HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #:CS/HB 975Background Screening Requirements for Health Care PractitionersSPONSOR(S):Health Care AppropriationsSubcommittee, TrabulsyTIED BILLS:IDEN./SIM. BILLS:SB 1008

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
1) Healthcare Regulation Subcommittee	15 Y, 1 N	Osborne	McElroy
2) Health Care Appropriations Subcommittee	14 Y, 0 N, As CS	Aderibigbe	Clark
3) Health & Human Services Committee			

SUMMARY ANALYSIS

Florida provides standard procedures for screening a prospective employee where the Legislature has determined it is necessary to conduct a criminal history background check to protect vulnerable persons.

Current law requires only specified health care professions to undergo background screening as a requirement for initial licensure, including: allopathic and osteopathic physicians, interns, and fellows; physician assistants; chiropractic physicians and chiropractic physician assistants; orthotists and prosthetists; podiatric physicians and podiatric x-ray assistants; certified nursing assistants, licensed practical nurses, registered nurses, and advanced practice registered nurses; athletic trainers; and massage therapists. In addition to the background screening as a requirement for the initial licensure process, several of the listed professions require subsequent national criminal history checks as a part of the licensure renewal process.

Licensure applicants who are subject to background screening are required to pay for the costs of the fingerprinting process and the cost of retaining the fingerprints. All fingerprints received as part of the initial licensure process as required under s. 456.0135, F.S., are entered into the Care Provider Background Screening Clearinghouse.

The majority of health care professions licensed by the Department of Health (DOH) do not undergo background screening as a part of their initial licensure requirements.

HB 975 requires **all** health care professions licensed by DOH to undergo background screening as a requirement for initial licensure.

The bill also adds background screening to the licensure by endorsement requirements for specified professions, including: occupational therapists, respiratory therapists, dieticians and nutritionists, psychologists, and mental health professions.

The bill requires health care professionals licensed prior to July 1, 2024, to comply with the background screening requirement by July 1, 2025.

The bill makes conforming changes.

The bill provides an appropriation to implement the provisions of the bill. There is no fiscal impact on local government.

The bill provides an effective date of July 1, 2024.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Background Screening

Florida provides standard procedures for screening a prospective employee¹ where the Legislature has determined it is necessary to conduct a criminal history background check to protect vulnerable persons.² Chapter 435, F.S., establishes procedures for criminal history background screening of prospective employees and outlines the screening requirements. There are two levels of background screening: level 1 and level 2.

- Level 1: Screening includes, at a minimum, employment history checks and statewide criminal correspondence checks through the Florida Department of Law Enforcement (FDLE) and a check of the Dru Sjodin National Sex Offender Public Website,³ and may include criminal records checks through local law enforcement agencies. A Level 1 screening may be paid for and conducted through FDLE's website, which provides immediate results.⁴
- <u>Level 2:</u> Screening includes, at a minimum, fingerprinting for statewide criminal history records checks through FDLE and national criminal history checks through the Federal Bureau of Investigation (FBI), and may include local criminal records checks through local law enforcement agencies.⁵

Criminal History Checks

Florida law authorizes and outlines specific elements required for Level 1 and Level 2 background screening; however, current law only establishes distinct requirements for determining whether an individual "passes" a screening in regard to an individual's criminal history.

All individuals subject to background screening must be confirmed to have not been arrested for and waiting final disposition of, been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, or been adjudicated delinquent and the record has not been sealed or expunged for, any of the following 52 offenses prohibited under Florida law, or similar law of another jurisdiction:⁶

- Section 393.135, F.S., relating to sexual misconduct with certain developmentally disabled clients and reporting of such sexual misconduct.
- Section 394.4593, F.S., relating to sexual misconduct with certain mental health patients and reporting of such sexual misconduct.
- Section 415.111, F.S., relating to adult abuse, neglect, or exploitation of aged persons or disabled adults.
- Section 777.04, F.S., relating to attempts, solicitation, and conspiracy to commit an offense listed in this subsection.
- Section 782.04, F.S., relating to murder.
- Section 782.07, F.S., relating to manslaughter, aggravated manslaughter of an elderly person or disabled adult, or aggravated manslaughter of a child.

¹ S. 435.02, F.S., defines "employee" to mean any person required bylaw to be screened pursuant to this chapter, including, but not limited to, persons who are contractors, licensees, or volunteers.

