat their own patients are physicians, chiropractors, podiatrists, naturopaths, and dentists. Laboratories must be biennially licensed and inspected by the AHCA to ensure quality standards in examination of specimens, equipment, sanitation, staffing, and other measures.<sup>24</sup>

A clinical laboratory may examine human specimens at the request of the following licensed practitioners:<sup>25</sup>

- Physicians
- Physician assistants
- Medical assistants
- Chiropractors
- Chiropractic assistants
- Chiropractic physician's assistants
- Podiatrists
- Naturopaths
- Dentists
- Nurse practitioners

Results of laboratory tests must be reported directly to the requesting practitioner. The same price must be charged regardless of what type of practitioner requests the testing.

### **III. Effect of Proposed Changes:**

The bill authorizes licensed certified optometrists to administer or prescribe oral ocular pharmaceutical agents in addition to the topical ocular pharmaceutical agents that optometrists are currently authorized to administer or prescribe.

**Section 1** amends s. 456.44, F.S., to require that a certified, licensed optometrist who prescribes any Schedule III or Schedule IV controlled substances for the treatment of chronic, nonmalignant pain, must comply with the requirements of s. 456.44, F.S.,<sup>26</sup> and applicable board rules.

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<sup>22</sup> See ss. 893.02(21) and 893.05, F.S.

<sup>23</sup> See s. 483.041, F.S.

<sup>24</sup> See s. 483.051, F.S.

<sup>25</sup> See s. 483.181, F.S.

<sup>26</sup> Section 456.44, F.S., was created in ch. 2011-141, LOF, and sets forth standards of practice related to controlled substance prescribing.

**Section 2** amends s. 463.002, F.S., to remove the limiting reference to *topical* ocular pharmaceutical agents in the definition of optometry and defines the term “ocular pharmaceutical agent.” Under the bill, this term means a pharmaceutical agent that is administered topically or orally for the diagnosis or treatment of ocular conditions of the human eye and its appendages without the use of surgery or other invasive techniques.

A licensed practitioner who is not a certified optometrist is required to display at his or her practice a sign that states, “I am a licensed practitioner, not a certified optometrist, and I am not able to prescribe pharmaceutical agents.” This disclosure is currently required; however, it refers to not being able to prescribe topical ocular pharmaceutical agents.

**Section 3** amends s. 463.005, F.S., to remove the limiting reference to *topical* with respect to authority for the board to adopt rules relating to the administration and prescription of ocular pharmaceutical agents.

**Section 4** amends s. 463.0055, F.S., to authorize certified optometrists to administer and prescribe oral pharmaceutical agents in addition to topical ocular pharmaceutical agents. A licensed practitioner who is not a certified optometrist is authorized under existing law to use topically applied anesthetics solely for glaucoma examination and prohibited from administering or prescribing topical ocular pharmaceutical agents. The bill continues to authorize the use of topically applied anesthetics for glaucoma examinations but prohibits the licensed optometrist who is not also certified from administering or prescribing pharmaceutical agents.

The bill requires a certified optometrist to complete a course and subsequent examination on general and ocular pharmaceutical agents and the side effects of those agents prior to administering or prescribing these agents. The Florida Medical Association and the Florida Optometric Association are required to jointly develop and administer the course and examination at a site or sites selected by these associations. The first course and examination must be presented by July 1, 2013, and subsequent courses and examinations must occur at least annually thereafter. The bill specifies that if an otherwise qualified optometrist does not complete the coursework and examination required for prescribing and administering oral ocular pharmaceutical agents, then he or she is authorized only to administer and prescribe topical ocular pharmaceutical agents.

The required number of hours for the training depends upon when the certified optometrist was licensed. For certified optometrists licensed before January 1, 1990, the course must consist of 50 contact hours with 25 of these hours Internet-based. For certified optometrists licensed on or after January 1, 1990, the course must consist of 20 contact hours, with 10 of these hours Internet-based.

The composition of the formulary committee is modified to require that the two optometrist members must be certified optometrists. The bill adds that the formulary must consist of pharmaceutical agents that are appropriate to treat and diagnose ocular diseases and disorders, in addition to the existing requirement that it include those agents that a certified optometrist is qualified to use in the practice of optometry.

The formulary committee is required to submit to the board as a part of its opinions and recommendations concerning additions to, deletions from, of modifications for the formulary, specific findings of fact and grounds for its recommendations. The bill provides that these findings, opinions, and recommendations are not considered decisions which affect substantial interests subject to administrative review under ss. 120.569 and 120.57, F.S. The board is bound by the committee's recommendations on oral ocular pharmaceutical agents unless competent substantial evidence is presented to the board sufficient to rebut the committee's recommendation.

The bill conforms the requirement for a certified optometrist to have a prescriber number and include that number on a prescription to include all authorized pharmaceutical agents.

**Section 5** amends s. 463.0057, F.S., to require the holder of a faculty certificate to satisfy the additional coursework and examination requirements, in addition to the existing requirements for administering and prescribing topical ocular pharmaceutical agents, prior to administering or prescribing oral ocular pharmaceutical agents.

**Section 6** amends s. 463.006, F.S., to require the examination for licensure and certification as a certified optometrist in Florida to include the use and side effects of [all] pharmaceutical agents. This is a change from current law that requires the examination to emphasize the side effects of ocular pharmaceutical agents.

**Section 7** amends s. 463.0135, F.S., to add that a certified optometrist is authorized to perform any eye examination, including a dilated examination required or authorized for pugilistic exhibitions (boxing, kickboxing, or mixed martial arts matches).

**Section 8** amends s. 463.014, F.S., to prohibit a licensed practitioner from prescribing, ordering, dispensing, administering, supplying, selling, or giving any drug to treat a systemic disease. Current law prohibits a licensed practitioner from performing any of these activities with a systemic drug.

