

The Florida Senate
COMMITTEE MEETING EXPANDED AGENDA

HEALTH POLICY
Senator Burton, Chair
Senator Harrell, Vice Chair

MEETING DATE: Tuesday, February 4, 2025
TIME: 1:45—3:45 p.m.
PLACE: *Pat Thomas Committee Room, 412 Knott Building*

MEMBERS: Senator Burton, Chair; Senator Harrell, Vice Chair; Senators Berman, Calatayud, Davis, Gaetz, Leek, Osgood, Passidomo, and Trumbull

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1		Presentation on Florida’s Medical Marijuana Program – Department of Health, Office of Medical Marijuana	
2		Updates on Implementation of Health-Care Related Laws Enacted in 2024 – Department of Health and Agency for Health Care Administration	
Other Related Meeting Documents			

Florida's Medical Marijuana Program Update

Senate Health Policy Committee

Christopher Kimball, Director
Office of Medical Marijuana Use

February 4, 2025

Florida
HEALTH

OMMU Office of MEDICAL
MARIJUANA Use

Presentation Roadmap

Program Numbers and Key Features

- Qualified patients, caregivers, and physicians
- Facilities and dispensation data
- Regulatory features
- OMMU and other stakeholders

Compliance Update

Licensing Update

Statutory Implementation

Program Key Numbers

Medical marijuana use registry population:

- Qualified patients (894,750)
- Qualified caregivers (6,326)
- Qualified physicians (2,465)

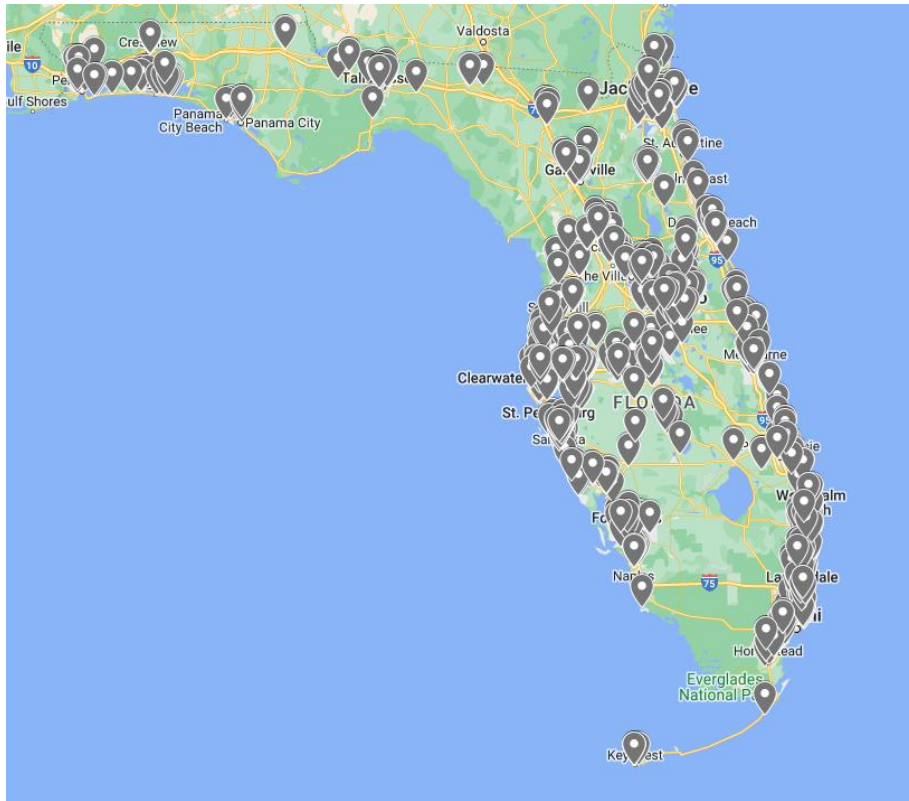
Regulated entities:

- Medical Marijuana Treatment Centers (MMTCs) (27)
 - Cultivation facilities (40)
 - Processing facilities (33)
 - Dispensing facilities (701)
 - Fulfillment and storage facilities (22)
- Certified Marijuana Testing Laboratories (CMTLs) (9)

Key Regulatory Features

- Vertically integrated MMTCs are accountable for all aspects of products they dispense; 27 licensees are accountable for all medical marijuana in Florida.
- Department of Health preapproval required for MMTC products, facilities, and advertising.
- Commercial lab testing required for each batch of final products before patient dispensation authorized; Certified Marijuana Testing Laboratories (CMTLs) test MMTC product and issue results in a certificate of analysis.
- Dispensations documented in the medical marijuana use registry (MMUR), enabling dispensation accountability and research.
- Plain packaging and labeling to minimize attractiveness to children.
- Real time seed-to-sale traceability.
- Prohibitions against advertising that is attractive to children or promotes recreational use of marijuana.

MMTC Facility Distribution



MMTC Facility Type	Number of Facilities
Dispensing Facility	701
Cultivation Facility	40
Processing Facility	33
Fulfillment and Storage Facility	22
All MMTC Facilities	796

OMMU's Focus Areas

To promote the health and safety of qualified patients and the public as it relates to medical marijuana through:



Rules

Developing and implementing the Department's rules for medical marijuana



Registry

Overseeing the statewide Medical Marijuana Use Registry



Licensing

Licensing medical marijuana treatment centers (MMTCs) and marijuana testing laboratories (CMTLs)



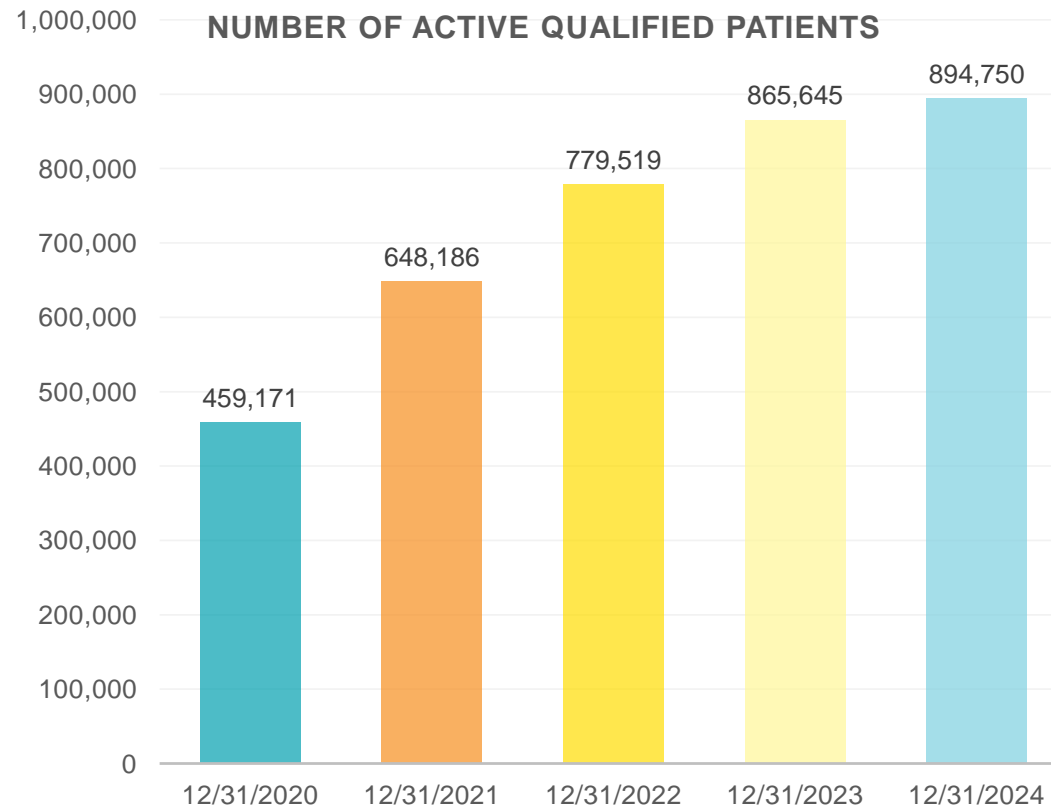
Compliance

Employee background screening, inspecting MMTCs and CMTLs, and investigating complaints

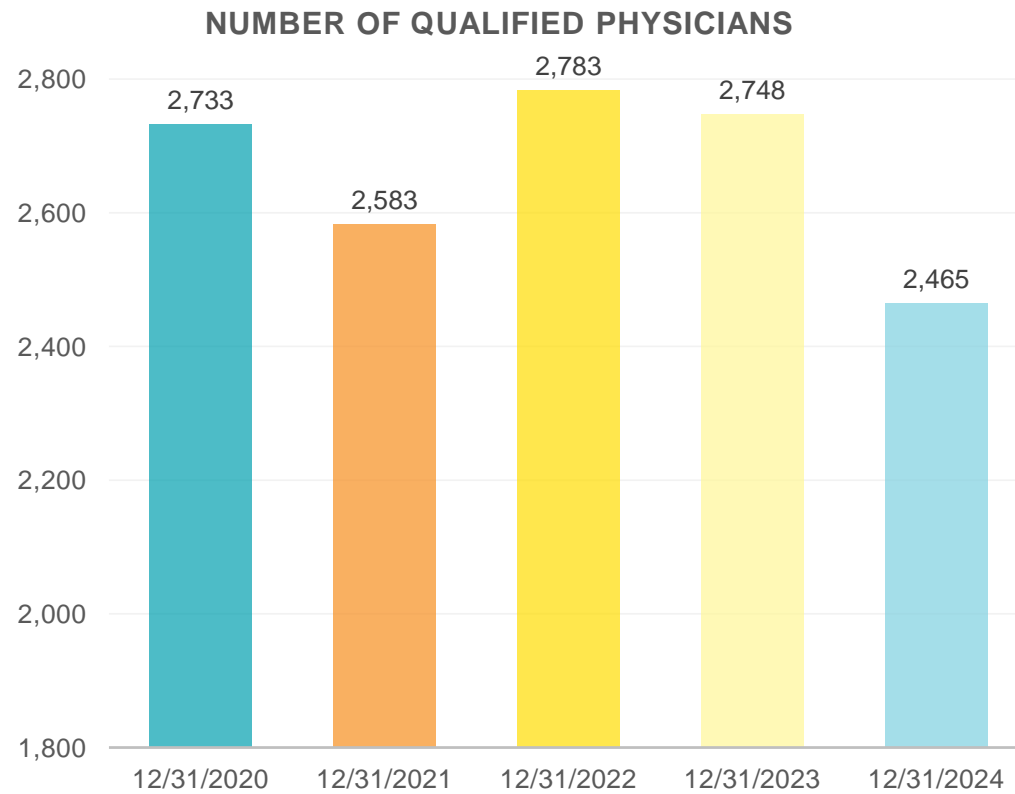
Research and Education Stakeholders

- Consortium for Medical Marijuana Clinical Outcomes Research (section 1004.4351, Florida Statutes) led by the University of Florida.
- Medical Marijuana Education and Research Initiative (section 381.986(7)(d), Florida Statutes), Florida Agricultural and Mechanical University, Division of Research.
- Physician Certification Pattern Review Panel (section 381.986(4)(j), Florida Statutes), Board of Medicine and Board of Osteopathic Medicine.
- Florida Physician Medical Marijuana Course (section 381.986(3)(a) and (c), Florida Statutes), Florida Medical Association, and Florida Osteopathic Medical Association.

