



HB 423, Engrossed 1

2016

1                                   A bill to be entitled  
2           An act relating to drug prescription by advanced  
3           registered nurse practitioners and physician  
4           assistants; providing a short title; amending s.  
5           110.12315, F.S.; expanding the categories of persons  
6           who may prescribe brand drugs under the prescription  
7           drug program when medically necessary; amending ss.  
8           310.071, 310.073, and 310.081, F.S.; exempting  
9           controlled substances prescribed by an advanced  
10          registered nurse practitioner or a physician assistant  
11          from the disqualifications for certification or  
12          licensure, and for continued certification or  
13          licensure, as a deputy or state pilot; amending s.  
14          456.072, F.S.; applying existing penalties for  
15          violations relating to the prescribing or dispensing  
16          of controlled substances to an advanced registered  
17          nurse practitioner; amending s. 456.44, F.S.; deleting  
18          an obsolete date; requiring advanced registered nurse  
19          practitioners and physician assistants who prescribe  
20          controlled substances for certain pain to make a  
21          certain designation, comply with registration  
22          requirements, and follow specified standards of  
23          practice; providing applicability; amending ss.  
24          458.3265 and 459.0137, F.S.; limiting the authority to  
25          prescribe a controlled substance in a pain-management  
26          clinic to a physician licensed under chapter 458 or

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

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27 | chapter 459, F.S.; amending s. 458.347, F.S.;

28 | expanding the prescribing authority of a licensed

29 | physician assistant; amending s. 464.012, F.S.;

30 | authorizing an advanced registered nurse practitioner

31 | to prescribe, dispense, administer, or order drugs,

32 | rather than to monitor and alter drug therapies;

33 | amending s. 464.018, F.S.; specifying acts that

34 | constitute grounds for denial of a license for or

35 | disciplinary action against an advanced registered

36 | nurse practitioner; amending s. 893.02, F.S.;

37 | redefining the term "practitioner" to include advanced

38 | registered nurse practitioners and physician

39 | assistants under the Florida Comprehensive Drug Abuse

40 | Prevention and Control Act; amending s. 948.03, F.S.;

41 | providing that possession of drugs or narcotics

42 | prescribed by an advanced registered nurse

43 | practitioner or physician assistant is an exception

44 | from a prohibition relating to the possession of drugs

45 | or narcotics during probation; reenacting s.

46 | 310.071(3), F.S., relating to deputy pilot

47 | certification, to incorporate the amendment made by

48 | the act to s. 310.071, F.S., in a reference thereto;

49 | reenacting ss. 458.331(10), 458.347(7)(g),

50 | 459.015(10), 459.022(7)(f), and 465.0158(5)(b), F.S.,

51 | relating to grounds for disciplinary action against

52 | certain licensed health care practitioners or



53 applicants, physician assistant licensure, the  
54 imposition of penalties upon physician assistants by  
55 the Board of Osteopathic Medicine, and nonresident  
56 sterile compounding permits, respectively, to  
57 incorporate the amendment made by the act to s.  
58 456.072, F.S., in references thereto; reenacting ss.  
59 456.072(1)(mm) and 466.02751, F.S., relating to  
60 grounds for discipline of certain licensed health care  
61 practitioners or applicants and dentist practitioner  
62 profiles, respectively, to incorporate the amendment  
63 made by the act to s. 456.44, F.S., in references  
64 thereto; reenacting ss. 458.303, 458.347(4)(e) and  
65 (9)(c), 458.3475(7)(b), 459.022(4)(e) and (9)(c), and  
66 459.023(7)(b), F.S., relating to the nonapplicability  
67 of certain provisions to specified health care  
68 practitioners, the prescribing or dispensing of  
69 medications by physician assistants, the duties of the  
70 Council on Physician Assistants, and the duties of the  
71 Board of Medicine and the Board of Osteopathic  
72 Medicine with respect to anesthesiologist assistants,  
73 respectively, to incorporate the amendment made by the  
74 act to s. 458.347, F.S., in references thereto;  
75 reenacting ss. 456.041(1)(a), 458.348(1) and (2), and  
76 459.025(1), F.S., relating to practitioner profiles  
77 and notice and standards for formal supervisory  
78 relationships, standing orders, and established