**Sections 9 and 11** amend ss. 483.035 and 483.181, F.S., respectively, to authorize an optometrist to operate a clinical laboratory to treat his or her own patients and require other clinical laboratories to accept specimens submitted for examination by an optometrist.

**Section 10** amends s. 483.041, F.S., to modify the definition of "licensed practitioner" with respect to clinical laboratories. It refers to a person licensed under ch. 463, F.S., related to the practice of optometry as a physician. However, ch. 463, F.S., does not refer to licensed practitioners and certified optometrists as physicians.

**Section 12** amends s. 893.02, F.S., to add certified optometrists to the list of practitioners who may prescribe or administer controlled substances if licensed by the federal DEA.

**Section 13** amends s. 893.05, F.S., to prohibit a certified optometrist from administering or prescribing a Schedule I or Schedule II controlled substance. The bill authorizes a certified optometrist who has complied with the additional coursework and examination requirements in

this bill to administer oral analgesics listed in Schedule III, Schedule IV, or Schedule V for the relief of pain due to ocular conditions of the eye and its appendages.

**Section 14** provides that the act is effective July 1, 2013.

**IV. Constitutional Issues:**

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

**V. Fiscal Impact Statement:**

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Certified optometrists who complete the additional coursework and successfully pass the examination will be able to provide a broader range of services for their patients by administering and prescribing oral pharmaceutical agents. Although a fee for the coursework and examination is not specified in the bill, it is reasonable to assume that optometrists would incur a fee.

If licensed optometrists seek to establish clinical laboratories as allowed under the bill, they will incur licensure fees for an accredited laboratory of \$100 for a two-year licensure period; or, for a laboratory performing less than 2,000 non-waived tests per year, a fee of \$400 for a two-year licensure period.

C. Government Sector Impact:

The Department of Health (DOH) indicates additional workload and costs will be incurred for rulemaking, modifications to the licensure system, tracking of certified optometrists who have completed the coursework and examination, and potential complaints related to enactment of the bill's provisions. However, the DOH indicates that current resources are adequate to absorb the workload and costs.

The Agency for Health Care Administration (AHCA) estimates the following fiscal impacts in terms of potential savings, revenues, and expenditures:

The bill allows Medicaid recipients to receive prescriptions for ocular medications from an optometrist, thereby saving the recipient from the need to see a physician to get a prescription for a condition diagnosed by the optometrist. The additional billing by the physician to Florida Medicaid would not then be necessary. The total number of recipients during FY 2011-12 seeing a physician within two months of an optometrist visit was 150,033, with an expenditure total of \$20,577,279. Assuming that one-half of one percent of those recipients were seeing a physician for an ocular pharmaceutical agent prescription, then a total of 750 recipient visits and total expenditures of \$102,889 in the Medicaid program could have been avoided under the bill. The savings for the state share of Medicaid costs are estimated to be \$42,524 for FY 2013-14 and \$42,257 for FY 2014-15.

If Section 9 of the bill is implemented, some percentage of the 3,089 currently licensed optometrists seeking to establish clinical laboratories would begin submitting initial clinical laboratory licensure applications beginning July 1, 2013. Should as many as 13.1 percent (the percentage of all physicians currently opting to offer clinical laboratory services) of these licensed optometrists seek to establish a clinical laboratory, AHCA would need to process an additional 405 initial applicants in FY 2013-14. Several elements of the clinical laboratory licensure application are technical in nature and necessitate review and processing by professional staff. AHCA estimates that, in order to review and process this increase in application volume, one additional professional full-time equivalent (FTE) would be required.

An on-site inspection would be required both prior to initial licensure and biennially thereafter. AHCA field office staff currently perform on-site inspections on 1,267 (51 percent) of the 2,484 licensed laboratories. If inspections are required by this same percentage of the 405 optometry-based laboratory applicants, the bill would require AHCA staff to perform an additional 207 on-site inspections during SFY 2012-13 and biennially thereafter. AHCA estimates that, in order to perform this number of inspections, an additional two FTEs for survey staff would be required. One of these additional FTEs would be needed in the Miami field office.

The fiscal impact for the three FTE positions is \$168,329 for year one and each recurring year; this includes a request for 10 percent above minimum salary for the two FTE survey staff due to recruitment challenges. There is an additional recurring expense of \$22,020 for travel for the two FTE survey staff. Two tablet computers are also required at a nonrecurring expense of \$2,830 in year one for the survey staff to use in the field while on inspections.

The total estimated fiscal impact to AHCA's Health Care Trust Fund for three FTE positions and the two tablets for year one is \$222,339. The estimated total recurring fiscal impact for the three FTE positions is \$209,078.

Licensure fees in the amount of \$102,600, to be deposited into the Health Care Trust Fund, are expected during FY 2013-14 with initial applicants and recurring biennially thereafter upon renewal. This number is based on 198 applicants seeking licensure as an accredited laboratory and 207 applicants seeking licensure to perform less than 2,000

non-waived tests per year. The licensure fee for an accredited laboratory is \$100 per two-year licensure period, and the fee for a laboratory performing less than 2,000 non-waived tests per year is \$400 per two-year licensure fee.

|                                         | FY 2013-14<br>General<br>Revenue | FY 2013-14<br>Health Care<br>Trust Fund | FY 2014-15<br>General<br>Revenue | FY 2014-15<br>Health Care<br>Trust Fund |
|-----------------------------------------|----------------------------------|-----------------------------------------|----------------------------------|-----------------------------------------|
| Recurring Medicaid savings, state share | \$42,524                         |                                         | \$42,257                         |                                         |
| Nonrecurring expenditures               |                                  | (\$13,261)                              |                                  |                                         |
| Recurring expenditures                  |                                  | (\$209,078)                             |                                  | (\$209,078)                             |
| Recurring revenue                       |                                  | \$102,600                               |                                  | \$102,600                               |
| <b>Total Savings/Revenue (Costs)</b>    | <b>\$42,524</b>                  | <b>(\$119,739)</b>                      | <b>\$42,257</b>                  | <b>(\$106,478)</b>                      |

**VI. Technical Deficiencies:**

None.