Active Qualified Patients



Active Qualified Physicians

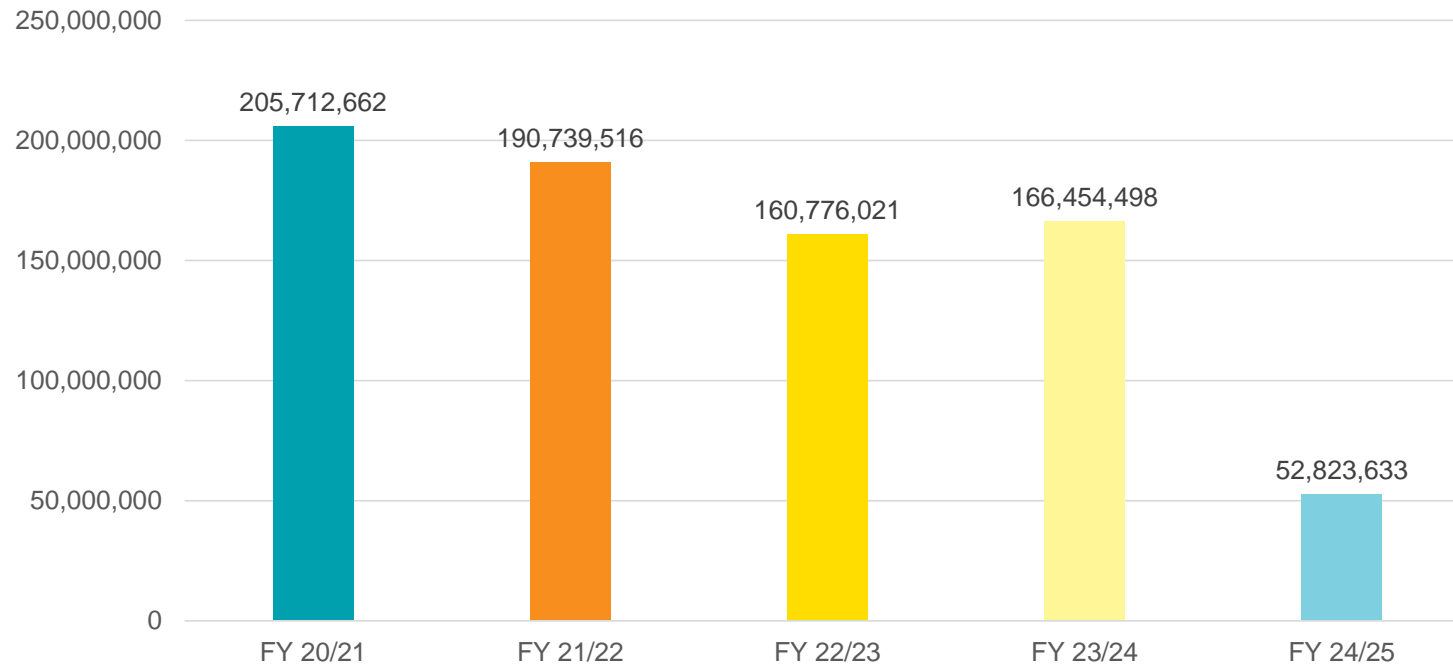


Medical Marijuana Routes of Administration

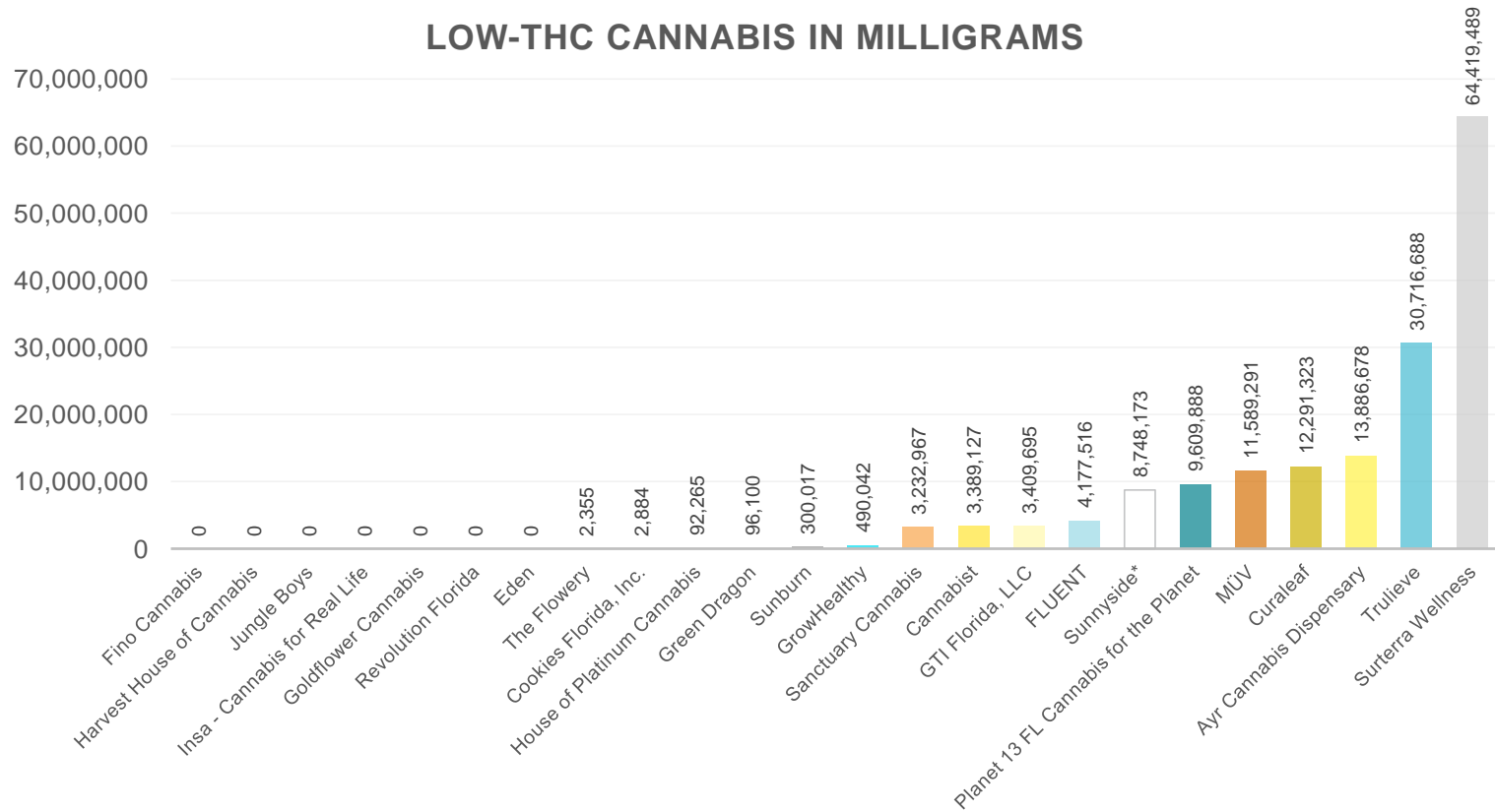
Route of Administration	Range in Potency Tetrahydrocannabinol (THC) Content as a Percentage of Volume	
	Lower Threshold	Upper Threshold
Inhalation	60.0%	>90.0%
Oral	0.5%	4.0%
Smoking	10.0%	>28.0%
Sublingual	0.5%	90.0%
Suppository	1.3%	3.0%
Topical	0.4%	90.0%
Edibles	<ul style="list-style-type: none">• Multi-serving edible may not contain more than 200 mg of THC• Single-serving edible, or a single-serving portion of a multi-serving edible, may not exceed 10 mg of THC	

Low-THC Cannabis Dispensed

LOW-THC CANNABIS IN MILLIGRAMS

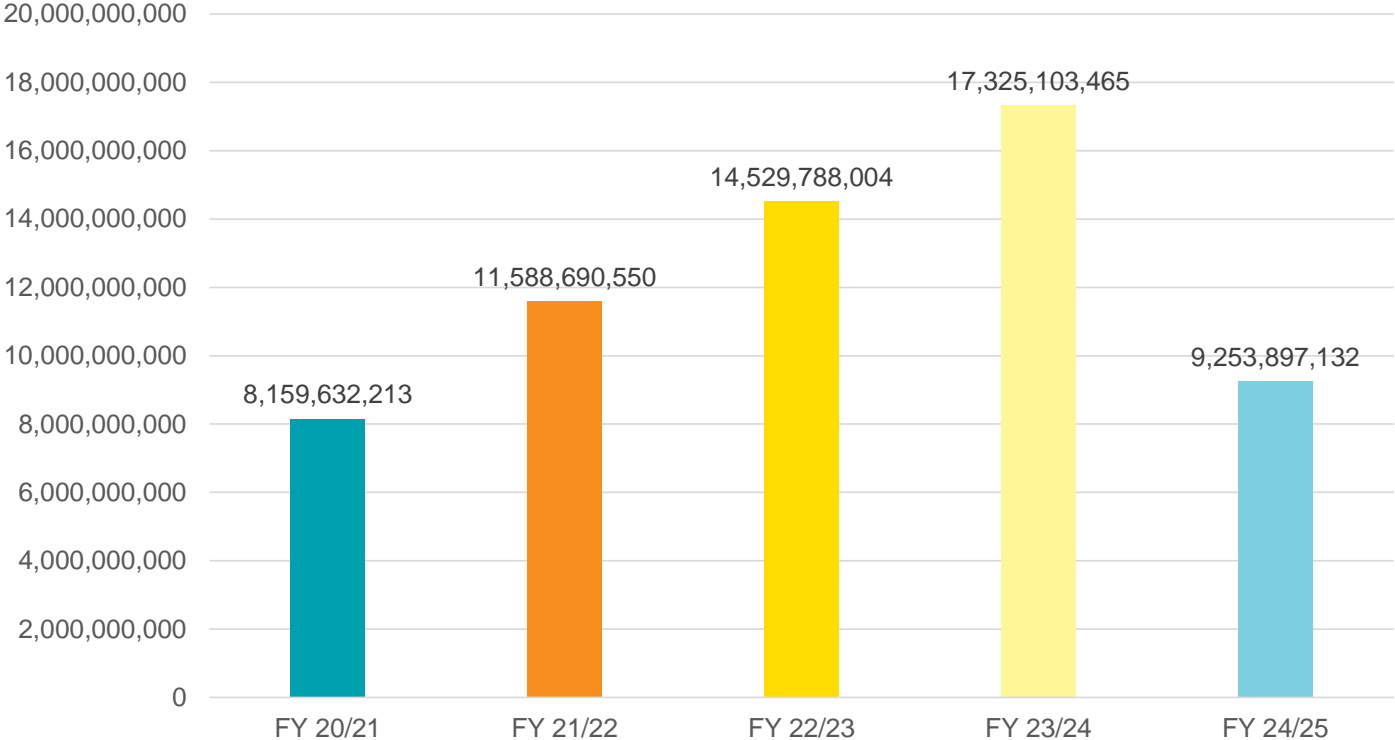


Low-THC Cannabis Dispensed by MMTCs (Fiscal Year 2023-2024)



