

	LEGISLATIVE ACTION	
Senate	•	House
Comm: RCS	•	
01/19/2022	•	
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The Committee on Health Policy (Bean) recommended the following:

Senate Amendment (with title amendment)

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Delete lines 26 - 130

and insert:

Section 1. Section 401.272, Florida Statutes, is amended to read:

401.272 Emergency medical services community health care.

(1) The purpose of this section is to encourage more effective use utilization of the skills of emergency medical technicians and paramedics in nonemergent community settings by enabling them to perform, in partnership with local county

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health departments and hospitals as defined in s. 395.002(13), specific additional health care tasks that are consistent with the public health and welfare.

- (2) Notwithstanding any other provision of law to the contrary:
- (a) Certified paramedics or emergency medical technicians may perform health promotion and wellness activities and blood pressure screenings in a nonemergency environment, within the scope of their training, and under the supervision of a physician or the direction of a medical director. As used in this paragraph, the term "health promotion and wellness" means the provision of public health programs pertaining to the prevention of illness and injury.
- (b) Certified paramedics may administer immunizations in a nonemergency environment, within the scope of their training, and under the supervision of a physician or the direction of a medical director. There must be a written agreement between the paramedic's supervising physician or medical director and the county health department located in each county in which the paramedic administers immunizations. This agreement must establish the protocols, policies, and procedures under which the paramedic must operate.
- (c) Certified paramedics may provide basic life support services, advanced life support services, and additional health care services to acute care at-home patients in a nonemergent community setting as specified in the paramedic's formal supervisory relationship with a physician or standing orders as described in s. 401.265, s. 458.348, or s. 459.025. Each physician who supervises or provides medical direction to a

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paramedic who administers basic life support services, advanced life support services, or additional health care services to acute care at-home patients in a nonemergent community setting pursuant to a formal supervisory relationship or standing orders is liable for any act or omission of the paramedic acting under the physician's supervision or medical direction when performing such services.

- (3) Each physician or medical director under whose supervision or direction a paramedic administers immunizations or provides basic life support services, advanced life support services, or additional health care services to acute care athome patients in a nonemergency community setting must verify and document that the paramedic has received sufficient training and experience to administer immunizations or provide basic life support services, advanced life support services, or additional health care services to acute care at-home patients in a nonemergency community setting, as applicable. The verification must be documented on forms developed by the department, and the completed forms must be maintained at the service location of the licensee and made available to the department upon request.
- (4) The department may adopt and enforce all rules necessary to enforce the provisions relating to paramedics and emergency medical technicians practicing in a nonemergent community setting under subsection (2) a paramedic's administration of immunizations and the performance of health promotion and wellness activities and blood pressure screenings by a paramedic or emergency medical technician in a nonemergency environment.
 - Section 2. Paragraph (d) of subsection (2) and paragraph

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(a) of subsection (4) of section 465.019, Florida Statutes, are amended to read:

465.019 Institutional pharmacies; permits.

- (2) The following classes of institutional pharmacies are established:
- (d)1. "Class III institutional pharmacies" are those institutional pharmacies, including central distribution facilities, affiliated with a hospital which that provide the same services that are authorized by a Class II institutional pharmacy permit. Class III institutional pharmacies may also:
- a. Dispense, distribute, compound, and fill prescriptions for medicinal drugs for inpatient treatment or for acute care at-home patients in a nonemergent community setting.
 - b. Prepare prepackaged drug products.
- c. Conduct other pharmaceutical services for the affiliated hospital and for entities under common control that are each permitted under this chapter to possess medicinal drugs.
- d. Provide the services in sub-subparagraphs a.-c. to an entity under common control which holds an active health care clinic establishment permit as required under s. 499.01(2)(r).
- 2. A Class III institutional pharmacy shall maintain policies and procedures addressing:
- a. The consultant pharmacist responsible for pharmaceutical services.
- b. Safe practices for the preparation, dispensing, prepackaging, distribution, and transportation of medicinal drugs and prepackaged drug products.
- c. Recordkeeping to monitor the movement, distribution, and transportation of medicinal drugs and prepackaged drug products.

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- 99 d. Recordkeeping of pharmacy staff responsible for each 100 step in the preparation, dispensing, prepackaging, 101 transportation, and distribution of medicinal drugs and 102 prepackaged drug products.
 - e. Medicinal drugs and prepackaged drug products that may not be safely distributed among Class III institutional pharmacies.
 - (4)(a) Medicinal drugs shall be dispensed in an institutional pharmacy to outpatients only when that institution has secured a community pharmacy permit from the department. However, medicinal drugs may be dispensed by a hospital that has not secured a community pharmacy permit but operates a Class II or Class III institutional pharmacy may dispense medicinal drugs to a patient of the hospital's emergency department, an acute care at-home patient in a nonemergent community setting, or a hospital inpatient upon discharge if a prescriber, as defined in s. 465.025(1), treating the patient in such hospital determines that the medicinal drug is warranted and that community pharmacy services are not readily accessible, geographically or otherwise, to the patient. Such prescribing and dispensing must be for a supply of the drug that will last for the greater of the following:
 - 1. Up to 48 hours; or
 - 2. Through the end of the next business day.
- 123 Section 3. Subsection (19) of section 401.23, Florida 124 Statutes, is amended to read:
 - 401.23 Definitions.—As used in this part, the term:
- 126 (19) "Physician" means a practitioner who is licensed under the provisions of chapter 458 or chapter 459. For the purpose of 127



providing "medical direction" as defined in this section subsection (14) for the treatment of patients immediately before prior to or during transportation to a United States Department of Veterans Affairs medical facility, "physician" also means a practitioner employed by the United States Department of Veterans Affairs.

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> ======== T I T L E A M E N D M E N T ========= And the title is amended as follows:

Delete lines 2 - 21

138 and insert:

> An act relating to acute care at-home patients in nonemergent community settings; amending s. 401.272, F.S.; revising a legislative purpose regarding emergency medical services community health care; authorizing certified paramedics to perform basic life support services, advanced life support services, and additional health care services to acute care at-home patients in nonemergent community settings under certain circumstances; providing that a physician or medical director who supervises or directs the provision of such services by a paramedic is liable for any act or omission during the provision of such services; requiring supervising physicians and medical directors to verify and document that paramedics providing such services under their supervision or direction are sufficiently trained and experienced to do so; revising the Department of Health's rulemaking authority to conform to changes made by the act;

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amending s. 465.019, F.S.; specifying that Class III institutional pharmacies may dispense, distribute, compound, and fill prescriptions for medicinal drugs for inpatients and acute care at-home patients in nonemergent community settings; authorizing hospitals to dispense medicinal drugs to certain patients without first securing a community pharmacy permit under certain circumstances; amending ss. 14.33, 252.515, 395.1027, 401.23, and 401.245, F.S.; making technical changes; providing an effective