**VII. Related Issues:**

None.

**VIII. Additional Information:**

- A. Committee Substitute – Statement of Substantial Changes:  
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

**Recommended CS by Appropriations Subcommittee on Health and Human Services on March 6, 2013:**

The committee substitute requires that a certified, licensed optometrist who prescribes any Schedule III or Schedule IV controlled substances for the treatment of chronic, nonmalignant pain, must comply with the requirements of s. 456.44, F.S., and applicable board rules; specifies that if an otherwise qualified optometrist does not complete the coursework and examination required for prescribing and administering oral ocular pharmaceutical agents, then he or she is authorized only to administer and prescribe topical ocular pharmaceutical agents; and requires the holder of a faculty certificate to satisfy the additional coursework and examination requirements, in addition to the existing requirements for administering and prescribing topical ocular pharmaceutical agents, prior to administering or prescribing oral ocular pharmaceutical agents.

**CS by Health Policy on February 21, 2013:**

The committee substitute defines ocular pharmaceutical agent; requires the first course and examination to be available on or before July 1, 2013; requires the formulary committee to submit specific findings of fact and grounds for recommendations which the board must follow when the board adopts the formulary by rule unless it has

competent substantial evidence to rebut the recommendation; expands the subject matter of the examination for licensure as a certified optometrist to emphasize the use and side effects of [all] pharmaceutical agents, not just ocular pharmaceutical agents; and authorizes certified optometrists who have completed the coursework and examination to administer (Schedule III, IV, or V) oral analgesics for relief of pain due to ocular conditions.

**B. Amendments:**

None.

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This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

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236832

LEGISLATIVE ACTION

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| Senate     | . | House |
| Comm: RCS  | . |       |
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Appropriations Subcommittee on Health and Human Services  
(Richter) recommended the following:

**Senate Amendment**

Delete lines 238 - 239  
and insert:  
under chapter 458, chapter 459, chapter 460, or chapter 461; a  
certified optometrist licensed under chapter 463; a dentist  
licensed under chapter 466; a person



645394

LEGISLATIVE ACTION

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| Senate     | . | House |
| Comm: RCS  | . |       |
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Appropriations Subcommittee on Health and Human Services  
(Richter) recommended the following:

**Senate Amendment**

Delete line 291  
and insert:  
III, Schedule IV, or Schedule V for the relief of pain due to  
ocular conditions of



111242

LEGISLATIVE ACTION

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| Senate     | . | House |
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Appropriations Subcommittee on Health and Human Services  
(Richter) recommended the following:

**Senate Amendment (with title amendment)**

Between lines 49 and 50  
insert:

Section 1. Subsection (2) of section 456.44, Florida  
Statutes, is amended to read:

456.44 Controlled substance prescribing.—

(2) REGISTRATION.—Effective January 1, 2012, a physician  
licensed under chapter 458, chapter 459, chapter 461, chapter  
463, or chapter 466 who prescribes any controlled substance,  
listed in Schedule II, Schedule III, or Schedule IV as defined  
in s. 893.03, for the treatment of chronic nonmalignant pain,



111242

13 must:

14 (a) Designate himself or herself as a controlled substance  
15 prescribing practitioner on the physician's practitioner  
16 profile.

17 (b) Comply with the requirements of this section and  
18 applicable board rules.

19

20 ===== T I T L E A M E N D M E N T =====

21 And the title is amended as follows:

22 Delete line 2

23 and insert:

24 An act relating to the practice of optometry; amending  
25 s. 456.44, F.S.; requiring an optometrist who  
26 prescribes a controlled substance to meet certain  
27 registration requirements; amending



685992

LEGISLATIVE ACTION

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| Senate     | . | House |
| Comm: RCS  | . |       |
| 03/06/2013 | . |       |
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Appropriations Subcommittee on Health and Human Services  
(Richter) recommended the following:

**Senate Substitute for Amendment (111242) (with title amendment)**

Between lines 49 and 50  
insert:

Section 1. Subsection (2) of section 456.44, Florida Statutes, is amended to read:

456.44 Controlled substance prescribing.—

(2) REGISTRATION.—

(a) ~~Effective January 1, 2012,~~ A physician licensed under chapter 458, chapter 459, chapter 461, or chapter 466 who prescribes any controlled substance, listed in Schedule II,



685992

13 Schedule III, or Schedule IV as defined in s. 893.03, for the  
14 treatment of chronic nonmalignant pain, must:

15 1.~~(a)~~ Designate himself or herself as a controlled  
16 substance prescribing practitioner on the physician's  
17 practitioner profile.

18 2.~~(b)~~ Comply with the requirements of this section and  
19 applicable board rules.

20 (b) A certified optometrist licensed under chapter 463 who  
21 prescribes any controlled substance listed in Schedule III or  
22 Schedule IV as defined in s. 893.03, for the treatment of  
23 chronic nonmalignant pain, must comply with the requirements of  
24 this section and applicable board rules.

25  
26 ===== T I T L E A M E N D M E N T =====

27 And the title is amended as follows:

28 Delete line 2

29 and insert:

30 An act relating to the practice of optometry; amending  
31 s. 456.44, F.S.; requiring a certified optometrist who  
32 prescribes a controlled substance for a specified  
33 purpose to meet certain requirements; amending



603788

LEGISLATIVE ACTION

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| Senate     | . | House |
| Comm: RCS  | . |       |
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Appropriations Subcommittee on Health and Human Services  
(Richter) recommended the following:

**Senate Amendment**

Delete line 116  
and insert:  
examination. If a certified optometrist does not complete a  
course and subsequent examination under this paragraph, the  
certified optometrist is only authorized to administer and  
prescribe ocular pharmaceutical agents by topical application.