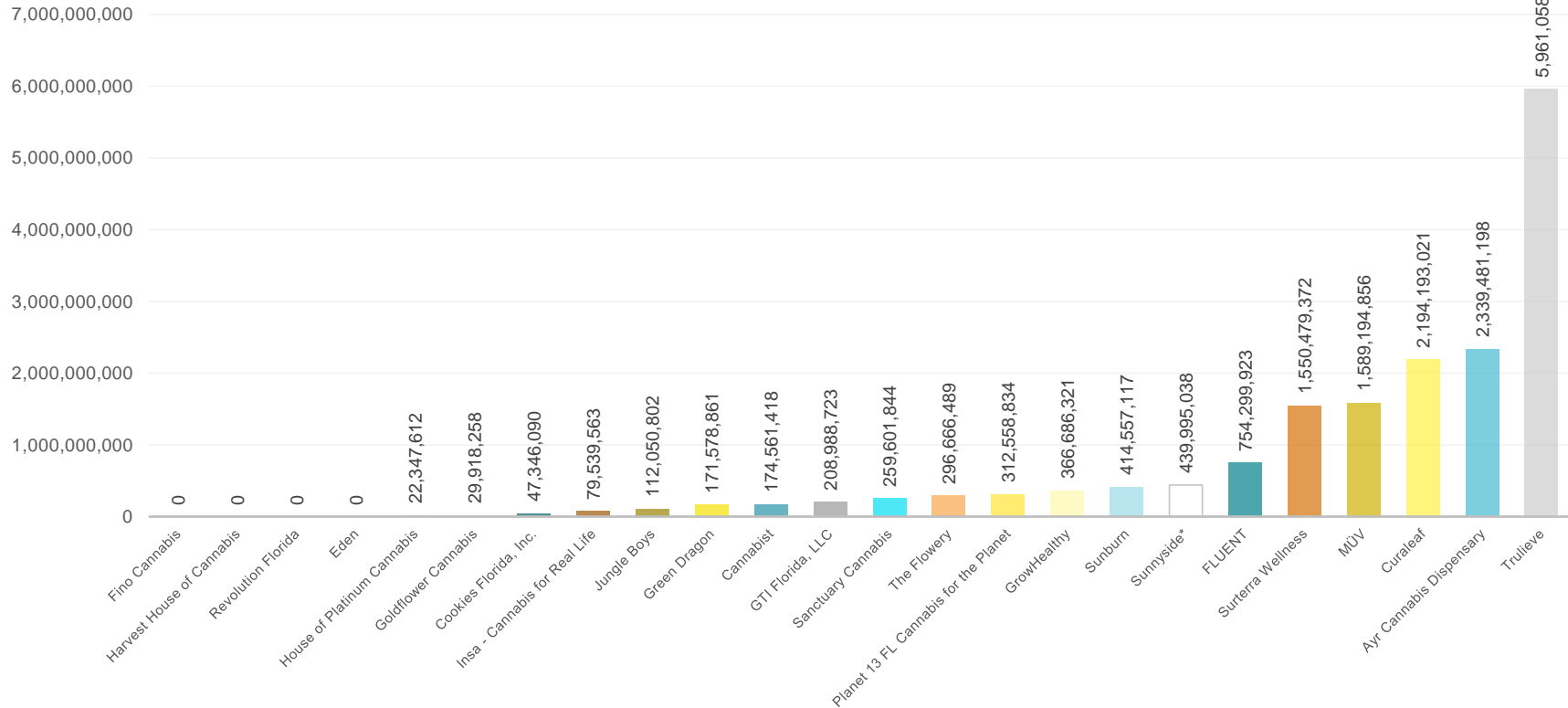
Medical Marijuana Dispensed

MEDICAL MARIJUANA IN MILLIGRAMS



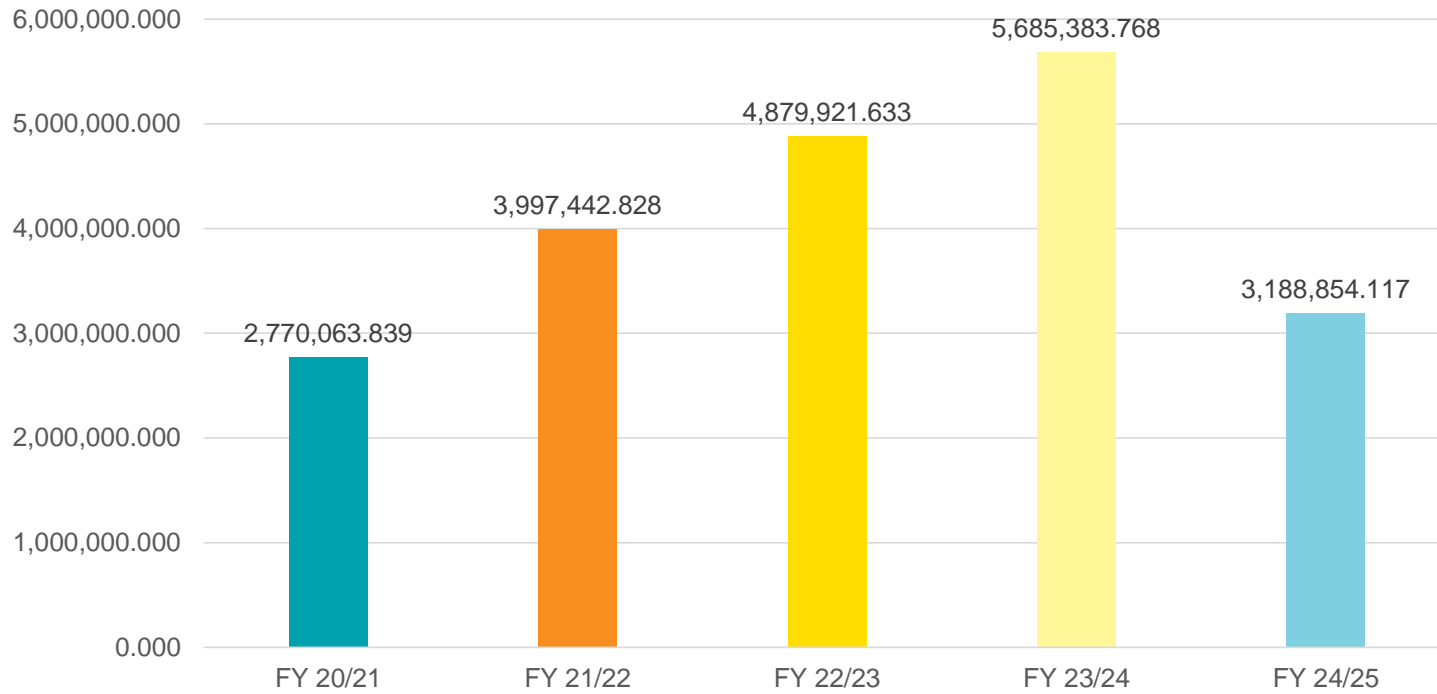
Medical Marijuana Dispensed by MMTCs (Fiscal Year 2023-2024)

MEDICAL MARIJUANA IN MILLIGRAMS

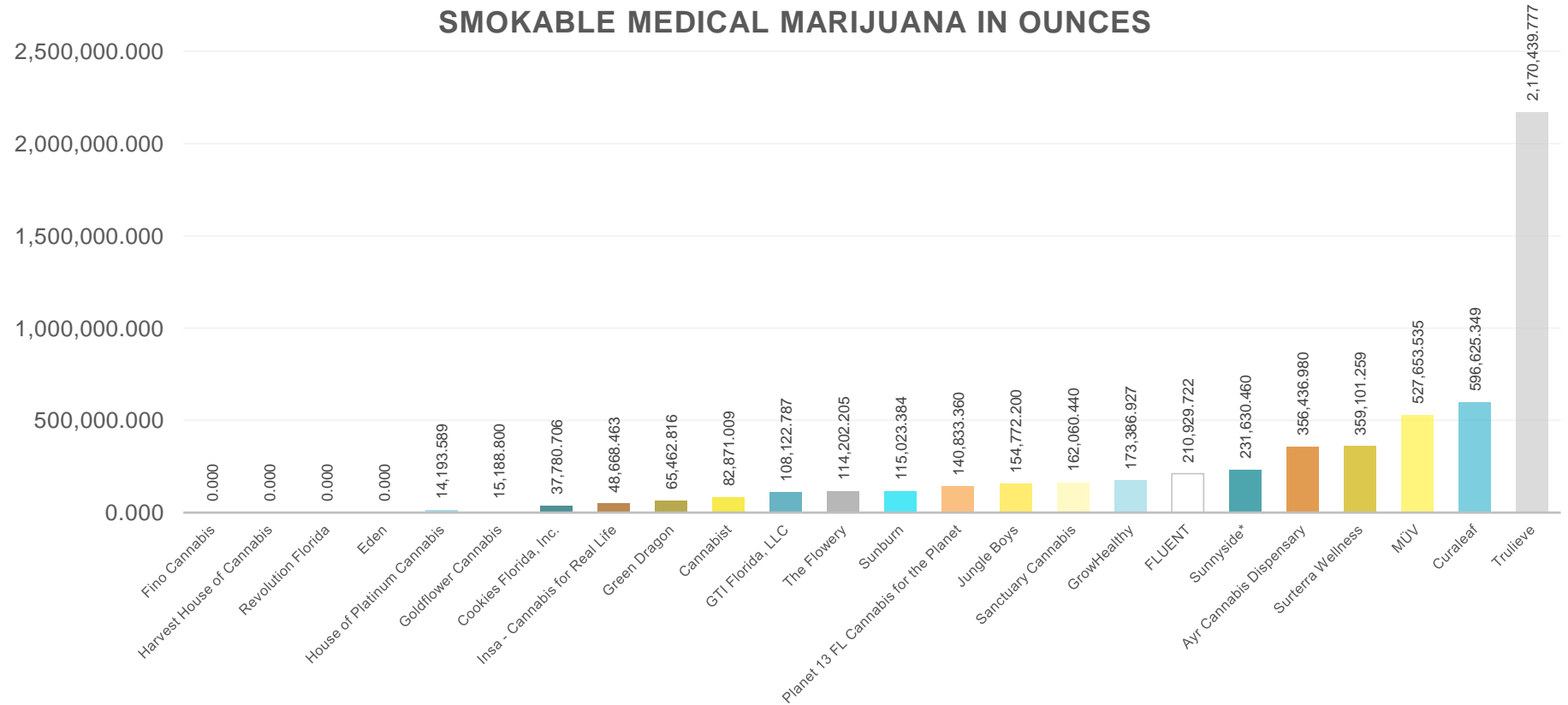


Smokable Medical Marijuana Dispensed

SMOKABLE MEDICAL MARIJUANA IN OUNCES



Smokable Medical Marijuana Dispensed by MMTCs (Fiscal Year 2023-2024)



Fiscal Year 2023-2024 Compliance Update

- **MMTC and CMTL Employee Background Screenings (13,053)**
 - Individuals deemed ineligible for employment (763)
- **Inspections of MMTC and CMTL facilities (2,551)**
- **Notices of Violation issued to MMTCs and CMTLs (243)**
 - Subset with fines (107)
- **Product Safety Quality Control Activities**
 - Tracked 332 failed batches to ensure proper retesting, remediation or destruction.
 - Reviewed over 880 Certificates of Analysis and over 200 data packages.
- **DOH, Bureau of Public Health Laboratories-Jacksonville, Medical Marijuana Expansion**
 - Accredited on June 28, 2024

Enforcement Focus Areas

- **MMTC enforcement focus areas:**
 - Unauthorized pesticide use
 - Dispensation of unapproved products
 - Advertising that is attractive to children
 - Failing to produce and make available low-THC cannabis as required by law
 - Seed-to-sale tracking discrepancies
 - Diversion of medical marijuana to nonpatients
 - Inversion of unapproved elements into medical marijuana
- **CMTL enforcement focus areas:**
 - Using inappropriate testing methods
 - THC potency inaccuracies

Pigford/Black Farmer Litigation (BFL) MMTC Licensing Update

- On September 20, 2022, the Department of Health (Department) issued notices of intent to approve and deny Pigford/BFL applications for MMTC licensure. Unsuccessful applicants filed petitions challenging the Department's notices. Litigation ensued and is pending.
- On July 11, 2023, the Department awarded two (2) Pigford/BFL licenses pursuant to HB 387.
- On July 11, 2023, the Department issued letters to Pigford/BFL applicants providing 90 days to resolve deficiencies identified in the notices of intent to deny pursuant to HB 387. No applicants cured their deficiencies.
- On November 22, 2024, the Department awarded two (2) Pigford/BFL licenses and sought clarification as to the designated heir of a deceased applicant in order to award licensure pursuant to SB 1582.
- On November 22, 2024, the Department issued letters to the six (6) remaining Pigford/BFL applicants providing 90 days to resolve deficiencies identified in the notices of intent to deny pursuant to SB 1582.

April 2023 MMTC Application Licensing Update

- The Department received 74 applications for up to 22 available MMTC licenses.
- 73 applications (1 withdrew) were reviewed.
- On November 26, 2024, the Department issued 22 notices of intent to approve applications for MMTC licensure.

Telehealth Recertification Implementation

- **HB 387 (2023)**
 - Telehealth: Implementing the provision allowing physician recertifications via telehealth.
 - Recertification telehealth use rate.
 - FY 2023-2024: 38% telehealth; 62% in-person
 - FY 2024-2025: 53% telehealth; 47% in-person

Seed-to-Sale Tracking System

- In 2024, the OMMU worked with its vendor, MMTCs, and CMTLs to establish a state seed-to-sale tracking system.
- On January 12, 2024, 64ER24-2 directed MMTCs' integration into the Department's seed-to-sale tracking system to achieve real time awareness of medical marijuana from cultivation to dispensation to patients.
 - MMTCs: 19 of 20 dispensing MMTCs integrated
 - CMTLs: 8 of 9 integrated

Thank You

Contact

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Implementation Update

Brian Meyer, Deputy Secretary for Medicaid

Kim Smoak, Deputy Secretary for Health Quality Assurance

Senate Health Policy Committee

February 4, 2025



Implementation Updates - Outline

- **SB 7016 (2024): Workforce**
 - Florida Reimbursement Assistance for Medical Education Program (FRAME), Dental Student Loan Repayment and Training, Education, and Clinicals in Health (TEACH)
- **SB 7016 (2024): Rate Changes**
 - DRG and Provider Rate/Fee Increases
- **SB 7016/SB 330 (2024): Funding for Graduate Medical Education (GME)**
 - GME Committee, Slots for Doctors Program, and Behavioral Health Teaching Hospitals
- **SB 7016 (2024): New Coverage**
 - Mobile Crisis Response Services, Acute Hospital Care at Home Program, and Advanced Birth Centers
- **Other Implementation Updates:**
 - **SB 644 (2024) Rural Emergency Hospitals**
 - **SB 7016 (2024): Legislatively Required Reports**
 - Advanced Birth Centers Reimbursement Methodology, Analysis of Potentially Preventable Health Care Events, GME Committee Report, and TEACH report

SB 7016 (2024): Workforce

- Florida Reimbursement Assistance for Medical Education Program (FRAME)
- Dental Student Loan Repayment
- Training, Education, and Clinicals in Health (TEACH)

SB 7016 (2024): Workforce

Sections 1 and 2

Florida Reimbursement Assistance for Medical Education Program (FRAME)

- Loan repayment program for qualified medical, mental health, and nursing professionals in the program who practice in areas with provider shortages
- Directs the Agency to seek federal authority to use Title XIX Matching Funds

Dental Student Loan Repayment Program (Dental FRAME)

- Loan repayment program for dental hygienists and dentists
- Directs the Agency to seek federal authority to use Title XIX matching funds

Training, Education, and Clinicals in Health (TEACH) Funding Program

- Directed the Agency to request federal approval to provide funding to offset administrative costs for training and education for residents and students at federally qualified health centers, community mental health centers, rural health clinics, and certified community behavioral health centers

SB 7016 (2024): Workforce

FRAME and TEACH Funding Programs



TEACH is operationalized by the Agency for Health Care Administration

FRAME is operationalized by the Department of Health



SB 7016 (2024): Workforce

FRAME and TEACH Funding Programs – Request for Federal Authority to Draw Federal Funds

Implementation Steps	Status
Drafted the New Florida Workforce 1115 Waiver Demonstration	Completed - November 2024
Issued Provider and Stakeholder Communication for New Florida Workforce 1115 Waiver Demonstration	Completed - December 2024
Began Public Comment Period for the New Florida Workforce 1115 Waiver Demonstration	
Held Public Meetings for the New Florida Workforce 1115 Waiver Demonstration Request	Completed - January 2025
Submit the New Florida Workforce 1115 Waiver Demonstration Request to CMS for the FRAME and TEACH Programs	Pending Submission Spring 2025

SB 7016 (2024): Workforce

FRAME and TEACH Funding Programs – Operational Implementation Steps

Implementation Steps	Status
Published Webpage for TEACH Program Information and Application	Completed - October 2024
Issued TEACH Program Provider and Stakeholder Communication	Completed - November 2024
Hosted a Stakeholder Forum for the TEACH Program Application	
Shared Frequently Asked Questions & Responses for TEACH Program Application with Associations for Dissemination to their Members	
Initiated Administrative Rulemaking for TEACH	Completed - January 2025
Rule Completion	Autumn 2025
First TEACH Program report due	Due December 1, 2025

SB 7016 (2024): Rate Changes

- Pediatric and Adult Obstetrics DRG Methodology
- Provider Rate/Fee Increases:
 - Physical Therapy, Occupational Therapy, and Speech Therapy
 - Private Duty Nursing
 - Behavior Analysis
 - Dental Providers

