Second Engrossed

	1
1	A bill to be entitled
2	An act relating to health care; providing
3	legislative intent and findings with respect to
4	the Medical Quality Assurance Trust Fund and
5	function administered by the Department of
6	Health; requiring the Auditor General to do a
7	followup Medical Quality Assurance audit and
8	issue a report to the Legislature; requiring
9	the Department of Health to reimburse the
10	Agency for Health Care Administration for
11	certain costs; requiring the Office of Program
12	Policy Analysis and Government Accountability
13	to study the feasibility of maintaining the
14	Medical Quality Assurance function within a
15	single department and issue a report to the
16	Legislature; amending s. 456.004, F.S.;
17	providing requirements for rules relating to
18	biennial renewal of licenses; amending s.
19	456.025, F.S.; revising requirements relating
20	to the setting and use of fees for the
21	regulation of health care professions and
22	practitioners, including continuing education
23	fees; providing for an electronic continuing
24	education tracking system; repealing s.
25	458.31151, F.S.; repealing obsolete provisions;
26	amending s. 457.107, F.S.; for clarification of
27	acupuncture fees; amending s. 483.807, F.S.;
28	relating to clinical laboratory personnel fees;
29	amending s. 456.011, F.S.; requiring board
30	meetings to be conducted through
31	teleconferencing or other technological means

Second Engrossed

1	except under certain circumstances; amending s.
2	456.013, F.S.; requiring the department to
3	charge initial license fees; amending s.
4	456.017, F.S.; providing for administration of
5	national examinations and termination of
6	state-administered written examinations;
7	providing for administration of
8	state-administered practical or clinical
9	examinations if paid for in advance by the
10	examination candidates; providing legislative
11	intent with respect to the use of national
12	examinations; providing for electronic access
13	to and posting of examination scores under
14	certain conditions; providing for the sharing
15	of examinations or examination item banks with
16	certain entities; clarifying circumstances
17	under which candidates may bring a challenge;
18	providing for electronic administration of
19	certain laws and rules examinations; amending
20	s. 456.035, F.S.; providing for electronic
21	notification of a licensee's current mailing
22	address and place of practice; amending s.
23	456.073, F.S.; authorizing a letter of guidance
24	in lieu of a finding of probable cause under
25	certain conditions; amending s. 456.081, F.S.;
26	providing for the posting of newsletters on the
27	department's website; amending s. 456.072,
28	F.S.; revising and providing grounds for
29	discipline of licensees; revising and providing
30	disciplinary actions; amending s. 456.079,
31	F.S.; requiring mitigating or aggravating
	2

1	circumstances to be in the final order to be
2	considered in the imposition of penalties;
3	amending ss. 457.109, 458.320, 458.331,
4	458.345, 458.347, 459.0085, 459.015, 459.022,
5	460.413, 461.013, 462.14, 463.016, 464.018,
б	465.008, 465.016, 466.028, 466.037, 467.203,
7	468.1295, 468.1755, 468.217, 468.365, 468.518,
8	468.719, 468.811, 478.52, 480.046, 483.825,
9	483.901, 484.014, 484.056, 486.125, 490.009,
10	and 491.009, F.S.; revising and conforming
11	provisions relating to disciplinary grounds and
12	penalties; amending s. 458.315, F.S.; revising
13	the procedure for obtaining a temporary permit;
14	amending 459.0075, F.S.; revising the procedure
15	for obtaining a limited license; providing
16	requirements for the Board of Medicine in
17	issuing temporary certificates; amending s.
18	456.065, F.S.; requiring the unlicensed
19	activity fee to be in addition to all other
20	fees collected from each licensee; amending ss.
21	458.347 and 459.022, F.S.; allowing authorized
22	physician assistants to prescribe any
23	medication not listed on a formulary
24	established by the Council on Physician
25	Assistants; allowing authorized physician
26	assistants to dispense drug samples pursuant to
27	proper prescription; eliminating the formulary
28	committee and revising provisions relating to
29	creation and amendment of the formulary, to
30	conform; amending s. 456.003, F.S.; providing a
31	limitation on the duties of certain boards;
	3

1	www.setable.com
1	providing for the Agency for Health Care
2	Administration to create the Organ Transplant
3	Task Force to study organ transplantation
4	programs; requiring the task force to study and
5	make recommendations on the necessity of the
6	issuance of certificates of need for such
7	programs and funding for organ transplantation;
8	providing a date for the task force to report
9	to the Governor and the Legislature; amending
10	s. 409.9205, F.S.; transferring positions in
11	the Medicaid Fraud Control Unit of the
12	Department of Legal Affairs to Career Services;
13	amending s. 483.245, F.S.; prohibiting rebate
14	or split-fee arrangements with dialysis
15	facilities for patient referrals to clinical
16	laboratories; providing penalties; amending s.
17	232.435, F.S.; providing training requirements
18	for a first responder and teacher athletic
19	trainer; amending s. 383.14, F.S.; amending
20	screening requirements for postnatal screening;
21	amending s. 395.0197, F.S.; revising provisions
22	relating to hospital and ambulatory surgical
23	center internal risk management programs;
24	modifying requirements for risk management and
25	prevention education and training; restricting
26	participation of unlicensed persons in surgical
27	procedures; requiring ongoing evaluation of
28	surgical procedures and protocols; eliminating
29	an annual report summarizing facility incident
30	reports and disciplinary actions; requiring the
31	Agency for Health Care Administration to

4

Second Engrossed

1	publish website summaries of adverse incident
2	reports; requiring facility reporting of
3	allegations of sexual misconduct by health care
4	practitioners; providing certain civil
5	liability for licensed risk managers;
6	prohibiting intimidation of a risk manager;
7	providing a penalty; amending s. 395.10972,
8	F.S.; increasing membership on the Health Care
9	Risk Management Advisory Council; amending s.
10	395.701, F.S.; limiting the financial
11	information the agency may require to determine
12	the amount of hospital annual assessments;
13	amending s. 409.905, F.S.; providing that the
14	Agency for Health Care Administration may
15	restrict the provision of mandatory services by
16	mobile providers; amending s. 409.906, F.S.;
17	providing that the agency may restrict or
18	prohibit the provision of services by mobile
19	providers; providing that Medicaid will not
20	provide reimbursement for dental services
21	provided in mobile dental units, except for
22	certain units; amending s. 456.013, F.S.;
23	providing a professional continuing education
24	requirement relating to prevention of medical
25	errors; amending s. 456.057, F.S.; providing
26	for appointment of a records custodian under
27	certain circumstances; amending s. 456.063,
28	F.S.; requiring licensed health care
29	practitioners to report to the Department of
30	Health any allegations of sexual misconduct;
31	amending s. 456.072, F.S.; providing additional
	5

Second Engrossed

1	grounds for disciplinary actions; clarifying a
2	penalty involving restriction of professional
3	practice or license; providing additional
4	penalties; requiring assessment of costs
5	related to investigation and prosecution;
6	amending s. 456.073, F.S.; requiring the
7	Department of Health to notify the patient or
8	legal representative of the status of a
9	disciplinary case; requiring the department to
10	provide certain information to the complainant;
11	providing time limitations on the filing of
12	administrative complaints against licensees of
13	the department; amending s. 456.074, F.S.;
14	providing for an emergency order suspending the
15	license of a practitioner for fraud; amending
16	s. 456.077, F.S.; specifying violations for
17	which the Department of Health or a regulatory
18	board may issue citations; amending s. 456.081,
19	F.S.; requiring the Department of Health and
20	regulatory boards to maintain a website
21	containing specified information; amending ss.
22	458.331 and 459.015, F.S.; conforming language
23	and cross references to changes made by the
24	act; amending s. 641.51, F.S.; revising adverse
25	determination provisions; amending ss. 465.019
26	and 465.0196, F.S.; requiring institutional
27	pharmacies and special pharmacy permittees that
28	use pharmacy technicians to have a written
29	policy and procedures manual; directing the
30	Department of Health and the Agency for Health
31	Care Administration to review health care

б

Second Engrossed

1	practitioner and facility reporting	
2	requirements; requiring a report to the	
3	Legislature; amending s. 468.1755, F.S.;	
4	providing an additional ground for disciplinary	
5	action against a nursing home administrator;	
6	reenacting ss. 468.1695(3) and 468.1735, F.S.,	
7	to incorporate said amendment in references;	
8	reenacting s. 484.056(1)(a), F.S., relating to	
9	disciplinary action against hearing aid	
10	specialists, to incorporate the amendment to s.	
11	456.072(1), in a reference; amending s.	
12	766.101, F.S.; providing that a continuous	
13	quality improvement committee of a licensed	
14	pharmacy is a medical review committee for	
15	purposes of immunity from liability, and	
16	reenacting ss. 440.105(1)(a) and 626.989(6),	
17	F.S., to incorporate said amendment in	
18	references; amending s. 766.1115, F.S.;	
19	conforming provisions and cross-references to	
20	changes made by the act; amending s. 456.047,	
21	F.S.; providing intent; revising and providing	
22	definitions; revising duties of the Department	
23	of Health relating to file maintenance;	
24	providing that primary source data verified by	
25	the department or its designee may be relied	
26	upon to meet accreditation purposes; amending	
27	s. 232.61, F.S.; requiring the Florida High	
28	School Activities Association to adopt bylaws	
29	which require students participating in	
30	interscholastic athletic competition or who are	
31	candidates for an interscholastic athletic team	
	7	
	l	

Second Engrossed

1	to satisfactorily pass a medical evaluation
2	prior to participating in interscholastic
3	athletic competition or engaging in practice
4	with an interscholastic athletic team;
5	providing requirements with respect to such
6	evaluation; amending s. 240.4075, F.S.;
7	transferring the Nursing Student Loan
8	Forgiveness Program from the Department of
9	Education to the Department of Health;
10	including public schools, family practice
11	teaching hospitals, and specialty hospitals for
12	children as eligible facilities under the
13	program; exempting such facilities from the
14	fund-matching requirements of the program;
15	amending s. 240.4076, F.S.; transferring the
16	nursing scholarship program from the Department
17	of Education to the Department of Health;
18	providing requirements under the program for
19	students seeking to qualify for a nursing
20	faculty position and receive credit for work in
21	such a position; including nursing homes,
22	hospitals, public schools, colleges of nursing,
23	and community college nursing programs as
24	eligible facilities under the program;
25	transferring powers, duties, functions, rules,
26	records, personnel, property, and
27	appropriations and other funds relating to the
28	Nursing Student Loan Forgiveness Program and
29	the nursing scholarship program from the
30	Department of Education to the Department of
31	Health; amending s. 464.005, F.S.; providing
	8
	°

CODING:Words stricken are deletions; words <u>underlined</u> are additions.

Second Engrossed

CS for SB 1558

1	for future relocation of the headquarters of
2	the Board of Nursing; amending s. 464.008,
3	F.S.; revising education requirements for
4	licensure by examination; amending s. 464.009,
5	F.S.; revising requirements for licensure by
б	endorsement; requiring submission of
7	fingerprints for a criminal history check and a
8	fee to cover the costs of such check; providing
9	for an electronic applicant notification
10	process; creating s. 464.0195, F.S.; creating
11	the Florida Center for Nursing and providing
12	its goals; creating s. 464.0196, F.S.;
13	providing for a board of directors; providing
14	for appointment of board members; providing for
15	staggered terms; providing powers and duties;
16	authorizing per diem and travel expenses;
17	creating s. 464.0197, F.S.; declaring state
18	budget support for the center; prohibiting the
19	Board of Nursing from developing any rule
20	relating to faculty/student clinical ratios
21	until a specified time; requiring the Board of
22	Nursing and the Department of Education to
23	submit to the Legislature an implementation
24	plan detailing the impact and cost of any such
25	proposed rule change; amending s. 464.0205,
26	F.S.; deleting the application and processing
27	fee for applicants for a retired volunteer
28	nurse certificate; requiring study by Office of
29	Program Policy Analysis and Government
30	Accountability of the feasibility of
31	maintaining all of Medical Quality Assurance in
	9

Second Engrossed

1	one state agency; creating s. 456.0375, F.S.;
2	requiring registration of certain clinics;
3	providing requirements, including fees;
4	providing rulemaking authority; requiring
5	medical directors or clinic directors for such
6	clinics and providing their duties and
7	responsibilities; providing an appropriation;
8	amending s. 456.031, F.S.; providing an
9	alternative by which licensees under ch. 466,
10	F.S., relating to dentistry, may comply with a
11	general requirement that they take
12	domestic-violence education courses; amending
13	s. 456.033, F.S.; providing an alternative by
14	which such licensees may comply with a general
15	requirement that they take AIDS/HIV education
16	courses; amending s. 627.419, F.S.; providing
17	for appeals from certain adverse determinations
18	relating to dental service claims; providing
19	applicability; amending s. 468.302, F.S.;
20	revising a provision relating to exemption from
21	certification to use radiation on human beings;
22	providing training requirements; amending ss.
23	468.352, 468.355, 468.357, 468.358, and
24	468.359, F.S.; revising definitions and
25	provisions relating to licensure and use of
26	titles and abbreviations to correct and conform
27	terminology with respect to respiratory
28	therapists and respiratory care practitioners;
29	amending ss. 468.1155 and 468.1215, F.S.;
30	revising requirements for licensure to practice
31	speech-language pathology or audiology and for
	10

CODING:Words stricken are deletions; words <u>underlined</u> are additions.

Second Engrossed

1	certification of speech-language pathology or
2	audiology assistants; amending s. 480.033,
3	F.S.; correcting terminology in the definition
4	of "massage"; amending s. 484.002, F.S.;
5	amending and creating definitions; amending ss.
6	484.002, 484.006, 484.012, F.S.; replacing
7	references to the term "medical doctor" with
8	the term "allopathic or osteopathic physician";
9	amending s. 484.013, F.S.; increasing the
10	penalty for certain acts involving preparation
11	or dispensing of optical devices; amending s.
12	921.0022, F.S.; providing for the ranking of
13	such offense on the offense severity ranking
14	chart; amending s. 484.015, F.S.; revising
15	inspection authority; amending s. 484.0445,
16	F.S.; removing certain provisions relating to
17	the training program for hearing aid
18	specialists; amending s. 484.045, F.S.;
19	revising requirements for licensure as a
20	hearing aid specialist by examination; amending
21	s. 490.012, F.S.; prohibiting the use of
22	certain titles or descriptions relating to the
23	practice of psychology or school psychology
24	unless properly licensed; providing penalties;
25	amending s. 490.014, F.S.; revising exemptions
26	from regulation under ch. 490, F.S., relating
27	to psychology; correcting a cross-reference;
28	amending s. 491.012, F.S.; revising
29	prohibitions against unlicensed practice of
30	clinical social work, marriage and family
31	therapy, and mental health counseling to
	11
	11

1	provide that practice by registered interns is
2	lawful; amending s. 491.014, F.S.; revising
3	exemptions from licensure under ch. 491, F.S.,
4	relating to clinical, counseling, and
5	psychotherapy services, to prohibit the use by
6	certain employees of titles, names, or
7	descriptions protected by the chapter; amending
8	ss. 458.319, 459.008, and 765.102, F.S.;
9	conforming terminology relating to palliative
10	care; amending s. 765.101, F.S.; redefining the
11	term "end-stage condition" with respect to
12	health care advance directives; creating s.
13	765.1025, F.S.; prescribing the content and
14	suitability of palliative care; amending s.
15	765.1103, F.S.; revising provisions relating to
16	compliance with requests for pain management
17	and palliative care; amending s. 765.205, F.S.;
18	prescribing the standards of decisionmaking to
19	be used in certain circumstances by health care
20	surrogates, persons who have durable powers of
21	attorney for health care, and proxy
22	decisionmakers; amending s. 765.401, F.S.;
23	prescribing the standards of decisionmaking to
24	be used in certain circumstances by proxy
25	decisionmakers; requiring the Department of
26	Health to conduct an interim study on specialty
27	certification and provide a report to the
28	Legislature; amending s. 499.012, F.S.;
29	authorizing transfer of prescription drugs
30	between a retail pharmacy and a Modified Class
31	II institutional pharmacy under a retail
	1.2

CODING:Words stricken are deletions; words <u>underlined</u> are additions.