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79 protocols, respectively, to incorporate the amendment  
80 made by the act to s. 464.012, F.S., in references  
81 thereto; reenacting ss. 464.008(2), 464.009(5),  
82 464.018(2), and 464.0205(1)(b), (3), and (4)(b), F.S.,  
83 relating to licensure by examination of registered  
84 nurses and licensed practical nurses, licensure by  
85 endorsement to practice professional or practical  
86 nursing, disciplinary actions against nursing  
87 applicants or licensees, and retired volunteer nurse  
88 certifications, respectively, to incorporate the  
89 amendment made by the act to s. 464.018, F.S., in  
90 references thereto; reenacting s. 775.051, F.S.,  
91 relating to the exclusion as a defense and  
92 nonadmissibility as evidence of voluntary  
93 intoxication, to incorporate the amendment made by the  
94 act to s. 893.02, F.S., in a reference thereto;  
95 reenacting ss. 944.17(3)(a), 948.001(8), and  
96 948.101(1)(e), F.S., relating to the receipt by the  
97 state correctional system of certain persons sentenced  
98 to incarceration, the definition of the term  
99 "probation," and the terms and conditions of community  
100 control, respectively, to incorporate the amendment  
101 made by the act to s. 948.03, F.S., in references  
102 thereto; providing an effective date.

103  
104 Be It Enacted by the Legislature of the State of Florida:



105  
106           Section 1. This act may be cited as the "Barbara Lumpkin  
107 Prescribing Act."

108           Section 2. Subsection (7) of section 110.12315, Florida  
109 Statutes, is amended to read:

110           110.12315 Prescription drug program.—The state employees'  
111 prescription drug program is established. This program shall be  
112 administered by the Department of Management Services, according  
113 to the terms and conditions of the plan as established by the  
114 relevant provisions of the annual General Appropriations Act and  
115 implementing legislation, subject to the following conditions:

116           (7) The department shall establish the reimbursement  
117 schedule for prescription pharmaceuticals dispensed under the  
118 program. Reimbursement rates for a prescription pharmaceutical  
119 must be based on the cost of the generic equivalent drug if a  
120 generic equivalent exists, unless the physician, advanced  
121 registered nurse practitioner, or physician assistant  
122 prescribing the pharmaceutical clearly states on the  
123 prescription that the brand name drug is medically necessary or  
124 that the drug product is included on the formulary of drug  
125 products that may not be interchanged as provided in chapter  
126 465, in which case reimbursement must be based on the cost of  
127 the brand name drug as specified in the reimbursement schedule  
128 adopted by the department.

129           Section 3. Paragraph (c) of subsection (1) of section  
130 310.071, Florida Statutes, is amended to read:



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131 310.071 Deputy pilot certification.—

132 (1) In addition to meeting other requirements specified in  
133 this chapter, each applicant for certification as a deputy pilot  
134 must:

135 (c) Be in good physical and mental health, as evidenced by  
136 documentary proof of having satisfactorily passed a complete  
137 physical examination administered by a licensed physician within  
138 the preceding 6 months. The board shall adopt rules to establish  
139 requirements for passing the physical examination, which rules  
140 shall establish minimum standards for the physical or mental  
141 capabilities necessary to carry out the professional duties of a  
142 certificated deputy pilot. Such standards shall include zero  
143 tolerance for any controlled substance regulated under chapter  
144 893 unless that individual is under the care of a physician,  
145 advanced registered nurse practitioner, or physician assistant  
146 and that controlled substance was prescribed by that physician,  
147 advanced registered nurse practitioner, or physician assistant.

148 To maintain eligibility as a certificated deputy pilot, each  
149 certificated deputy pilot must annually provide documentary  
150 proof of having satisfactorily passed a complete physical  
151 examination administered by a licensed physician. The physician  
152 must know the minimum standards and certify that the  
153 certificateholder satisfactorily meets the standards. The  
154 standards for certificateholders shall include a drug test.

155 Section 4. Subsection (3) of section 310.073, Florida  
156 Statutes, is amended to read:



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157           310.073 State pilot licensing.—In addition to meeting  
158 other requirements specified in this chapter, each applicant for  
159 license as a state pilot must:

160           (3) Be in good physical and mental health, as evidenced by  
161 documentary proof of having satisfactorily passed a complete  
162 physical examination administered by a licensed physician within  
163 the preceding 6 months. The board shall adopt rules to establish  
164 requirements for passing the physical examination, which rules  
165 shall establish minimum standards for the physical or mental  
166 capabilities necessary to carry out the professional duties of a  
167 licensed state pilot. Such standards shall include zero  
168 tolerance for any controlled substance regulated under chapter  
169 893 unless that individual is under the care of a physician,  
170 advanced registered nurse practitioner, or physician assistant  
171 and that controlled substance was prescribed by that physician,  
172 advanced registered nurse practitioner, or physician assistant.

173 To maintain eligibility as a licensed state pilot, each licensed  
174 state pilot must annually provide documentary proof of having  
175 satisfactorily passed a complete physical examination  
176 administered by a licensed physician. The physician must know  
177 the minimum standards and certify that the licensee  
178 satisfactorily meets the standards. The standards for licensees  
179 shall include a drug test.