SB 7016 (2024): Rate Changes

Section 82

Pediatric and Adult Obstetrics DRG Methodology

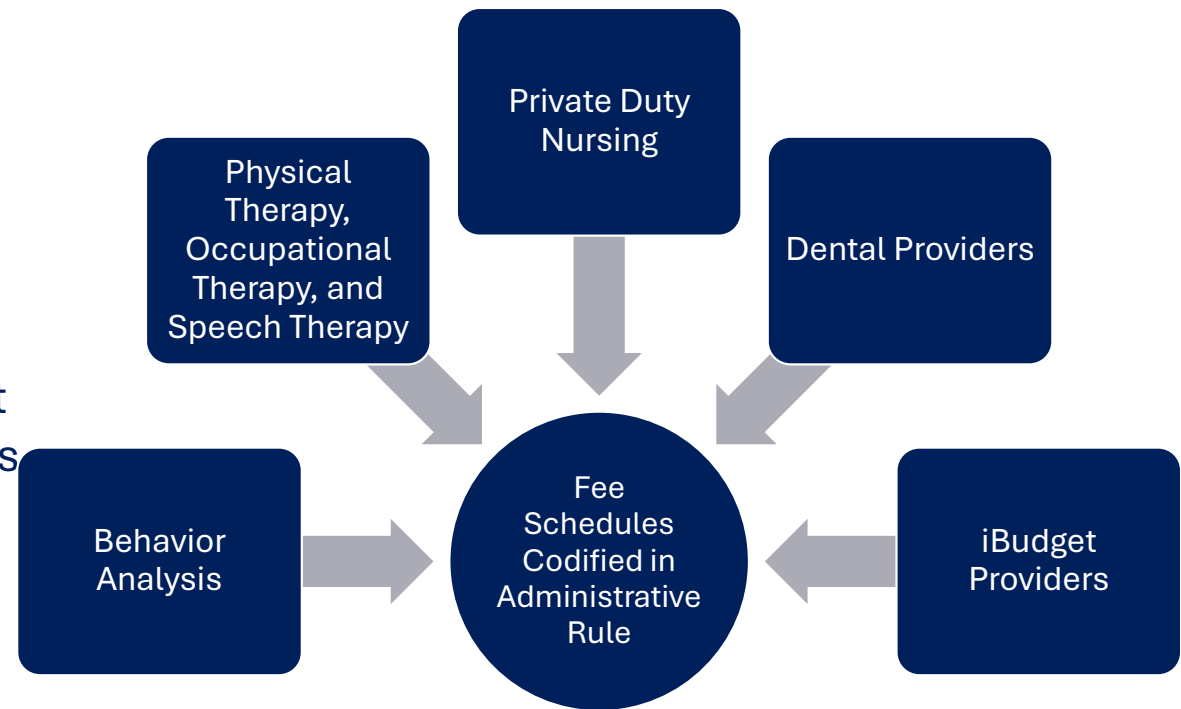
- Provided recurring funding to establish a Pediatric Normal Newborn, Pediatric Obstetrics, and Adult Obstetrics Diagnosis Related Grouping (DRG) reimbursement methodology for including in the DRG reimbursements for hospital inpatient services

Implementation Steps	Status
Updated System to Include New Methodology <ul style="list-style-type: none">• Allows providers to receive the new DRG rate	Completed - July 2024
Submitted State Plan Amendment (SPA) to CMS to Request Federal Approval <ul style="list-style-type: none">• Approval will provide a July 2024 effective date	Submitted September 2024 Pending Approval <i>(anticipated Spring 2025)</i>

SB 7016 (2024): Rate Changes

Sections 83, 84, 88, 89, and 90 - Provider Rate Increases

- Funding provided to increase rates for certain providers
- Reimbursement rates are codified in Administrative Rule
- **Updated rates/fee schedules are effective as of October 1** of a given year, so providers can begin billing at the new rate and codified in the rule's next iteration
- Rule promulgation is currently underway with an **expected effective date in Spring 2025***



*Providers can bill and receive reimbursement for the updated rate on and after the effective date established by Statute and GAA.

Rates are codified in rule and apply retroactively.

SB 7016/SB 330 (2024): Funding for Graduate Medical Education

- Graduate Medical Education (GME) Committee
- Slots for Doctors Program
- Behavioral Health Teaching Hospitals

SB 7016 (2024): Funding for GME

Section 28

The Graduate Medical Education Committee

- Directed the Agency to create and populate a committee for the purpose of developing an annual report detailing:

The role of residents and medical faculty in the provision of health care

The relationship of graduate medical education to the state's physician workforce

The typical workload for residents and the role such workload plays in retaining physicians in the long-term workforce

The costs of training medical residents for hospitals and qualifying institutions

The availability and adequacy of all sources of revenue available to support graduate medical education

The use of state funds, for graduate medical education for each hospital or qualifying institution receiving such funds

SB 7016 (2024): Funding for GME

Section 28 – GME Committee

Implementation Steps	Status
Developed Committee Milestones Timeline	Completed - May 2024
Developed Data Reporting Requirements for Qualifying Institutions Based on Positions Funded	
Published GME Committee Web Link and Splash Page on Agency Website	
Notified Committee Members of their Appointments	Completed - October 2024
Held Inaugural GME Committee Meeting	Completed - December 2024
Draft and Publish Committee Annual Report	Due July 1, 2025

SB 7016 (2024): Funding for GME

Section 28

Graduate Medical Education – Slots for Doctors

- Directed the Agency to provide additional funding for up to 200 resident positions that existed prior to July 1, 2023, to hospitals and qualifying institutions which have applied for the funding

Implementation Steps	Status
Receipt of New Applications for Funding	Completed - December 2024
Publish Slots for Doctors Program Distribution	Estimated Spring 2025
Submit GME Report to Legislature	Estimated Spring 2025
Submit a SPA for Federal Authority	Estimated Spring 2025

SB 330 (2024): Funding for GME

Sections 9, 10, and 11

Behavioral Health Teaching Hospitals (BHTHs)

- Appropriated funding for behavioral health residency slots in BHTH facilities and appropriates TEACH funding for BHTH facilities
- Directed the Agency to designate the following four hospitals as BHTHs:
 - Tampa General Hospital (affiliation with the University of South Florida)
 - UF Health Shands Hospital (affiliation with the University of Florida)
 - UF Health Jacksonville (affiliation with the University of Florida)
 - Jackson Memorial Hospital (affiliation with the University of Miami)

SB 330 (2024): Funding for GME

Sections 9, 10, and 11- Behavioral Health Teaching Hospitals

Implementation Steps [Medicaid]	Status
Submitted SPA for Federal Authority for the new BHTH 'Slots for Doctors' funding	Completed - June 2024
Created application for the BHTH 'Slots for Doctors' program and dispersed to the four BHTHs	Completed - July 2024
Received Slots for Doctors applications and Posted 'Slots for Doctors' Distribution Model	Completed - November 2024
Pay 'Slots for Doctors' Quarters 1 and 2	Completed - January 2025
Pay Slots for Doctors Quarter 3 and submit Slots for Doctors report to Legislature and Executive Office of the Governor	Estimated Spring 2025
Pay Slots for Doctors Quarter 4	Estimated Summer 2025

SB 330 (2024): Health Quality Assurance

Sections 9, 10, and 11- Behavioral Health Teaching Hospitals

Implementation Steps [Health Quality Assurance]	Status
The designation of behavioral health teaching hospital has been conveyed to the four hospitals identified in the statute	Completed - April 2024
System changes to create a new designation for behavioral health teaching hospitals	Completed - October 2024
BHTH Grant Application posted	Completed - November 2024

SB 330 (2024): Health Quality Assurance

Sections 9, 10, and 11- Behavioral Health Teaching Hospitals

- On or after July 1, 2025, hospitals must apply for the designation on a licensure application
- Designated hospitals must reapply every two years at time of license renewal.
- The criteria includes:
 - Designation as a teaching hospital per s. 408.07, F.S.;
 - Offer an accredited residency program in psychiatry or a fellowship program in clinical psychiatry;
 - Provide behavioral health services;
 - Affiliation with a Florida medical school listed under s. 458.3145, F.S.
 - Develop a plan to create and maintain integrated workforce development programs.

SB 330 (2024): Health Quality Assurance

Sections 9, 10, and 11- Behavioral Health Teaching Hospitals

- Requires the agency to establish a grant program for BHTHs
- Requires submission of a grant application, supporting documents and a detailed spending plan
- Grant program funding may be used for:
 - Operations
 - Expenses
 - Fixed Capital outlay including but not limited to, facility renovation and upgrades.
- \$300 Million Appropriated for the program
 - 2024-2025 – may not exceed \$100 million
 - 2025-2026 – may not exceed \$100 million
 - 2026-2027 – may not exceed \$100 million

SB 330 (2024): Health Quality Assurance

Sections 9, 10, and 11- Behavioral Health Teaching Hospitals

Ongoing:

- Amending Rules:
 - 59A-35.060, F.A.C. pertaining to the License Application Process to update the hospital licensure application
 - 59A-3.066, F.A.C. outlines license procedures for hospitals
 - 59A-3.273, F.A.C. which details management and administration duties as it relates to hospitals
- Meeting with the Department of Children and Families (DCF) regarding oversight of the BHTH grant program

SB 7016 (2024): New Coverage

- Mobile Crisis Response Services
- Acute Hospital Care at Home Program
- Advanced Birth Centers
- Nonemergent Care Access Plan (NCAP)

SB 7016 (2024): New Coverage

Sections 14 and 24

Mobile Crisis Response Services

- Directed the Agency to seek federal approval for coverage and reimbursement authority for mobile crisis response services
- The bill also directed the Department of Children and Families (DCF) to coordinate with the Agency to provide education to providers of child, adolescent, and young adult mobile response team services on the process to enroll as Medicaid providers

SB 7016 (2024): New Coverage

Sections 14 and 24– Mobile Crisis Response Services

Implementation Steps	Status
Identified non-Medicaid DCF-Funded Mobile Response Teams and collaborate with DCF on provider outreach <ul style="list-style-type: none"> To assist with Medicaid provider enrollment 	Completed - August 2024
Amend Managed Care Contracts to Add Service	Estimated Spring 2025
Submit State Plan Amendment (SPA) for Federal Authority	Estimated Spring 2025
Post Updated Fee Schedule <ul style="list-style-type: none"> To allow providers to bill for this service 	Estimated Summer 2025
Completed System Updates	Estimated Summer 2025
Update Fee Schedule and Behavioral Health Coverage Policy via Rule Promulgation	Estimated Summer 2025
CMS Approval of SPA	Estimated Summer 2025

SB 7016 (2024): New Coverage

Section 32

Acute Hospital Care at Home

- Directed the Agency to seek federal approval necessary to implement an acute hospital care at home program in the state Medicaid program consistent with the Medicare Hospital at Home waiver program

Implementation Steps	Status
Issued Provider and Stakeholder Communication <ul style="list-style-type: none">• Emailed alert to providers regarding the implementation of the new program and reimbursement	Completed - November 2024
Held public meeting for the update to the Inpatient Hospital Service Coverage Policy <ul style="list-style-type: none">• To update the policy to include the new covered services	Completed – December 2024
Completion of Inpatient Hospital Service Coverage Policy via Rule Promulgation	Estimated Spring 2025

SB 7016 (2024): New Coverage

Sections 7, 8 and 87

Advanced Birth Centers (ABC)

- It amends multiple sections of the Florida statutes related to birth center licensure to create ABC
- Establishes an optional level of service for a licensed birth center to accept clients currently excluded due to medical conditions and other factors such that the client's pregnancy is no longer low risk

SB 7016 (2024): New Coverage

Section 26

Nonemergent Care Access Plan (NCAP)

- Requires all hospitals with emergency departments (EDs), including off-campus EDs, to submit a Nonemergent Care Access Plan (NCAP) to the Agency
- The plan must assist patients with nonemergent health care needs or those lacking regular access to primary care in accessing appropriate care settings
- The Agency must approve NCAP before Initial licensure or licensure renewal starting July 1, 2025

SB 7016 (2024): New Coverage

Section 26

Nonemergent Care Access Plan (NCAP)

- The Nonemergent Care Access Plan (NCAP) must include:
 - Procedures that ensure the actions will not conflict with s. 395.1041, F.S., (emergency access to care) or 42 U.S.C., s. 1395dd (Emergency Medical Treatment and Labor Act)
 - Procedures to educate patients on the appropriate setting for their healthcare needs
 - Be capable of providing services directly or by contract to meet the patient's needs such as an urgent care center or primary care office (which may be Medicare certified as a federally qualified health center)

SB 7016 (2024): New Coverage

Sections 7, 8 and 87 (ABC) / Section 26

Advanced Birth Centers [ABC]	Status
Conducted discussion sessions with the industry to gather input regarding Advanced Birth Centers	Completed – May to July 2024
Changes to the licensure database and online licensing for advanced birth centers have been implemented	Completed – October 2024
Amending Chapter 59A-11 to reflect standards for patient safety for Advanced Birth Centers	Ongoing
Nonemergent Care Access Plan [NCAP]	Status
Conducted discussion sessions with the industry to gather input regarding NCAPs	Completed – May to July 2024
System changes to the licensure database and online hospital licensing have been implemented	Completed – October 2024
Amending Chapter 59A-3 to reflect the required components of the NCAP	Ongoing

Other Implementation Updates

- SB 644: Rural Emergency Hospitals
- SB 7016 (2024): Legislatively Required Reports

SB 644: Rural Emergency Hospitals

- Directed the Agency to create a new hospital license classification in response to the Centers for Medicare and Medicaid Services (CMS) new Medicare certification option referred to as Rural Emergency Hospitals
- This bill authorizes the Agency to designate qualifying hospitals as rural emergency hospitals. The agency will license these facilities and ensure they meet the established criteria
- This allows hospitals in rural communities to provide emergency and outpatient services for a higher rate of reimbursement without having to meet the current requirements of a full-service hospital