12

Second Engrossed

1	pharmacy wholesaler's permit; providing
2	legislative intent; amending ss. 395.3025,
3	400.1415, and 456.057, F.S.; prohibiting the
4	use of a patient's medical records for purposes
5	of solicitation and marketing absent a specific
6	written release or authorization; providing
7	penalties; creating s. 626.9651, F.S.;
8	requiring the Department of Insurance to adopt
9	rules governing the use of a consumer's
10	nonpublic personal financial and health
11	information; providing standards for the rules;
12	amending s. 400.141, F.S.; prescribing duties
13	of nursing homes with respect to influenza and
14	pneumococcal polysaccharide vaccinations;
15	providing rulemaking authority; establishing
16	the Office of Community Partners within the
17	Department of Health to provide for delivery of
18	social services through eligible private
19	organizations and programs; providing procedure
20	for transfer of general revenue funds to match
21	federal funds received by the office; creating
22	s. 458.3147, F.S.; providing automatic
23	admission to any medical school in the State
24	University System for United States Military
25	Academy students or graduates; amending s.
26	409.91188, F.S.; requiring the Agency for
27	Health Care Administration to seek certain
28	waivers to allow certain Medicare beneficiaries
29	to participate in the Medipass HIV disease
30	management program; repealing s. 71(1) of ch.
31	98-171, Laws of Florida; abrogating the repeal
	13

1	of provisions of law which require background
2	screening of certain applicants for licensure,
3	certification, or registration; amending s.
4	766.302, F.S.; clarifying the definition of the
5	term "birth-related neurological injury";
6	amending s. 766.31, F.S.; providing for payment
7	of funeral expenses up to a specified amount;
8	repealing s. 766.308, F.S., which provides for
9	review by a medical advisory panel; amending s.
10	468.805, F.S.; revising grandfathering
11	requirements for licensure to practice
12	orthotics, prosthetics, or pedorthics without
13	meeting statutory educational requirements;
14	repealing s. 1, ch. 99-158, Laws of Florida,
15	relating to a deadline to apply for licensure
16	to practice orthotics, prosthetics, or
17	pedorthics without meeting statutory
18	educational requirements; providing effective
19	dates.
20	
21	Be It Enacted by the Legislature of the State of Florida:
22	
23	Section 1. It is the intent of the Legislature that
24	the Medical Quality Assurance Trust Fund should be
25	administered in a fiscally responsible manner. It is also the
26	intent of the Legislature that the Department of Health reduce
27	expenses wherever possible to ensure that the cost of
28	regulation is reasonable and fair and does not serve as a
29	barrier to licensure in this state. The Legislature adopts
30	findings 1, 2, 4, 5, and 8 and the recommendations of the
31	Auditor General's Medical Quality Assurance Operational Audit
	14
COD	

1	Report Number 01-063. In addition, the Legislature adopts
2	recommendations 1, 2, 4, 5, and 7 of the Florida Senate
3	Committee on Fiscal Policy Interim Project Report 2001-016.
4	Section 2. The Auditor General shall conduct a
5	followup audit to the Medical Quality Assurance Operational
6	Audit Report Number 01-063 to determine if the Department of
7	Health has implemented the recommendations of that report. The
8	Auditor General shall complete the followup audit and issue a
9	report to the President of the Senate and the Speaker of the
10	House of Representatives no later than January 31, 2002.
11	Section 3. The contract between the Department of
12	Health and the Agency for Health Care Administration pursuant
13	to section 20.43(3), Florida Statutes, is not subject to the
14	provisions of section 216.346, Florida Statutes. The
15	Department of Health shall reimburse the Agency for Health
16	Care Administration for the agency's actual direct costs and
17	the agency's indirect costs incurred as a result of the
18	contract, subject to appropriated funds. The agency shall
19	provide to the department documentation, explanation, and
20	justification of all direct and indirect costs incurred, by
21	budget entity.
22	Section 4. The Office of Program Policy Analysis and
23	Government Accountability shall study the feasibility of
24	maintaining the entire Medical Quality Assurance function,
25	including enforcement, within a single department. The study
26	shall be completed and a report issued to the President of the
27	Senate and the Speaker of the House of Representatives no
28	later than November 30, 2001.
29	Section 5. Subsection (1) of section 456.004, Florida
30	Statutes, is amended, and subsection (10) is added to that
31	section, to read:
	15

1	456.004 Department; powers and dutiesThe
2	department, for the professions under its jurisdiction, shall:
3	(1) Adopt rules establishing a procedure for the
4	biennial renewal of licenses; however, the department may
5	issue up to a 4-year license to selected licensees
6	notwithstanding any other provisions of law to the contrary.
7	The rules shall specify the expiration dates of licenses and
8	the process for tracking compliance with continuing education
9	requirements, financial responsibility requirements, and any
10	other conditions of renewal set forth in statute or rule.Fees
11	for such renewal shall not exceed the fee caps for individual
12	professions on an annualized basis as authorized by law.
13	(10) Set an examination fee that includes all costs to
14	develop, purchase, validate, administer, and defend the
15	examination and is an amount certain to cover all
16	administrative costs plus the actual per-applicant cost of the
17	examination.
18	Section 6. Section 456.025, Florida Statutes, is
19	amended to read:
20	456.025 Fees; receipts; disposition
21	(1) It is the intent of the Legislature that all costs
22	of regulating health care professions and practitioners shall
23	be borne solely by licensees and licensure applicants. It is
24	also the intent of the Legislature that fees should be
25	reasonable and not serve as a barrier to licensure. Moreover,
26	it is the intent of the Legislature that the department
27	operate as efficiently as possible and regularly report to the
28	Legislature additional methods to streamline operational
29	costs. Therefore, the boards in consultation with the
30	department, or the department if there is no board, shall, by
31	rule, set renewal fees which:
	16

1	(a) Shall be based on revenue projections prepared
2	using generally accepted accounting procedures;
3	(b) Shall be adequate to cover all expenses relating
4	to that board identified in the department's long-range policy
5	plan, as required by s. 456.005;
6	(c) Shall be reasonable, fair, and not serve as a
7	barrier to licensure;
8	(d) Shall be based on potential earnings from working
9	under the scope of the license;
10	(e) Shall be similar to fees imposed on similar
11	licensure types;
12	(f) Shall not be more than 10% greater than the fee
13	imposed for the previous biennium;
14	(g) Shall not be more than 10% greater than the actual
15	cost to regulate that profession for the previous biennium;
16	and
17	(h) Shall be subject to challenge pursuant to chapter
18	<u>120.</u>
19	(2) The chairpersons of the boards and councils listed
20	in s. 20.43(3)(g), shall meet annually at division
21	headquarters to review the long-range policy plan required by
22	s. 456.005 and current and proposed fee schedules. The
23	chairpersons shall make recommendations for any necessary
24	statutory changes relating to fees and fee caps. Such
25	recommendations shall be compiled by the Department of Health
26	and be included in the annual report to the Legislature
27	required by s. 456.026 as well as be included in the
28	long-range policy plan required by s. 456.005.
29	(2) (1) Each board within the jurisdiction of the
30	department, or the department when there is no board, shall
31	determine by rule the amount of license fees for the
	17
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

profession it regulates, based upon long-range estimates 1 prepared by the department of the revenue required to 2 3 implement laws relating to the regulation of professions by 4 the department and the board. Each board, or the department 5 if there is no board, shall ensure that license fees are 6 adequate to cover all anticipated costs and to maintain a 7 reasonable cash balance, as determined by rule of the agency, 8 with advice of the applicable board. If sufficient action is 9 not taken by a board within 1 year after notification by the department that license fees are projected to be inadequate, 10 the department shall set license fees on behalf of the 11 12 applicable board to cover anticipated costs and to maintain the required cash balance. The department shall include 13 14 recommended fee cap increases in its annual report to the Legislature. Further, it is the legislative intent that no 15 16 regulated profession operate with a negative cash balance. The 17 department may provide by rule for advancing sufficient funds to any profession operating with a negative cash balance. The 18 19 advancement may be for a period not to exceed 2 consecutive years, and the regulated profession must pay interest. 20 Interest shall be calculated at the current rate earned on 21 investments of a trust fund used by the department to 22 23 implement this chapter. Interest earned shall be allocated to the various funds in accordance with the allocation of 24 25 investment earnings during the period of the advance. 26 (3)(2) Each board, or the department if there is no 27 board, may charge a fee not to exceed \$25, as determined by rule, for the issuance of a wall certificate pursuant to s. 28 29 456.013(2) requested by a licensee who was licensed prior to July 1, 1998, or for the issuance of a duplicate wall 30 certificate requested by any licensee. 31

18

1	(4) (3) Each board, or the department if there is no
2	board, may, by rule, assess and collect a one-time fee from
3	each active status licensee and each inactive status licensee
4	in an amount necessary to eliminate a cash deficit or, if
5	there is not a cash deficit, in an amount sufficient to
6	maintain the financial integrity of the professions as
7	required in this section. Not more than one such assessment
8	may be made in any 4-year period without specific legislative
9	authorization.
10	(5) If the cash balance of the trust fund at the end
11	of any fiscal year exceeds the total appropriation provided
12	for the regulation of the health care professions in the prior
13	fiscal year, the boards, in consultation with the department,
14	may lower the license renewal fees.
15	(6)(4) Each board authorized to approve continuing
16	education providers, or the department if there is no board,
17	shall may establish, by rule, a fee not to exceed \$250 for
18	anyone seeking approval to provide continuing education
19	courses <u>or programs</u> and <u>shall</u> may establish by rule a biennial
20	renewal fee not to exceed \$250 for the renewal of providership
21	of such courses. The fees collected from continuing education
22	providers shall be used for the purposes of reviewing course
23	provider applications, monitoring the integrity of the courses
24	provided, covering legal expenses incurred as a result of not
25	granting or renewing a providership, and developing and
26	maintaining an electronic continuing education tracking
27	system. The department shall implement an electronic
28	continuing education tracking system for each new biennial
29	renewal cycle for which electronic renewals are implemented
30	after the effective date of this act and shall integrate such
31	system into the licensure and renewal system. All approved
	19
	ту ТУ

1 <u>continuing education providers shall provide information on</u> 2 <u>course attendance to the department necessary to implement the</u> 3 <u>electronic tracking system. The department shall, by rule,</u> 4 <u>specify the form and procedures by which the information is to</u> 5 <u>be submitted. This subsection does not apply to continuing</u> 6 <u>education courses or providers approved by the board under</u> 7 chapter 465.

8 (7) (5) All moneys collected by the department from 9 fees or fines or from costs awarded to the agency by a court shall be paid into a trust fund used by the department to 10 implement this chapter. The Legislature shall appropriate 11 12 funds from this trust fund sufficient to carry out this chapter and the provisions of law with respect to professions 13 14 regulated by the Division of Medical Quality Assurance within the department and the boards. The department may contract 15 with public and private entities to receive and deposit 16 17 revenue pursuant to this section. The department shall 18 maintain separate accounts in the trust fund used by the 19 department to implement this chapter for every profession within the department. To the maximum extent possible, the 20 department shall directly charge all expenses to the account 21 of each regulated profession. For the purpose of this 22 23 subsection, direct charge expenses include, but are not limited to, costs for investigations, examinations, and legal 24 services. For expenses that cannot be charged directly, the 25 26 department shall provide for the proportionate allocation 27 among the accounts of expenses incurred by the department in the performance of its duties with respect to each regulated 28 29 profession. The regulation by the department of professions, as defined in this chapter, shall be financed solely from 30 revenue collected by it from fees and other charges and 31

20

deposited in the Medical Quality Assurance Trust Fund, and all 1 such revenue is hereby appropriated to the department. 2 3 However, it is legislative intent that each profession shall 4 operate within its anticipated fees. The department may not 5 expend funds from the account of a profession to pay for the expenses incurred on behalf of another profession, except that 6 7 the Board of Nursing must pay for any costs incurred in the 8 regulation of certified nursing assistants. The department 9 shall maintain adequate records to support its allocation of agency expenses. The department shall provide any board with 10 reasonable access to these records upon request. On or before 11 12 October 1 of each year, the department shall provide each board an annual report of revenue and direct and allocated 13 14 expenses related to the operation of that profession. The 15 board shall use these reports and the department's adopted long-range plan to determine the amount of license fees. A 16 17 condensed version of this information, with the department's recommendations, shall be included in the annual report to the 18 19 Legislature prepared under s. 456.026. 20 (8) (6) The department shall provide a condensed management report of budgets, finances, performance 21 22 statistics, and recommendations to each board at least once a 23 quarter. The department shall identify and include in such presentations any changes, or projected changes, made to the 24 board's budget since the last presentation. 25 26 (9) (7) If a duplicate license is required or requested 27 by the licensee, the board or, if there is no board, the department may charge a fee as determined by rule not to 28 29 exceed \$25 before issuance of the duplicate license. (10) (10) (8) The department or the appropriate board shall 30 charge a fee not to exceed \$25 for the certification of a 31 21

public record. The fee shall be determined by rule of the 1 2 department. The department or the appropriate board shall 3 assess a fee for duplicating a public record as provided in s. 4 119.07(1)(a) and (b). 5 Section 7. Subsection (1) of section 457.107, Florida 6 Statutes, is amended to read: 457.107 Renewal of licenses; continuing education .--7 8 (1) The department shall renew a license upon receipt 9 of the renewal application and the required fee set by the board by rule, not to exceed \$500. 10 Section 8. Section 458.31151, Florida Statutes, is 11 12 repealed. Section 9. Subsection (1) of section 483.807, Florida 13 14 Statutes, is amended to read: 483.807 Fees; establishment; disposition.--15 (1) The board, by rule, shall establish fees to be 16 17 paid for application, examination, reexamination, licensing and renewal, registration, laboratory training program 18 19 application, reinstatement, and recordmaking and 20 recordkeeping. The board may also establish, by rule, a delinquency fee. The board shall establish fees that are 21 adequate to ensure the continued operation of the board and to 22 23 fund the proportionate expenses incurred by the department in carrying out its licensure and other related responsibilities 24 under this part. Fees shall be based on departmental estimates 25 26 of the revenue required to implement this part and the 27 provisions of law with respect to the regulation of clinical laboratory personnel. 28 29 Section 10. Subsections (1), (3), and (4) of section 30 456.011, Florida Statutes, are amended to read: 31 2.2 CODING: Words stricken are deletions; words underlined are additions.