² Ch. 435, F.S.

³ The Dru Sjodin National Sex Offender Public Website is a U.S. government website that links public state, territorial, and tribal sex offender registries in one national search site. Available at <u>www.nsopw.gov</u> (last visited March 15, 2023).

⁴ Florida Department of Law Enforcement, State of Florida Criminal History Records Check. Available at http://www.fdle.state.fl.us/Criminal-History Records/Florida-Checks.aspx (lastvisited March 15, 2023)

http://www.fdle.state.fl.us/Criminal-History-Records/Florida-Checks.aspx (last visited March 15, 2023).

- Section 782.071, F.S., relating to vehicular homicide.
- Section 782.09, F.S., relating to killing of an unborn child by injury to the mother.
- Chapter 784, F.S., relating to assault, battery, and culpable negligence, if the offense was a felony.
- Section 784.011, F.S., relating to assault, if the victim of the offense was a minor.
- Section 784.03, F.S., relating to battery, if the victim of the offense was a minor.
- Section 787.01, F.S., relating to kidnapping.
- Section 787.02, F.S., relating to false imprisonment.
- Section 787.025, F.S., relating to luring or enticing a child.
- Section 787.04(2), F.S., relating to taking, enticing, or removing a child beyond the state limits with criminal intent pending custody proceedings.
- Section 787.04(3), F.S., relating to carrying a child beyond the state lines with criminal intent to avoid producing a child at a custody hearing or delivering the child to the designated person.
- Section 790.115(1), F.S., relating to exhibiting firearms or weapons within 1,000 feet of a school.
- Section 790.115(2)(b), F.S., relating to possessing an electric weapon or device, destructive device, or other weapon on school property.
- Section 794.011, F.S., relating to sexual battery.
- Former s. 794.041, F.S., relating to prohibited acts of persons in familial or custodial authority.
- Section 794.05, F.S., relating to unlawful sexual activity with certain minors.
- Chapter 796, F.S., relating to prostitution.
- Section 798.02, F.S., relating to lewd and lascivious behavior.
- Chapter 800, F.S., relating to lewdness and indecent exposure.
- Section 806.01, F.S., relating to arson.
- Section 810.02, F.S., relating to burglary.
- Section 810.14, F.S., relating to voyeurism, if the offense is a felony.
- Section 810.145, F.S., relating to video voyeurism, if the offense is a felony.
- Chapter 812, F.S., relating to theft, robbery, and related crimes, if the offense is a felony.
- Section 817.563, F.S., relating to fraudulent sale of controlled substances, only if the offense was a felony.
- Section 825.102, F.S., relating to abuse, aggravated abuse, or neglect of an elderly person or disabled adult.
- Section 825.1025, F.S., relating to lewd or lascivious offenses committed upon or in the presence of an elderly person or disabled adult.
- Section 825.103, F.S., relating to exploitation of an elderly person or disabled adult, if the offense was a felony.
- Section 826.04, F.S., relating to incest.
- Section 827.03, F.S., relating to child abuse, aggravated child abuse, or neglect of a child.
- Section 827.04, F.S., relating to contributing to the delinquency or dependency of a child.
- Former s. 827.05, F.S., relating to negligent treatment of children.
- Section 827.071, F.S., relating to sexual performance by a child.
- Section 843.01, F.S., relating to resisting arrest with violence.
- Section 843.025, F.S., relating to depriving a law enforcement, correctional, or correctional probation officer of means of protection or communication.
- Section 843.12, F.S., relating to aiding in an escape.
- Section 843.13, F.S., relating to aiding in the escape of juvenile inmates in correctional institutions.
- Chapter 847, F.S., relating to obscene literature.
- Section 874.05, F.S., relating to encouraging or recruiting another to join a criminal gang.
- Chapter 893, F.S., relating to drug abuse prevention and control, only if the offense was a felony or if any other person involved in the offense was a minor.
- Section 916.1075, F.S., relating to sexual misconduct with certain forensic clients and reporting of such sexual misconduct.
- Section 944.35(3), F.S., relating to inflicting cruel or inhuman treatment on an inmate resulting in great bodily harm.