SB 644: Rural Emergency Hospitals

- Allows hospitals to participate in the Medicare program as a REH
- REHs will provide rural emergency services and other care that do not require treatment beyond 24 hours
- The agency may designate a hospital as a rural emergency hospital if it demonstrates that it meets the following criteria:
 - Meets the requirements of the Consolidated Appropriations Act of 2021, Pub. L. No. 116-260
 - Has no more than 50 beds
 - Can adequately provide rural emergency services in the facility 24 hours a day and seven days a week
 - Is sufficiently staffed and equipped to provide rural emergency services
 - Has a current transfer agreement with a Level I or Level II trauma center

SB 644: Rural Emergency Hospitals

Implementation Steps	Status
59A-3.252, F.A.C., Classification of Hospitals to include a new designation titled Rural Emergency Hospital (REH)	
Workshop conducted	November 2024
59A-35.060, F.A.C. pertaining to the License Application Process to update the hospital licensure application.	Ongoing
Survey guidelines will be updated to incorporate the amended rule	Ongoing
The Medicaid program will update rules (if necessary) pending the outcome of the licensure rule updates for the Rural Emergency Hospital designation.	Pending

SB 7016 (2024): Legislatively Required Reports

- Advanced Birth Center Services Reimbursement Methodology
- Analysis of Potentially Preventable Health Care Events
- Graduate Medical Education (GME) Committee Report
- TEACH Program Report

SB 7016 (2024): Legislatively Required Reports

Section 87

Advanced Birth Center Services Methodology

- Directed the Agency to contract with a vendor to develop a reimbursement methodology for covered services at advanced birth centers and submit the reimbursement methodology and estimated fiscal impact to the Executive Office of the Governor's Office of Policy and Budget, the chair of the Senate Appropriations Committee, and the chair of the House Appropriations Committee

Implementation Steps	Status
Submitted the Reimbursement Methodology Report and Estimated Fiscal Impact	Completed – January 2025

SB 7016 (2024): Legislatively Required Reports

Section 29

Analysis of Potentially Preventable Health Care Events for Medicaid Enrollees

- Directed the Agency to annually produce a report on the potentially preventable hospital events that occurred during the previous state fiscal year which may have been prevented

Implementation Steps	Status
Submitted Report to the Governor, the President of the Senate, and the Speaker of the House of Representatives	Completed – October 2024

SB 7016 (2024): Legislatively Required Reports

Section 30

Graduate Medical Education (GME) Committee Report

- The GME committee is to submit a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives that includes specific information about the residents and funding of GME

Implementation Steps	Status
Submit Report	Due July 1, 2025

SB 7016 (2024): Legislatively Required Reports

Section 29

Training, Education, and Clinicals in Health (TEACH) Funding Program Report

- The Agency must submit an annual report to the Governor, the President of the Senate, and the Speaker of the House of Representatives detailing the effects of the program for the prior fiscal year regarding the students and program participants

Implementation Steps	Status
Submit report	Due December 1, 2025

THANK YOU



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FLORIDA AGENCY OF HEALTH
CARE ADMINISTRATION



FLORIDA AGENCY OF HEALTH
CARE ADMINISTRATION

AHCA
AGENCY FOR HEALTH CARE ADMINISTRATION

Florida Department of Health

2024 Health Care Legislation Implementation Update



Florida
HEALTH

Senate Health Policy Committee
February 4, 2025

DIVISION OF Medical Quality Assurance

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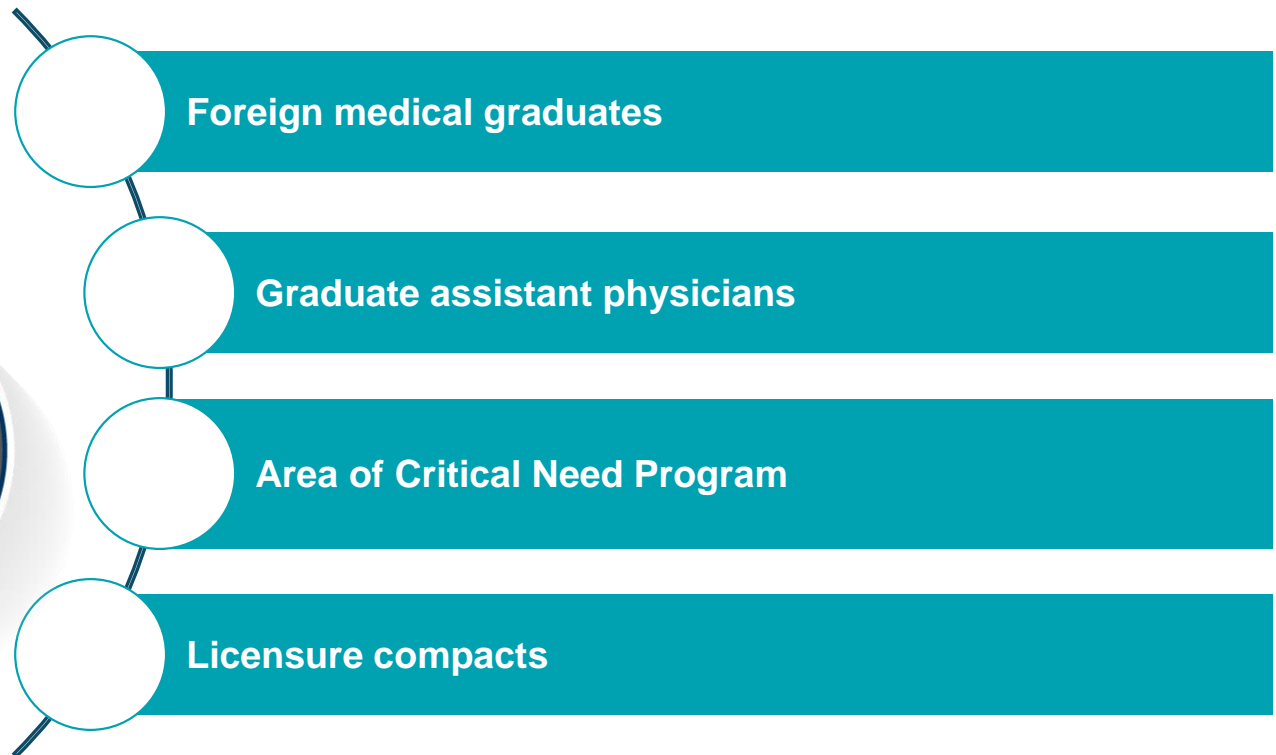
**Florida
HEALTH**

SB 7016 Health Care

Expands access to quality, efficient health care by growing Florida's health care workforce.



Florida
HEALTH



SB 7016 Health Care

March 21, 2024



CS/SB 7016 was signed into law.

June - August 2024



The Board of Nursing held meetings to draft rule language and develop application forms for Area of Critical Need licensure and Nurse Midwives Adverse Reporting.

June - December 2024



The Boards of Medicine and Osteopathic Medicine held two meetings to draft rule language and develop new application forms.

June 27, 2024



Area of Critical Need application available for Advanced Practice Registered Nurses and Physician Assistants.

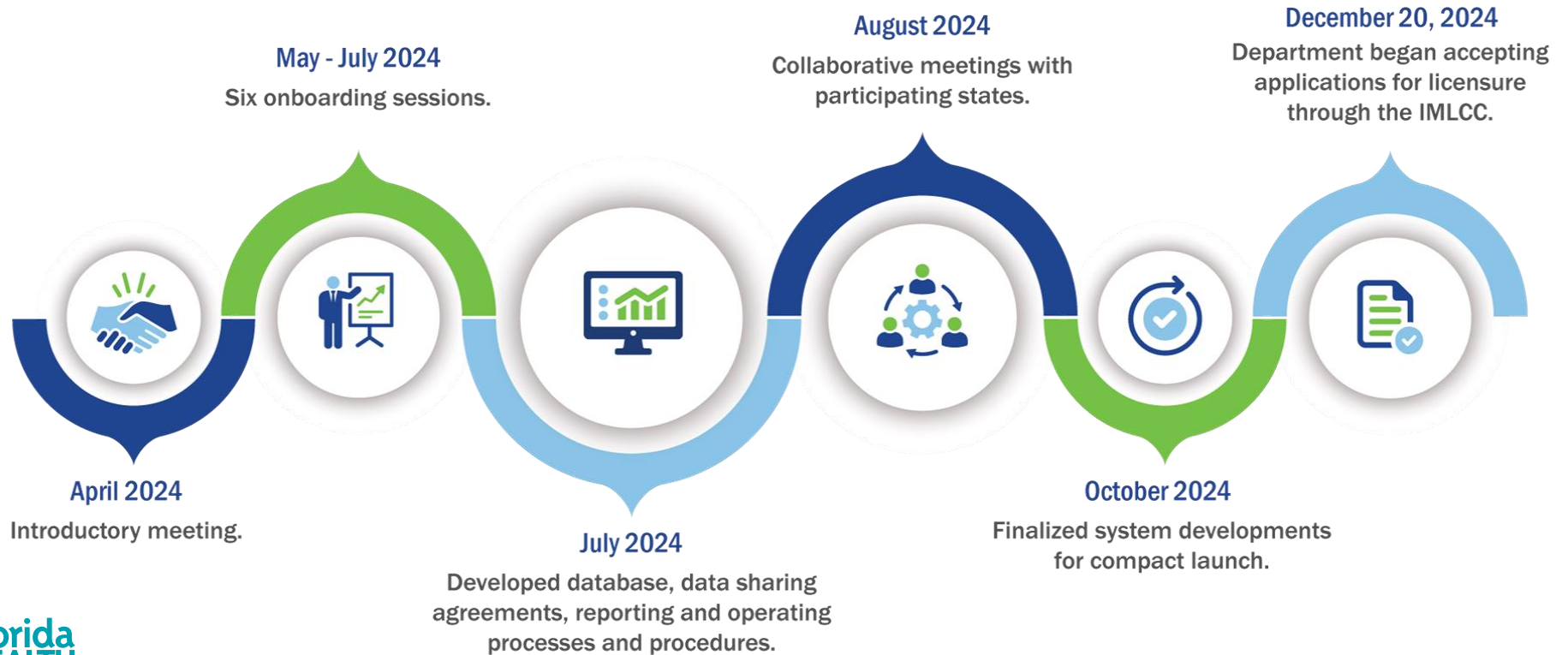
October - December 2024



Graduate Assistant Physician and Interstate Medical Licensure Compact applications made available.