611802

LEGISLATIVE ACTION

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|------------|---|-------|
| Senate     | . | House |
| Comm: RCS  | . |       |
| 03/06/2013 | . |       |
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Appropriations Subcommittee on Health and Human Services  
(Richter) recommended the following:

**Senate Amendment (with title amendment)**

Delete lines 183 - 187  
and insert:

(3) The holder of a faculty certificate may engage in the practice of optometry as permitted by this section, but may not administer or prescribe topical ocular pharmaceutical agents unless the certificateholder has satisfied the requirements of s. 463.006(1)(b)4. and 5. A certificateholder may not administer or prescribe oral ocular pharmaceutical agents unless the certificateholder has satisfied the requirements of ss. 463.0055(1)(b) and 463.006(1)(b)4. and 5.



611802

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20

===== T I T L E A M E N D M E N T =====

And the title is amended as follows:

    Delete line 23

and insert:

    oral ocular pharmaceutical agents unless the  
    certificateholder meets certain requirements; amending  
    s. 463.006, F.S.;

By the Committee on Health Policy; and Senator Richter

588-01737-13

2013278c1

1 A bill to be entitled  
 2 An act relating to the practice of optometry; amending  
 3 s. 463.002, F.S.; requiring a licensed practitioner  
 4 who is not a certified optometrist to display a  
 5 specifically worded sign; revising definitions;  
 6 defining the term "ocular pharmaceutical agent";  
 7 amending s. 463.005, F.S.; authorizing the Board of  
 8 Optometry to adopt rules relating to the  
 9 administration and prescription of ocular  
 10 pharmaceutical agents; amending s. 463.0055, F.S.;  
 11 requiring a certified optometrist to complete a course  
 12 and examination on general and ocular pharmaceutical  
 13 agents before administering or prescribing oral ocular  
 14 pharmaceutical agents; specifying the number of  
 15 required course hours based on the date of licensure;  
 16 requiring the Florida Medical Association and the  
 17 Florida Optometric Association to jointly develop and  
 18 administer the course and examination; revising  
 19 provisions relating to the development of a formulary  
 20 of pharmaceutical agents; amending s. 463.0057, F.S.;  
 21 prohibiting the holder of an optometric faculty  
 22 certificate from administering or prescribing  
 23 pharmaceutical agents; amending s. 463.006, F.S.;  
 24 revising provisions relating to licensure and  
 25 certification of optometrists; amending s. 463.0135,  
 26 F.S.; authorizing a certified optometrist to perform  
 27 certain eye examinations; amending s. 463.014, F.S.;  
 28 prohibiting a licensed practitioner of optometry from  
 29 providing any drug for the purpose of treating a

Page 1 of 11

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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2013278c1

30 systemic disease; amending s. 483.035, F.S.; requiring  
 31 a clinical laboratory operated by a licensed  
 32 practitioner of optometry to be licensed under ch.  
 33 463, F.S.; amending s. 483.041, F.S.; revising the  
 34 definition of the term "licensed practitioner" to  
 35 include certified optometrists; amending s. 483.181,  
 36 F.S.; providing for an optometrist to accept a human  
 37 specimen for examination, under certain conditions;  
 38 amending s. 893.02, F.S.; redefining the term  
 39 "practitioner" to include certified optometrists;  
 40 amending s. 893.05, F.S.; prohibiting a certified  
 41 optometrist from administering or prescribing  
 42 pharmaceutical agents listed in Schedule I or Schedule  
 43 II of the Florida Comprehensive Drug Abuse Prevention  
 44 and Control Act; authorizing certain certified  
 45 optometrists to administer certain oral analgesics;  
 46 providing an effective date.

47  
 48 Be It Enacted by the Legislature of the State of Florida:

49  
 50 Section 1. Paragraph (b) of subsection (3) and subsections  
 51 (4) and (5) of section 463.002, Florida Statutes, are amended,  
 52 and subsection (11) is added to that section, to read:

53 463.002 Definitions.—As used in this chapter, the term:

54 (3)

55 (b) A licensed practitioner who is not a certified  
 56 optometrist is ~~shall be~~ required to display at her or his place  
 57 of practice a sign that ~~which~~ states, "I am a licensed  
 58 practitioner, not a certified optometrist, and I am not able to

Page 2 of 11

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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59 prescribe ~~topical-ocular~~ pharmaceutical agents.”

60 (4) “Certified optometrist” means a licensed practitioner  
61 authorized by the board to administer and prescribe ~~topical~~  
62 ocular pharmaceutical agents.

63 (5) “Optometry” means the diagnosis of conditions of the  
64 human eye and its appendages; the employment of ~~any~~ objective or  
65 subjective means or methods, including the administration of  
66 ~~topical~~ ocular pharmaceutical agents, for the purpose of  
67 determining the refractive powers of the human eyes, or ~~any~~  
68 visual, muscular, neurological, or anatomic anomalies of the  
69 human eyes and their appendages; and the prescribing and  
70 employment of lenses, prisms, frames, mountings, contact lenses,  
71 orthoptic exercises, light frequencies, and ~~any~~ other means or  
72 methods, including ~~topical~~ ocular pharmaceutical agents, for the  
73 correction, remedy, or relief of ~~any~~ insufficiencies or abnormal  
74 conditions of the human eyes and their appendages.

75 (11) “Ocular pharmaceutical agent” means a pharmaceutical  
76 agent that is administered topically or orally for the diagnosis  
77 or treatment of ocular conditions of the human eye and its  
78 appendages without the use of surgery or other invasive  
79 techniques.

80 Section 2. Paragraph (g) of subsection (1) of section  
81 463.005, Florida Statutes, is amended to read:

82 463.005 Authority of the board.—

83 (1) The Board of Optometry ~~may~~ ~~has authority to~~ adopt rules  
84 pursuant to ss. 120.536(1) and 120.54 to implement the  
85 provisions of this chapter conferring duties upon it. Such rules  
86 ~~shall~~ include, but are not ~~be~~ limited to, rules relating to:

87 (g) Administration and prescription of ~~topical~~ ocular

588-01737-13 2013278c1

88 pharmaceutical agents.