- Section 944.40, F.S., relating to escape.
- Section 944.46, F.S., relating to harboring, concealing, or aiding an escaped prisoner.
- Section 944.47, F.S., relating to introduction of contraband into a correctional facility.
- Section 985.701, F.S., relating to sexual misconduct in juvenile justice programs.
- Section 985.711, F.S., relating to contraband introduced into detention facilities.

Exemptions

For otherwise qualified individuals who would be disqualified from employment due to their criminal history, there is a process through which they can be exempt from disqualification. Current law allows the Secretary of the appropriate state agency to exempt applicants from disqualification under certain circumstances:⁷

- Three years have elapsed since the individual has completed or been lawfully released from confinement, supervision, or nonmonetary condition imposed by a court for a disqualifying felony; or
- The individual has completed or been lawfully released from confinement, supervision, or nonmonetary condition imposed by a court for a misdemeanor or an offense that was a felony at the time of commission but is now a misdemeanor.

Receiving an exemption allows that individual to be employed in a profession or workplace where background screening is statutorily required despite the disqualifying offense in that person's past. Certain criminal backgrounds, however, render a person ineligible for an exemption; a person who is considered a sexual predator,⁸ career offender,⁹ or registered sexual offender¹⁰ is not eligible for exemption.¹¹

Care Provider Background Screening Clearinghouse

Florida has established different programs for the facilitation of background screenings. The Care Provider Background Screening Clearinghouse (Clearinghouse) is used by state agencies for statutorily-required screenings, including screenings required as part of the licensure process for specified health care professionals.

In 2012, the Legislature created the Care Provider Background Screening Clearinghouse (Clearinghouse) to create a single program of screening individuals and allow for the results of criminal history checks of persons acting as covered care providers to be shared among the specified agencies.¹² Current designated agencies participating in the clearinghouse include:¹³

- The Agency for Health Care Administration (AHCA);
- The Department of Health (DOH);
- The Department of Children and Families (DCF);
- The Department of Elder Affairs (DOEA);
- The Agency for Persons with Disabilities (APD);
- The Department of Education (DOE);
- Regional workforce boards providing services as defined in s. 445.002(3), F.S.; and

⁷ S. 435.07, F.S.

⁸ S. 775.21, F.S.

⁹S. 775.261, F.S.

¹⁰ S. 943.0435, F.S.

¹¹ S. 435.07(4)(b), F.S.

¹² Ch. 2012-73, L.O.F.

¹³ S. 435.02(5), F.S. Additional entities were added to the list of designated entities beginning in 2023; these entities include district units, special district units, the Florida School for the Deaf and Blind, the Florida Virtual School, virtual instruction programs, charter schools, hope operators, private schools participating in certain scholarship programs, and alternative schools. *See also*, Ch. 2022-154, L.O.F.

• Local licensing agencies approved pursuant to s. 402.307, F.S., when these agencies are conducting state and national criminal history background screening on persons who work with children or persons who are elderly or disabled.

Employers whose employees are screened through an agency participating in the Clearinghouse must maintain the status of individuals being screened and update the Clearinghouse regarding any employment changes within 10 business days of the change.¹⁴

The Clearinghouse allows for constant review of new criminal history information through the federal Rap Back Service¹⁵ which continually match fingerprints against new arrests or convictions that occur after the individual was originally screened. Once a person's screening record is in the Clearinghouse, that person may avoid the need for any future state screens and related fees for screenings, depending on the screening agencies or organizations.¹⁶

Last fiscal year, DOH paid \$108,414 to access the background screening results for health care professionals through the Clearinghouse.¹⁷

Background Screening of Health Care Professionals

Under current law, DOH is required to review the criminal history of licensure applicants and current licensees for certain health care professions. A history of certain criminal charges may preclude an applicant from licensure in some professions, or result in disciplinary action by the appropriate regulatory board. Regardless of whether background screening is required for initial licensure, each licensee at renewal must answer criminal history questions that become part of the review and approval of licensure.¹⁸

The table below lists the health care professions which are required to be background screened by DOH as part of initial licensure:¹⁹

Health Care Professions – Background Screening		
Screened	Non-Screened	
Athletic Trainers	Acupuncturists	
Allopathic Physicians (Medical Doctor)	Audiologists	
Resident Physicians, Interns, Fellows, and House Physicians	Audiology Assistants	
Osteopathic Physicians	Clinical Laboratory Personnel	
Osteopathic Resident Physicians/Interns/Fellows	Clinical Social Workers, Marriage and Family Therapists, and Mental Health Counselors	
Chiropractic Physicians	Clinical Social Work Interns, Marriage and Family Therapy Interns, and Mental Health Counseling Interns	
Certified Chiropractic Physician's Assistants	Dentists	
Physician Assistants	Dental Hygienists	
Anesthesiologist Assistants	Dietitians and Nutritionists	

¹⁴ S. 435.12(2)(c), F.S.; Beginning January 1, 2024, employers must report changes in an employee's status within five business days for employees screened after January 1, 2024.