456.011 Boards; organization; meetings; compensation 1 2 and travel expenses. --3 (1) Each board within the department shall comply with 4 the provisions of this chapter section. 5 (3) The board shall meet at least once annually and 6 may meet as often as is necessary. Meetings shall be conducted 7 through teleconferencing or other technological means, unless 8 disciplinary hearings involving standard of care, sexual 9 misconduct, fraud, impairment, or felony convictions; licensure denial hearings; or controversial rule hearings are 10 being conducted; or unless otherwise approved in advance of 11 12 the meeting by the director of the Division of Medical Quality 13 Assurance. The chairperson or a quorum of the board shall have 14 the authority to call other meetings, except as provided above 15 relating to in-person meetings. A quorum shall be necessary for the conduct of official business by the board or any 16 17 committee thereof. Unless otherwise provided by law, 51 percent or more of the appointed members of the board or any 18 19 committee, when applicable, shall constitute a quorum. The 20 membership of committees of the board, except as otherwise authorized pursuant to this chapter or the applicable practice 21 22 act, shall be composed of currently appointed members of the 23 board. The vote of a majority of the members of the quorum shall be necessary for any official action by the board or 24 25 committee. Three consecutive unexcused absences or absences 26 constituting 50 percent or more of the board's meetings within 27 any 12-month period shall cause the board membership of the member in question to become void, and the position shall be 28 29 considered vacant. The board, or the department when there is 30 no board, shall, by rule, define unexcused absences. 31 23

1	(4) Unless otherwise provided by law, a board member
2	or former board member serving on a probable cause panel shall
3	be compensated \$50 for each day in attendance at an official
4	meeting of the board and for each day of participation in any
5	other business involving the board. Each board shall adopt
6	rules defining the phrase "other business involving the
7	board," but the phrase may not routinely be defined to include
8	telephone conference calls <u>that last less than 4 hours</u> . A
9	board member also shall be entitled to reimbursement for
10	expenses pursuant to s. 112.061. Travel out of state shall
11	require the prior approval of the secretary.
12	Section 11. Subsection (2) of section 456.013, Florida
13	Statutes, is amended to read:
14	456.013 Department; general licensing provisions
15	(2) Before the issuance of any license, the department
16	<u>shall</u> may charge an initial license fee as determined by rule
17	of the applicable board or, if no such board exists, by rule
18	of the department. Upon receipt of the appropriate license
19	fee, the department shall issue a license to any person
20	certified by the appropriate board, or its designee, as having
21	met the licensure requirements imposed by law or rule. The
22	license shall consist of a wallet-size identification card and
23	a wall card measuring 6 1/2 inches by 5 inches. In addition
24	to the two-part license, the department, at the time of
25	initial licensure, shall issue a wall certificate suitable for
26	conspicuous display, which shall be no smaller than 8 $1/2$
27	inches by 14 inches. The licensee shall surrender to the
28	department the wallet-size identification card, the wall card,
29	and the wall certificate, if one has been issued by the
30	department, if the licensee's license is revoked.
31	
	24
	47

Section 12. Section 456.017, Florida Statutes, is 1 2 amended to read: 3 456.017 Department of Health; examinations.--4 (1)(a) The department shall provide, contract, or 5 approve services for the development, preparation, 6 administration, scoring, score reporting, and evaluation of 7 all examinations, in consultation with the appropriate board. 8 The department shall certify that examinations developed and 9 approved by the department adequately and reliably measure an applicant's ability to practice the profession regulated by 10 the department. After an examination developed or approved by 11 12 the department has been administered, the board, or the department when there is no board, may reject any question 13 14 which does not reliably measure the general areas of 15 competency specified in the rules of the board. The department 16 may contract for the preparation, administration, scoring, score reporting, and evaluation of examinations, when such 17 18 services are available and approved by the board. 19 (b) For each examination developed by the department 20 or contracted vendor, to the extent not otherwise specified by statute, the board, or the department when there is no board, 21 22 shall by rule specify the general areas of competency to be 23 covered by each examination, the relative weight to be assigned in grading each area tested, and the score necessary 24 to achieve a passing grade. The department shall assess, and 25 26 fees, where applicable, to cover the actual cost for any 27 purchase, development, validation, and administration, and defense of required examinations. This subsection does not 28 29 apply to national examinations approved and administered pursuant to paragraph (c). If a practical examination is 30 deemed to be necessary, the rules shall specify the criteria 31 25

by which examiners are to be selected, the grading criteria to 1 be used by the examiner, the relative weight to be assigned in 2 3 grading each criterion, and the score necessary to achieve a 4 passing grade. When a mandatory standardization exercise for a 5 practical examination is required by law, the board, or the department when there is no board, may conduct such exercise. 6 7 Therefore, board members, or employees of the department when 8 there is no board, may serve as examiners at a practical 9 examination with the consent of the board or department, as 10 appropriate.

(c)1. The board, or the department when there is no 11 12 board, shall may approve by rule the use of one or more any 13 national examinations examination which the department has 14 certified as meeting requirements of national examinations and 15 generally accepted testing standards pursuant to department rules. Providers of examinations seeking certification by the 16 17 department shall pay the actual costs incurred by the 18 department in making a determination regarding the 19 certification. The name and number of a candidate may be provided to a national contractor for the limited purpose of 20 preparing the grade tape and information to be returned to the 21 board or department; or, to the extent otherwise specified by 22 23 rule, the candidate may apply directly to the vendor of the national examination and supply test score information to the 24 department. The department may delegate to the board the duty 25 26 to provide and administer the examination. Any national 27 examination approved by a board, or the department when there is no board, prior to October 1, 1997, is deemed certified 28 29 under this paragraph.

- 30
- 31

2. The board, or the department when there is no board, shall approve and begin administering a national

26

examination no later than December 31, 2001. Neither the board 1 2 nor the department may administer a state-developed written 3 examination after December 31, 2001, notwithstanding any other 4 provision of law. The examination may be administered electronically if adequate security measures are used, as 5 6 determined by rule of the department. 7 3. The board, or the department when there is no 8 board, may administer a state-developed practical or clinical 9 examination, as required by the applicable practice act, if all costs of development, purchase, validation, 10 administration, review, and defense are paid by the 11 12 examination candidate prior to the administration of the 13 examination. If a national practical or clinical examination 14 is available and certified by the department pursuant to this 15 section, the board, or the department when there is no board, may administer the national examination. 16 17 4. It is the intent of the Legislature to reduce the costs associated with state examinations and to encourage the 18 19 use of national examinations whenever possible. 20 (d) Each board, or the department when there is no board, shall adopt rules regarding the security and monitoring 21 22 of examinations. The department shall implement those rules 23 adopted by the respective boards. In order to maintain the security of examinations, the department may employ the 24 procedures set forth in s. 456.065 to seek fines and 25 26 injunctive relief against an examinee who violates the 27 provisions of s. 456.018 or the rules adopted pursuant to this paragraph. The department, or any agent thereof, may, for the 28 29 purposes of investigation, confiscate any written, photographic, or recording material or device in the 30 possession of the examinee at the examination site which the 31 27 CODING: Words stricken are deletions; words underlined are additions.

department deems necessary to enforce such provisions or 1 2 rules. The scores of candidates who have taken state-developed 3 examinations shall be provided to the candidates 4 electronically using a candidate identification number, and 5 the department shall post the aggregate scores on the 6 department's website without identifying the names of the 7 candidates. 8 (e) If the professional board with jurisdiction over 9 an examination concurs, the department may, for a fee, share with any other state's licensing authority or a national 10 testing entity an examination or examination item bank 11 12 developed by or for the department unless prohibited by a contract entered into by the department for development or 13 14 purchase of the examination. The department, with the concurrence of the appropriate board, shall establish 15 guidelines that ensure security of a shared exam and shall 16 17 require that any other state's licensing authority comply with 18 those guidelines. Those guidelines shall be approved by the 19 appropriate professional board. All fees paid by the user shall be applied to the department's examination and 20 development program for professions regulated by this chapter. 21 (f) The department may adopt rules necessary to 22 administer this subsection. 23 (2) For each examination developed by the department 24 or a contracted vendor, the board, or the department when 25 26 there is no board, shall adopt rules providing for 27 reexamination of any applicants who failed an examination developed by the department or a contracted vendor. If both a 28 29 written and a practical examination are given, an applicant shall be required to retake only the portion of the 30 examination on which the applicant failed to achieve a passing 31 28

grade, if the applicant successfully passes that portion 1 within a reasonable time, as determined by rule of the board, 2 3 or the department when there is no board, of passing the other 4 portion. Except for national examinations approved and 5 administered pursuant to this section, the department shall provide procedures for applicants who fail an examination 6 7 developed by the department or a contracted vendor to review their examination questions, answers, papers, grades, and 8 9 grading key for the questions the candidate answered 10 incorrectly or, if not feasible, the parts of the examination failed. Applicants shall bear the actual cost for the 11 12 department to provide examination review pursuant to this 13 subsection. An applicant may waive in writing the 14 confidentiality of the applicant's examination grades. Notwithstanding any other provisions, only candidates who fail 15 16 an examination by less than ten percent shall be entitled to 17 challenge the validity of the examination at hearing. 18 (3) For each examination developed or administered by 19 the department or a contracted vendor, an accurate record of each applicant's examination questions, answers, papers, 20 grades, and grading key shall be kept for a period of not less 21 22 than 2 years immediately following the examination, and such 23 record shall thereafter be maintained or destroyed as provided in chapters 119 and 257. This subsection does not apply to 24 national examinations approved and administered pursuant to 25 26 this section. 27 (4) Meetings of any member of the department or of any board within the department held for the exclusive purpose of 28 29 creating or reviewing licensure examination questions or proposed examination questions are exempt from the provisions 30 of s. 286.011 and s. 24(b), Art. I of the State Constitution. 31 29

Any public records, such as tape recordings, minutes, or 1 notes, generated during or as a result of such meetings are 2 3 confidential and exempt from the provisions of s. 119.07(1) 4 and s. 24(a), Art. I of the State Constitution. However, these 5 exemptions shall not affect the right of any person to review б an examination as provided in subsection (2). 7 (5) For examinations developed by the department or a 8 contracted vendor, each board, or the department when there is 9 no board, may provide licensure examinations in an applicant's native language. Notwithstanding any other provision of law, 10 applicants for examination or reexamination pursuant to this 11 12 subsection shall bear the full cost for the department's development, preparation, validation, administration, grading, 13 14 and evaluation of any examination in a language other than English prior to the examination being administered. Requests 15 for translated examinations must be on file in the board 16 17 office at least 6 months prior to the scheduled examination. 18 When determining whether it is in the public interest to allow 19 the examination to be translated into a language other than English, the board shall consider the percentage of the 20 population who speak the applicant's native language. 21 22 Applicants must apply for translation to the applicable board 23 at least 6 months prior to the scheduled examination. (6) In addition to meeting any other requirements for 24 licensure by examination or by endorsement, and 25 26 notwithstanding the provisions in paragraph (1)(c), an 27 applicant may be required by a board, or the department when there is no board, to certify competency in state laws and 28 29 rules relating to the applicable practice act. Beginning October 1, 2001, all laws and rules examinations shall be 30 administered electronically unless the laws and rules 31 30

examination is administered concurrently with another written 1 2 examination for that profession or unless the electronic 3 administration would be substantially more expensive. 4 Section 13. Subsection (1) of section 456.035, Florida 5 Statutes, is amended to read: 6 456.035 Address of record.--7 (1) Each licensee of the department is solely 8 responsible for notifying the department in writing of the 9 licensee's current mailing address and place of practice, as defined by rule of the board or the department if there is no 10 board. Electronic notification shall be allowed by the 11 12 department; however, it shall be the responsibility of the 13 licensee to ensure that the electronic notification was 14 received by the department.A licensee's failure to notify the 15 department of a change of address constitutes a violation of this section, and the licensee may be disciplined by the board 16 17 or the department if there is no board. Section 14. Subsections (2), (4), and (10) of section 18 19 456.073, Florida Statutes, are amended to read: 456.073 Disciplinary proceedings.--Disciplinary 20 proceedings for each board shall be within the jurisdiction of 21 22 the department. 23 (2) The department shall allocate sufficient and adequately trained staff to expeditiously and thoroughly 24 determine legal sufficiency and investigate all legally 25 26 sufficient complaints. For purposes of this section, it is the 27 intent of the Legislature that the term "expeditiously" means that the department complete the report of its initial 28 29 investigative findings and recommendations concerning the existence of probable cause within 6 months after its receipt 30 of the complaint. The failure of the department, for 31 31

disciplinary cases under its jurisdiction, to comply with the 1 2 time limits of this section while investigating a complaint 3 against a licensee constitutes harmless error in any 4 subsequent disciplinary action unless a court finds that either the fairness of the proceeding or the correctness of 5 6 the action may have been impaired by a material error in 7 procedure or a failure to follow prescribed procedure. When 8 its investigation is complete and legally sufficient, the 9 department shall prepare and submit to the probable cause 10 panel of the appropriate regulatory board the investigative report of the department. The report shall contain the 11 12 investigative findings and the recommendations of the department concerning the existence of probable cause. The 13 14 department shall not recommend a letter of guidance in lieu of finding probable cause if the subject has already been issued 15 16 a letter of guidance for a related offense.At any time after 17 legal sufficiency is found, the department may dismiss any case, or any part thereof, if the department determines that 18 19 there is insufficient evidence to support the prosecution of allegations contained therein. The department shall provide a 20 detailed report to the appropriate probable cause panel prior 21 to dismissal of any case or part thereof, and to the subject 22 23 of the complaint after dismissal of any case or part thereof, under this section. For cases dismissed prior to a finding of 24 probable cause, such report is confidential and exempt from s. 25 26 119.07(1). The probable cause panel shall have access, upon 27 request, to the investigative files pertaining to a case prior to dismissal of such case. If the department dismisses a case, 28 29 the probable cause panel may retain independent legal counsel, employ investigators, and continue the investigation and 30 prosecution of the case as it deems necessary. 31

32

(4) The determination as to whether probable cause 1 2 exists shall be made by majority vote of a probable cause 3 panel of the board, or by the department, as appropriate. Each 4 regulatory board shall provide by rule that the determination 5 of probable cause shall be made by a panel of its members or 6 by the department. Each board may provide by rule for multiple 7 probable cause panels composed of at least two members. Each 8 board may provide by rule that one or more members of the 9 panel or panels may be a former board member. The length of term or repetition of service of any such former board member 10 on a probable cause panel may vary according to the direction 11 12 of the board when authorized by board rule. Any probable cause 13 panel must include one of the board's former or present 14 consumer members, if one is available, is willing to serve, 15 and is authorized to do so by the board chair. Any probable 16 cause panel must include a present board member. Any probable 17 cause panel must include a former or present professional board member. However, any former professional board member 18 19 serving on the probable cause panel must hold an active valid 20 license for that profession. All proceedings of the panel are exempt from s. 286.011 until 10 days after probable cause has 21 been found to exist by the panel or until the subject of the 22 23 investigation waives his or her privilege of confidentiality. The probable cause panel may make a reasonable request, and 24 upon such request the department shall provide such additional 25 26 investigative information as is necessary to the determination 27 of probable cause. A request for additional investigative information shall be made within 15 days from the date of 28 29 receipt by the probable cause panel of the investigative report of the department or the agency. The probable cause 30 panel or the department, as may be appropriate, shall make its 31

33

determination of probable cause within 30 days after receipt 1 by it of the final investigative report of the department. The 2 3 secretary may grant extensions of the 15-day and the 30-day 4 time limits. In lieu of a finding of probable cause, the 5 probable cause panel, or the department if there is no board, may issue a letter of guidance to the subject. If, within the 6 7 30-day time limit, as may be extended, the probable cause 8 panel does not make a determination regarding the existence of 9 probable cause or does not issue a letter of guidance in lieu 10 of a finding of probable cause, the department must make a determination regarding the existence of probable cause within 11 12 10 days after the expiration of the time limit. If the 13 probable cause panel finds that probable cause exists, it 14 shall direct the department to file a formal complaint against 15 the licensee. The department shall follow the directions of 16 the probable cause panel regarding the filing of a formal 17 complaint. If directed to do so, the department shall file a formal complaint against the subject of the investigation and 18 19 prosecute that complaint pursuant to chapter 120. However, the 20 department may decide not to prosecute the complaint if it finds that probable cause has been improvidently found by the 21 22 panel. In such cases, the department shall refer the matter to 23 the board. The board may then file a formal complaint and prosecute the complaint pursuant to chapter 120. The 24 department shall also refer to the board any investigation or 25 26 disciplinary proceeding not before the Division of 27 Administrative Hearings pursuant to chapter 120 or otherwise completed by the department within 1 year after the filing of 28 29 a complaint. The department, for disciplinary cases under its jurisdiction, must establish a uniform reporting system to 30 quarterly refer to each board the status of any investigation 31