89 Section 3. Section 463.0055, Florida Statutes, is amended  
90 to read:

91 463.0055 Administration and prescription of ~~topical~~ ocular  
92 pharmaceutical agents; committee.—

93 (1) (a) Certified optometrists may administer and prescribe  
94 ~~topical~~ ocular pharmaceutical agents as provided in this section  
95 for the diagnosis and treatment of ocular conditions of the  
96 human eye and its appendages without the use of surgery or other  
97 invasive techniques. However, a licensed practitioner who is not  
98 certified may use topically applied anesthetics solely for the  
99 purpose of glaucoma examinations, but is otherwise prohibited  
100 from administering or prescribing ~~topical-ocular~~ pharmaceutical  
101 agents.

102 (b) Before a certified optometrist may administer or  
103 prescribe oral ocular pharmaceutical agents, the certified  
104 optometrist must complete a course and subsequent examination on  
105 general and ocular pharmaceutical agents and the side effects of  
106 those agents. For certified optometrists licensed before January  
107 1, 1990, the course consists of 50 contact hours, with 25 of  
108 those hours web-based. For certified optometrists licensed on or  
109 after January 1, 1990, the course consists of 20 contact hours,  
110 with 10 of those hours web-based. The first course and  
111 examination shall be presented by July 1, 2013, and shall be  
112 administered at least annually thereafter. The Florida Medical  
113 Association and the Florida Optometric Association shall jointly  
114 develop and administer a course and examination for such purpose  
115 and jointly determine the site or sites for the course and  
116 examination.

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117 (2) (a) There is ~~hereby~~ created a committee composed of two  
 118 certified optometrists licensed pursuant to this chapter,  
 119 appointed by the Board of Optometry, two board-certified  
 120 ophthalmologists licensed pursuant to chapter 458 or chapter  
 121 459, appointed by the Board of Medicine, and one additional  
 122 person with a doctorate degree in pharmacology who is not  
 123 licensed pursuant to chapter 458, chapter 459, or this chapter,  
 124 appointed by the State Surgeon General. The committee shall  
 125 review requests for additions to, deletions from, or  
 126 modifications of a formulary of ~~topical~~ ocular pharmaceutical  
 127 agents for administration and prescription by certified  
 128 optometrists and shall provide to the board advisory opinions  
 129 and recommendations on such requests. The committee's opinions  
 130 and recommendations must state specific findings of fact and  
 131 grounds for its recommendation. The committee's findings,  
 132 opinions, and recommendations are not subject to review pursuant  
 133 to ss. 120.569 and 120.57. The formulary shall consist of those  
 134 topical ocular pharmaceutical agents that which are appropriate  
 135 to treat and diagnose ocular diseases and disorders and which  
 136 the certified optometrist is qualified to use in the practice of  
 137 optometry. The board shall establish, add to, delete from, or  
 138 modify the formulary by rule. The board is bound by the  
 139 committee's recommendations on oral ocular pharmaceutical agents  
 140 unless competent substantial evidence is presented to the board  
 141 sufficient to rebut the committee's recommendation.  
 142 Notwithstanding any provision of chapter 120 to the contrary,  
 143 the formulary rule becomes shall become effective 60 days from  
 144 the date it is filed with the Secretary of State.

145 (b) The formulary may be added to, deleted from, or

Page 5 of 11

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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146 modified according to the procedure described in paragraph (a).  
 147 A ~~Any~~ person who requests an addition, deletion, or modification  
 148 of an authorized ~~topical~~ ocular pharmaceutical agent has shall  
 149 ~~have~~ the burden of proof to show cause why such addition,  
 150 deletion, or modification should be made.

151 (c) The State Surgeon General has shall have standing to  
 152 challenge a ~~any~~ rule or proposed rule of the board pursuant to  
 153 s. 120.56. In addition to challenges to an ~~for any~~ invalid  
 154 exercise of delegated legislative authority, the administrative  
 155 law judge, upon such a challenge by the State Surgeon General,  
 156 may declare all or part of a rule or proposed rule invalid if  
 157 it:

- 158 1. Does not protect the public from ~~any~~ significant and
- 159 discernible harm or damages;
- 160 2. Unreasonably restricts competition or the availability
- 161 of professional services in the state or in a significant part
- 162 of the state; or
- 163 3. Unnecessarily increases the cost of professional
- 164 services without a corresponding or equivalent public benefit.

165 However, ~~there shall not be created~~ a presumption of the  
 166 existence of ~~any of~~ the conditions cited in this subsection is  
 167 not created in the event that the rule or proposed rule is  
 168 challenged.

169 (d) Upon adoption of the formulary required by this  
 170 section, and upon each addition, deletion, or modification to  
 171 the formulary, the board shall mail a copy of the amended  
 172 formulary to each certified optometrist and to each pharmacy  
 173 licensed by the state.

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CODING: Words ~~stricken~~ are deletions; words underlined are additions.

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175 (3) A certified optometrist shall be issued a prescriber  
 176 number by the board. Any prescription written by a certified  
 177 optometrist for an a-topical ocular pharmaceutical agent  
 178 pursuant to this section must include ~~shall have~~ the prescriber  
 179 number ~~printed thereon~~.

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

182 463.0057 Optometric faculty certificate.—

183 (3) The holder of a faculty certificate may engage in the  
 184 practice of optometry as permitted by this section, but may not  
 185 administer or prescribe ~~topical~~ ocular pharmaceutical agents  
 186 unless the certificateholder has satisfied the requirements of  
 187 ss. 463.0055(1)(b) and ~~s-~~ 463.006(1)(b)4. and 5.