¹⁶ Agency for Health Care Administration, *Clearinghouse Renewals*. Available at

https://ahca.myflorida.com/MCHQ/Central Services/Background Screening/Renewals.shtml (last visited January 14, 2024). Fingerprints are retained for five years. Employers have an option to renew screenings at the end of the five year period through a

Fingerprints are retained for five years. Employers have an option to renew screenings at the end of the five year period through a "Clearinghouse Renewal" process which allows employee's fingerprints to be retained without being re-fingerprinted.

¹⁷ Department of Health, Agency Analysis for HB 975 (2024). On file with the Healthcare Regulation Subcommittee.

¹⁸ Id.

¹⁵ The Rap Back Service is managed by the FBI's Criminal Justice Information Services Division. For more information, see the Fe deral Bureau of Investigation, Privacy Impact Assessment for the Next Generation Identification (NGI) Rap Back Service. Available at <u>https://www.fbi.gov/file-repository/pia-ngi-rap-back-service.pdf/view</u> (last visited January 15, 2024).

Orthotists, Prosthetists, Pedorthists, Orthotic Fitters, Orthotic Fitter Assistants, O&P Residents	Electrologists
Registered Nurses	Emergency Medical Technicians
Advanced Practice Registered Nurses	Genetic Counselors
License Practical Nurses	Hearing Aid Specialists
Certified Nursing Assistants	Medical Physicists
Massage Therapists	Midwifery
Pharmacy Owners	Nursing Home Administrators
Prescription Department Managers	Occupational Therapists
Podiatric Physicians	Opticians
Certified Podiatric X-Ray Assistants	Optometrists
	Pain Management Clinic
	Paramedics
	Pharmacists
	Registered Pharmacy Interns
	Pharmacy Technicians
	Physical Therapists
	Physical Therapy Assistants
	Psychologists
	Radiological Technicians
	Respiratory Therapists
	School Psychology
	Speech-Language Pathologists
	Speech-Language Pathology Assistants

Additionally, some professions are required to undergo subsequent national criminal history checks as a part of the licensure renewal process, including allopathic and osteopathic physicians, chiropractors, and podiatrists.²⁰ In such cases, DOH is directed to request FDLE to forward the retained fingerprints of the applicant to the Federal Bureau of Investigation unless the fingerprints are enrolled in the national retained print arrest notification program.

Current law also requires background screening for applicants seeking licensure by endorsement²¹ for specified health care professions. Currently, allopathic physicians, certified nursing assistants, licensed practical nurses, registered nurses, and massage therapists must undergo background screening as part of the licensure by endorsement process.

Some health care professionals who are not screened as a requirement for initial licensure may be statutorily required to undergo screening as a prerequisite to employment based on the type of facility wherein they are employed.²² Health care professionals in screened professions, or those seeking employment in facilities that are statutorily required to background screen employees, may seek an exemption from disqualification due to criminal history. Such individuals may be granted an exemption from disqualification²³ after DOH reviews their background screening. For the fiscal year 2022-2023, the Background Screening unit received over 432 exemption applications.²⁴

²⁰ S. 456.039(4), F.S.

²¹ Licensure by endorsement is a process of obtaining licensure for health care professionals who have obtained full licensure in another US jurisdiction.

²² For example, a licensed health care professional employed by a program that provides services to the elderly is required under s. 430.0402, F.S., to undergo background screening if the health care professional is a direct service provider who was not othe rwise screened as a prerequisite for licensure. For more information on screening requirements based on facility type, see, Florida Agency for Health Care Administration, *Who is Required to be Screened?* Available at https://ahca.myflorida.com/health-care-policy-andoversight/bureau-of-central-services/background-screening/screening/who-is-required-to-be-screened# (last visited January 15, 2024).