34

or disciplinary proceeding that is not before the Division of 1 2 Administrative Hearings or otherwise completed by the 3 department within 1 year after the filing of the complaint. 4 Annually, the department, in consultation with the applicable 5 probable cause panel, if there is no board, or each board must 6 establish a plan to expedite reduce or otherwise close any 7 investigation or disciplinary proceeding that is not before 8 the Division of Administrative Hearings or otherwise completed 9 by the department within 1 year after the filing of the 10 complaint. A probable cause panel or a board may retain independent legal counsel, employ investigators, and continue 11 12 the investigation as it deems necessary; all costs thereof shall be paid from a trust fund used by the department to 13 14 implement this chapter. All proceedings of the probable cause panel are exempt from s. 120.525. 15 (10) The complaint and all information obtained 16 17 pursuant to the investigation by the department are confidential and exempt from s. 119.07(1) until 10 days after 18 19 probable cause has been found to exist by the probable cause panel or by the department, or until the regulated 20 professional or subject of the investigation waives his or her 21 privilege of confidentiality, whichever occurs first. Upon 22 23 completion of the investigation and a recommendation by the department to find probable cause, and pursuant to a written 24 request by the subject or the subject's attorney, the 25 26 department shall provide the subject an opportunity to inspect 27 the investigative file or, at the subject's expense, forward to the subject a copy of the investigative file. 28 29 Notwithstanding s. 456.057, the subject may inspect or receive a copy of any expert witness report or patient record 30 connected with the investigation if the subject agrees in 31 35

writing to maintain the confidentiality of any information 1 received under this subsection until 10 days after probable 2 3 cause is found and to maintain the confidentiality of patient 4 records pursuant to s. 456.057. The subject may file a written 5 response to the information contained in the investigative file. Such response must be filed within 20 days of mailing by 6 7 the department, unless an extension of time has been granted 8 by the department. This subsection does not prohibit the 9 department from providing such information to any law 10 enforcement agency or to any other regulatory agency. Section 15. Section 456.081, Florida Statutes, is 11 12 amended to read: 456.081 Publication of information.--The department 13 14 and the boards shall have the authority to advise licensees 15 periodically, through the publication of a newsletter on the 16 department's website, about information that the department or 17 the board determines is of interest to the industry. Unless otherwise prohibited by law, the department and the boards 18 19 shall publish a summary of final orders resulting in 20 disciplinary action fines, suspensions, or revocations, and any other information the department or the board determines 21 22 is of interest to the public. 23 Section 16. Subsection (3) of section 456.079, Florida Statutes, is amended to read: 24 456.079 Disciplinary guidelines.--25 26 (3) A specific finding in the final order of 27 mitigating or aggravating circumstances shall allow the board to impose a penalty other than that provided for in such 28 29 guidelines. If applicable, the board, or the department if there is no board, shall adopt by rule disciplinary guidelines 30 to designate possible mitigating and aggravating circumstances 31 36 CODING: Words stricken are deletions; words underlined are additions.
```
Second Engrossed
```

and the variation and range of penalties permitted for such 1 2 circumstances. 3 Section 17. Subsections (1) and (2) of section 4 457.109, Florida Statutes, are amended to read: 5 457.109 Disciplinary actions; grounds; action by the 6 board.--7 (1) The following acts shall constitute grounds for 8 denial of a license or disciplinary action, as specified in s. 9 456.072(2) which the disciplinary actions specified in subsection (2) may be taken: 10 (a) Attempting to obtain, obtaining, or renewing a 11 12 license to practice acupuncture by bribery, by fraudulent misrepresentations, or through an error of the department. 13 14 (b) Having a license to practice acupuncture revoked, 15 suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, 16 17 territory, or country. 18 (c) Being convicted or found guilty, regardless of 19 adjudication, in any jurisdiction of a crime which directly relates to the practice of acupuncture or to the ability to 20 practice acupuncture. Any plea of nolo contendere shall be 21 considered a conviction for purposes of this chapter. 22 23 (d) False, deceptive, or misleading advertising or 24 advertising which claims that acupuncture is useful in curing 25 any disease. 26 (e) Advertising, practicing, or attempting to practice under a name other than one's own. 27 28 (f) Failing to report to the department any person who 29 the licensee knows is in violation of this chapter or of the 30 rules of the department. 31 37 CODING: Words stricken are deletions; words underlined are additions.

Second Engrossed

CS for SB 1558

1	(g) Aiding, assisting, procuring, employing, or
1 2	advising any unlicensed person to practice acupuncture
3	contrary to this chapter or to a rule of the department.
4	(h) Failing to perform any statutory or legal
5	obligation placed upon a licensed acupuncturist.
6	(i) Making or filing a report which the licensee knows
7	to be false, intentionally or negligently failing to file a
, 8	report or record required by state or federal law, willfully
9	impeding or obstructing such filing or inducing another person
10	to do so. Such reports or records shall include only those
11	which are signed in the capacity as a licensed acupuncturist.
12	(j) Exercising influence within a
13	patient-acupuncturist relationship for purposes of engaging a
14	patient in sexual activity. A patient shall be presumed to be
15	incapable of giving free, full, and informed consent to sexual
16	activity with his or her acupuncturist.
17	(k) Making deceptive, untrue, or fraudulent
18	representations in the practice of acupuncture or employing a
19	trick or scheme in the practice of acupuncture when such
20	scheme or trick fails to conform to the generally prevailing
21	standards of treatment in the community.
22	(1) Soliciting patients, either personally or through
23	an agent, through the use of fraud, intimidation, undue
24	influence, or a form of overreaching or vexatious conduct. A
25	solicitation is any communication which directly or implicitly
26	requests an immediate oral response from the recipient.
27	(m) Failing to keep written medical records justifying
28	the course of treatment of the patient.
29	(n) Exercising influence on the patient to exploit the
30	patient for the financial gain of the licensee or of a third
31	party.
	20
	38

1 (o) Being unable to practice acupuncture with 2 reasonable skill and safety to patients by reason of illness 3 or use of alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical 4 5 condition. In enforcing this paragraph, upon a finding of the 6 secretary or the secretary's designee that probable cause 7 exists to believe that the licensee is unable to serve as an 8 acupuncturist due to the reasons stated in this paragraph, the 9 department shall have the authority to issue an order to compel the licensee to submit to a mental or physical 10 examination by a physician designated by the department. If 11 12 the licensee refuses to comply with such order, the department's order directing such examination may be enforced 13 14 by filing a petition for enforcement in the circuit court 15 where the licensee resides or serves as an acupuncturist. The licensee against whom the petition is filed shall not be named 16 17 or identified by initials in any public court record or 18 document, and the proceedings shall be closed to the public. 19 The department shall be entitled to the summary procedure provided in s. 51.011. An acupuncturist affected under this 20 paragraph shall at reasonable intervals be afforded an 21 opportunity to demonstrate that he or she can resume the 22 23 competent practice of acupuncture with reasonable skill and safety to patients. In any proceeding under this paragraph, 24 neither the record of proceedings nor the orders entered by 25 26 the department shall be used against an acupuncturist in any 27 other proceeding. 28 (p) Gross or repeated malpractice or the failure to 29 practice acupuncture with that level of care, skill, and treatment which is recognized by a reasonably prudent similar 30 31

39

acupuncturist as being acceptable under similar conditions and 1 2 circumstances. 3 (q) Practicing or offering to practice beyond the 4 scope permitted by law or accepting and performing professional responsibilities which the licensee knows or has 5 6 reason to know that he or she is not competent to perform. 7 (r) Delegating professional responsibilities to a 8 person when the licensee delegating such responsibilities 9 knows or has reason to know that such person is not qualified by training, experience, or licensure to perform them. 10 (s) Violating any provision of this chapter, a rule of 11 12 the department, or a lawful order of the board department previously entered in a disciplinary hearing or failing to 13 14 comply with a lawfully issued subpoena of the department. 15 (t) Conspiring with another to commit an act, or committing an act, which would tend to coerce, intimidate, or 16 17 preclude another licensee from lawfully advertising his or her 18 services. 19 (u) Fraud or deceit or gross negligence, incompetence, or misconduct in the operation of a course of study. 20 21 (v) Failing to comply with state, county, or municipal 22 regulations or reporting requirements relating to public 23 health and the control of contagious and infectious diseases. (w) Failing to comply with any rule of the board 24 relating to health and safety, including, but not limited to, 25 the sterilization of needles and equipment and the disposal of 26 potentially infectious materials. 27 28 (x) Violating any provision of this chapter or chapter 29 456, or any rules adopted pursuant thereto. The board may enter an order denying licensure or 30 (2) 31 imposing any of the penalties in s. 456.072(2) against any 40

applicant for licensure or licensee who is found guilty of 1 2 violating any provision of subsection (1) of this section or 3 who is found guilty of violating any provision of s. 4 456.072(1). When the board finds any person guilty of any of 5 the acts set forth in subsection (1), it may enter an order 6 imposing one or more of the following penalties: 7 (a) Refusal to certify to the department an 8 application for licensure. 9 (b) Revocation or suspension of a license. 10 (c) Restriction of practice. (d) Imposition of an administrative fine not to exceed 11 12 \$1,000 for each count or separate offense. 13 (e) Issuance of a reprimand. 14 (f) Placement of the acupuncturist on probation for a 15 period of time and subject to such conditions as the board may 16 specify. 17 Section 18. Subsection (2) of section 458.315, Florida 18 Statutes, is amended to read: 19 458.315 Temporary certificate for practice in areas of 20 critical need.--Any physician who is licensed to practice in any other state, whose license is currently valid, and who 21 pays an application fee of \$300 may be issued a temporary 22 23 certificate to practice in communities of Florida where there is a critical need for physicians. A certificate may be 24 issued to a physician who will be employed by a county health 25 26 department, correctional facility, community health center funded by s. 329, s. 330, or s. 340 of the United States 27 Public Health Services Act, or other entity that provides 28 29 health care to indigents and that is approved by the State Health Officer. The Board of Medicine may issue this 30 temporary certificate with the following restrictions: 31 41

(2) The board may administer an abbreviated oral 1 2 examination to determine the physician's competency, but no 3 written regular examination is necessary. Within 60 days after 4 receipt of an application for a temporary certificate, the board shall review the application and issue the temporary 5 6 certificate or notify the applicant of denial. 7 Section 19. Paragraph (d) is added to subsection (1) 8 of section 459.0075, Florida Statutes, to read: 9 459.0075 Limited licenses.--10 (1) Any person desiring to obtain a limited license shall: 11 12 (d) Within 60 days after receipt of an application for 13 a limited license, the board shall review the application and 14 issue the limited license or notify the applicant of denial. 15 Section 20. Subsection (6) of section 458.320, Florida Statutes, is amended to read: 16 17 458.320 Financial responsibility.--18 (6) Any deceptive, untrue, or fraudulent 19 representation by the licensee with respect to any provision of this section shall result in permanent disqualification 20 from any exemption to mandated financial responsibility as 21 provided in this section and shall constitute grounds for 22 23 disciplinary action under as specified in s. 458.331. Section 21. Subsections (1) and (2) of section 24 458.331, Florida Statutes, are amended to read: 25 26 458.331 Grounds for disciplinary action; action by the 27 board and department. --28 (1) The following acts shall constitute grounds for 29 denial of a license or disciplinary action, as specified in s. 456.072(2) which the disciplinary actions specified in 30 subsection (2) may be taken: 31 42 CODING: Words stricken are deletions; words underlined are additions.

(a) Attempting to obtain, obtaining, or renewing a 1 2 license to practice medicine by bribery, by fraudulent 3 misrepresentations, or through an error of the department or 4 the board. 5 (b) Having a license or the authority to practice 6 medicine revoked, suspended, or otherwise acted against, 7 including the denial of licensure, by the licensing authority 8 of any jurisdiction, including its agencies or subdivisions. 9 The licensing authority's acceptance of a physician's 10 relinquishment of a license, stipulation, consent order, or other settlement, offered in response to or in anticipation of 11 12 the filing of administrative charges against the physician's 13 license, shall be construed as action against the physician's 14 license. 15 (C) Being convicted or found guilty of, or entering a 16 plea of nolo contendere to, regardless of adjudication, a 17 crime in any jurisdiction which directly relates to the 18 practice of medicine or to the ability to practice medicine. 19 (d) False, deceptive, or misleading advertising. 20 (e) Failing to report to the department any person who the licensee knows is in violation of this chapter or of the 21 22 rules of the department or the board. A treatment provider 23 approved pursuant to s. 456.076 shall provide the department or consultant with information in accordance with the 24 requirements of s. 456.076(3), (4), (5), and (6). 25 26 (f) Aiding, assisting, procuring, or advising any 27 unlicensed person to practice medicine contrary to this chapter or to a rule of the department or the board. 28 29 (g) Failing to perform any statutory or legal 30 obligation placed upon a licensed physician. 31 43

1	(h) Making or filing a report which the licensee knows
2	to be false, intentionally or negligently failing to file a
3	report or record required by state or federal law, willfully
4	impeding or obstructing such filing or inducing another person
5	to do so. Such reports or records shall include only those
6	which are signed in the capacity as a licensed physician.
7	(i) Paying or receiving any commission, bonus,
8	kickback, or rebate, or engaging in any split-fee arrangement
9	in any form whatsoever with a physician, organization, agency,
10	or person, either directly or indirectly, for patients
11	referred to providers of health care goods and services,
12	including, but not limited to, hospitals, nursing homes,
13	clinical laboratories, ambulatory surgical centers, or
14	pharmacies. The provisions of this paragraph shall not be
15	construed to prevent a physician from receiving a fee for
16	professional consultation services.
17	(j) Exercising influence within a patient-physician
18	relationship for purposes of engaging a patient in sexual
19	activity. A patient shall be presumed to be incapable of
20	giving free, full, and informed consent to sexual activity
21	with his or her physician.
22	(k) Making deceptive, untrue, or fraudulent
23	representations in or related to the practice of medicine or
24	employing a trick or scheme in the practice of medicine.
25	(1) Soliciting patients, either personally or through
26	an agent, through the use of fraud, intimidation, undue
27	influence, or a form of overreaching or vexatious conduct. A
28	solicitation is any communication which directly or implicitly
29	requests an immediate oral response from the recipient.
30	(m) Failing to keep legible, as defined by department
31	rule in consultation with the board, medical records that
	44
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

identify the licensed physician or the physician extender and 1 supervising physician by name and professional title who is or 2 are responsible for rendering, ordering, supervising, or 3 4 billing for each diagnostic or treatment procedure and that 5 justify the course of treatment of the patient, including, but not limited to, patient histories; examination results; test 6 7 results; records of drugs prescribed, dispensed, or administered; and reports of consultations and 8 hospitalizations. 9

10 (n) Exercising influence on the patient or client in 11 such a manner as to exploit the patient or client for 12 financial gain of the licensee or of a third party, which 13 shall include, but not be limited to, the promoting or selling 14 of services, goods, appliances, or drugs.