180           Section 5. Paragraph (b) of subsection (3) of section  
181 310.081, Florida Statutes, is amended to read:

182           310.081 Department to examine and license state pilots and



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183 certificate deputy pilots; vacancies.—

184 (3) Pilots shall hold their licenses or certificates  
185 pursuant to the requirements of this chapter so long as they:

186 (b) Are in good physical and mental health as evidenced by  
187 documentary proof of having satisfactorily passed a physical  
188 examination administered by a licensed physician or physician  
189 assistant within each calendar year. The board shall adopt rules  
190 to establish requirements for passing the physical examination,  
191 which rules shall establish minimum standards for the physical  
192 or mental capabilities necessary to carry out the professional  
193 duties of a licensed state pilot or a certificated deputy pilot.  
194 Such standards shall include zero tolerance for any controlled  
195 substance regulated under chapter 893 unless that individual is  
196 under the care of a physician, advanced registered nurse  
197 practitioner, or physician assistant and that controlled  
198 substance was prescribed by that physician, advanced registered  
199 nurse practitioner, or physician assistant. To maintain  
200 eligibility as a certificated deputy pilot or licensed state  
201 pilot, each certificated deputy pilot or licensed state pilot  
202 must annually provide documentary proof of having satisfactorily  
203 passed a complete physical examination administered by a  
204 licensed physician. The physician must know the minimum  
205 standards and certify that the certificateholder or licensee  
206 satisfactorily meets the standards. The standards for  
207 certificateholders and for licensees shall include a drug test.

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209 Upon resignation or in the case of disability permanently  
210 affecting a pilot's ability to serve, the state license or  
211 certificate issued under this chapter shall be revoked by the  
212 department.

213 Section 6. Subsection (7) of section 456.072, Florida  
214 Statutes, is amended to read:

215 456.072 Grounds for discipline; penalties; enforcement.—

216 (7) Notwithstanding subsection (2), upon a finding that a  
217 physician has prescribed or dispensed a controlled substance, or  
218 caused a controlled substance to be prescribed or dispensed, in  
219 a manner that violates the standard of practice set forth in s.  
220 458.331(1)(q) or (t), s. 459.015(1)(t) or (x), s. 461.013(1)(o)  
221 or (s), or s. 466.028(1)(p) or (x), or that an advanced  
222 registered nurse practitioner has prescribed or dispensed a  
223 controlled substance, or caused a controlled substance to be  
224 prescribed or dispensed, in a manner that violates the standard  
225 of practice set forth in s. 464.018(1)(n) or (p)6., the  
226 physician or advanced registered nurse practitioner shall be  
227 suspended for a period of not less than 6 months and pay a fine  
228 of not less than \$10,000 per count. Repeated violations shall  
229 result in increased penalties.

230 Section 7. Subsections (2) and (3) of section 456.44,  
231 Florida Statutes, are amended to read:

232 456.44 Controlled substance prescribing.—

233 (2) REGISTRATION. ~~Effective January 1, 2012,~~ A physician  
234 licensed under chapter 458, chapter 459, chapter 461, or chapter



235 466, a physician assistant licensed under chapter 458 or chapter  
 236 459, or an advanced registered nurse practitioner certified  
 237 under part I of chapter 464 who prescribes any controlled  
 238 substance, listed in Schedule II, Schedule III, or Schedule IV  
 239 as defined in s. 893.03, for the treatment of chronic  
 240 nonmalignant pain, must:

241 (a) Designate himself or herself as a controlled substance  
 242 prescribing practitioner on his or her ~~the physician's~~  
 243 practitioner profile.

244 (b) Comply with the requirements of this section and  
 245 applicable board rules.

246 (3) STANDARDS OF PRACTICE.—The standards of practice in  
 247 this section do not supersede the level of care, skill, and  
 248 treatment recognized in general law related to health care  
 249 licensure.

250 (a) A complete medical history and a physical examination  
 251 must be conducted before beginning any treatment and must be  
 252 documented in the medical record. The exact components of the  
 253 physical examination shall be left to the judgment of the  
 254 registrant clinician ~~clinician~~ who is expected to perform a physical  
 255 examination proportionate to the diagnosis that justifies a  
 256 treatment. The medical record must, at a minimum, document the  
 257 nature and intensity of the pain, current and past treatments  
 258 for pain, underlying or coexisting diseases or conditions, the  
 259 effect of the pain on physical and psychological function, a  
 260 review of previous medical records, previous diagnostic studies,



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261 and history of alcohol and substance abuse. The medical record  
262 shall also document the presence of one or more recognized  
263 medical indications for the use of a controlled substance. Each  
264 registrant must develop a written plan for assessing each  
265 patient's risk of aberrant drug-related behavior, which may  
266 include patient drug testing. Registrants must assess each  
267 patient's risk for aberrant drug-related behavior and monitor  
268 that risk on an ongoing basis in accordance with the plan.

