CHAMBER ACTION

The Health Care Regulation Committee recommends the following: 1 2 3 Council/Committee Substitute 4 Remove the entire bill and insert: A bill to be entitled 5 6 An act relating to physician supervision standards; 7 amending s. 458.348, F.S.; defining the term "physician 8 office practice setting"; providing requirements for 9 supervisory relationships with advanced registered nurse 10 practitioners or physician assistants practicing outside the physician office practice setting; providing 11 12 rulemaking authority; exempting certain advanced registered nurse practitioners and physician assistants 13 14 from certain supervisory relationships and requirements; creating s. 459.025, F.S.; requiring osteopathic 15 16 physicians in a supervisory relationship with certain 17 professionals to provide notice; providing for protocols requiring direct supervision; defining the term 18 19 "osteopathic physician office practice setting"; providing 20 requirements for supervisory relationships with advanced 21 registered nurse practitioners or physician assistants 22 practicing outside the osteopathic physician office 23 practice setting; providing rulemaking authority; Page 1 of 10

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24	exempting certain advanced registered nurse practitioners
25	and physician assistants from certain supervisory
26	relationships and requirements; providing an effective
27	date.
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29	Be It Enacted by the Legislature of the State of Florida:
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31	Section 1. Section 458.348, Florida Statutes, is amended
32	to read:
33	458.348 Formal supervisory relationships, standing orders,
34	and established protocols; notice; standards; supervisory
35	relationships with advanced registered nurse practitioners or
36	physician assistants practicing outside the physician office
37	practice setting; exemptions
38	(1) NOTICE
39	(a) When a physician enters into a formal supervisory
40	relationship or standing orders with an emergency medical
41	technician or paramedic licensed pursuant to s. 401.27, which
42	relationship or orders contemplate the performance of medical
43	acts, or when a physician enters into an established protocol
44	with an advanced registered nurse practitioner, which protocol
45	contemplates the performance of medical acts identified and
46	approved by the joint committee pursuant to s. 464.003(3)(c) or
47	acts set forth in s. $464.012(3)$ and (4) , the physician shall
48	submit notice to the board. The notice shall contain a statement
49	in substantially the following form:
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51 (name and professional license number of physician) I, , (address of physician) have hereby entered into a formal 52 of 53 supervisory relationship, standing orders, or an established 54 protocol with (number of persons) emergency medical 55 technician(s), (number of persons) paramedic(s), or 56 (number of persons) advanced registered nurse practitioner(s). Notice shall be filed within 30 days after of entering 57 (b)

58 into the relationship, orders, or protocol. Notice also shall be 59 provided within 30 days after the physician has terminated any 60 such relationship, orders, or protocol.

61 ESTABLISHMENT OF STANDARDS BY JOINT COMMITTEE.--The (2) joint committee created by s. 464.003(3)(c) shall determine 62 minimum standards for the content of established protocols 63 pursuant to which an advanced registered nurse practitioner may 64 65 perform medical acts identified and approved by the joint 66 committee pursuant to s. 464.003(3)(c) or acts set forth in s. 67 464.012(3) and (4) and shall determine minimum standards for supervision of such acts by the physician, unless the joint 68 69 committee determines that any act set forth in s. 464.012(3) or 70 (4) is not a medical act. Such standards shall be based on risk 71 to the patient and acceptable standards of medical care and 72 shall take into account the special problems of medically 73 underserved areas. The standards developed by the joint 74 committee shall be adopted as rules by the Board of Nursing and the Board of Medicine for purposes of carrying out their 75 76 responsibilities pursuant to part I of chapter 464 and this 77 chapter, respectively, but neither board shall have disciplinary 78 powers over the licensees of the other board. Page 3 of 10