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

190 463.006 Licensure and certification by examination.—

191 (2) The examination consists ~~shall consist~~ of the  
 192 appropriate subjects, including applicable state laws and rules  
 193 and general and ocular pharmacology with emphasis on the use  
 194 ~~topical application~~ and side effects of ~~ocular~~ pharmaceutical  
 195 agents. The board may by rule substitute a national examination  
 196 as part or all of the examination and may by rule offer a  
 197 practical examination in addition to the written examination.

198 (3) Each applicant who successfully passes the examination  
 199 and otherwise meets the requirements of this chapter is entitled  
 200 to be licensed as a practitioner and to be certified to  
 201 administer and prescribe ~~topical-ocular~~ pharmaceutical agents in  
 202 the diagnosis and treatment of ocular conditions.

203 Section 6. Subsection (10) is added to section 463.0135,

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204 Florida Statutes, to read:

205 463.0135 Standards of practice.—

206 (10) A certified optometrist may perform any eye  
 207 examination, including a dilated examination, required or  
 208 authorized by chapter 548 or by rules adopted to implement that  
 209 chapter.

210 Section 7. Subsection (3) of section 463.014, Florida  
 211 Statutes, is amended to read:

212 463.014 Certain acts prohibited.—

213 (3) Prescribing, ordering, dispensing, administering,  
 214 supplying, selling, or giving any drug for the purpose of  
 215 treating a systemic disease ~~systemic drugs~~ by a licensed  
 216 practitioner is prohibited.

217 Section 8. Subsection (1) of section 483.035, Florida  
 218 Statutes, is amended to read:

219 483.035 Clinical laboratories operated by practitioners for  
 220 exclusive use; licensure and regulation.—

221 (1) A clinical laboratory operated by one or more  
 222 practitioners licensed under chapter 458, chapter 459, chapter  
 223 460, chapter 461, chapter 462, chapter 463, or chapter 466,  
 224 exclusively in connection with the diagnosis and treatment of  
 225 their own patients, must be licensed under this part and must  
 226 comply with the provisions of this part, except that the agency  
 227 shall adopt rules for staffing, for personnel, including  
 228 education and training of personnel, for proficiency testing,  
 229 and for construction standards relating to the licensure and  
 230 operation of the laboratory based upon and not exceeding the  
 231 same standards contained in the federal Clinical Laboratory  
 232 Improvement Amendments of 1988 and the federal regulations

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233 adopted thereunder.

234 Section 9. Subsection (7) of section 483.041, Florida  
235 Statutes, is amended to read:

236 483.041 Definitions.—As used in this part, the term:

237 (7) "Licensed practitioner" means a physician licensed  
238 under chapter 458, chapter 459, chapter 460, ~~or~~ chapter 461, or  
239 chapter 463; a dentist licensed under chapter 466; a person  
240 licensed under chapter 462; or an advanced registered nurse  
241 practitioner licensed under part I of chapter 464; or a duly  
242 licensed practitioner from another state licensed under similar  
243 statutes who orders examinations on materials or specimens for  
244 nonresidents of the State of Florida, but who reside in the same  
245 state as the requesting licensed practitioner.

246 Section 10. Subsection (5) of section 483.181, Florida  
247 Statutes, is amended to read:

248 483.181 Acceptance, collection, identification, and  
249 examination of specimens.—

250 (5) A clinical laboratory licensed under this part must  
251 accept a human specimen submitted for examination by a  
252 practitioner licensed under chapter 458, chapter 459, chapter  
253 460, chapter 461, chapter 462, chapter 463, s. 464.012, or  
254 chapter 466, if the specimen and test are the type performed by  
255 the clinical laboratory. A clinical laboratory may only refuse a  
256 specimen based upon a history of nonpayment for services by the  
257 practitioner. A clinical laboratory ~~may shall~~ not charge  
258 different prices for tests based upon the chapter under which a  
259 practitioner submitting a specimen for testing is licensed.

260 Section 11. Subsection (21) of section 893.02, Florida  
261 Statutes, is amended to read:

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262 893.02 Definitions.—The following words and phrases as used  
263 in this chapter shall have the following meanings, unless the  
264 context otherwise requires:

265 (21) "Practitioner" means a physician licensed pursuant to  
266 chapter 458, a dentist licensed pursuant to chapter 466, a  
267 veterinarian licensed pursuant to chapter 474, an osteopathic  
268 physician licensed pursuant to chapter 459, a naturopath  
269 licensed pursuant to chapter 462, a certified optometrist  
270 licensed pursuant to chapter 463, or a podiatric physician  
271 licensed pursuant to chapter 461, provided such practitioner  
272 holds a valid federal controlled substance registry number.

273 Section 12. Subsection (1) of section 893.05, Florida  
274 Statutes, is amended to read:

275 893.05 Practitioners and persons administering controlled  
276 substances in their absence.—

277 (1) A practitioner, in good faith and in the course of his  
278 or her professional practice only, may prescribe, administer,  
279 dispense, mix, or otherwise prepare a controlled substance, or  
280 the practitioner may cause the same to be administered by a  
281 licensed nurse or an intern practitioner under his or her  
282 direction and supervision only. A veterinarian may so prescribe,  
283 administer, dispense, mix, or prepare a controlled substance for  
284 use on animals only, and may cause it to be administered by an  
285 assistant or orderly under the veterinarian's direction and  
286 supervision only. A certified optometrist licensed under chapter  
287 463 may not administer or prescribe pharmaceutical agents listed  
288 in Schedule I or Schedule II of s. 893.03. A certified  
289 optometrist who has complied with the provisions of section  
290 463.0055(1)(b) may administer oral analgesics listed in Schedule

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291 III, IV, or V for the relief of pain due to ocular conditions of  
292 the eye and its appendages.