269 (b) Each registrant must develop a written individualized  
270 treatment plan for each patient. The treatment plan shall state  
271 objectives that will be used to determine treatment success,  
272 such as pain relief and improved physical and psychosocial  
273 function, and shall indicate if any further diagnostic  
274 evaluations or other treatments are planned. After treatment  
275 begins, the registrant ~~physician~~ shall adjust drug therapy to  
276 the individual medical needs of each patient. Other treatment  
277 modalities, including a rehabilitation program, shall be  
278 considered depending on the etiology of the pain and the extent  
279 to which the pain is associated with physical and psychosocial  
280 impairment. The interdisciplinary nature of the treatment plan  
281 shall be documented.

282 (c) The registrant ~~physician~~ shall discuss the risks and  
283 benefits of the use of controlled substances, including the  
284 risks of abuse and addiction, as well as physical dependence and  
285 its consequences, with the patient, persons designated by the  
286 patient, or the patient's surrogate or guardian if the patient



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287 is incompetent. The registrant ~~physician~~ shall use a written  
288 controlled substance agreement between the registrant ~~physician~~  
289 and the patient outlining the patient's responsibilities,  
290 including, but not limited to:

291 1. Number and frequency of controlled substance  
292 prescriptions and refills.

293 2. Patient compliance and reasons for which drug therapy  
294 may be discontinued, such as a violation of the agreement.

295 3. An agreement that controlled substances for the  
296 treatment of chronic nonmalignant pain shall be prescribed by a  
297 single treating registrant ~~physician~~ unless otherwise authorized  
298 by the treating registrant ~~physician~~ and documented in the  
299 medical record.

300 (d) The patient shall be seen by the registrant ~~physician~~  
301 at regular intervals, not to exceed 3 months, to assess the  
302 efficacy of treatment, ensure that controlled substance therapy  
303 remains indicated, evaluate the patient's progress toward  
304 treatment objectives, consider adverse drug effects, and review  
305 the etiology of the pain. Continuation or modification of  
306 therapy shall depend on the registrant's ~~physician's~~ evaluation  
307 of the patient's progress. If treatment goals are not being  
308 achieved, despite medication adjustments, the registrant  
309 ~~physician~~ shall reevaluate the appropriateness of continued  
310 treatment. The registrant ~~physician~~ shall monitor patient  
311 compliance in medication usage, related treatment plans,  
312 controlled substance agreements, and indications of substance



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313 abuse or diversion at a minimum of 3-month intervals.

314 (e) The registrant ~~physician~~ shall refer the patient as  
315 necessary for additional evaluation and treatment in order to  
316 achieve treatment objectives. Special attention shall be given  
317 to those patients who are at risk for misusing their medications  
318 and those whose living arrangements pose a risk for medication  
319 misuse or diversion. The management of pain in patients with a  
320 history of substance abuse or with a comorbid psychiatric  
321 disorder requires extra care, monitoring, and documentation and  
322 requires consultation with or referral to an addiction medicine  
323 specialist or psychiatrist.

324 (f) A registrant ~~physician~~ registered under this section  
325 must maintain accurate, current, and complete records that are  
326 accessible and readily available for review and comply with the  
327 requirements of this section, the applicable practice act, and  
328 applicable board rules. The medical records must include, but  
329 are not limited to:

- 330 1. The complete medical history and a physical  
331 examination, including history of drug abuse or dependence.
- 332 2. Diagnostic, therapeutic, and laboratory results.
- 333 3. Evaluations and consultations.
- 334 4. Treatment objectives.
- 335 5. Discussion of risks and benefits.
- 336 6. Treatments.
- 337 7. Medications, including date, type, dosage, and quantity  
338 prescribed.



- 339 | 8. Instructions and agreements.
- 340 | 9. Periodic reviews.
- 341 | 10. Results of any drug testing.
- 342 | 11. A photocopy of the patient's government-issued photo
- 343 | identification.
- 344 | 12. If a written prescription for a controlled substance
- 345 | is given to the patient, a duplicate of the prescription.
- 346 | 13. The registrant's ~~physician's~~ full name presented in a
- 347 | legible manner.

348 | (g) Patients with signs or symptoms of substance abuse

349 | shall be immediately referred to a board-certified pain

350 | management physician, an addiction medicine specialist, or a

351 | mental health addiction facility as it pertains to drug abuse or

352 | addiction unless the registrant is a physician who is board

353 | certified ~~board-certified~~ or board eligible ~~board-eligible~~ in

354 | pain management. Throughout the period of time before receiving

355 | the consultant's report, a prescribing registrant ~~physician~~

356 | shall clearly and completely document medical justification for

357 | continued treatment with controlled substances and those steps

358 | taken to ensure medically appropriate use of controlled

359 | substances by the patient. Upon receipt of the consultant's

360 | written report, the prescribing registrant ~~physician~~ shall

361 | incorporate the consultant's recommendations for continuing,

362 | modifying, or discontinuing controlled substance therapy. The

363 | resulting changes in treatment shall be specifically documented

364 | in the patient's medical record. Evidence or behavioral



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365 | indications of diversion shall be followed by discontinuation of  
366 | controlled substance therapy, and the patient shall be  
367 | discharged, and all results of testing and actions taken by the  
368 | registrant ~~physician~~ shall be documented in the patient's  
369 | medical record.