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79 PROTOCOLS REQUIRING DIRECT SUPERVISION. -- All protocols (3) 80 relating to electrolysis or electrology using laser or lightbased hair removal or reduction by persons other than physicians 81 82 licensed under this chapter or chapter 459 shall require the 83 person performing such service to be appropriately trained and 84 work only under the direct supervision and responsibility of a physician licensed under this chapter or chapter 459. 85 86 (4) SUPERVISORY RELATIONSHIPS WITH ADVANCED REGISTERED 87 NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS PRACTICING OUTSIDE 88 THE PHYSICIAN OFFICE PRACTICE SETTING. --89 (a) For purposes of this subsection, the term "physician 90 office practice setting" means a business location where a 91 physician delivers medical services regardless of whether the 92 business is physician owned or nonphysician owned. A physician office practice setting includes a location where medical 93 94 services are performed other than at a hospital, an ambulatory surgical center, an abortion clinic, or any other medical 95 96 facility licensed by the Department of Health, the Agency for Health Care Administration, the Department of Corrections, a 97 98 successor agency, or a certified rural health clinic. A business location is a physician office practice setting if a physician 99 100 is physically present in the business location during the 101 provision of care greater than 33 percent of the hours of 102 operation in which medical care is provided. A business location 103 that does not meet this requirement shall be considered outside 104 a physician office practice setting during all hours when a 105 physician is not physically present, irrespective of the 106 ownership or business name of the site. Page 4 of 10

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107	(b) A physician who is in a supervisory relationship with
108	an advanced registered nurse practitioner as described in s.
109	464.012(4)(c) or a physician assistant as described in s.
110	458.347(2)(f) who is practicing outside a physician office
111	practice setting of the supervising physician shall:
112	1. Maintain a valid and unrestricted active Florida
113	license pursuant to this chapter and a valid federal controlled
114	substance registry number pursuant to chapter 893.
115	2. Provide indirect supervision as defined by the Board of
116	Medicine to the advanced registered nurse practitioner or
117	physician assistant.
118	3. Notwithstanding the number of supervisory relationships
119	authorized in s. 458.347(3), maintain no more than two
120	supervisory relationships with any combination of advanced
121	registered nurse practitioners or physician assistants outside
122	the physician office practice setting at any one time.
123	4. Delegate only tasks and procedures to the advanced
124	registered nurse practitioner or physician assistant which are
125	within the supervising physician's practice and medical
126	specialty area.
127	5. Ensure that the advanced registered nurse practitioner
128	or physician assistant has been actively practicing within the
129	medical specialty area for a minimum of 4 years prior to
130	providing care in a practice setting outside the physician
131	office practice setting of the supervising physician.
132	6. Ensure that the advanced registered nurse practitioner
133	or physician assistant under supervision clearly identifies to
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134	the patient that he or she is an advanced registered nurse
135	practitioner or a physician assistant.
136	(5) RULESThe Board of Medicine may adopt rules to
137	administer this section.
138	(6) EXEMPTIONSThe requirements of this section shall
139	not apply to advanced registered nurse practitioners or
140	physician assistants providing services in a nursing home
141	licensed under part II of chapter 400, an assisted living
142	facility licensed under part III of chapter 400, a continuing
143	care facility licensed under chapter 651, or a retirement
144	community consisting of independent living units and either a
145	licensed nursing home or assisted living facility. The
146	requirements of this section shall not apply to advanced
147	registered nurse practitioners or physician assistants providing
148	services to persons enrolled in a program designed to maintain
149	elders and persons with disabilities in a home and community-
150	based setting.
151	Section 2. Section 459.025, Florida Statutes, is created
152	to read:
153	459.025 Formal supervisory relationships, standing orders,
154	and established protocols; notice; standards; supervisory
155	relationships with advanced registered nurse practitioners or
156	physician assistants practicing outside the osteopathic
157	physician office practice setting; exemptions
158	(1) NOTICE
159	(a) When an osteopathic physician enters into a formal
160	supervisory relationship or standing orders with an emergency
161	medical technician or paramedic licensed pursuant to s. 401.27, Page6of10

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162	which relationship or orders contemplate the performance of
163	medical acts, or when an osteopathic physician enters into an
164	established protocol with an advanced registered nurse
165	practitioner, which protocol contemplates the performance of
166	medical acts identified and approved by the joint committee
167	pursuant to s. 464.003(3)(c) or acts set forth in s. 464.012(3)
168	and (4), the osteopathic physician shall submit notice to the
169	board. The notice shall contain a statement in substantially the
170	following form:
171	
172	I, (name and professional license number of osteopathic
173	physician) , of (address of osteopathic physician) have
174	hereby entered into a formal supervisory relationship, standing
175	orders, or an established protocol with (number of persons)
176	<pre>emergency medical technician(s), (number of persons)</pre>
177	paramedic(s), or (number of persons) advanced registered
178	nurse practitioner(s).
179	(b) Notice shall be filed within 30 days after entering
180	into the relationship, orders, or protocol. Notice also shall be
181	provided within 30 days after the osteopathic physician has
182	terminated any such relationship, orders, or protocol.
183	(2) PROTOCOLS REQUIRING DIRECT SUPERVISION All protocols
184	relating to electrolysis or electrology using laser or light-
185	based hair removal or reduction by persons other than
186	osteopathic physicians licensed under this chapter shall require
187	the person performing such service to be appropriately trained
188	and work only under the direct supervision and responsibility of
189	an osteopathic physician licensed under this chapter.