The licensure applicants for screened professions are required to pay for the costs of the fingerprinting process and the cost of retaining the fingerprints.²⁵ Once licensed, the health care practitioner in screened professions pays \$43.25 every five years for fingerprint retention.²⁶ All fingerprints received as part of the initial licensure process as required under s. 456.0135, F.S., are entered into the Care Provider Background Screening Clearinghouse.²⁷

Background Screening Process

The regulatory board for each profession which requires a background screening establishes criteria for the evaluation of criminal history. DOH then applies a board-approved matrix to review the background screening results to ensure that licensure qualifications have been met.²⁸ For applicants in a screened profession, the background screening requirement is often the last requirement completed to become a qualified applicant – meaning all licensure requirements are fulfilled and a license is issued. DOH will notify the licensure applicant if a required background screening was not completed, submitted through the proper channels, or if a criminal history hit on that screening was reviewed by a staff member and needs additional documentation.²⁹

When an applicant's background screening includes criminal history, the outcome is dependent upon the nature of the offense. Statute outlines specific offenses which would result in a "failed" screening.³⁰ The outcome of a screening including a criminal history can be an approval by DOH staff after additional information and review, based on scenarios pre-determined by the regulatory board to be allowable; a requirement to appear at a board meeting for in-person review; or denial. If denied, the applicant has the right to appeal. If an applicant receives a letter to appear before the board, they have three board meetings at which to attend, or the board may deny the application without the person present.³¹

Background screening reviews have increased more than 40% since 2015 due to an increase in licensure of existing screened professions, as well as the establishment of new licensure pathways requiring screening, such as the multistate licensing compacts. Out of the 17,532 initial applicant files reviewed due to criminal charges in the fiscal year 2022-23, 87.9% were for the Board of Nursing, 4.8% for the Board of Massage, 4.5% for the Board of Medicine, 0.06% for the Board of Chiropractic Medicine, 0.08% Osteopathic Medicine and 2.66% were for the remaining boards.³²

Background Screening for License Renewal & Monitoring

Once licensed, practitioners in screened professions with ongoing screening requirements have their fingerprints retained with FDLE so new charges are found through rerunning the criminal history checks. Licensees are also required to report any criminal charges when they occur. The process of reviewing new criminal charges may disrupt the licensee's ability to practice.³³

A licensee who does not pay to retain their prints receives notification from DOH when those prints are expiring that fingerprints must be retained or renewed. DOH employs strategies to ensure compliance by the licensee, such as reminders, email notifications, and letters. Approximately 62,364 licensees, 4.3 percent of all licensees, are required to renew their fingerprints per year. Of those, approximately 28 percent fail to do so; failure to renew fingerprints results in disciplinary cases which may ultimately cause a loss of licensure.

²⁵ S. 456.0135(3), F.S.

²⁶ Supra, note 17.

²⁷ S. 456.0135(4), F.S.

²⁸ Supra, note 17.

²⁹ Supra, note 17.

³⁰ See, s. 435.04, F.S., for the full list of disqualifying offenses. See also, S. 456.0135(5), F.S., expresslylists criminal violation of s. 784.03, F.S., relating to battery, if the victim is a vulnerable adult as defined in s. 415.102, or a patient or resident of a facility licensed under chs. 395, 400, or 429, F.S. ³¹ Supra, note 17.

³² Id.

³³ Supra, note 17. STORAGE NAME: h0975c.HCA DATE: 2/7/2024

When a case has been open for approximately a year and the licensee has not complied, an investigative report is completed, and the case is sent to Prosecution Services Unit for prosecution as a violation. Since 2019, DOH has opened a total of 39,438 cases for failure to renew fingerprints. Currently, there are 14,069 of these cases still open with the Division of Medical Quality Assurance.³⁴

Background checks completed for applicants whose licensure applications were received before January 1, 2013, are stored within FDLE's SHIELD system, outside of the Clearinghouse. DOH runs a background check through FDLE for specific practitioners who have renewed their license in this system. In the 2022-23 fiscal year, DOH paid over \$1,229,448, to FDLE for 45,519 background checks to be completed.³⁵