SB 7016 Health Care

Interstate Medical Licensure Compact Implementation

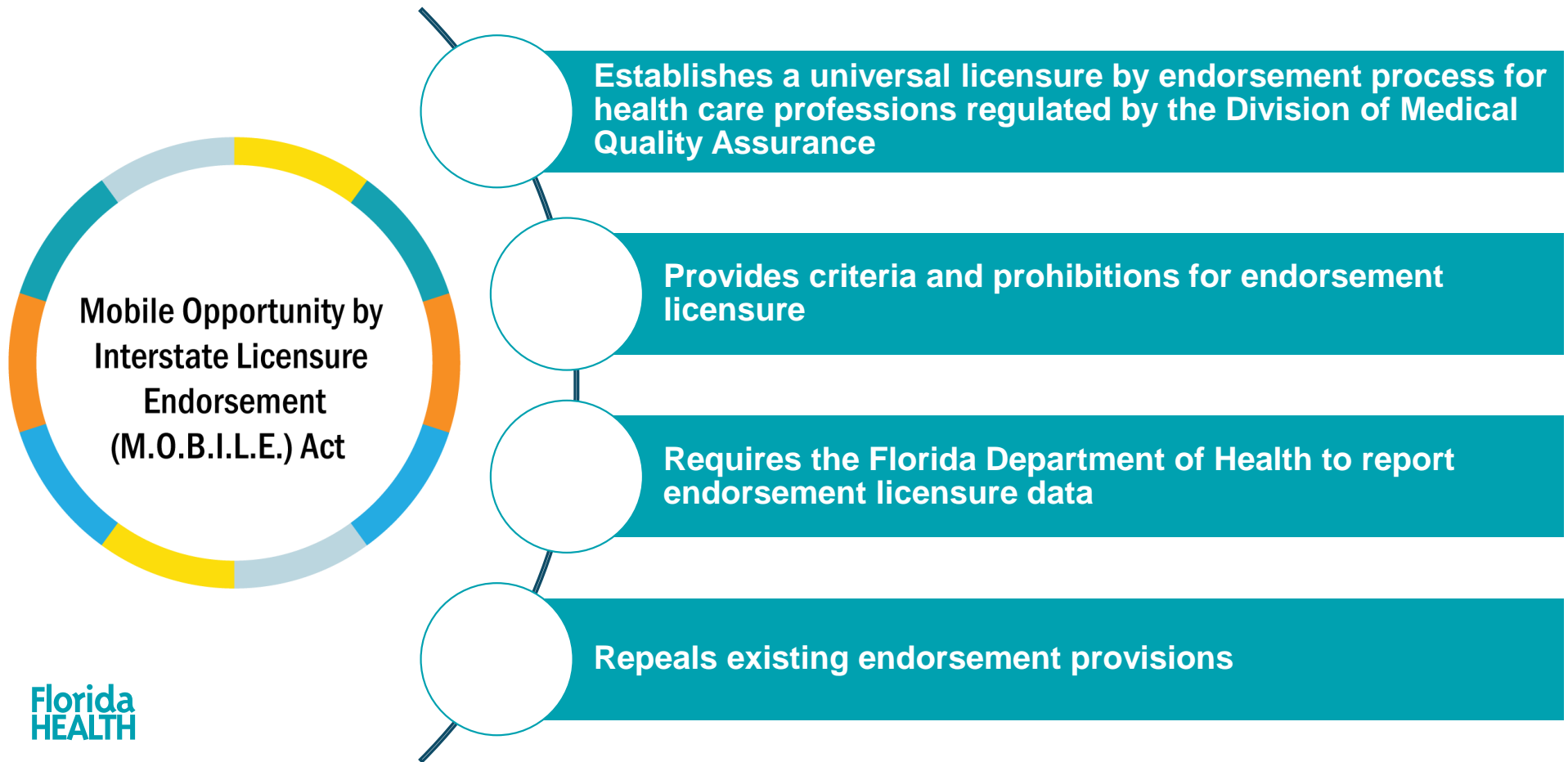


SB 7016 Health Care

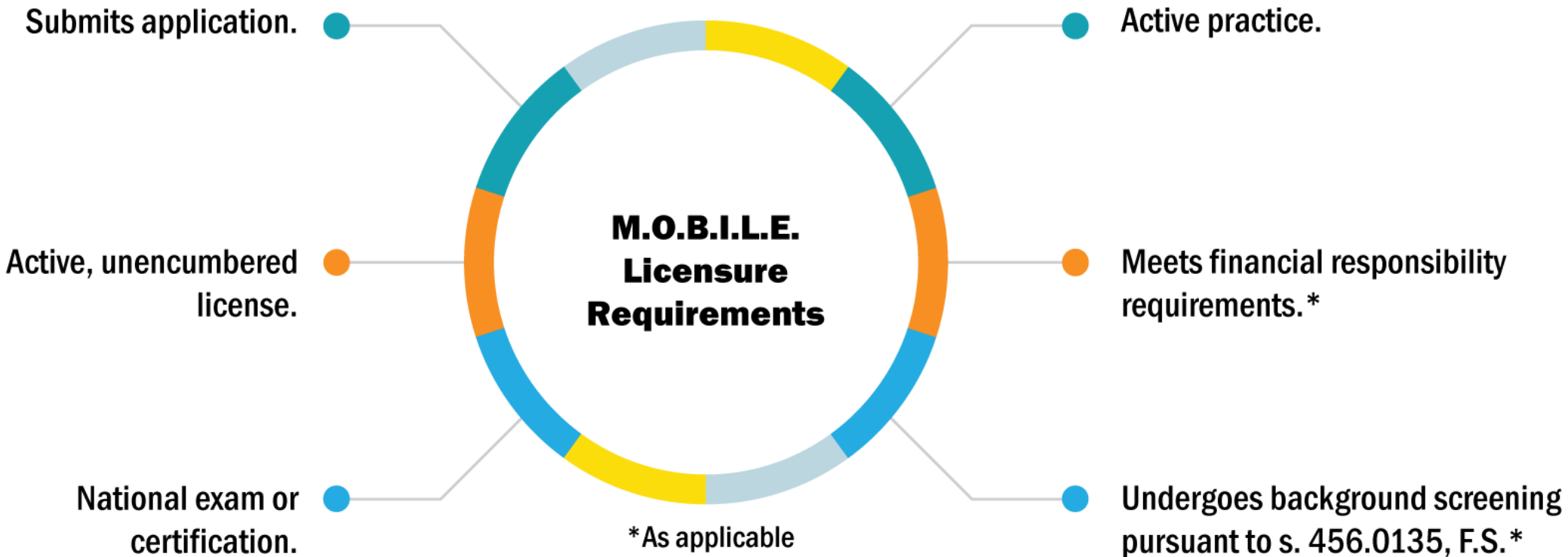
New Licensure Pathway		Applications Received	Licenses Issued
Graduate Assistant Physicians		6	0
Area of Critical Need	Physician Assistants	152	9
	Advanced Practice Registered Nurses	6	2
Interstate Medical Licensure Compact		113	62

This data is valid as of January 20, 2025

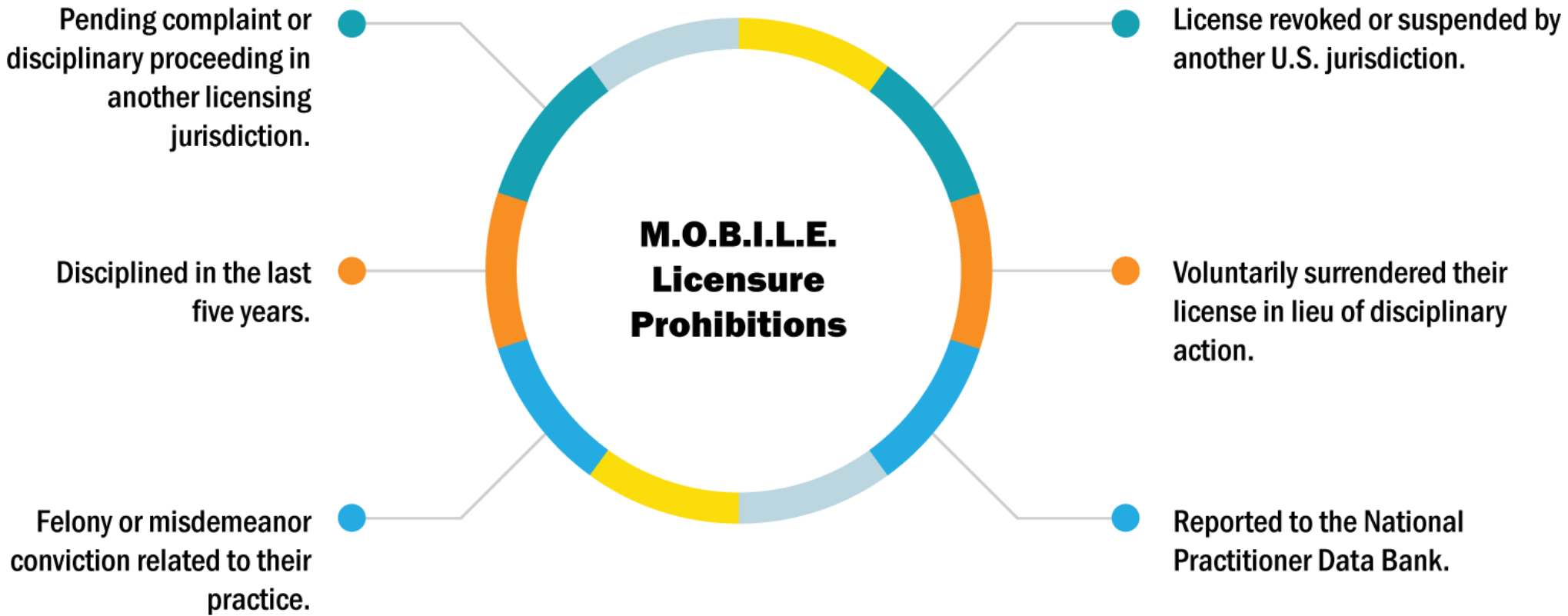
SB 1600 Interstate Mobility



SB 1600 Interstate Mobility



SB 1600 Interstate Mobility



SB 1600 Interstate Mobility



March 6, 2024

CS/SB 1600 ordered enrolled.

April 2024

Endorsement Application form drafted in preparation for use by all health care boards.

July 1, 2024

CS/SB 1600 became effective.

July–September 2024

Health care boards approved the M.O.B.I.L.E. Endorsement Application form and began rulemaking.

September 2024

The first applications were received and licenses issued to three dentists.

SB 1600 Interstate Mobility

APPLICATIONS
RECEIVED

4,561



LICENSES ISSUED

1,311



As of January 20, 2025

HB 197 Health Care Practitioners and Massage Therapy



Amends massage establishment requirements related to sexual activity prohibitions, prohibited conduct and devices, window transparency, signage, employee dress code, and the maintenance and display of employee and customer records

Establishes new grounds for emergency suspension of a health care practitioner's license related to sexual misconduct

Specifies advertising requirements for massage therapists and establishments and prohibits advertisements related to prostitution services

HB 197 Health Care Practitioners and Massage Therapy



May 6, 2024
CS/CS/HB 197
was signed
into law.

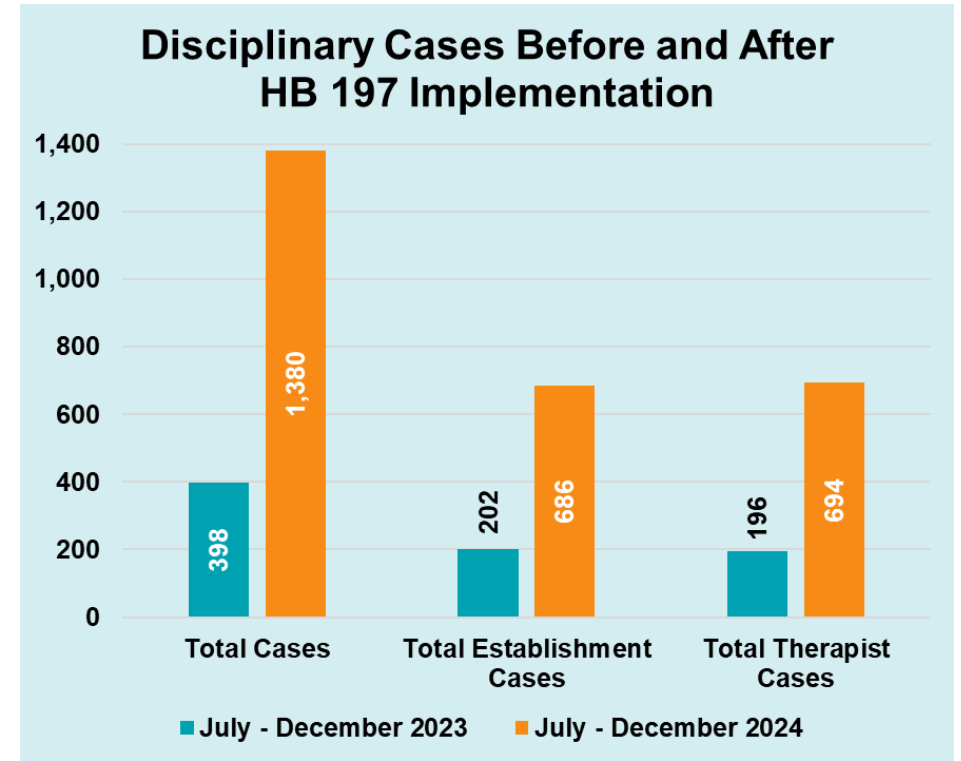
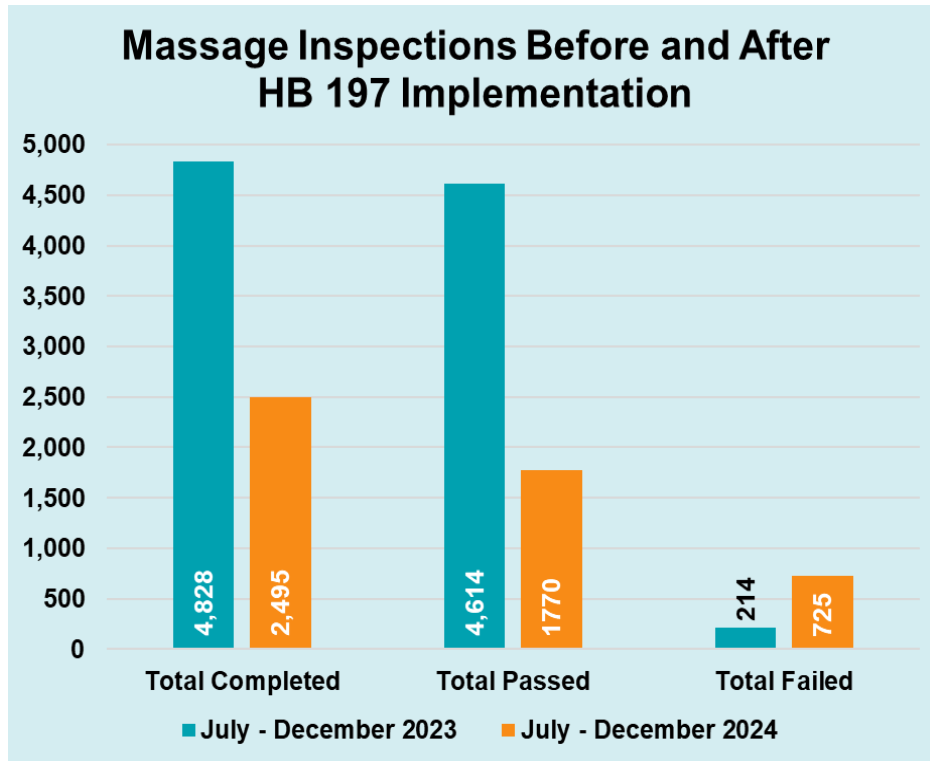
June 11-13, 2024
Inspector training
was conducted.

July 1, 2024
CS/CS/HB 197
became effective.

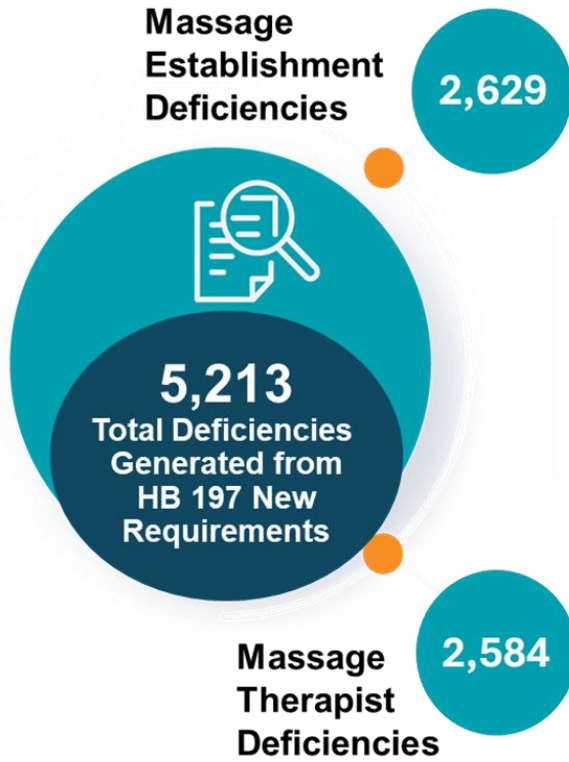
June - July 2024
The Board of Massage
Therapy held two
meetings to draft rule
language and develop
application forms.