(o) Promoting or advertising on any prescription form
of a community pharmacy unless the form shall also state "This
prescription may be filled at any pharmacy of your choice."

(p) Performing professional services which have not been duly authorized by the patient or client, or his or her legal representative, except as provided in s. 743.064, s. 766.103, or s. 768.13.

(q) Prescribing, dispensing, administering, mixing, or 22 23 otherwise preparing a legend drug, including any controlled substance, other than in the course of the physician's 24 professional practice. For the purposes of this paragraph, it 25 26 shall be legally presumed that prescribing, dispensing, 27 administering, mixing, or otherwise preparing legend drugs, including all controlled substances, inappropriately or in 28 29 excessive or inappropriate quantities is not in the best interest of the patient and is not in the course of the 30 31

physician's professional practice, without regard to his or
 her intent.

3 (r) Prescribing, dispensing, or administering any 4 medicinal drug appearing on any schedule set forth in chapter 5 893 by the physician to himself or herself, except one 6 prescribed, dispensed, or administered to the physician by 7 another practitioner authorized to prescribe, dispense, or 8 administer medicinal drugs.

9 (s) Being unable to practice medicine with reasonable skill and safety to patients by reason of illness or use of 10 alcohol, drugs, narcotics, chemicals, or any other type of 11 12 material or as a result of any mental or physical condition. 13 In enforcing this paragraph, the department shall have, upon a 14 finding of the secretary or the secretary's designee that 15 probable cause exists to believe that the licensee is unable to practice medicine because of the reasons stated in this 16 17 paragraph, the authority to issue an order to compel a licensee to submit to a mental or physical examination by 18 19 physicians designated by the department. If the licensee refuses to comply with such order, the department's order 20 directing such examination may be enforced by filing a 21 petition for enforcement in the circuit court where the 22 23 licensee resides or does business. The licensee against whom the petition is filed may not be named or identified by 24 initials in any public court records or documents, and the 25 26 proceedings shall be closed to the public. The department 27 shall be entitled to the summary procedure provided in s. 51.011. A licensee or certificateholder affected under this 28 29 paragraph shall at reasonable intervals be afforded an 30 opportunity to demonstrate that he or she can resume the 31

46

competent practice of medicine with reasonable skill and
 safety to patients.

3 (t) Gross or repeated malpractice or the failure to 4 practice medicine with that level of care, skill, and 5 treatment which is recognized by a reasonably prudent similar physician as being acceptable under similar conditions and 6 7 circumstances. The board shall give great weight to the provisions of s. 766.102 when enforcing this paragraph. As 8 9 used in this paragraph, "repeated malpractice" includes, but is not limited to, three or more claims for medical 10 malpractice within the previous 5-year period resulting in 11 12 indemnities being paid in excess of \$25,000 each to the claimant in a judgment or settlement and which incidents 13 14 involved negligent conduct by the physician. As used in this 15 paragraph, "gross malpractice" or "the failure to practice medicine with that level of care, skill, and treatment which 16 17 is recognized by a reasonably prudent similar physician as being acceptable under similar conditions and circumstances," 18 19 shall not be construed so as to require more than one instance, event, or act. Nothing in this paragraph shall be 20 construed to require that a physician be incompetent to 21 22 practice medicine in order to be disciplined pursuant to this 23 paragraph.

(u) Performing any procedure or prescribing any therapy which, by the prevailing standards of medical practice in the community, would constitute experimentation on a human subject, without first obtaining full, informed, and written consent.

(v) Practicing or offering to practice beyond the
scope permitted by law or accepting and performing
professional responsibilities which the licensee knows or has

47

reason to know that he or she is not competent to perform. The 1 board may establish by rule standards of practice and 2 3 standards of care for particular practice settings, including, 4 but not limited to, education and training, equipment and supplies, medications including anesthetics, assistance of and 5 6 delegation to other personnel, transfer agreements, 7 sterilization, records, performance of complex or multiple 8 procedures, informed consent, and policy and procedure 9 manuals. 10 Delegating professional responsibilities to a (w) person when the licensee delegating such responsibilities 11 12 knows or has reason to know that such person is not qualified by training, experience, or licensure to perform them. 13 14 (x) Violating any provision of this chapter, a rule of 15 the board or department, or a lawful order of the board or 16 department previously entered in a disciplinary hearing or 17 failing to comply with a lawfully issued subpoena of the department. 18 19 (y) Conspiring with another licensee or with any other 20 person to commit an act, or committing an act, which would tend to coerce, intimidate, or preclude another licensee from 21 22 lawfully advertising his or her services. 23 (z) Procuring, or aiding or abetting in the procuring of, an unlawful termination of pregnancy. 24 25 (aa) Presigning blank prescription forms. 26 (bb) Prescribing any medicinal drug appearing on 27 Schedule II in chapter 893 by the physician for office use. 28 (cc) Prescribing, ordering, dispensing, administering, 29 supplying, selling, or giving any drug which is a Schedule II amphetamine or a Schedule II sympathomimetic amine drug or any 30 31 48

compound thereof, pursuant to chapter 893, to or for any 1 2 person except for: 3 The treatment of narcolepsy; hyperkinesis; 1. 4 behavioral syndrome characterized by the developmentally 5 inappropriate symptoms of moderate to severe distractability, short attention span, hyperactivity, emotional lability, and б 7 impulsivity; or drug-induced brain dysfunction; 8 2. The differential diagnostic psychiatric evaluation 9 of depression or the treatment of depression shown to be refractory to other therapeutic modalities; or 10 The clinical investigation of the effects of such 11 3. 12 drugs or compounds when an investigative protocol therefor is 13 submitted to, reviewed, and approved by the board before such 14 investigation is begun. 15 (dd) Failing to supervise adequately the activities of 16 those physician assistants, paramedics, emergency medical 17 technicians, or advanced registered nurse practitioners acting under the supervision of the physician. 18 19 (ee) Prescribing, ordering, dispensing, administering, 20 supplying, selling, or giving growth hormones, testosterone or its analogs, human chorionic gonadotropin (HCG), or other 21 22 hormones for the purpose of muscle building or to enhance 23 athletic performance. For the purposes of this subsection, the term "muscle building" does not include the treatment of 24 injured muscle. A prescription written for the drug products 25 26 listed above may be dispensed by the pharmacist with the 27 presumption that the prescription is for legitimate medical 28 use. 29 (ff) Prescribing, ordering, dispensing, administering, supplying, selling, or giving amygdalin (laetrile) to any 30 31 person. 49

(gg) Misrepresenting or concealing a material fact at
 any time during any phase of a licensing or disciplinary
 process or procedure.

4 (hh) Improperly interfering with an investigation or5 with any disciplinary proceeding.

6 (ii) Failing to report to the department any licensee 7 under this chapter or under chapter 459 who the physician or physician assistant knows has violated the grounds for 8 9 disciplinary action set out in the law under which that person is licensed and who provides health care services in a 10 facility licensed under chapter 395, or a health maintenance 11 12 organization certificated under part I of chapter 641, in 13 which the physician or physician assistant also provides 14 services.

(jj) Being found by any court in this state to have provided corroborating written medical expert opinion attached to any statutorily required notice of claim or intent or to any statutorily required response rejecting a claim, without reasonable investigation.

(kk) Failing to report to the board, in writing, within 30 days if action as defined in paragraph (b) has been taken against one's license to practice medicine in another state, territory, or country.

24 (11) Advertising or holding oneself out as a
25 board-certified specialist, if not qualified under s.
26 458.3312, in violation of this chapter.

(mm) Failing to comply with the requirements of ss.
381.026 and 381.0261 to provide patients with information
about their patient rights and how to file a patient
complaint.

31

50

1	(nn) Violating any provision of this chapter or
2	chapter 456, or any rules adopted pursuant thereto.
3	(2) The board may enter an order denying licensure or
4	imposing any of the penalties in s. 456.072(2) against any
5	applicant for licensure or licensee who is found guilty of
6	violating any provision of subsection (1) of this section or
7	who is found guilty of violating any provision of s.
8	<u>456.072(1).When the board finds any person guilty of any of</u>
9	the grounds set forth in subsection (1), including conduct
10	that would constitute a substantial violation of subsection
11	(1) which occurred prior to licensure, it may enter an order
12	imposing one or more of the following penalties:
13	(a) Refusal to certify, or certification with
14	restrictions, to the department an application for licensure,
15	certification, or registration.
16	(b) Revocation or suspension of a license.
17	(c) Restriction of practice.
18	(d) Imposition of an administrative fine not to exceed
19	\$10,000 for each count or separate offense.
20	(e) Issuance of a reprimand.
21	(f) Placement of the physician on probation for a
22	period of time and subject to such conditions as the board may
23	specify, including, but not limited to, requiring the
24	physician to submit to treatment, to attend continuing
25	education courses, to submit to reexamination, or to work
26	under the supervision of another physician.
27	(g) Issuance of a letter of concern.
28	(h) Corrective action.
29	(i) Refund of fees billed to and collected from the
30	patient.
31	
	51
പറാ	TNG•Words stricken are deletions: words underlined are additions

Imposition of an administrative fine in accordance 1 (j) 2 with s. 381.0261 for violations regarding patient rights. 3 4 In determining what action is appropriate, the board must first consider what sanctions are necessary to protect the 5 б public or to compensate the patient. Only after those 7 sanctions have been imposed may the disciplining authority 8 consider and include in the order requirements designed to 9 rehabilitate the physician. All costs associated with compliance with orders issued under this subsection are the 10 obligation of the physician. 11 12 Section 22. Subsection (2) of section 458.345, Florida Statutes, is amended to read: 13 14 458.345 Registration of resident physicians, interns, 15 and fellows; list of hospital employees; prescribing of 16 medicinal drugs; penalty .--17 (2) The board shall not certify to the department for registration any applicant who is under investigation in any 18 19 state or jurisdiction for an act which would constitute 20 grounds the basis for imposing a disciplinary action under penalty specified in s. 458.331(2)(b)until such time as the 21 22 investigation is completed, at which time the provisions of s. 23 458.331 shall apply. Section 23. Subsection (7) of section 458.347, Florida 24 25 Statutes, is amended to read: 26 458.347 Physician assistants.--(7) PHYSICIAN ASSISTANT LICENSURE.--27 28 The Board of Medicine may impose any of the (q) 29 penalties authorized under specified in ss. 456.072 and 458.331(2) upon a physician assistant if the physician 30 assistant or the supervising physician has been found guilty 31 52 CODING: Words stricken are deletions; words underlined are additions.

of or is being investigated for any act that constitutes a 1 violation of this chapter or chapter 456. 2 3 Section 24. Subsection (6) of section 459.0085, 4 Florida Statutes, is amended to read: 459.0085 Financial responsibility.--5 6 (6) Any deceptive, untrue, or fraudulent 7 representation by the licensee with respect to any provision 8 of this section shall result in permanent disqualification 9 from any exemption to mandated financial responsibility as provided in this section and shall constitute grounds for 10 disciplinary action under as specified in s. 459.015. 11 12 Section 25. Subsections (1) and (2) of section 459.015, Florida Statutes, are amended to read: 13 14 459.015 Grounds for disciplinary action; action by the 15 board and department. --(1) The following acts shall constitute grounds for 16 17 denial of a license or disciplinary action, as specified in s. 456.072(2) which the disciplinary actions specified in 18 19 subsection (2) may be taken: (a) Attempting to obtain, obtaining, or renewing a 20 license to practice osteopathic medicine or a certificate 21 22 issued under this chapter by bribery, by fraudulent 23 misrepresentations, or through an error of the department or the board. 24 25 (b) Having a license or the authority to practice 26 osteopathic medicine revoked, suspended, or otherwise acted 27 against, including the denial of licensure, by the licensing authority of any jurisdiction, including its agencies or 28 29 subdivisions. The licensing authority's acceptance of a physician's relinquishment of license, stipulation, consent 30 order, or other settlement offered in response to or in 31 53

anticipation of the filing of administrative charges against 1 2 the physician shall be construed as action against the 3 physician's license. 4 (c) Being convicted or found guilty, regardless of 5 adjudication, of a crime in any jurisdiction which directly 6 relates to the practice of osteopathic medicine or to the 7 ability to practice osteopathic medicine. A plea of nolo 8 contendere shall create a rebuttable presumption of guilt to 9 the underlying criminal charges. (d) False, deceptive, or misleading advertising. 10 (e) Failing to report to the department or the 11 12 department's impaired professional consultant any person who the licensee or certificateholder knows is in violation of 13 14 this chapter or of the rules of the department or the board. 15 A treatment provider, approved pursuant to s. 456.076, shall provide the department or consultant with information in 16 17 accordance with the requirements of s. 456.076(3), (4), (5), 18 and (6). 19 (f) Aiding, assisting, procuring, or advising any 20 unlicensed person to practice osteopathic medicine contrary to this chapter or to a rule of the department or the board. 21 22 (g) Failing to perform any statutory or legal 23 obligation placed upon a licensed osteopathic physician. (h) Giving false testimony in the course of any legal 24 25 or administrative proceedings relating to the practice of 26 medicine or the delivery of health care services. 27 (i) Making or filing a report which the licensee knows to be false, intentionally or negligently failing to file a 28 29 report or record required by state or federal law, willfully impeding or obstructing such filing, or inducing another 30 person to do so. Such reports or records shall include only 31 54

those which are signed in the capacity as a licensed
 osteopathic physician.

3 (j) Paying or receiving any commission, bonus, 4 kickback, or rebate, or engaging in any split-fee arrangement 5 in any form whatsoever with a physician, organization, agency, person, partnership, firm, corporation, or other business 6 7 entity, for patients referred to providers of health care goods and services, including, but not limited to, hospitals, 8 9 nursing homes, clinical laboratories, ambulatory surgical centers, or pharmacies. The provisions of this paragraph 10 shall not be construed to prevent an osteopathic physician 11 12 from receiving a fee for professional consultation services. 13 (k) Refusing to provide health care based on a

14 patient's participation in pending or past litigation or 15 participation in any disciplinary action conducted pursuant to 16 this chapter, unless such litigation or disciplinary action 17 directly involves the osteopathic physician requested to 18 provide services.

(1) Exercising influence within a patient-physician relationship for purposes of engaging a patient in sexual activity. A patient shall be presumed to be incapable of giving free, full, and informed consent to sexual activity with his or her physician.

(m) Making deceptive, untrue, or fraudulent representations in or related to the practice of osteopathic medicine or employing a trick or scheme in the practice of osteopathic medicine.

(n) Soliciting patients, either personally or through an agent, through the use of fraud, intimidation, undue influence, or forms of overreaching or vexatious conduct. A 31

1	solicitation is any communication which directly or implicitly
2	requests an immediate oral response from the recipient.
3	(o) Failing to keep legible, as defined by department
4	rule in consultation with the board, medical records that
5	identify the licensed osteopathic physician or the osteopathic
6	physician extender and supervising osteopathic physician by
7	name and professional title who is or are responsible for
8	rendering, ordering, supervising, or billing for each
9	diagnostic or treatment procedure and that justify the course
10	of treatment of the patient, including, but not limited to,
11	patient histories; examination results; test results; records
12	of drugs prescribed, dispensed, or administered; and reports
13	of consultations and hospitalizations.
14	(p) Fraudulently altering or destroying records
15	relating to patient care or treatment, including, but not
16	limited to, patient histories, examination results, and test
17	results.
18	(q) Exercising influence on the patient or client in
19	such a manner as to exploit the patient or client for
20	financial gain of the licensee or of a third party which shall
21	include, but not be limited to, the promotion or sale of
22	services, goods, appliances, or drugs.
23	(r) Promoting or advertising on any prescription form
24	of a community pharmacy, unless the form shall also state
25	"This prescription may be filled at any pharmacy of your
26	choice."
27	(s) Performing professional services which have not
28	been duly authorized by the patient or client or his or her
29	legal representative except as provided in s. 743.064, s.
30	766.103, or s. 768.13.
31	
	56
COD	I ING: Words stricken are deletions; words <u>underlined</u> are additions.