Effect of the Bill

HB 975 requires **all** health care professions licensed by DOH to undergo background screening as a requirement for initial licensure. The following professions that previously were not required to undergo background screening, but will be required to do so under the bill:

- Acupuncturists;
- Anesthesiologist Assistants;
- Audiologists;
- Audiologist Assistants;
- Clinical Laboratory Personnel;
- Mental Health Professionals;36
- Registered Mental Health Profession Interns;³⁷
- Dentists;
- Dentists seeking a limited health access license;
- Dental Hygienists;
- Dieticians;
- Electrologists;
- Genetic Counselors;
- Hearing Aid Specialists;
- Medical Physicists;
- Nursing Home Administrators;
- Occupational Therapists;
- Opticians;
- Optometrist;
- Pharmacists;
- Registered Pharmacy Interns;
- Pharmacy Technicians;
- Physical Therapists;
- Physical Therapist Assistants;
- Physician Assistants;
- Psychologists and School Psychologists;
- Radiology Technicians;
- Respiratory Therapists;
- Speech-Language Pathologists; and
- Speech-Language Pathology Assistants.

³⁷ Id.

³⁴ Id.

³⁵ Id.

³⁶ Mental health professionals include clinical social workers, mental health counselors, and marriage and family therapists licensed under ch. 491, F.S.

The bill also adds background screening to the licensure by endorsement requirements for select professions, including: occupational therapists, respiratory therapists, dieticians and nutritionists, psychologists, and mental health professions.

The bill requires health care practitioners, as defined in s. 456.001, F.S., and licensed prior to July 1, 2024, to comply with the background screening requirement by July 1, 2025. Under the bill, 699,754 licensees in renewable status would have to complete the fingerprinting process of background screening within the year.³⁸

All screenings received would be entered into the Clearinghouse and require criminal history review through DOH. This would impact current non-screened professions and licensees who do not have updated screenings in the Clearinghouse. DOH would no longer have to process background checks through SHIELD and all of those licensees would be required to obtain new screenings to be housed in the Clearinghouse. This would provide continuity for monitoring of new criminal charges through the Clearinghouse.

The bill makes conforming changes to the practice acts of each health care profession effected by the background screening requirement as to state the background screening requirement in the initial licensure requirements of each profession. The bill makes additional conforming changes throughout the practice acts to correct references that are affected by numbering changes due to the new licensure requirements.

The bill provides an effective date of July 1, 2024.

B. SECTION DIRECTORY:

Section 1: Section 2: Section 3: Section 4: Section 5: Section 6:	 Amends s. 456.0135, F.S., relating to general background screening provisions. Creates an unnumbered section of law, relating to compliance with background screening requirements for health care practitioners. Amends s. 457.105, F.S., relating to licensure qualification and fees. Amends s. 463.006, F.S., relating to licensure and certification by examination. Amends s. 465.007, F.S., relating to licensure by examination. Amends s. 465.0075, F.S., relating to licensure by endorsement; requirements; fee.
Section 7: Section 8:	Amends s. 465.013, F.S., relating to registration of pharmacy interns. Amends s. 465.014, F.S., relating to pharmacy technician.
Section 9:	Amends s. 466.006, F.S., relating to examination of dentists.
Section 10:	Amends s. 466.0067, F.S., relating to application for health access dental license.
Section 11:	Amends s. 466.007, F.S., relating to examination of dental hygienists.
Section 12:	Amends s. 467.011, F.S., relating to licensed midwives; qualifications; examination.
Section 13:	Amends s. 468.1185, F.S., relating to licensure.
Section 14:	Amends s. 468.1215, F.S., relating to speech-language pathology assistant and
0 1 15	audiology assistant; certification.
Section 15:	Amends s. 468.1695, F.S., relating to licensure by examination.
Section 16:	Amends s. 468.209, F.S., relating to requirements for licensure.
Section 17:	Amends s. 468.213, F.S., relating to licensure by endorsement.
Section 18:	Amends s. 468.355, F.S., relating to licensure requirements.
Section 19:	Amends s. 468.358, F.S., relating to licensure by endorsement.
Section 20:	Amends s. 468.509, F.S., relating to dietician/nutritionist; requirements for licensure.
Section 21:	Amends s. 468.513, F.S., relating to dietician/nutritionist; licensure by endorsement.
Section 22:	Amends s. 468.803, F.S., relating to license, registration, and examination requirements.
Section 23:	Amends s. 478.45, F.S., relating to requirements for licensure.
Section 24:	Amends s. 483.815, F.S., relating to application for clinical laboratory personnel license.
Section 25:	Amends s. 483.901, F.S., relating to medical physicists; definitions; licensure.
Section 26:	Amends s. 483.914, F.S., relating to licensure requirements.
Section 27:	Amends s. 484.007, F.S., relating to licensure of opticians; permitting of optical establishments.

