

LEGISLATIVE ACTION

Senate House

Comm: RCS 01/31/2012

The Committee on Health Regulation (Diaz de la Portilla) recommended the following:

Senate Amendment (with title amendment)

Delete lines 163 - 263

and insert:

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This subsection does not apply to a board-certified anesthesiologist, physiatrist, psychiatrist, rheumatologist, or neurologist, or to a board-certified physician who has surgical privileges at a hospital or ambulatory surgery center and primarily provides surgical services. This subsection does not apply to a board-certified medical specialist who has also completed a fellowship in pain medicine approved by the Accreditation Council for Graduate Medical Education or the

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American Osteopathic Association, or who is board certified in pain medicine by a board approved by the American Board of Medical Specialties or the American Osteopathic Association and performs interventional pain procedures of the type routinely billed using surgical codes. This subsection does not apply to a physician who is treating a patient in accordance with an approved clinical trial.

Section 2. Paragraph (a) of subsection (1) of section 458.3265, Florida Statutes, is amended to read:

458.3265 Pain-management clinics.-

- (1) REGISTRATION.—
- (a) 1. As used in this section, the term:
- a. "Chronic nonmalignant pain" means pain unrelated to cancer or rheumatoid arthritis which persists beyond the usual course of disease or beyond the injury that is the cause of the pain or which persists more than 90 days after surgery.
- b. "Pain-management clinic" or "clinic" means any publicly or privately owned facility:
- (I) That advertises in any medium for any type of painmanagement services; or
- (II) Where in any month a majority of patients are prescribed opioids, benzodiazepines, barbiturates, or carisoprodol for the treatment of chronic nonmalignant pain.
- 2. Each pain-management clinic must register with the department unless:
- a. The That clinic is licensed as a facility pursuant to chapter 395;
- b. The majority of the physicians who provide services in the clinic primarily provide primarily surgical services;

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- c. The clinic is owned by a publicly held corporation whose shares are traded on a national exchange or on the over-thecounter market and whose total assets at the end of the corporation's most recent fiscal quarter exceeded \$50 million;
- d. The clinic is affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows;
- e. The clinic does not prescribe controlled substances for the treatment of pain;
- f. The clinic is owned by a corporate entity exempt from federal taxation under 26 U.S.C. s. 501(c)(3);
- g. The clinic is wholly owned and operated by one or more board-certified anesthesiologists, physiatrists, psychiatrists, rheumatologists, or neurologists; or
- h. The clinic is wholly owned and operated by one or more board-certified medical specialists who have also completed fellowships in pain medicine approved by the Accreditation Council for Graduate Medical Education, or who are also boardcertified in pain medicine by a board approved by the American Board of Medical Specialties and perform interventional pain procedures of the type routinely billed using surgical codes.

Section 3. Paragraph (a) of subsection (1) of section 459.0137, Florida Statutes, is amended to read:

- 459.0137 Pain-management clinics.-
- (1) REGISTRATION.—
- (a) 1. As used in this section, the term:
- a. "Chronic nonmalignant pain" means pain unrelated to cancer or rheumatoid arthritis which persists beyond the usual course of disease or beyond the injury that is the cause of the

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pain or which persists more than 90 days after surgery.

- b. "Pain-management clinic" or "clinic" means any publicly or privately owned facility:
- (I) That advertises in any medium for any type of painmanagement services; or
- (II) Where in any month a majority of patients are prescribed opioids, benzodiazepines, barbiturates, or carisoprodol for the treatment of chronic nonmalignant pain.
- 2. Each pain-management clinic must register with the department unless:
- a. The That clinic is licensed as a facility pursuant to chapter 395;
- b. The majority of the physicians who provide services in the clinic primarily provide primarily surgical services;
- c. The clinic is owned by a publicly held corporation whose shares are traded on a national exchange or on the over-thecounter market and whose total assets at the end of the corporation's most recent fiscal quarter exceeded \$50 million;
- d. The clinic is affiliated with an accredited medical school at which training is provided for medical students, residents, or fellows;
- e. The clinic does not prescribe controlled substances for the treatment of pain;
- f. The clinic is owned by a corporate entity exempt from federal taxation under 26 U.S.C. s. 501(c)(3);
- g. The clinic is wholly owned and operated by one or more board-certified anesthesiologists, physiatrists, psychiatrists, rheumatologists, or neurologists; or
 - h. The clinic is wholly owned and operated by one or more



board-certified medical specialists who have also completed fellowships in pain medicine approved by the Accreditation Council for Graduate Medical Education or the American Osteopathic Association, or who are also board-certified in pain medicine by a board approved by the American Board of Medical Specialties or the American Osteopathic Association and perform interventional pain procedures of the type routinely billed using surgical codes.

Section 4. Paragraph (b) of subsection (1) of section 465.0276, Florida Statutes, is amended to read:

465.0276 Dispensing practitioner.-

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- (b) A practitioner registered under this section may not dispense a controlled substance listed in Schedule II or Schedule III as provided in s. 893.03. This paragraph does not apply to:
- 1. The dispensing of complimentary packages of medicinal drugs which are labeled as a drug sample or complimentary drug as defined in s. 499.028 to the practitioner's own patients in the regular course of her or his practice without the payment of a fee or remuneration of any kind, whether direct or indirect, as provided in subsection (5).
- 2. The dispensing of controlled substances in the health care system of the Department of Corrections.
- 3. The dispensing of a controlled substance listed in Schedule II or Schedule III in connection with the performance of a surgical procedure. The amount dispensed pursuant to the subparagraph may not exceed a 14-day supply. This exception does not allow for the dispensing of a controlled substance listed in



Schedule II or Schedule III more than 14 days after the performance of the surgical procedure. For purposes of this subparagraph, the term "surgical procedure" means any procedure in any setting which involves, or reasonably should involve:

- a. Perioperative medication and sedation that allows the patient to tolerate unpleasant procedures while maintaining adequate cardiorespiratory function and the ability to respond purposefully to verbal or tactile stimulation and makes intraand postoperative monitoring necessary; or
- b. The use of general anesthesia or major conduction anesthesia and preoperative sedation.
- 4. The dispensing of a controlled substance listed in Schedule II or Schedule III pursuant to an approved clinical trial. For purposes of this subparagraph, the term "approved clinical trial" means a clinical research study or clinical investigation that, in whole or in part, is state or federally funded or is conducted under protocols approved by an investigational new drug application that is reviewed by the United States Food and Drug Administration.
- 5. The dispensing of methadone in a facility licensed under s. 397.427 where medication-assisted treatment for opiate addiction is provided.
- 6. The dispensing of a controlled substance listed in Schedule II or Schedule III to a patient of a facility licensed under part IV of chapter 400.

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And the title is amended as follows: 156

Delete lines 11 - 19



and insert:

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when a pharmacy receives it; providing that the standards of practice regarding the prescribing of controlled substances do not apply to certain physicians; amending ss. 458.3265 and 459.0137, F.S.; requiring that a pain-management clinic register with the Department of Health unless the clinic is wholly owned and operated by certain health care professionals, including a board-certified psychiatrist or rheumatologist; amending s. 465.0276, F.S.; redefining the term "approved clinical trial" as it relates to the Florida Pharmacy Act;