July - August 2024
Three Inspection
Workshops were held to
educate stakeholders
throughout the state.

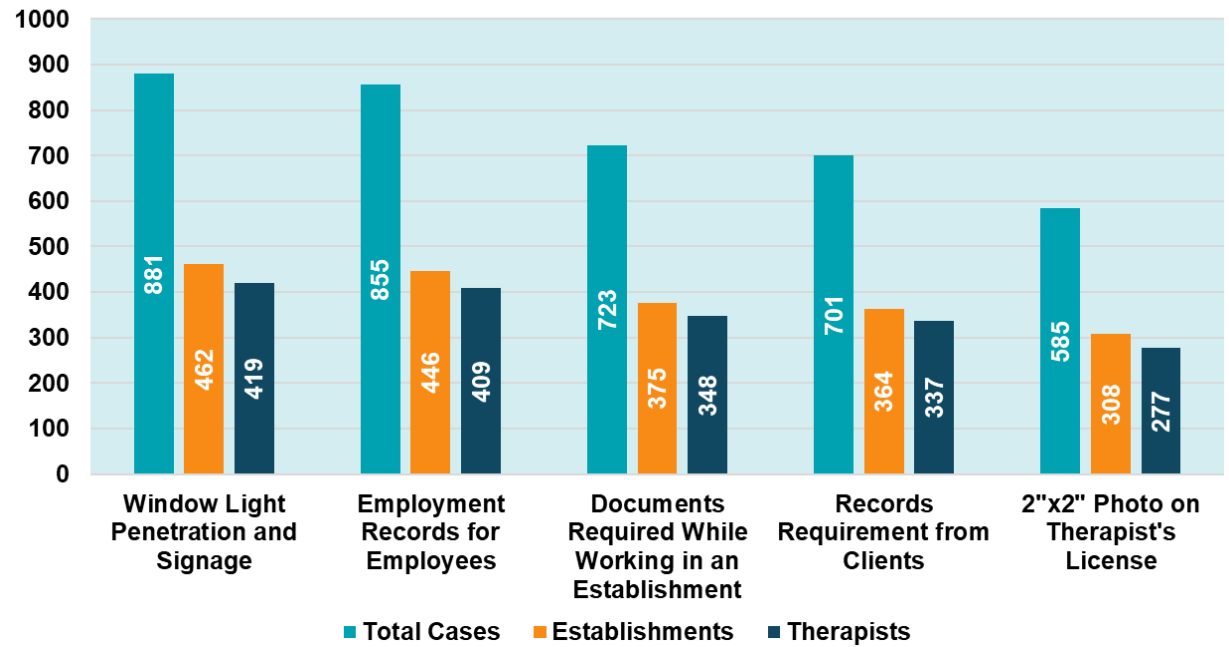
HB 197 Health Care Practitioners and Massage Therapy



HB 197 Health Care Practitioners and Massage Therapy



Top Five Reasons Cases are Generated from HB 197 New Requirements

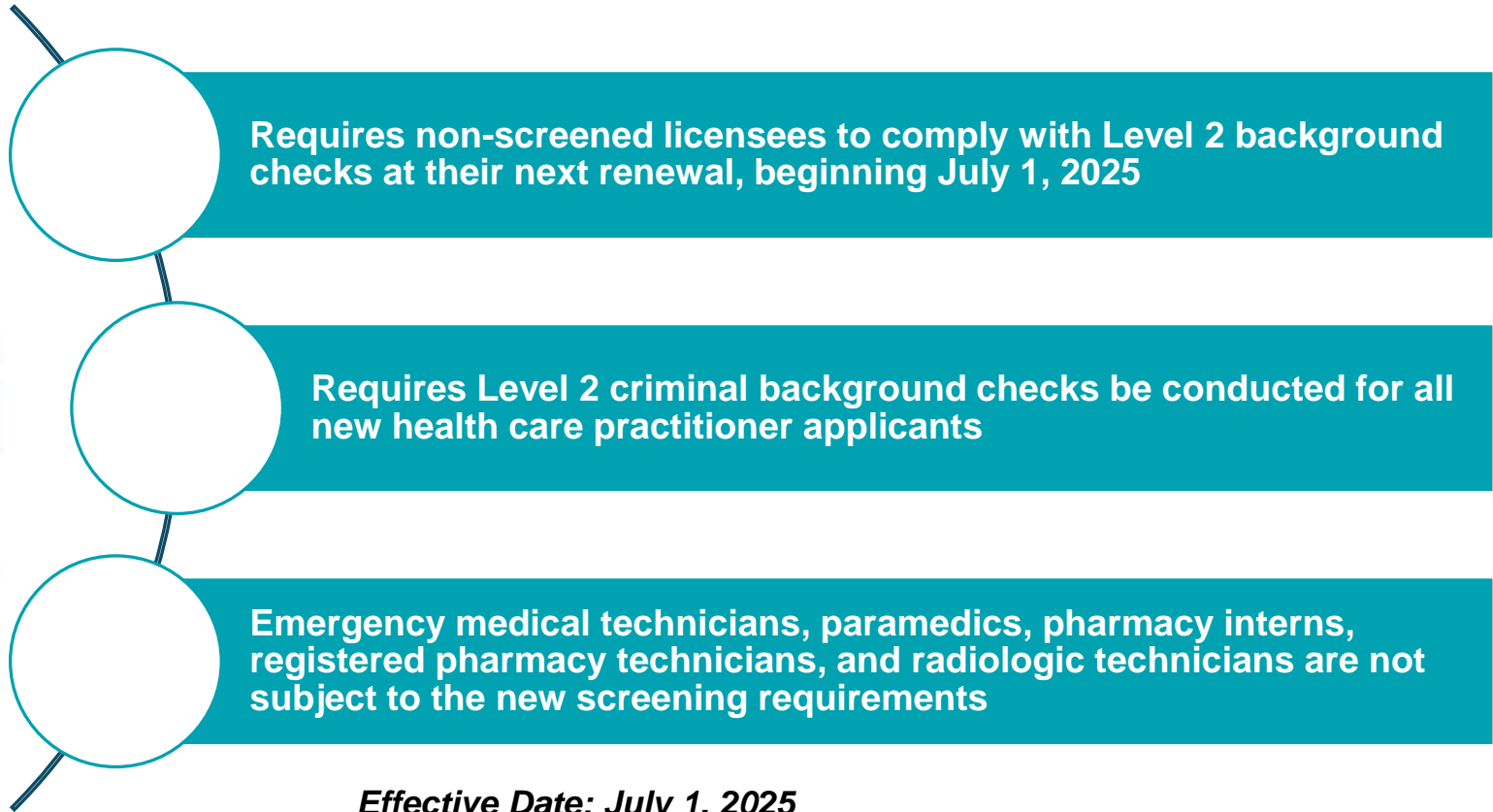


HB 197 Health Care Practitioners and Massage Therapy

Fourteen emergency suspension orders issued for sexual misconduct because of HB 197 since July 1, 2024.



HB 975 Background Screening Requirements for Health Care Practitioners



Effective Date: July 1, 2025

HB 1561 Office Surgeries

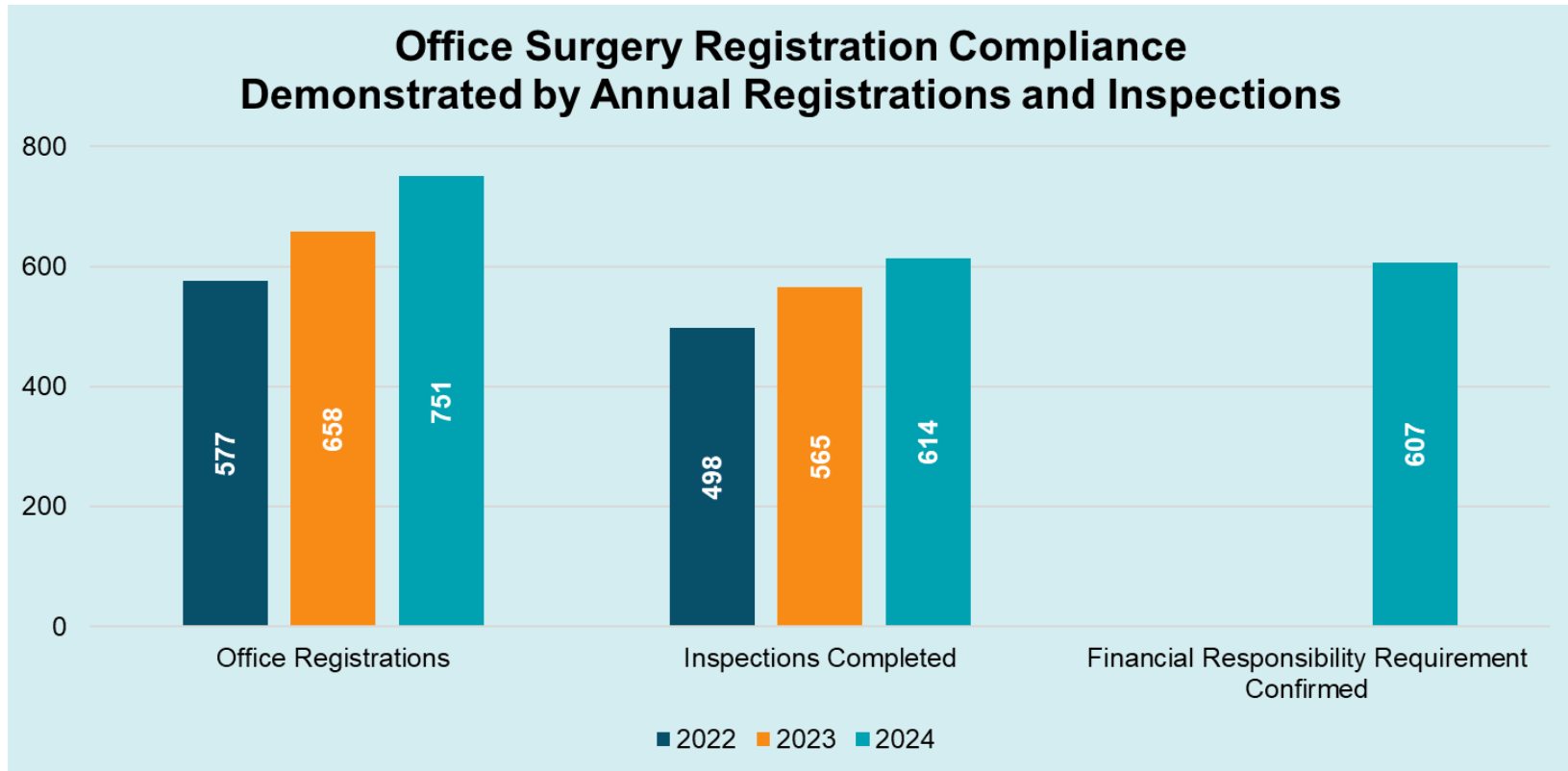


Adds financial responsibility requirements for physician offices where gluteal fat grafting procedures are performed

Clarifies prohibition for liposuction procedures removing over 1,000 cc of supernatant fat