370 |  
371 | This subsection does not apply to a board-eligible or board-  
372 | certified anesthesiologist, physiatrist, rheumatologist, or  
373 | neurologist, or to a board-certified physician who has surgical  
374 | privileges at a hospital or ambulatory surgery center and  
375 | primarily provides surgical services. This subsection does not  
376 | apply to a board-eligible or board-certified medical specialist  
377 | who has also completed a fellowship in pain medicine approved by  
378 | the Accreditation Council for Graduate Medical Education or the  
379 | American Osteopathic Association, or who is board eligible or  
380 | board certified in pain medicine by the American Board of Pain  
381 | Medicine or a board approved by the American Board of Medical  
382 | Specialties or the American Osteopathic Association and performs  
383 | interventional pain procedures of the type routinely billed  
384 | using surgical codes. This subsection does not apply to a  
385 | registrant, physician, advanced registered nurse practitioner,  
386 | or physician assistant who prescribes medically necessary  
387 | controlled substances for a patient during an inpatient stay in  
388 | a hospital licensed under chapter 395.

389 |       Section 8. Paragraph (b) of subsection (2) of section  
390 | 458.3265, Florida Statutes, is amended to read:



391 458.3265 Pain-management clinics.—

392 (2) PHYSICIAN RESPONSIBILITIES.—These responsibilities  
 393 apply to any physician who provides professional services in a  
 394 pain-management clinic that is required to be registered in  
 395 subsection (1).

396 (b) A person may not dispense any medication on the  
 397 premises of a registered pain-management clinic unless he or she  
 398 is a physician licensed under this chapter or chapter 459. A  
 399 person may not prescribe any controlled substance regulated  
 400 under chapter 893 on the premises of a registered pain-  
 401 management clinic unless he or she is a physician licensed under  
 402 this chapter or chapter 459.

403 Section 9. Paragraph (f) of subsection (4) of section  
 404 458.347, Florida Statutes, is amended to read:

405 458.347 Physician assistants.—

406 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.—

407 (f)1. The council shall establish a formulary of medicinal  
 408 drugs that a fully licensed physician assistant having  
 409 prescribing authority under this section or s. 459.022 may not  
 410 prescribe. The formulary must include ~~controlled substances as~~  
 411 ~~defined in chapter 893,~~ general anesthetics, and radiographic  
 412 contrast materials.

413 2. In establishing the formulary, the council shall  
 414 consult with a pharmacist licensed under chapter 465, but not  
 415 licensed under this chapter or chapter 459, who shall be  
 416 selected by the State Surgeon General.





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417 3. Only the council shall add to, delete from, or modify  
418 the formulary. Any person who requests an addition, deletion, or  
419 modification of a medicinal drug listed on such formulary has  
420 the burden of proof to show cause why such addition, deletion,  
421 or modification should be made.

422 4. The boards shall adopt the formulary required by this  
423 paragraph, and each addition, deletion, or modification to the  
424 formulary, by rule. Notwithstanding any provision of chapter 120  
425 to the contrary, the formulary rule shall be effective 60 days  
426 after the date it is filed with the Secretary of State. Upon  
427 adoption of the formulary, the department shall mail a copy of  
428 such formulary to each fully licensed physician assistant having  
429 prescribing authority under this section or s. 459.022, and to  
430 each pharmacy licensed by the state. The boards shall establish,  
431 by rule, a fee not to exceed \$200 to fund the provisions of this  
432 paragraph and paragraph (e).

433 Section 10. Paragraph (b) of subsection (2) of section  
434 459.0137, Florida Statutes, is amended to read:

435 459.0137 Pain-management clinics.—

436 (2) PHYSICIAN RESPONSIBILITIES.—These responsibilities  
437 apply to any osteopathic physician who provides professional  
438 services in a pain-management clinic that is required to be  
439 registered in subsection (1).

440 (b) A person may not dispense any medication on the  
441 premises of a registered pain-management clinic unless he or she  
442 is a physician licensed under this chapter or chapter 458. A



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443 person may not prescribe any controlled substance regulated  
444 under chapter 893 on the premises of a registered pain-  
445 management clinic unless he or she is a physician licensed under  
446 this chapter or chapter 458.