1	(t) Prescribing, dispensing, administering, supplying,
2	selling, giving, mixing, or otherwise preparing a legend drug,
3	including all controlled substances, other than in the course
4	of the osteopathic physician's professional practice. For the
5	purposes of this paragraph, it shall be legally presumed that
6	prescribing, dispensing, administering, supplying, selling,
7	giving, mixing, or otherwise preparing legend drugs, including
8	all controlled substances, inappropriately or in excessive or
9	inappropriate quantities is not in the best interest of the
10	patient and is not in the course of the osteopathic
11	physician's professional practice, without regard to his or
12	her intent.
13	(u) Prescribing or dispensing any medicinal drug
14	appearing on any schedule set forth in chapter 893 by the
15	osteopathic physician for himself or herself or administering
16	any such drug by the osteopathic physician to himself or
17	herself unless such drug is prescribed for the osteopathic
18	physician by another practitioner authorized to prescribe
19	medicinal drugs.
20	(v) Prescribing, ordering, dispensing, administering,
21	supplying, selling, or giving amygdalin (laetrile) to any
22	person.
23	(w) Being unable to practice osteopathic medicine with
24	reasonable skill and safety to patients by reason of illness
25	or use of alcohol, drugs, narcotics, chemicals, or any other
26	type of material or as a result of any mental or physical
27	condition. In enforcing this paragraph, the department shall,
28	upon a finding of the secretary or the secretary's designee
29	that probable cause exists to believe that the licensee is
30	unable to practice medicine because of the reasons stated in
31	this paragraph, have the authority to issue an order to compel
	57

a licensee to submit to a mental or physical examination by 1 physicians designated by the department. If the licensee 2 refuses to comply with such order, the department's order 3 4 directing such examination may be enforced by filing a 5 petition for enforcement in the circuit court where the 6 licensee resides or does business. The licensee against whom 7 the petition is filed shall not be named or identified by 8 initials in any public court records or documents, and the 9 proceedings shall be closed to the public. The department shall be entitled to the summary procedure provided in s. 10 51.011. A licensee or certificateholder affected under this 11 12 paragraph shall at reasonable intervals be afforded an 13 opportunity to demonstrate that he or she can resume the 14 competent practice of medicine with reasonable skill and 15 safety to patients.

16 (x) Gross or repeated malpractice or the failure to 17 practice osteopathic medicine with that level of care, skill, 18 and treatment which is recognized by a reasonably prudent 19 similar osteopathic physician as being acceptable under similar conditions and circumstances. The board shall give 20 great weight to the provisions of s. 766.102 when enforcing 21 this paragraph. As used in this paragraph, "repeated 22 23 malpractice" includes, but is not limited to, three or more claims for medical malpractice within the previous 5-year 24 period resulting in indemnities being paid in excess of 25 26 \$25,000 each to the claimant in a judgment or settlement and 27 which incidents involved negligent conduct by the osteopathic physician. As used in this paragraph, "gross malpractice" or 28 29 "the failure to practice osteopathic medicine with that level of care, skill, and treatment which is recognized by a 30 reasonably prudent similar osteopathic physician as being 31

58

acceptable under similar conditions and circumstances" shall 1 not be construed so as to require more than one instance, 2 3 event, or act. Nothing in this paragraph shall be construed to 4 require that an osteopathic physician be incompetent to 5 practice osteopathic medicine in order to be disciplined pursuant to this paragraph. A recommended order by an б 7 administrative law judge or a final order of the board finding a violation under this paragraph shall specify whether the 8 9 licensee was found to have committed "gross malpractice," "repeated malpractice," or "failure to practice osteopathic 10 medicine with that level of care, skill, and treatment which 11 12 is recognized as being acceptable under similar conditions and circumstances," or any combination thereof, and any 13 14 publication by the board shall so specify.

(y) Performing any procedure or prescribing any therapy which, by the prevailing standards of medical practice in the community, would constitute experimentation on human subjects, without first obtaining full, informed, and written consent.

20 (z) Practicing or offering to practice beyond the scope permitted by law or accepting and performing 21 22 professional responsibilities which the licensee knows or has 23 reason to know that he or she is not competent to perform. The board may establish by rule standards of practice and 24 standards of care for particular practice settings, including, 25 26 but not limited to, education and training, equipment and 27 supplies, medications including anesthetics, assistance of and delegation to other personnel, transfer agreements, 28 sterilization, records, performance of complex or multiple 29 procedures, informed consent, and policy and procedure 30 manuals. 31

59

1	(aa) Delegating professional responsibilities to a
2	person when the licensee delegating such responsibilities
3	knows or has reason to know that such person is not qualified
4	by training, experience, or licensure to perform them.
5	(bb) Violating any provision of this chapter, a rule
6	of the board or department, or a lawful order of the board or
7	department previously entered in a disciplinary hearing or
8	failing to comply with a lawfully issued subpoena of the board
9	or department.
10	(cc) Conspiring with another licensee or with any
11	other person to commit an act, or committing an act, which
12	would tend to coerce, intimidate, or preclude another licensee
13	from lawfully advertising his or her services.
14	(dd) Procuring, or aiding or abetting in the procuring
15	of, an unlawful termination of pregnancy.
16	(ee) Presigning blank prescription forms.
17	(ff) Prescribing any medicinal drug appearing on
18	Schedule II in chapter 893 by the osteopathic physician for
19	office use.
20	(gg) Prescribing, ordering, dispensing, administering,
21	supplying, selling, or giving any drug which is a Schedule II
22	amphetamine or Schedule II sympathomimetic amine drug or any
23	compound thereof, pursuant to chapter 893, to or for any
24	person except for:
25	1. The treatment of narcolepsy; hyperkinesis;
26	behavioral syndrome characterized by the developmentally
27	inappropriate symptoms of moderate to severe distractability,
28	short attention span, hyperactivity, emotional lability, and
29	<pre>impulsivity; or drug-induced brain dysfunction;</pre>
30	
31	
	60
CODING: Words stricken are deletions; words <u>underlined</u> are additions.	

2. The differential diagnostic psychiatric evaluation 1 2 of depression or the treatment of depression shown to be 3 refractory to other therapeutic modalities; or 4 3. The clinical investigation of the effects of such 5 drugs or compounds when an investigative protocol therefor is 6 submitted to, reviewed, and approved by the board before such 7 investigation is begun. (hh) Failing to supervise adequately the activities of 8 9 those physician assistants, paramedics, emergency medical 10 technicians, advanced registered nurse practitioners, or other persons acting under the supervision of the osteopathic 11 12 physician. (ii) Prescribing, ordering, dispensing, administering, 13 14 supplying, selling, or giving growth hormones, testosterone or 15 its analogs, human chorionic gonadotropin (HCG), or other hormones for the purpose of muscle building or to enhance 16 17 athletic performance. For the purposes of this subsection, the term "muscle building" does not include the treatment of 18 19 injured muscle. A prescription written for the drug products listed above may be dispensed by the pharmacist with the 20 presumption that the prescription is for legitimate medical 21 22 use. 23 (jj) Misrepresenting or concealing a material fact at 24 any time during any phase of a licensing or disciplinary 25 process or procedure. 26 (kk) Improperly interfering with an investigation or 27 with any disciplinary proceeding. 28 (11) Failing to report to the department any licensee 29 under chapter 458 or under this chapter who the osteopathic physician or physician assistant knows has violated the 30 grounds for disciplinary action set out in the law under which 31 61 CODING: Words stricken are deletions; words underlined are additions.

1	that person is licensed and who provides health care services
2	in a facility licensed under chapter 395, or a health
3	maintenance organization certificated under part I of chapter
4	641, in which the osteopathic physician or physician assistant
5	also provides services.
6	(mm) Being found by any court in this state to have
7	provided corroborating written medical expert opinion attached
8	to any statutorily required notice of claim or intent or to
9	any statutorily required response rejecting a claim, without
10	reasonable investigation.
11	(nn) Advertising or holding oneself out as a
12	board-certified specialist in violation of this chapter.
13	(oo) Failing to comply with the requirements of ss.
14	381.026 and 381.0261 to provide patients with information
15	about their patient rights and how to file a patient
16	complaint.
17	(pp) Violating any provision of this chapter or
18	chapter 456, or any rules adopted pursuant thereto.
19	(2) The board may enter an order denying licensure or
20	imposing any of the penalties in s. 456.072(2) against any
21	applicant for licensure or licensee who is found guilty of
22	violating any provision of subsection (1) of this section or
23	who is found guilty of violating any provision of s.
24	456.072(1). When the board finds any person guilty of any of
25	the grounds set forth in subsection (1), it may enter an order
26	imposing one or more of the following penalties:
27	(a) Refusal to certify, or certify with restrictions,
28	to the department an application for certification, licensure,
29	renewal, or reactivation.
30	(b) Revocation or suspension of a license or
31	certificate.
	62

Second Engrossed

1 (c) Restriction of practice. 2 (d) Imposition of an administrative fine not to exceed 3 \$10,000 for each count or separate offense. 4 (e) Issuance of a reprimand. (f) Issuance of a letter of concern. 5 6 (g) Placement of the osteopathic physician on 7 probation for a period of time and subject to such conditions 8 as the board may specify, including, but not limited to, 9 requiring the osteopathic physician to submit to treatment, 10 attend continuing education courses, submit to reexamination, or work under the supervision of another osteopathic 11 12 physician. 13 (h) Corrective action. 14 (i) Refund of fees billed to and collected from the 15 patient. (j) Imposition of an administrative fine in accordance 16 17 with s. 381.0261 for violations regarding patient rights. 18 19 In determining what action is appropriate, the board must first consider what sanctions are necessary to protect the 20 public or to compensate the patient. Only after those 21 sanctions have been imposed may the disciplining authority 22 23 consider and include in the order requirements designed to rehabilitate the physician. All costs associated with 24 25 compliance with orders issued under this subsection are the 26 obligation of the physician. Section 26. Paragraph (f) of subsection (7) of section 27 28 459.022, Florida Statutes, is amended to read: 29 459.022 Physician assistants.--(7) PHYSICIAN ASSISTANT LICENSURE.--30 31 63 CODING: Words stricken are deletions; words underlined are additions.

(f) The Board of Osteopathic Medicine may impose any 1 2 of the penalties authorized under specified in ss. 456.072 and 3 459.015(2) upon a physician assistant if the physician 4 assistant or the supervising physician has been found guilty 5 of or is being investigated for any act that constitutes a 6 violation of this chapter or chapter 456. 7 Section 27. Subsections (1) and (2) of section 460.413, Florida Statutes, are amended to read: 8 9 460.413 Grounds for disciplinary action; action by board or department. --10 (1) The following acts shall constitute grounds for 11 12 denial of a license or disciplinary action, as specified in s. 456.072(2) which the disciplinary actions specified in 13 14 subsection (2) may be taken: (a) Attempting to obtain, obtaining, or renewing a 15 license to practice chiropractic medicine by bribery, by 16 17 fraudulent misrepresentations, or through an error of the department or the board. 18 19 (b) Having a license to practice chiropractic medicine revoked, suspended, or otherwise acted against, including the 20 denial of licensure, by the licensing authority of another 21 state, territory, or country. 22 23 (c) Being convicted or found guilty, regardless of adjudication, of a crime in any jurisdiction which directly 24 relates to the practice of chiropractic medicine or to the 25 26 ability to practice chiropractic medicine. Any plea of nolo 27 contendere shall be considered a conviction for purposes of this chapter. 28 29 (d) False, deceptive, or misleading advertising. (e) Causing to be advertised, by any means whatsoever, 30 any advertisement which does not contain an assertion or 31 64 CODING: Words stricken are deletions; words underlined are additions.

statement which would identify herself or himself as a 1 chiropractic physician or identify such chiropractic clinic or 2 related institution in which she or he practices or in which 3 4 she or he is owner, in whole or in part, as a chiropractic 5 institution. (f) Advertising, practicing, or attempting to practice б 7 under a name other than one's own. (g) Failing to report to the department any person who 8 9 the licensee knows is in violation of this chapter or of the rules of the department or the board. 10 (h) Aiding, assisting, procuring, or advising any 11 12 unlicensed person to practice chiropractic medicine contrary 13 to this chapter or to a rule of the department or the board. 14 (i) Failing to perform any statutory or legal 15 obligation placed upon a licensed chiropractic physician. (j) Making or filing a report which the licensee knows 16 17 to be false, intentionally or negligently failing to file a report or record required by state or federal law, willfully 18 19 impeding or obstructing such filing or inducing another person 20 to do so. Such reports or records shall include only those which are signed in the capacity of a licensed chiropractic 21 22 physician. 23 (k) Making misleading, deceptive, untrue, or fraudulent representations in the practice of chiropractic 24 medicine or employing a trick or scheme in the practice of 25 26 chiropractic medicine when such trick or scheme fails to 27 conform to the generally prevailing standards of treatment in the chiropractic medical community. 28 29 Soliciting patients either personally or through (1) an agent, unless such solicitation falls into a category of 30 solicitations approved by rule of the board. 31 65

Second Engrossed

CS for SB 1558

. 1	
1	(m) Failing to keep legibly written chiropractic
2 r	medical records that identify clearly by name and credentials
3 t	the licensed chiropractic physician rendering, ordering,
4 s	supervising, or billing for each examination or treatment
5 g	procedure and that justify the course of treatment of the
бŗ	patient, including, but not limited to, patient histories,
7 e	examination results, test results, X rays, and diagnosis of a
8 0	disease, condition, or injury. X rays need not be retained
9 f	for more than 4 years.
10	(n) Exercising influence on the patient or client in
11 s	such a manner as to exploit the patient or client for
12 f	financial gain of the licensee or of a third party which shall
13 i	include, but not be limited to, the promotion or sale of
14 s	services, goods or appliances, or drugs.
15	(o) Performing professional services which have not
16 k	been duly authorized by the patient or client or her or his
17]	legal representative except as provided in ss. 743.064,
18 7	766.103, and 768.13.
19	(p) Prescribing, dispensing, or administering any
20 r	medicinal drug except as authorized by s. 460.403(9)(c)2.,
21 g	performing any surgery, or practicing obstetrics.
22	(q) Being unable to practice chiropractic medicine
23 v	with reasonable skill and safety to patients by reason of
24	illness or use of alcohol, drugs, narcotics, chemicals, or any
25 d	other type of material or as a result of any mental or
26 g	physical condition. In enforcing this paragraph, upon a
27 f	finding by the secretary of the department, or his or her
28 c	designee, or the probable cause panel of the board that
29 g	probable cause exists to believe that the licensee is unable
30 t	to practice the profession because of reasons stated in this
31 g	paragraph, the department shall have the authority to compel a
	66
CODI	NG:Words stricken are deletions; words <u>underlined</u> are additions.