Section 28: Section 29: Section 30: Section 31: Section 32: Section 33: Section 34: Section 35: Section 36: Section 37: Section 38:	 Amends s. 484.045, F.S., relating to licensure by examination. Amends s. 486.031, F.S., relating to physical therapist; licensing requirements. Amends s. 486.102, F.S., relating to physical therapist assistant; licensing requirements. Amends s. 490.005, F.S., relating to licensure by examination. Amends s. 490.0051, F.S., relating to provisional licensure. Amends s. 490.006, F.S., relating to licensure by endorsement. Amends s. 491.0045, F.S., relating to intern registration; requirements. Amends s. 491.0046, F.S., relating to provisional license; requirements. Amends s. 491.0046, F.S., relating to licensure by examination. Amends s. 491.005, F.S., relating to licensure by examination. Amends s. 491.006, F.S., relating to licensure by examination.
Section 39: Section 40: Section 41: Section 42: Section 43:	 Practice. Amends s. 486.0715, F.S., relating to physical therapist; issuance of temporary permit. Amends s. 486.1065, F.S., relating to physical therapist assistant; issuance of temporary permit. Amends s. 491.003, F.S., relating to definitions. Provides an appropriation. Provides an effective date of July 1, 2024.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

According to FDLE, the total fiscal revenue for the state portion of a state and national criminal history record check with five years of fingerprint retention within the Clearinghouse retention is \$48 per person. These fees will go into FDLE's Operating Trust Fund.³⁹

2. Expenditures:

DOH estimates that 699,754 current licensees would require background screenings by July 1st, 2025. For background screening of initial licensure applicants, DOH estimates that 42,467 additional applicants will need to be screened. This is a 32% increase from the prior year. The percentage of applicants in the screened professions requiring further review due to criminal history found on those screenings was 19% of applicants. Likely, an additional 8,000 applicants would have required additional review by DOH staff or the profession board.

DOH estimates that 21 full-time equivalent (FTE) positions will be required within the Medical Quality Assurance Services program to implement the provisions of the bill. The total estimated annual cost is \$4,284,501.⁴⁰

As of January 2024, DOH has 63 vacancies greater than 100 days within the Medical Quality Assurance Services program and has the flexibility to reclassify and transfer positions to meet the demands of the unit; however, it is unlikely that DOH can fully absorb this workload by utilizing vacant positions.

The bill appropriates 9 full-time equivalent (FTE) positions and associated salary rate and the sums of \$1,164,134 in recurring and \$59,931 in nonrecurring funds from the Medical Quality Assurance Trust Fund to DOH to implement the provisions of the bill.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

³⁹ Florida Department of Law Enforcement, *Legislative Bill Analysis for HB* 975 (2024), p. 3. On file with the Healthcare Regulation Subcommittee.
 ⁴⁰ Supra, note 17.
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1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

Health care providers previously not required to undergo a background screening will incur the cost associated with obtaining a background screening. These costs amount to \$61.25 per person for applicants screened and retained within the Care Provider Background Screening Clearinghouse. This amount does not include additional servicing fees which may be assessed by the screening service provider.⁴¹

D. FISCAL COMMENTS:

None.

III. COMMENTS

- A. CONSTITUTIONAL ISSUES:
 - 1. Applicability of Municipality/County Mandates Provision:

Not Applicable. This bill does not appear to affect county or municipal governments.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

The licensure boards and DOH have adequate rule-making authority to implement any rule changes which may be necessitated by the provisions of the bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES

On February 6, 2024, the Health Care Appropriations Subcommittee adopted an amendment and reported the bill favorably as a committee substitute.

 Appropriated 9 FTE with associated salary rate and \$1,164,134 in recurring funds and \$59,931 in nonrecurring funds from the Medical Quality Assurance Trust Fund to DOH for the implementation of the bill.