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190	(3) SUPERVISORY RELATIONSHIPS WITH ADVANCED REGISTERED
191	NURSE PRACTITIONERS OR PHYSICIAN ASSISTANTS PRACTICING OUTSIDE
192	THE PHYSICIAN OFFICE PRACTICE SETTING
193	(a) For purposes of this subsection, the term "osteopathic
194	physician office practice setting" means a business location
195	where an osteopathic physician delivers medical services
196	regardless of whether the business is osteopathic physician
197	owned or nonphysician owned. An osteopathic physician office
198	practice setting includes a location where medical services are
199	performed other than at a hospital, an ambulatory surgical
200	center, an abortion clinic, or any other medical facility
201	licensed by the Department of Health, the Agency for Health Care
202	Administration, the Department of Corrections, a successor
203	agency, or a certified rural health clinic. A business location
204	is not an osteopathic physician office practice setting unless
205	an osteopathic physician is physically present in the business
206	location during the provision of care at least 33 percent of the
207	hours of operation in which medical care is provided. A business
208	location that does not meet this requirement shall be considered
209	outside an osteopathic physician office practice setting during
210	all hours when an osteopathic physician is not physically
211	present, irrespective of the ownership or business name of the
212	site.
213	(b) An osteopathic physician who is in a supervisory
214	relationship with an advanced registered nurse practitioner as
215	described in s. 464.012(4)(c) or a physician assistant as
216	described in s. 459.022(2)(f) who is practicing outside an

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217	osteopathic physician office practice setting of the supervising
218	osteopathic physician shall:
219	1. Maintain a valid and unrestricted active Florida
220	license pursuant to this chapter and a valid federal controlled
221	substance registry number pursuant to chapter 893.
222	2. Provide indirect supervision as defined by the Board of
223	Osteopathic Medicine to the advanced registered nurse
224	practitioner or physician assistant.
225	3. Notwithstanding the number of supervisory relationships
226	authorized in s. 459.022(3), maintain no more than two
227	supervisory relationships with any combination of advanced
228	registered nurse practitioners or physician assistants outside
229	the osteopathic physician office practice setting at any one
230	time.
231	4. Delegate only tasks and procedures to the advanced
232	registered nurse practitioner or physician assistant which are
233	within the supervising osteopathic physician's practice and
234	medical specialty area.
235	5. Ensure that the advanced registered nurse practitioner
236	or physician assistant has been actively practicing within the
237	medical specialty area for a minimum of 4 years prior to
238	providing care in a practice setting outside the osteopathic
239	physician office practice setting of the supervising osteopathic
240	physician.
241	6. Ensure that the advanced registered nurse practitioner
242	or physician assistant under supervision clearly identifies to
243	the patient that he or she is an advanced registered nurse
244	<u>practitioner or a physician assistant.</u> Page9of10

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245	(4) RULESThe Board of Osteopathic Medicine may adopt
246	rules to administer this section.
247	(5) EXEMPTIONSThe requirements of this section shall
248	not apply to advanced registered nurse practitioners or
249	physician assistants providing services in a nursing home
250	licensed under part II of chapter 400, an assisted living
251	facility licensed under part III of chapter 400, a continuing
252	care facility licensed under chapter 651, or a retirement
253	community consisting of independent living units and either a
254	licensed nursing home or assisted living facility. The
255	requirements of this section shall not apply to advanced
256	registered nurse practitioners or physician assistants providing
257	services to persons enrolled in a program designed to maintain
258	elders and persons with disabilities in a home and community-
259	based setting.
260	Section 3. This act shall take effect upon becoming a law.

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