licensee to submit to a mental or physical examination by a 1 physician designated by the department. If the licensee 2 3 refuses to comply with the department's order, the department 4 may file a petition for enforcement in the circuit court of 5 the circuit in which the licensee resides or does business. 6 The department shall be entitled to the summary procedure 7 provided in s. 51.011. The record of proceedings to obtain a 8 compelled mental or physical examination shall not be used 9 against a licensee in any other proceedings. A chiropractic physician affected under this paragraph shall at reasonable 10 intervals be afforded an opportunity to demonstrate that she 11 12 or he can resume the competent practice of chiropractic medicine with reasonable skill and safety to patients. 13 14 (r) Gross or repeated malpractice or the failure to 15 practice chiropractic medicine at a level of care, skill, and treatment which is recognized by a reasonably prudent 16 17 chiropractic physician as being acceptable under similar conditions and circumstances. The board shall give great 18 19 weight to the standards for malpractice in s. 766.102 in interpreting this provision. A recommended order by an 20 administrative law judge, or a final order of the board 21 22 finding a violation under this section shall specify whether 23 the licensee was found to have committed "gross malpractice," "repeated malpractice," or "failure to practice chiropractic 24 medicine with that level of care, skill, and treatment which 25 26 is recognized as being acceptable under similar conditions and 27 circumstances" or any combination thereof, and any publication by the board shall so specify. 28 29 (s) Performing any procedure or prescribing any therapy which, by the prevailing standards of chiropractic 30 medical practice in the community, would constitute 31

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

67

experimentation on human subjects, without first obtaining 1 2 full, informed, and written consent. 3 (t) Practicing or offering to practice beyond the 4 scope permitted by law or accepting and performing 5 professional responsibilities which the licensee knows or has 6 reason to know that she or he is not competent to perform. 7 (u) Delegating professional responsibilities to a 8 person when the licensee delegating such responsibilities 9 knows or has reason to know that such person is not qualified 10 by training, experience, or licensure to perform them. (v) Violating any provision of this chapter, any rule 11 12 of the board or department, or a lawful order of the board or department previously entered in a disciplinary hearing or 13 14 failing to comply with a lawfully issued subpoena of the 15 department. (w) Conspiring with another licensee or with any other 16 17 person to commit an act, or committing an act, which would tend to coerce, intimidate, or preclude another licensee from 18 19 lawfully advertising her or his services. 20 (x) Submitting to any third-party payor a claim for a service or treatment which was not actually provided to a 21 22 patient. 23 (y) Failing to preserve identity of funds and property of a patient. As provided by rule of the board, money or other 24 property entrusted to a chiropractic physician for a specific 25 26 purpose, including advances for costs and expenses of examination or treatment, is to be held in trust and must be 27 applied only to that purpose. Money and other property of 28 29 patients coming into the hands of a chiropractic physician are not subject to counterclaim or setoff for chiropractic 30 physician's fees, and a refusal to account for and deliver 31 68

over such money and property upon demand shall be deemed a 1 conversion. This is not to preclude the retention of money or 2 3 other property upon which the chiropractic physician has a 4 valid lien for services or to preclude the payment of agreed 5 fees from the proceeds of transactions for examinations or treatments. Controversies as to the amount of the fees are 6 7 not grounds for disciplinary proceedings unless the amount demanded is clearly excessive or extortionate, or the demand 8 9 is fraudulent. All funds of patients paid to a chiropractic physician, other than advances for costs and expenses, shall 10 be deposited in one or more identifiable bank accounts 11 12 maintained in the state in which the chiropractic physician's office is situated, and no funds belonging to the chiropractic 13 14 physician shall be deposited therein except as follows: 15 1. Funds reasonably sufficient to pay bank charges may be deposited therein. 16 17 2. Funds belonging in part to a patient and in part presently or potentially to the physician must be deposited 18 19 therein, but the portion belonging to the physician may be withdrawn when due unless the right of the physician to 20 receive it is disputed by the patient, in which event the 21 22 disputed portion shall not be withdrawn until the dispute is 23 finally resolved. 24 Every chiropractic physician shall maintain complete records 25 26 of all funds, securities, and other properties of a patient 27 coming into the possession of the physician and render appropriate accounts to the patient regarding them. In 28 addition, every chiropractic physician shall promptly pay or 29 deliver to the patient, as requested by the patient, the 30 31 69

funds, securities, or other properties in the possession of 1 the physician which the patient is entitled to receive. 2 (z) Offering to accept or accepting payment for 3 4 services rendered by assignment from any third-party payor 5 after offering to accept or accepting whatever the third-party payor covers as payment in full, if the effect of the offering 6 7 or acceptance is to eliminate or give the impression of eliminating the need for payment by an insured of any required 8 9 deductions applicable in the policy of the insured. 10 (aa) Failing to provide, upon request of the insured, a copy of a claim submitted to any third-party payor for 11 12 service or treatment of the insured. (bb) Advertising a fee or charge for a service or 13 14 treatment which is different from the fee or charge the 15 licensee submits to third-party payors for that service or 16 treatment. 17 (cc) Advertising any reduced or discounted fees for services or treatments, or advertising any free services or 18 19 treatments, without prominently stating in the advertisement the usual fee of the licensee for the service or treatment 20 which is the subject of the discount, rebate, or free 21 22 offering. 23 (dd) Using acupuncture without being certified 24 pursuant to s. 460.403(9)(f). (ee) Failing to report to the department any licensee 25 26 under chapter 458 or under chapter 459 who the chiropractic 27 physician or chiropractic physician's assistant knows has violated the grounds for disciplinary action set out in the 28 law under which that person is licensed and who provides 29 health care services in a facility licensed under chapter 395, 30 or a health maintenance organization certificated under part I 31 70

Second Engrossed

of chapter 641, in which the chiropractic physician or 1 chiropractic physician's assistant also provides services. 2 3 (ff) Violating any provision of this chapter or 4 chapter 456, or any rules adopted pursuant thereto. 5 (2) The board may enter an order denying licensure or 6 imposing any of the penalties in s. 456.072(2) against any 7 applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or 8 9 who is found guilty of violating any provision of s. 456.072(1). When the board finds any person guilty of any of 10 the grounds set forth in subsection (1), it may enter an order 11 12 imposing one or more of the following penalties: (a) Refusal to certify to the department an 13 14 application for licensure. 15 (b) Revocation or suspension of a license. (c) Restriction of practice. 16 17 (d) Imposition of an administrative fine not to exceed \$10,000 for each count or separate offense. 18 19 (e) Issuance of a reprimand. 20 (f) Placement of the chiropractic physician on probation for a period of time and subject to such conditions 21 as the board may specify, including requiring the chiropractic 22 23 physician to submit to treatment, to attend continuing education courses, to submit to reexamination, or to work 24 under the supervision of another chiropractic physician. 25 26 (g) Imposition of costs of the investigation and 27 prosecution. 28 (h) Requirement that the chiropractic physician 29 undergo remedial education. 30 (i) Issuance of a letter of concern. (i) Corrective action. 31 71 CODING: Words stricken are deletions; words underlined are additions.

(k) Refund of fees billed to and collected from the 1 2 patient or a third party. 3 4 In determining what action is appropriate, the board must 5 first consider what sanctions are necessary to protect the public or to compensate the patient. Only after those б 7 sanctions have been imposed may the disciplining authority consider and include in the order requirements designed to 8 9 rehabilitate the chiropractic physician. All costs associated with compliance with orders issued under this subsection are 10 the obligation of the chiropractic physician. 11 12 Section 28. Subsections (1) and (2) of section 461.013, Florida Statutes, are amended to read: 13 14 461.013 Grounds for disciplinary action; action by the 15 board; investigations by department. --16 (1) The following acts shall constitute grounds for 17 denial of a license or disciplinary action, as specified in s. 456.072(2) which the disciplinary actions specified in 18 19 subsection (2) may be taken: (a) Attempting to obtain, obtaining, or renewing a 20 license to practice podiatric medicine by bribery, by 21 22 fraudulent misrepresentations, or through an error of the 23 department or the board. 24 (b) Having a license to practice podiatric medicine revoked, suspended, or otherwise acted against, including the 25 26 denial of licensure, by the licensing authority of another 27 state, territory, or country. 28 (c) Being convicted or found guilty, regardless of 29 adjudication, of a crime in any jurisdiction which directly relates to the practice of podiatric medicine or to the 30 ability to practice podiatric medicine. Any plea of nolo 31 72 CODING: Words stricken are deletions; words underlined are additions.
contendere shall be considered a conviction for purposes of 1 2 this chapter. 3 (d) False, deceptive, or misleading advertising. 4 (e) Advertising, practicing, or attempting to practice 5 under a name other than one's own. 6 (f) Failing to report to the department any person who 7 the licensee knows is in violation of this chapter or of the 8 rules of the department or the board. 9 (g) Aiding, assisting, procuring, permitting, or 10 advising any unlicensed person to practice podiatric medicine contrary to this chapter or to rule of the department or the 11 12 board. 13 (h) Failing to perform any statutory or legal 14 obligation placed upon a licensed podiatric physician. 15 (i) Making or filing a report which the licensee knows to be false, intentionally or negligently failing to file a 16 17 report or record required by state or federal law, willfully impeding or obstructing such filing or inducing another person 18 19 to do so. Such report or records shall include only those 20 which are signed in the capacity of a licensed podiatric physician. 21 (j) Making misleading, deceptive, untrue, or 22 23 fraudulent representations in the practice of podiatric 24 medicine or employing a trick or scheme in the practice of podiatric medicine when such scheme or trick fails to conform 25 26 to the generally prevailing standards of treatment in the 27 podiatric community. 28 Soliciting patients either personally or through (k) 29 an agent, unless such solicitation falls into a category of solicitations approved by rule of the board. 30 31 73 CODING: Words stricken are deletions; words underlined are additions.

(1) Failing to keep written medical records justifying 1 2 the course of treatment of the patient, including, but not 3 limited to, patient histories, examination results, and test 4 results. (m) Exercising influence on the patient or client in 5 б such a manner as to exploit the patient or client for 7 financial gain of the licensee or of a third party which shall 8 include, but not be limited to, the promotion or sale of 9 services, goods, appliances, or drugs and the promoting or 10 advertising on any prescription form of a community pharmacy unless the form shall also state "This prescription may be 11 12 filled at any pharmacy of your choice." (n) Performing professional services which have not 13 14 been duly authorized by the patient or client or her or his 15 legal representative except as provided in ss. 743.064, 766.103, and 768.13. 16 17 (o) Prescribing, dispensing, administering, mixing, or otherwise preparing a legend drug, including all controlled 18 19 substances, other than in the course of the podiatric 20 physician's professional practice. For the purposes of this paragraph, it shall be legally presumed that prescribing, 21 dispensing, administering, mixing, or otherwise preparing 22 23 legend drugs, including all controlled substances, inappropriately or in excessive or inappropriate quantities is 24 not in the best interest of the patient and is not in the 25 26 course of the podiatric physician's professional practice, without regard to her or his intent. 27 (p) Prescribing, dispensing, or administering any 28 29 medicinal drug appearing on any schedule set forth in chapter 893 by the podiatric physician to herself or himself except 30 those prescribed, dispensed, or administered to the podiatric 31 74 CODING: Words stricken are deletions; words underlined are additions.

physician by another practitioner authorized to prescribe, 1 2 dispense, or administer them. 3 (q) Prescribing, ordering, dispensing, administering, 4 supplying, selling, or giving any amphetamine or 5 sympathomimetic amine drug or compound designated as a 6 Schedule II controlled substance pursuant to chapter 893. 7 (r) Being unable to practice podiatric medicine with 8 reasonable skill and safety to patients by reason of illness 9 or use of alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical 10 condition. In enforcing this paragraph the department shall, 11 12 upon probable cause, have authority to compel a podiatric physician to submit to a mental or physical examination by 13 14 physicians designated by the department. Failure of a 15 podiatric physician to submit to such examination when directed shall constitute an admission of the allegations 16 17 against her or him, unless the failure was due to circumstances beyond her or his control, consequent upon which 18 19 a default and final order may be entered without the taking of testimony or presentation of evidence. A podiatric physician 20 affected under this paragraph shall at reasonable intervals be 21 22 afforded an opportunity to demonstrate that she or he can 23 resume the competent practice of podiatric medicine with reasonable skill and safety to patients. 24 (s) Gross or repeated malpractice or the failure to 25 26 practice podiatric medicine at a level of care, skill, and 27 treatment which is recognized by a reasonably prudent podiatric physician as being acceptable under similar 28 29 conditions and circumstances. The board shall give great weight to the standards for malpractice in s. 766.102 in 30 interpreting this section. As used in this paragraph, 31

75

"repeated malpractice" includes, but is not limited to, three 1 or more claims for medical malpractice within the previous 2 3 5-year period resulting in indemnities being paid in excess of 4 \$10,000 each to the claimant in a judgment or settlement and 5 which incidents involved negligent conduct by the podiatric 6 physicians. As used in this paragraph, "gross malpractice" or 7 "the failure to practice podiatric medicine with the level of 8 care, skill, and treatment which is recognized by a reasonably 9 prudent similar podiatric physician as being acceptable under similar conditions and circumstances" shall not be construed 10 so as to require more than one instance, event, or act. 11 12 (t) Performing any procedure or prescribing any therapy which, by the prevailing standards of podiatric 13 14 medical practice in the community, would constitute 15 experimentation on human subjects without first obtaining full, informed, and written consent. 16 17 (u) Practicing or offering to practice beyond the scope permitted by law or accepting and performing 18 19 professional responsibilities which the licensee knows or has reason to know that she or he is not competent to perform. 20 21 (v) Delegating professional responsibilities to a 22 person when the licensee delegating such responsibilities 23 knows or has reason to know that such person is not qualified by training, experience, or licensure to perform them. 24 (w) Violating any provision of this chapter or chapter 25 26 456, any rule of the board or department, or a lawful order of 27 the board or department previously entered in a disciplinary hearing or failing to comply with a lawfully issued subpoena 28 29 of the board or department. (x) Conspiring with another licensee or with any other 30 person to commit an act, or committing an act, which would 31 76 CODING: Words stricken are deletions; words underlined are additions.

tend to coerce, intimidate, or preclude another licensee from 1 lawfully advertising her or his services. 2 3 (y) Prescribing, ordering, dispensing, administering, 4 supplying, selling, or giving growth hormones, testosterone or its analogs, human chorionic gonadotropin (HCG), or other 5 hormones for the purpose of muscle building or to enhance 6 7 athletic performance. For the purposes of this subsection, the term "muscle building" does not include the treatment of 8 9 injured muscle. A prescription written for any of the drug 10 products listed above may be dispensed by the pharmacist with the presumption that the prescription is for legitimate 11 12 medical use. 13 (z) Fraud, deceit, or misconduct in the practice of 14 podiatric medicine. 15 (aa) Failing to report to the department any licensee 16 under chapter 458 or chapter 459 who the podiatric physician 17 knows has violated the grounds for disciplinary action set out 18 in the law under which that person is licensed and who 19 provides health care services in a facility licensed under 20 chapter 395, or a health maintenance organization certificated under part I of chapter 641, in which the podiatric physician 21 22 also provides services. 23 (bb) Failing to comply with the requirements of ss. 381.026 and 381.0261 to provide patients with information 24 about their patient rights and how to file a patient 25 26 complaint. 27 (cc) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. 28 29 The board may enter an order denying licensure or (2) imposing any of the penalties in s. 456.072(2) against any 30 applicant for licensure or licensee who is found guilty of 31 77 CODING: Words stricken are deletions; words underlined are additions.