447 Section 11. Section 464.012, Florida Statutes, is amended  
448 to read:

449 464.012 Certification of advanced registered nurse  
450 practitioners; fees; controlled substance prescribing.-

451 (1) Any nurse desiring to be certified as an advanced  
452 registered nurse practitioner shall apply to the department and  
453 submit proof that he or she holds a current license to practice  
454 professional nursing and that he or she meets one or more of the  
455 following requirements as determined by the board:

456 (a) Satisfactory completion of a formal postbasic  
457 educational program of at least one academic year, the primary  
458 purpose of which is to prepare nurses for advanced or  
459 specialized practice.

460 (b) Certification by an appropriate specialty board. Such  
461 certification shall be required for initial state certification  
462 and any recertification as a registered nurse anesthetist or  
463 nurse midwife. The board may by rule provide for provisional  
464 state certification of graduate nurse anesthetists and nurse  
465 midwives for a period of time determined to be appropriate for  
466 preparing for and passing the national certification  
467 examination.

468 (c) Graduation from a program leading to a master's degree



469 in a nursing clinical specialty area with preparation in  
470 specialized practitioner skills. For applicants graduating on or  
471 after October 1, 1998, graduation from a master's degree program  
472 shall be required for initial certification as a nurse  
473 practitioner under paragraph (4) (c). For applicants graduating  
474 on or after October 1, 2001, graduation from a master's degree  
475 program shall be required for initial certification as a  
476 registered nurse anesthetist under paragraph (4) (a).

477 (2) The board shall provide by rule the appropriate  
478 requirements for advanced registered nurse practitioners in the  
479 categories of certified registered nurse anesthetist, certified  
480 nurse midwife, and nurse practitioner.

481 (3) An advanced registered nurse practitioner shall  
482 perform those functions authorized in this section within the  
483 framework of an established protocol that is filed with the  
484 board upon biennial license renewal and within 30 days after  
485 entering into a supervisory relationship with a physician or  
486 changes to the protocol. The board shall review the protocol to  
487 ensure compliance with applicable regulatory standards for  
488 protocols. The board shall refer to the department licensees  
489 submitting protocols that are not compliant with the regulatory  
490 standards for protocols. A practitioner currently licensed under  
491 chapter 458, chapter 459, or chapter 466 shall maintain  
492 supervision for directing the specific course of medical  
493 treatment. Within the established framework, an advanced  
494 registered nurse practitioner may:



495 (a) Prescribe, dispense, administer, or order any ~~Monitor~~  
496 ~~and alter~~ drug therapies.

497 (b) Initiate appropriate therapies for certain conditions.

498 (c) Perform additional functions as may be determined by  
499 rule in accordance with s. 464.003(2).

500 (d) Order diagnostic tests and physical and occupational  
501 therapy.

502 (4) In addition to the general functions specified in  
503 subsection (3), an advanced registered nurse practitioner may  
504 perform the following acts within his or her specialty:

505 (a) The certified registered nurse anesthetist may, to the  
506 extent authorized by established protocol approved by the  
507 medical staff of the facility in which the anesthetic service is  
508 performed, perform any or all of the following:

509 1. Determine the health status of the patient as it  
510 relates to the risk factors and to the anesthetic management of  
511 the patient through the performance of the general functions.

512 2. Based on history, physical assessment, and supplemental  
513 laboratory results, determine, with the consent of the  
514 responsible physician, the appropriate type of anesthesia within  
515 the framework of the protocol.

516 3. Order under the protocol preanesthetic medication.

517 4. Perform under the protocol procedures commonly used to  
518 render the patient insensible to pain during the performance of  
519 surgical, obstetrical, therapeutic, or diagnostic clinical  
520 procedures. These procedures include ordering and administering



521 regional, spinal, and general anesthesia; inhalation agents and  
522 techniques; intravenous agents and techniques; and techniques of  
523 hypnosis.

524 5. Order or perform monitoring procedures indicated as  
525 pertinent to the anesthetic health care management of the  
526 patient.

527 6. Support life functions during anesthesia health care,  
528 including induction and intubation procedures, the use of  
529 appropriate mechanical supportive devices, and the management of  
530 fluid, electrolyte, and blood component balances.

531 7. Recognize and take appropriate corrective action for  
532 abnormal patient responses to anesthesia, adjunctive medication,  
533 or other forms of therapy.

534 8. Recognize and treat a cardiac arrhythmia while the  
535 patient is under anesthetic care.

536 9. Participate in management of the patient while in the  
537 postanesthesia recovery area, including ordering the  
538 administration of fluids and drugs.

539 10. Place special peripheral and central venous and  
540 arterial lines for blood sampling and monitoring as appropriate.