293 Section 13. This act shall take effect July 1, 2013.

THE FLORIDA SENATE  
**APPEARANCE RECORD**

10

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

3-10-13  
Meeting Date

Topic Licensure fee exemp/vets

Bill Number SB 140  
*(if applicable)*

Name Michelle Jacquis

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title Dir. of Legislative Advocacy

Address PO BOX 10269

Phone 251-2288

Tallahassee, FL 32302  
*Street City State Zip*

E-mail mjacquis@fmedical.org

Speaking:  For  Against  Information WAIVE IN SUPPORT

Representing FL Medical Association

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

W

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

3/6/13  
Meeting Date

Topic military veterans licensure fee exemption

Bill Number SB 160  
*(if applicable)*

Name Jo Morris

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title Legislative Affairs

Address 2585 Merchants Row Blvd - Bin A01  
*Street*  
Tallahassee FL 32399  
*City State Zip*

Phone 245-4006

E-mail \_\_\_\_\_

Speaking:  For  Against  Information

Representing Department of Health

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(W)

3-6-13

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Meeting Date

Topic VETS FEE EXEMPTION Bill Number SB 160  
(if applicable)

Name TRAVIS COKER Amendment Barcode \_\_\_\_\_  
(if applicable)

Job Title DIR OF LEGISLATIVE AFFAIRS

Address 2340 HANSEY Phone 850 942-182  
Street

TLH FL 32301  
City State Zip

E-mail tcoker@fachc.org

Speaking:  For  Against  Information

Representing FL ASSN OF COMMUNITY HEALTH CENTERS

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

W

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3-6-13

Meeting Date

Topic DOH License Fee Waiver Bill Number SB 160  
(if applicable)

Name Jim Brodie Amendment Barcode \_\_\_\_\_  
(if applicable)

Job Title Director Legislative Affairs

Address \_\_\_\_\_ Phone 487-1533  
Street

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Speaking:  For  Against  Information

Representing FL Dept Veterans Affairs

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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Waive Time in Support

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3/6/13

Meeting Date

Topic Veterans / License fees

Bill Number SB 160  
*(if applicable)*

Name Ron Watson

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title Lobbyist

Address 118 E Jefferson St

Phone 850 224 1089

Street Tallahassee FL 32309  
City State Zip

E-mail rwatson@floridadental.org

Speaking:  For  Against  Information

Representing FDA Dental Association

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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3-6-13

Meeting Date

Topic Optometry

Bill Number 273  
*(if applicable)*

Name Rebecca O'hara

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title VP of Governmental Affairs

Address PO BOX 10269

Phone 224-6496

Street

Tallahassee, FL 32302

City

State

Zip

E-mail rohara@fimedical.org

Speaking:  For  Against  Information

Representing FL Medical Association

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

W

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

3-6-2013

Meeting Date

Topic PRACTICE OF OPTOMETRY

Bill Number SB 278  
*(if applicable)*

Name STEPHEN R. WINN

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title EXECUTIVE DIRECTOR

Address 2007 APALACHEE PARKWAY

Phone 850-878-7463

Street

TALLAHASSEE FL 32301

City

State

Zip

Speaking:  For  Against  Information

E-mail  
**WAIVE TIME IN OPPOSITION**

Representing FLORIDA DOSTEOPATHIC MEDICAL ASSOCIATION

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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S-001 (10/20/11)

THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

3/6/13

Meeting Date

Topic Optometry

Bill Number SB 278  
*(if applicable)*

Name Charles J Stonim, MD

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title Ophthalmologist

Address 2409 S. Dundee St.

Phone \_\_\_\_\_

Tampa FL 33629  
City State Zip

E-mail \_\_\_\_\_

Speaking:  For  Against  Information

Representing Florida Soc. Ophthalmology

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

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3/6/13

Meeting Date

Topic Optometry

Bill Number SB 278  
*(if applicable)*

Name Bruce May, Esq.

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title General Counsel

Address HOLLAND + KNIGHT

Phone 758-425-5607

Street

TALLAHASSEE FL.

E-mail dbmay@hk1aw.com

City

State

Zip

Speaking:  For  Against  Information

Representing Florida Society of Ophthalmology

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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SEN01 (10/20/11)

THE FLORIDA SENATE  
**APPEARANCE RECORD**

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3/6/2013

Meeting Date

Topic OPTOMETRY

Bill Number 278  
*(if applicable)*

Name STANLEY BRAVERMAN MD

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title OPHTHALMOLOGIST

Address 1935 E. HALLANDALE BEACH BLVD.  
*Street*

Phone 954-458-2112

HALLANDALE BEACH, FL. 33009  
*City State Zip*

E-mail VSPDOC@AOL.COM

Speaking:  For  Against  Information

Representing OPTOMETRY

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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S-001 (10/20/11)

THE FLORIDA SENATE

APPEARANCE RECORD

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3/6/2013

Meeting Date

Topic Optometry

Bill Number 278  
*(if applicable)*

Name Kimberly Reed

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title ASSOCIATE PROFESSOR

Address 2780 SW 116th Ave

Phone 954-262-4227

Davie FL 33330  
City State Zip

E-mail Kimreed@nova.edu

Speaking:  For  Against  Information

Representing Optometry

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
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6 March 2013  
Meeting Date

Topic Optometry

Bill Number 278  
*(if applicable)*

Name Joni Scott-Weideman, O.D.