Revises the fine from \$5,000 a day to \$5,000, per incident

HB 1561 Office Surgeries



Financial responsibility was not added until June 28, 2024

HB 159 HIV Infection Prevention Drugs

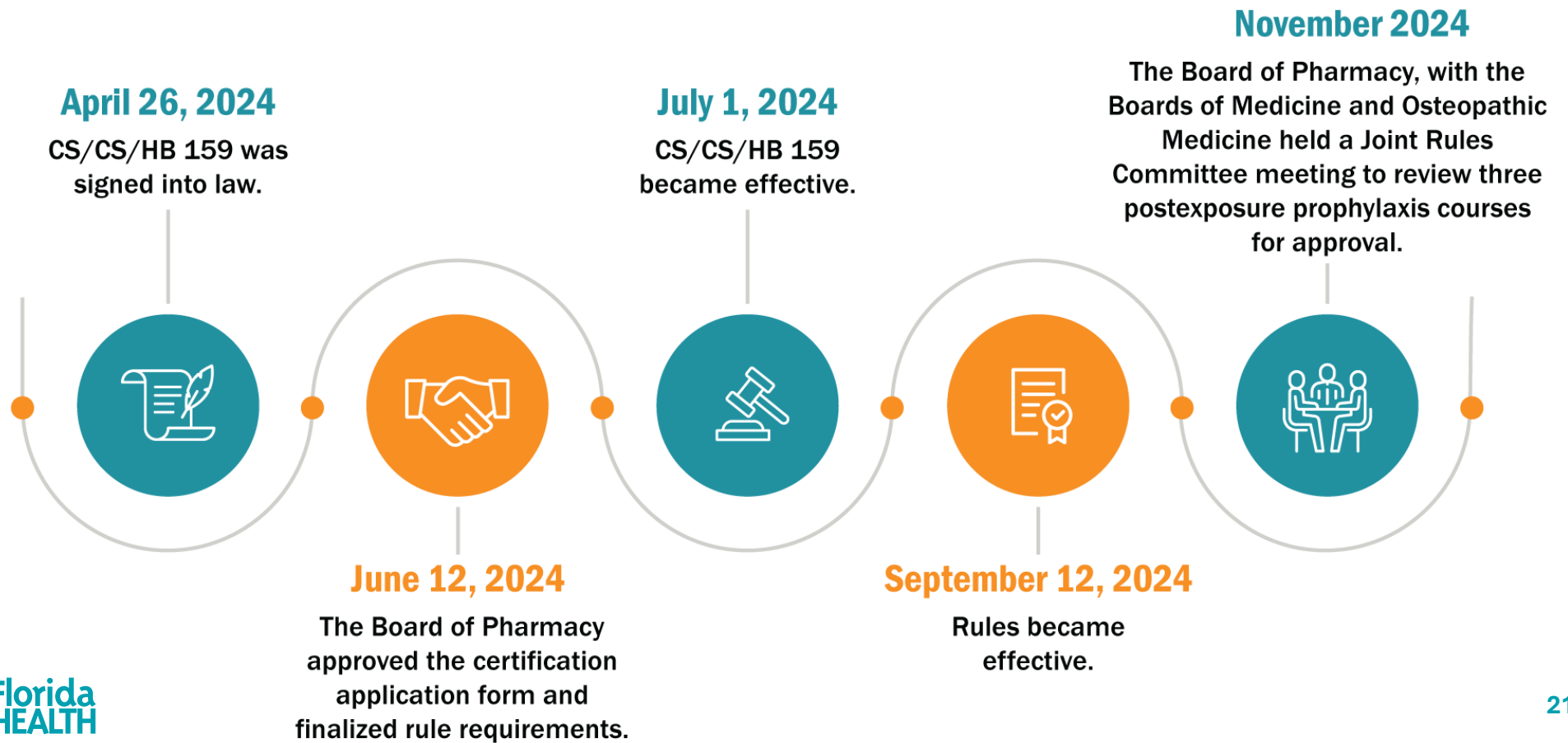


HIV post-exposure prophylaxis certification

Collaborative practice agreements

Pharmacy access-to-care plans

HB 159 HIV Infection Prevention Drugs



HB 1063 Practice of Chiropractic Medicine

June 26, 2024



CS/CS/HB 1063 signed into law.

August 18, 2024



Florida Board of Chiropractic Medicine approved application for Dry Needling Certification and amended application for Licensure by Examination. Subcommittee for Dry Needling Credentialing established.

September 25, 2024



Notice of Rule Development published for Rule 64B2-11.001, F.A.C., and Rule 64B2-17.004, F.A.C.

October 1, 2024



Board offices review and resume processing of pending applicants with non-U.S. bachelor's degrees.

DIVISION OF
**Public Health Statistics
and Performance Management**

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**Florida
HEALTH**

SB 7016 FRAME Legislative Changes

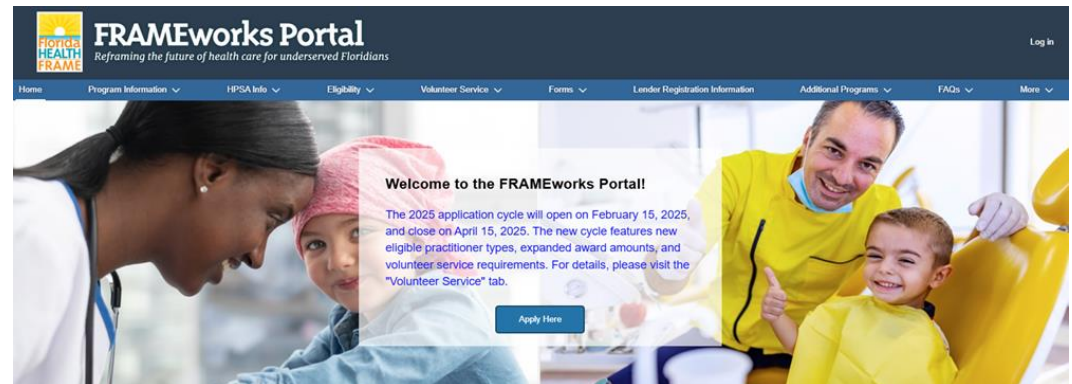
Florida Reimbursement Assistance for Medical Education (FRAME) Program and Dental Loan Repayment Program

- 
- Establishes new award limits and participation requirements for applicants
 - Expands the scope of the FRAME program
 - Expands the scope of the dental loan repayment program
 - Establishes new award limits and participation requirements for applicants to the dental program
 - Establishes an annual 25-hour volunteer service requirement to be eligible to either program

SB 7016 FRAME Programs

System Upgrades In Progress

- Volunteer service modules deployed October 2024
- Initial volunteer service opportunity search deployed to website
- Balance of system enhancements planned for release February 2025



SB 7016 FRAME Programs

Volunteer Requirements

- Draft volunteer service form posted September 2024
- Stakeholder outreach (applicants, associations, volunteer sites) begun August 1, 2024, and is ongoing
- Initial website resources posted July 1, 2024

Other Requirements

- Annual report submitted to the Governor, President of the Senate, and Speaker of the House of Representatives on July 1, 2024
- Executed agreement with the Florida State University College of Medicine for the independent third-party evaluation of the FRAME program
- Executed agreement with 3RNET Provider Retention and Information System Management (PRISM) to collect and measure outcomes of programs

SB 7016 Cinotti Grant Program

Dr. and Mrs. Alfonse and Kathleen Cinotti Health Care Screening and Services Grant Program

Expands access to no-cost health care screenings or services for the public facilitated by nonprofit entities

Grants can be used for the following types of screenings, including referrals for treatment or related services:

Hearing

Vision

Dental

Cancer

Diabetes

Renal Disease

COPD

Hypertension

Heart Disease

Stroke

Scoliosis

SB 7016 Cinotti Grant Program

Screening and Services Grant Program and Portal

- Accepted applications from August 1 - September 3, 2024
- 54 applications were fully submitted, and are under review
- Health care screening portal is in development and will display screenings or services that are of no or reduced cost
- Licensed health care practitioners can use the website to identify volunteer opportunities
- Portal link will be prominently placed on DOH website and promoted by county health departments

SB 7016 Volunteer Health Care Provider Program

Expands Eligibility for Florida Residents

- Increases access to health care for uninsured and underserved low-income residents
- New eligibility requirements to increase the maximum income a client may have from 200% to 300% of the federal poverty level

Implementation

- Memo sent in May 2024 to all providers advising of change
- Notice of proposed rule published November 7, 2024



SB 7072 Cancer Funding

Issue Cancer Innovation Fund grants for FY 2024-25: \$60 million

To continue to provide support for the Cancer Connect Collaborative

The Collaborative are tasked with creating a long-range comprehensive plan.

Annual cancer report due in July following submission to both the Cancer Control and Research Advisory Board and the Collaborative

Update Cancer Center allocation agreements to include additional reporting

SB 7072 Cancer Funding Implementation

- Collaborative must solicit input from cancer centers, research institutions, biomedical education institutions, hospitals, and medical providers
- Council meetings held August 20, 2024, and November 20, 2024
- Cancer Innovation Fund Funding Opportunity released October 25, 2024
- Plan submitted in December 2024
- Application period will be on a rolling basis with awards being announced throughout March - April 2025

Long-Range Comprehensive Plan



Expansion to include a broader pool of Florida-based cancer centers, research institutions, biomedical education institutions, hospitals, and medical providers to receive funding



Evaluation to determine metrics that focus on patient outcomes, quality of care, and efficacy of treatment



Compilation of best practices relating to cancer research or treatment

SB 7018 Health Care Innovation



Establishes the **Health Care Innovation Council** to explore and promote innovations in health care delivery and technology

Creates a **revolving loan program** to fund the implementation of innovative health care solutions

Defines the roles of the Department of Health in supporting the council's activities and administering the loan program

Focus of improving health care quality, reduce costs, and enhance access through scalable, replicable solutions

SB 7018 Health Care Innovation



Council Formation and Strategy Development

- Identify and authorize necessary staff and facilities to support the council
- Establish council structure and processes
- Identified core program objectives

Q2 2024



Program Design and Framework Drafting

- Drafted loan program framework
- Develop agreements for loan program implementation
- Identified core program objectives

Q3 2024



Council Inauguration and Orientation

- An orientation meeting held in fall of 2024 to establish expectations for the members, prior to regular meetings to fulfill the council's duties
- **Initial meeting held November 19, 2024**

Q4 2024



Council Mission and Vision Development

- Council reconvenes to refine mission and vision
- Aligns goals with state health care priorities
- Establish and approve criteria for successful program outcomes

Q1 2025



Initial Loan Cycle Launch

- Open first round of loan applications
- Council review process begins
- Program outreach to innovators expands

Q2 2025

SB 1582 Andrew John Anderson Pediatric Rare Disease Grant Program



Creates the Andrew John Anderson Pediatric Rare Disease Grant Program



Directs DOH to administer grant program for FY 2024-25: \$500,000



Requires DOH to consult the Rare Disease Advisory Council (RDAC) in determining which research proposals to fund



Following a peer review process, RDAC makes grant funding award recommendations to ensure awards are based on scientific merit

SB 1582 Andrew John Anderson Pediatric Rare Disease Grant Program Implementation

Grant Applications

RDAC will receive applications that have been preliminarily peer-reviewed and scored by an independent third-party evaluator contracted by DOH and will recommend which applications should be funded

Conflict-of-Interest Policy

Approved by RDAC on October 7, 2024, grant guidelines require members to disclose any conflicts of interest before the review process begins, and recuse themselves from discussions, evaluations, and voting, and document those actions

2024-25 Funding, \$500,000

Released November 2024, the funding announcement is used to solicit applications for grant funding to support innovative research projects

FLORIDA DEPARTMENT OF HEALTH

Bill Implementation Update

Florida
HEALTH

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Director
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SB 7016 Health Care – Telehealth: Maternity Care Program

- Expanded pilot program (Duval and Orange counties) outlined in section 383.2163, F.S., to establish a statewide telehealth maternity care program that expands the capacity for health interventions that support positive maternal health outcomes
- DOH identified providers in 15 regions based on hospital maternal level of care designations, neonatal intensive care unit levels, and experience of community-based organizations to screen and treat common pregnancy-related complications
- Contract negotiations and execution underway



HB 415 Pregnancy and Parenting Resources Website



- Domain name(s) has been secured
- Florida Department of Health, Florida Department of Children and Families, and Florida Agency for Health Care Administration have identified resources and consolidated information for use on the new website
- All information for the site has been compiled and is placed in a staging/development environment
- Additional enhancements are being identified for implementation, in addition to requirements of the legislation

SB 168 Congenital Cytomegalovirus Screenings

cCMV Screening Expansion, July 1, 2024

Requires Children Diagnosed with cCMV

- Deemed eligible and referred to the Early Steps Program

Completed Activities

- Updates to the Newborn Screening Program data system
- Provision of three stakeholder education webinars
- Updates to guidance documents
- Addition of one full-time staff position in Newborn Hearing Screening Program



FOR NEWBORNS
WHO

- Fail the hearing screen
- Anticipated neonatal intensive care unit stay of three weeks or more
- Transferred to another facility for a higher level of care

HB 7085 Sickle Cell Disease

Sickle Cell Registry

Requires newborns identified through newborn screening as having sickle cell disease, or carrying a sickle cell trait, be included in a statewide registry, unless parents opt-out.

Completed Activities

- Development of an opt-out process and form
- Updates to the Newborn Screening Program data system
- Parent notification of identified newborns of the option to opt-out of inclusion in the Sickle Cell Registry
- Addition of two full-time Sickle Cell Registry follow-up staff within the Newborn Screening Program

HB 7085 Sickle Cell Disease

Section 1 Sickle Cell Disease Research and Treatment Grant Program

Award grants to community-based medical treatment and research centers, per section 381.814, F.S.
Program funding: \$10 million.

Project Areas

Sickle Cell Disease
Workforce
Development and
Education

Sickle Cell Disease
Treatment Centers of
Excellence

Section 2 Sickle Cell Disease Registry

Establish and maintain a registry for individuals carrying a sickle cell disease or sickle cell trait, amends section 383.147, F.S.

HB 7085 Sickle Cell Disease

Section 1 Implementation

Established the Sickle Cell Disease Research and Treatment Grant Program and implemented an application process. Identified five funding recipients:

Workforce Development and Education

- Foundation for Sickle Cell Disease Research \$2,661,273
- Sickle Cell Foundation \$151,453

Treatment Centers of Excellence

- Foundation for Sickle Cell Disease Research \$4,531,350
- South Broward Hospital District \$1,899,607
- UM Jackson Lifespan Sickle Cell Center of Excellence \$756,315

HB 7085 Sickle Cell Disease

Section 2 Implementation

Sickle Cell Registry

- Contracted with a community-based sickle cell disease medical treatment and research center
- Coordinated with DOH Newborn Screening Program

Next Steps

- Evaluate recipients' performance
- Evaluate the progress toward meeting the grant objectives
- Develop a comprehensive annual report

SB 544 Swimming Lesson Voucher Program

Requires DOH to Issue Vouchers to Eligible Families and Establish Network of Providers

- Vendor registration and voucher request portal launched September 2024
- **9,992 applications have been submitted for the 3,500 available vouchers**
- 86 facilities (with multiple instructors/facilities) have enrolled
- Family satisfaction survey will be sent once lessons are completed
- Evaluation of program will be completed spring of 2025