541 (b) The certified nurse midwife may, to the extent  
542 authorized by an established protocol which has been approved by  
543 the medical staff of the health care facility in which the  
544 midwifery services are performed, or approved by the nurse  
545 midwife's physician backup when the delivery is performed in a  
546 patient's home, perform any or all of the following:



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- 547 | 1. Perform superficial minor surgical procedures.
- 548 | 2. Manage the patient during labor and delivery to include
- 549 | amniotomy, episiotomy, and repair.
- 550 | 3. Order, initiate, and perform appropriate anesthetic
- 551 | procedures.
- 552 | 4. Perform postpartum examination.
- 553 | 5. Order appropriate medications.
- 554 | 6. Provide family-planning services and well-woman care.
- 555 | 7. Manage the medical care of the normal obstetrical
- 556 | patient and the initial care of a newborn patient.
- 557 | (c) The nurse practitioner may perform any or all of the
- 558 | following acts within the framework of established protocol:
- 559 | 1. Manage selected medical problems.
- 560 | 2. Order physical and occupational therapy.
- 561 | 3. Initiate, monitor, or alter therapies for certain
- 562 | uncomplicated acute illnesses.
- 563 | 4. Monitor and manage patients with stable chronic
- 564 | diseases.
- 565 | 5. Establish behavioral problems and diagnosis and make
- 566 | treatment recommendations.
- 567 | (5) The board shall certify, and the department shall
- 568 | issue a certificate to, any nurse meeting the qualifications in
- 569 | this section. The board shall establish an application fee not
- 570 | to exceed \$100 and a biennial renewal fee not to exceed \$50. The
- 571 | board is authorized to adopt such other rules as are necessary
- 572 | to implement the provisions of this section.



573 Section 12. Paragraph (p) is added to subsection (1) of  
574 section 464.018, Florida Statutes, to read:

575 464.018 Disciplinary actions.—

576 (1) The following acts constitute grounds for denial of a  
577 license or disciplinary action, as specified in s. 456.072(2):

578 (p) For an advanced registered nurse practitioner:

579 1. Presigning blank prescription forms.

580 2. Prescribing for office use any medicinal drug appearing  
581 on Schedule II in chapter 893.

582 3. Prescribing, ordering, dispensing, administering,  
583 supplying, selling, or giving a drug that is an amphetamine or a  
584 sympathomimetic amine drug, or a compound designated pursuant to  
585 chapter 893 as a Schedule II controlled substance, to or for any  
586 person except for:

587 a. The treatment of narcolepsy; hyperkinesis; behavioral  
588 syndrome in children characterized by the developmentally  
589 inappropriate symptoms of moderate to severe distractibility,  
590 short attention span, hyperactivity, emotional lability, and  
591 impulsivity; or drug-induced brain dysfunction.

592 b. The differential diagnostic psychiatric evaluation of  
593 depression or the treatment of depression shown to be refractory  
594 to other therapeutic modalities.

595 c. The clinical investigation of the effects of such drugs  
596 or compounds when an investigative protocol is submitted to,  
597 reviewed by, and approved by the department before such  
598 investigation is begun.



599        4. Prescribing, ordering, dispensing, administering,  
600 supplying, selling, or giving growth hormones, testosterone or  
601 its analogs, human chorionic gonadotropin (HCG), or other  
602 hormones for the purpose of muscle building or to enhance  
603 athletic performance. As used in this subparagraph, the term  
604 "muscle building" does not include the treatment of injured  
605 muscle. A prescription written for the drug products listed in  
606 this paragraph may be dispensed by a pharmacist with the  
607 presumption that the prescription is for legitimate medical use.

608        5. Promoting or advertising on any prescription form a  
609 community pharmacy unless the form also states: "This  
610 prescription may be filled at any pharmacy of your choice."

611        6. Prescribing, dispensing, administering, mixing, or  
612 otherwise preparing a legend drug, including a controlled  
613 substance, other than in the course of his or her professional  
614 practice. For the purposes of this subparagraph, it is legally  
615 presumed that prescribing, dispensing, administering, mixing, or  
616 otherwise preparing legend drugs, including all controlled  
617 substances, inappropriately or in excessive or inappropriate  
618 quantities is not in the best interest of the patient and is not  
619 in the course of the advanced registered nurse practitioner's  
620 professional practice, without regard to his or her intent.

621        7. Prescribing, dispensing, or administering a medicinal  
622 drug appearing on any schedule set forth in chapter 893 to  
623 himself or herself, except a drug prescribed, dispensed, or  
624 administered to the advanced registered nurse practitioner by





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625 another practitioner authorized to prescribe, dispense, or  
626 administer medicinal drugs.

627 8. Prescribing, ordering, dispensing, administering,  
628 supplying, selling, or giving amygdalin (laetrile) to any  
629 person.

630 9. Dispensing a controlled substance listed on Schedule II  
631 or Schedule III in chapter 893 in violation of s. 465.0276.