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title VA Optometric Physician

850-877-4697

Address 1848 WAGON WHEEL CIR W

Phone ~~957-559-6228~~

Tallahassee FL. 32317  
City State Zip

E-mail floridaeyedoc@yahoo.com

Speaking:  For  Against  Information

Representing Optometry

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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NOT Present

THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

March 6, 2013

*Meeting Date*

Topic Practice of Optometry Bill Number SB 278  
*(if applicable)*

Name Leslie Dughi( Pronounced Doo-gee) Amendment Barcode N/A  
*(if applicable)*

Job Title Associate Director of Governmental Relations

Address 101 E. College Ave Phone (850) 222-6891  
*Street*

Tallahassee FL 32301 E-mail dughil@gtlaw.com  
*City State Zip*

Speaking:  For  Against  Information

Representing Associated Industries of Florida

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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S-001 (10/20/11)

W

THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

3/6/13

Meeting Date

Topic \_\_\_\_\_

Bill Number 278  
*(if applicable)*

Name Chris Noland

Amendment Barcode \_\_\_\_\_  
*(if applicable)*

Job Title \_\_\_\_\_

Address 1000 Riverside Ave #115

Phone 904-355-1555

Street

Tax 32204

E-mail nolandlaw@aol.com

City

State

Zip

Speaking:  For  Against  Information

Representing Florida Chapter, American of Surgeons

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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S-001 (10/20/11)

THE FLORIDA SENATE  
**APPEARANCE RECORD**

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3/6/13

Meeting Date

Topic Optometry

Bill Number CS/SB 278  
(if applicable)

Name John B. Griffin

Amendment Barcode \_\_\_\_\_  
(if applicable)

Job Title Attorney

Address 2930 Wellington Circle, Suite 201

Phone (850) 894-1009

Street

Tallahassee

FL

32309

City

State

Zip

E-mail JBGriffin@carsm-adkinslaw.com

Speaking:  For  Against  Information

*TO ANSWER SEN THRASHER'S  
QUESTIONS.*

Representing Florida Optometric Association

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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S-001 (10/20/11)

# CourtSmart Tag Report

**Room:** KN 412

**Case:**

**Type:**

**Caption:** Senate Appropriations Subcommittee on Health & Human Services

**Judge:**

**Started:** 3/6/2013 10:32:48 AM

**Ends:** 3/6/2013 11:41:19 AM

**Length:** 01:08:32

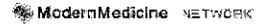
**10:32:53 AM** Meeting called to order  
**10:33:00 AM** Roll call  
**10:33:04 AM** Opening Remarks by Chair Grimsley  
**10:33:33 AM** Tab 1:CS/SB 160-Licensure Fee Exemptions for Military Veterans; Richter  
**10:34:26 AM** Amendment 477770 (FAV)  
**10:34:56 AM** Motion to CS bill/Roll Call (Bill reported favorably as CS)  
**10:36:05 AM** Tab 2: CS/SB 278-Practice of Optometry; Richter  
**10:38:29 AM** Amendment 236832(FAV)  
**10:39:42 AM** Amendment 645394(FAV)  
**10:39:54 AM** Amendment 111242(PENDING)  
**10:40:10 AM** Amendment 685992(Substitute Amendment for 111242) - FAV  
**10:40:30 AM** Amendment 603788 (FAV)  
**10:40:59 AM** Amendment 611802 (FAV)  
**10:52:23 AM** Public Testimony  
**10:53:23 AM** Rebecca O'hara-VP of Governmental Affairs  
**10:54:04 AM** Charles Slonim, MD-Ophthalmology  
**11:00:54 AM** Bruce May, ESQ-Holland & Knight  
**11:05:21 AM** Stanley Braverman, MD-Ophthalmologist  
**11:07:22 AM** Kimberly Reed-Associate Professor of Optometry  
**11:11:37 AM** Joni Scott Weideman, O.D.-VA Optometric Physician  
**11:12:53 AM** John Griffin-Attorney  
**11:40:12 AM** Motion to CS bill/Roll Call (Bill reported favorably as CS)  
**11:40:14 AM** Meeting Adjourned

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## Peek into optometry's future with trends and technology

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David Talley, OD, FAAO, reviewed what trends and technology optometry can look to in the future during a lunch course at the 90th annual SECO International meeting in Atlanta.

Dr. Talley, who practices in Memphis, TN, discussed that trends and technology in the optometric profession can be intertwined. He cautioned attendees to expand their knowledge and abilities. "If the only tool in your toolbox is a hammer," he said, "everything looks like a nail."

Trends include:

- ODs will move to refractive lasers.
- There will be a continued expansion of ODs using injectable medications. Dr. Talley mentioned that Botox (onabotulinumtoxinA) is one of the easiest injections to perform, and he has been using Botox in Memphis for 20 years.
- Continued expansion of ODs performing minor surgical procedures on the eye and adnexa, such as:
  - Draining cysts
  - Snipping neoplasm
  - Chalazion incision
  - Entropion care
- ODs expanding their presence with third-party payers, and electronic health records (EHR) including e-prescribing and Physician Quality Reporting Systems (PQRS).

New technology to watch for:

- Molecular technology and genomics. Gene chip analysis would allow practitioners to better identify and treat eye disease and better prescribe antibiotics. For example, ODs would know if a patient would likely better respond to one antibiotic over another.
- Radio frequency technology. Dr. Talley mentioned the Ellman Surgitron Unit, which allows practitioners to remove eye lesions, resection skin tumors, and perform blepharoplasty.
- Plasma surgery. This nanotechnology creates low-energy incisions on the ocular surface. Dr. Talley showed how the Fugo Plasma Blade sterilizes the wound and controls hemostasis in procedures like filtering glaucoma surgery and removing conjunctival nevus and neoplasm.
- Tissue engineering and biomechanics in ocular disease management. This includes organ regeneration and replacement, wound healing, and adhesion. Consider how growing corneas for research would change the research model, Dr. Talley asked. Other uses include using stem cells to repair tissue and anti-VEGF therapy.
- Ocular iontophoresis. Dr. Talley mentioned EyeGate II Delivery System, which would allow practitioners to allow medication into the anterior and posterior chambers without injection.

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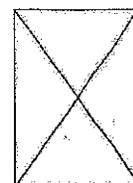
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• Femtodynamics. Femtosecond lasers will be used for more applications, such as thin LASIK, glaucoma surgery, limbal stem cell harvesting, and grafting corneas with very little induced astigmatism.



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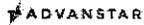
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