632 10. Promoting or advertising through any communication  
633 medium the use, sale, or dispensing of a controlled substance  
634 appearing on any schedule in chapter 893.

635 Section 13. Subsection (21) of section 893.02, Florida  
636 Statutes, is amended to read:

637 893.02 Definitions.—The following words and phrases as  
638 used in this chapter shall have the following meanings, unless  
639 the context otherwise requires:

640 (21) "Practitioner" means a physician licensed under  
641 ~~pursuant to~~ chapter 458, a dentist licensed under ~~pursuant to~~  
642 chapter 466, a veterinarian licensed under ~~pursuant to~~ chapter  
643 474, an osteopathic physician licensed under ~~pursuant to~~ chapter  
644 459, an advanced registered nurse practitioner certified under  
645 chapter 464, a naturopath licensed under ~~pursuant to~~ chapter  
646 462, a certified optometrist licensed under ~~pursuant to~~ chapter  
647 463, ~~or~~ a podiatric physician licensed under ~~pursuant to~~ chapter  
648 461, or a physician assistant licensed under chapter 458 or  
649 chapter 459, provided such practitioner holds a valid federal  
650 controlled substance registry number.



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651 Section 14. Paragraph (n) of subsection (1) of section  
652 948.03, Florida Statutes, is amended to read:

653 948.03 Terms and conditions of probation.—

654 (1) The court shall determine the terms and conditions of  
655 probation. Conditions specified in this section do not require  
656 oral pronouncement at the time of sentencing and may be  
657 considered standard conditions of probation. These conditions  
658 may include among them the following, that the probationer or  
659 offender in community control shall:

660 (n) Be prohibited from using intoxicants to excess or  
661 possessing any drugs or narcotics unless prescribed by a  
662 physician, advanced registered nurse practitioner, or physician  
663 assistant. The probationer or community controllee may ~~shall~~ not  
664 knowingly visit places where intoxicants, drugs, or other  
665 dangerous substances are unlawfully sold, dispensed, or used.

666 Section 15. Subsection (3) of s. 310.071, Florida  
667 Statutes, is reenacted for the purpose of incorporating the  
668 amendment made by this act to s. 310.071, Florida Statutes, in a  
669 reference thereto.

670 Section 16. Subsection (10) of s. 458.331, paragraph (g)  
671 of subsection (7) of s. 458.347, subsection (10) of s. 459.015,  
672 paragraph (f) of subsection (7) of s. 459.022, and paragraph (b)  
673 of subsection (5) of s. 465.0158, Florida Statutes, are  
674 reenacted for the purpose of incorporating the amendment made by  
675 this act to s. 456.072, Florida Statutes, in references thereto.

676 Section 17. Paragraph (mm) of subsection (1) of s. 456.072



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677 and s. 466.02751, Florida Statutes, are reenacted for the  
678 purpose of incorporating the amendment made by this act to s.  
679 456.44, Florida Statutes, in references thereto.

680 Section 18. Section 458.303, paragraph (e) of subsection  
681 (4) and paragraph (c) of subsection (9) of s. 458.347, paragraph  
682 (b) of subsection (7) of s. 458.3475, paragraph (e) of  
683 subsection (4) and paragraph (c) of subsection (9) of s.  
684 459.022, and paragraph (b) of subsection (7) of s. 459.023,  
685 Florida Statutes, are reenacted for the purpose of incorporating  
686 the amendment made by this act to s. 458.347, Florida Statutes,  
687 in references thereto.

688 Section 19. Paragraph (a) of subsection (1) of s. 456.041,  
689 subsections (1) and (2) of s. 458.348, and subsection (1) of s.  
690 459.025, Florida Statutes, are reenacted for the purpose of  
691 incorporating the amendment made by this act to s. 464.012,  
692 Florida Statutes, in references thereto.

693 Section 20. Subsection (2) of s. 464.008, subsection (5)  
694 of s. 464.009, subsection (2) of s. 464.018, and paragraph (b)  
695 of subsection (1), subsection (3), and paragraph (b) of  
696 subsection (4) of s. 464.0205, Florida Statutes, are reenacted  
697 for the purpose of incorporating the amendment made by this act  
698 to s. 464.018, Florida Statutes, in references thereto.

699 Section 21. Section 775.051, Florida Statutes, is  
700 reenacted for the purpose of incorporating the amendment made by  
701 this act to s. 893.02, Florida Statutes, in a reference thereto.

702 Section 22. Paragraph (a) of subsection (3) of s. 944.17,



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703 subsection (8) of s. 948.001, and paragraph (e) of subsection  
704 (1) of s. 948.101, Florida Statutes, are reenacted for the  
705 purpose of incorporating the amendment made by this act to s.  
706 948.03, Florida Statutes, in references thereto.

707 Section 23. This act shall take effect July 1, 2016.