violating any provision of subsection (1) of this section or 1 2 who is found guilty of violating any provision of s. 3 456.072(1). When the board finds any person guilty of any of the grounds set forth in subsection (1), it may enter an order 4 5 imposing one or more of the following penalties: 6 (a) Refusal to certify to the department an 7 application for licensure. 8 (b) Revocation or suspension of a license. 9 (c) Restriction of practice. 10 (d) Imposition of an administrative fine not to exceed \$10,000 for each count or separate offense. 11 12 (e) Issuance of a reprimand. (f) Placing the podiatric physician on probation for a 13 14 period of time and subject to such conditions as the board may 15 specify, including requiring the podiatric physician to submit to treatment, to attend continuing education courses, to 16 17 submit to reexamination, and to work under the supervision of 18 another podiatric physician. 19 (g) Imposition of an administrative fine in accordance 20 with s. 381.0261 for violations regarding patient rights. 21 Section 29. Subsections (1) and (2) of section 462.14, Florida Statutes, are amended to read: 22 23 462.14 Grounds for disciplinary action; action by the 24 department. --(1) The following acts constitute grounds for denial 25 26 of a license or disciplinary action, as specified in s. 27 456.072(2) which the disciplinary actions specified in subsection (2) may be taken: 28 29 (a) Attempting to obtain, obtaining, or renewing a 30 license to practice naturopathic medicine by bribery, by 31 78

fraudulent misrepresentation, or through an error of the 1 2 department. 3 (b) Having a license to practice naturopathic medicine 4 revoked, suspended, or otherwise acted against, including the 5 denial of licensure, by the licensing authority of another 6 state, territory, or country. 7 (c) Being convicted or found guilty, regardless of 8 adjudication, of a crime in any jurisdiction which directly 9 relates to the practice of naturopathic medicine or to the ability to practice naturopathic medicine. Any plea of nolo 10 contendere shall be considered a conviction for purposes of 11 12 this chapter. (d) False, deceptive, or misleading advertising. 13 14 (e) Advertising, practicing, or attempting to practice 15 under a name other than one's own. (f) Failing to report to the department any person who 16 17 the licensee knows is in violation of this chapter or of the 18 rules of the department. 19 (g) Aiding, assisting, procuring, or advising any 20 unlicensed person to practice naturopathic medicine contrary to this chapter or to a rule of the department. 21 22 (h) Failing to perform any statutory or legal 23 obligation placed upon a licensed naturopathic physician. (i) Making or filing a report which the licensee knows 24 25 to be false, intentionally or negligently failing to file a 26 report or record required by state or federal law, willfully 27 impeding or obstructing such filing or inducing another person to do so. Such reports or records shall include only those 28 29 which are signed in the capacity as a licensed naturopathic 30 physician. 31 79 CODING: Words stricken are deletions; words underlined are additions.

1	(j) Paying or receiving any commission, bonus,
2	kickback, or rebate, or engaging in any split-fee arrangement
3	in any form whatsoever with a physician, organization, agency,
4	or person, either directly or indirectly, for patients
5	referred to providers of health care goods and services,
6	including, but not limited to, hospitals, nursing homes,
7	clinical laboratories, ambulatory surgical centers, or
8	pharmacies. The provisions of this paragraph shall not be
9	construed to prevent a naturopathic physician from receiving a
10	fee for professional consultation services.
11	(k) Exercising influence within a patient-physician
12	relationship for purposes of engaging a patient in sexual
13	activity. A patient shall be presumed to be incapable of
14	giving free, full, and informed consent to sexual activity
15	with her or his physician.
16	(1) Making deceptive, untrue, or fraudulent
17	representations in the practice of naturopathic medicine or
18	employing a trick or scheme in the practice of naturopathic
19	medicine when such scheme or trick fails to conform to the
20	generally prevailing standards of treatment in the medical
21	community.
22	(m) Soliciting patients, either personally or through
23	an agent, through the use of fraud, intimidation, undue
24	influence, or a form of overreaching or vexatious conduct. A
25	"solicitation" is any communication which directly or
26	implicitly requests an immediate oral response from the
27	recipient.
28	(n) Failing to keep written medical records justifying
29	the course of treatment of the patient, including, but not
30	limited to, patient histories, examination results, test
31	
	80
COD	ING:Words stricken are deletions; words <u>underlined</u> are additions.

results, X rays, and records of the prescribing, dispensing
 and administering of drugs.

3 (o) Exercising influence on the patient or client in 4 such a manner as to exploit the patient or client for the 5 financial gain of the licensee or of a third party, which 6 shall include, but not be limited to, the promoting or selling 7 of services, goods, appliances, or drugs and the promoting or advertising on any prescription form of a community pharmacy 8 9 unless the form also states "This prescription may be filled at any pharmacy of your choice." 10

(p) Performing professional services which have not been duly authorized by the patient or client, or her or his legal representative, except as provided in s. 743.064, s. 766.103, or s. 768.13.

(q) Prescribing, dispensing, administering, mixing, or 15 16 otherwise preparing a legend drug, including any controlled 17 substance, other than in the course of the naturopathic physician's professional practice. For the purposes of this 18 19 paragraph, it shall be legally presumed that prescribing, 20 dispensing, administering, mixing, or otherwise preparing legend drugs, including all controlled substances, 21 22 inappropriately or in excessive or inappropriate quantities is 23 not in the best interest of the patient and is not in the course of the naturopathic physician's professional practice, 24 without regard to her or his intent. 25

(r) Prescribing, dispensing, or administering any
medicinal drug appearing on any schedule set forth in chapter
893 by the naturopathic physician to herself or himself,
except one prescribed, dispensed, or administered to the
naturopathic physician by another practitioner authorized to
prescribe, dispense, or administer medicinal drugs.

81

Second Engrossed

(s) Being unable to practice naturopathic medicine 1 2 with reasonable skill and safety to patients by reason of 3 illness or use of alcohol, drugs, narcotics, chemicals, or any 4 other type of material or as a result of any mental or 5 physical condition. In enforcing this paragraph, the department shall have, upon probable cause, authority to 6 7 compel a naturopathic physician to submit to a mental or physical examination by physicians designated by the 8 9 department. The failure of a naturopathic physician to submit to such an examination when so directed shall constitute an 10 admission of the allegations against her or him upon which a 11 12 default and final order may be entered without the taking of testimony or presentation of evidence, unless the failure was 13 14 due to circumstances beyond the naturopathic physician's 15 control. A naturopathic physician affected under this paragraph shall at reasonable intervals be afforded an 16 17 opportunity to demonstrate that she or he can resume the competent practice of naturopathic medicine with reasonable 18 19 skill and safety to patients. In any proceeding under this paragraph, neither the record of proceedings nor the orders 20 entered by the department may be used against a naturopathic 21 22 physician in any other proceeding. 23 (t) Gross or repeated malpractice or the failure to practice naturopathic medicine with that level of care, skill, 24 and treatment which is recognized by a reasonably prudent 25 26 similar physician as being acceptable under similar conditions 27 and circumstances. The department shall give great weight to the provisions of s. 766.102 when enforcing this paragraph. 28

(u) Performing any procedure or prescribing any
therapy which, by the prevailing standards of medical practice
in the community, constitutes experimentation on a human

82

subject, without first obtaining full, informed, and written 1 2 consent. 3 Practicing or offering to practice beyond the (v) 4 scope permitted by law or accepting and performing 5 professional responsibilities which the licensee knows or has 6 reason to know that she or he is not competent to perform. 7 (w) Delegating professional responsibilities to a 8 person when the licensee delegating such responsibilities 9 knows or has reason to know that such person is not qualified 10 by training, experience, or licensure to perform them. (x) Violating any provision of this chapter, any rule 11 12 of the department, or a lawful order of the department previously entered in a disciplinary hearing or failing to 13 14 comply with a lawfully issued subpoena of the department. 15 (y) Conspiring with another licensee or with any other person to commit an act, or committing an act, which would 16 17 tend to coerce, intimidate, or preclude another licensee from 18 lawfully advertising her or his services. 19 (z) Procuring, or aiding or abetting in the procuring 20 of, an unlawful termination of pregnancy. 21 (aa) Presigning blank prescription forms. 22 (bb) Prescribing by the naturopathic physician for 23 office use any medicinal drug appearing on Schedule II in chapter 893. 24 (cc) Prescribing, ordering, dispensing, administering, 25 26 supplying, selling, or giving any drug which is an amphetamine 27 or sympathomimetic amine drug, or a compound designated pursuant to chapter 893 as a Schedule II controlled substance 28 29 to or for any person except for: The treatment of narcolepsy; hyperkinesis; 30 1. behavioral syndrome in children characterized by the 31 83

developmentally inappropriate symptoms of moderate to severe 1 2 distractability, short attention span, hyperactivity, 3 emotional lability, and impulsivity; or drug-induced brain 4 dysfunction. The differential diagnostic psychiatric evaluation 5 2. 6 of depression or the treatment of depression shown to be 7 refractory to other therapeutic modalities. The clinical investigation of the effects of such 8 3. 9 drugs or compounds when an investigative protocol therefor is 10 submitted to, reviewed, and approved by the department before such investigation is begun. 11 12 (dd) Prescribing, ordering, dispensing, administering, 13 supplying, selling, or giving growth hormones, testosterone or 14 its analogs, human chorionic gonadotropin (HCG), or other 15 hormones for the purpose of muscle building or to enhance 16 athletic performance. For the purposes of this subsection, the 17 term "muscle building" does not include the treatment of injured muscle. A prescription written for the drug products 18 19 listed above may be dispensed by the pharmacist with the presumption that the prescription is for legitimate medical 20 21 use. 22 (ee) Violating any provision of this chapter or 23 chapter 456, or any rules adopted pursuant thereto. 24 (2) The department may enter an order denying 25 licensure or imposing any of the penalties in s. 456.072(2) 26 against any applicant for licensure or licensee who is found 27 guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of 28 29 s. 456.072(1). When the department finds any person guilty of any of the grounds set forth in subsection (1), it may enter 30 an order imposing one or more of the following penalties: 31 84 CODING: Words stricken are deletions; words underlined are additions.

1 (a) Refusal to certify to the department an 2 application for licensure. (b) Revocation or suspension of a license. 3 4 (c) Restriction of practice. 5 (d) Imposition of an administrative fine not to exceed 6 \$1,000 for each count or separate offense. 7 (e) Issuance of a reprimand. 8 (f) Placement of the naturopathic physician on 9 probation for a period of time and subject to such conditions 10 as the department may specify, including, but not limited to, requiring the naturopathic physician to submit to treatment, 11 12 to attend continuing education courses, to submit to 13 reexamination, or to work under the supervision of another 14 naturopathic physician. Section 30. Subsections (1) and (2) of section 15 463.016, Florida Statutes, are amended to read: 16 463.016 Grounds for disciplinary action; action by the 17 18 board.--19 (1) The following acts shall constitute grounds for 20 denial of a license or disciplinary action, as specified in s. 21 456.072(2) which the disciplinary actions specified in subsection (2) may be taken: 22 23 (a) Procuring or attempting to procure a license to practice optometry by bribery, by fraudulent 24 misrepresentations, or through an error of the department or 25 26 board. (b) Procuring or attempting to procure a license for 27 any other person by making or causing to be made any false 28 29 representation. 30 31 85 CODING: Words stricken are deletions; words underlined are additions.

1	(c) Having a license to practice optometry revoked,
2	suspended, or otherwise acted against, including the denial of
3	licensure, by the licensing authority of another jurisdiction.
4	(d) Being convicted or found guilty, regardless of
5	adjudication, of a crime in any jurisdiction which directly
6	relates to the practice of optometry or to the ability to
7	practice optometry. Any plea of nolo contendere shall be
8	considered a conviction for the purposes of this chapter.
9	(e) Making or filing a report or record which the
10	licensee knows to be false, intentionally or negligently
11	failing to file a report or record required by state or
12	federal law, willfully impeding or obstructing such filing, or
13	inducing another person to do so. Such reports or records
14	shall include only those which are signed by the licensee in
15	her or his capacity as a licensed practitioner.
16	(f) Advertising goods or services in a manner which is
17	fraudulent, false, deceptive, or misleading in form or
18	content.
19	(g) Fraud or deceit, negligence or incompetency, or
20	misconduct in the practice of optometry.
21	(h) A violation or repeated violations of provisions
22	of this chapter, or of chapter 456, and any rules promulgated
23	pursuant thereto.
24	(i) Conspiring with another licensee or with any
25	person to commit an act, or committing an act, which would
26	coerce, intimidate, or preclude another licensee from lawfully
27	advertising her or his services.
28	(j) Willfully submitting to any third-party payor a
29	claim for services which were not provided to a patient.
30	(k) Failing to keep written optometric records about
31	the examinations, treatments, and prescriptions for patients.
	86
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

1 (1) Willfully failing to report any person who the 2 licensee knows is in violation of this chapter or of rules of 3 the department or the board. 4 (m) Gross or repeated malpractice. 5 (n) Practicing with a revoked, suspended, inactive, or 6 delinquent license. 7 (o) Being unable to practice optometry with reasonable 8 skill and safety to patients by reason of illness or use of 9 alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition. 10 A licensed practitioner affected under this paragraph shall at 11 12 reasonable intervals be afforded an opportunity to demonstrate that she or he can resume the competent practice of optometry 13 14 with reasonable skill and safety to patients. 15 (p) Having been disciplined by a regulatory agency in 16 another state for any offense that would constitute a 17 violation of Florida laws or rules regulating optometry. 18 (q) Violating any provision of s. 463.014 or s. 463.015. 19 20 (r) Violating any lawful order of the board or department, previously entered in a disciplinary hearing, or 21 22 failing to comply with a lawfully issued subpoena of the board 23 or department. (s) Practicing or offering to practice beyond the 24 25 scope permitted by law or accepting and performing 26 professional responsibilities which the licensed practitioner 27 knows or has reason to know she or he is not competent to perform. 28 29 (t) Violating any provision of this chapter or chapter 30 456, or any rules adopted pursuant thereto. 31 87 CODING: Words stricken are deletions; words underlined are additions.

Second Engrossed

1 The department may enter an order imposing any of (2) the penalties in s. 456.072(2) against any licensee who is 2 3 found guilty of violating any provision of subsection (1) of 4 this section or who is found guilty of violating any provision 5 of s. 456.072(1). When the board finds any person guilty of 6 any of the grounds set forth in subsection (1), it may enter 7 an order imposing one or more of the following penalties: 8 (a) Refusal to certify to the department an 9 application for licensure. 10 (b) Revocation or suspension of a license. (c) Imposition of an administrative fine not to exceed 11 12 \$5,000 for each count or separate offense. (d) Issuance of a reprimand. 13 14 (e) Placement of the licensed practitioner on 15 probation for a period of time and subject to such conditions as the board may specify, including requiring the licensed 16 17 practitioner to submit to treatment, to attend continuing 18 education courses, or to work under the supervision of another 19 licensed practitioner. 20 Section 31. Subsections (1) and (2) of section 21 464.018, Florida Statutes, are amended to read: 464.018 Disciplinary actions.--22 23 The following acts constitute shall be grounds for (1) denial of a license or disciplinary action, as specified in s. 24 25 456.072(2) disciplinary action set forth in this section: 26 (a) Procuring, attempting to procure, or renewing a 27 license to practice nursing by bribery, by knowing 28 misrepresentations, or through an error of the department or 29 the board. (b) Having a license to practice nursing revoked, 30 suspended, or otherwise acted against, including the denial of 31 88 CODING: Words stricken are deletions; words underlined are additions.

Second Engrossed

licensure, by the licensing authority of another state, 1 2 territory, or country. 3 (c) Being convicted or found guilty of, or entering a 4 plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly relates to the 5 6 practice of nursing or to the ability to practice nursing. 7 (d) Being found guilty, regardless of adjudication, of 8 any of the following offenses: 9 1. A forcible felony as defined in chapter 776. A violation of chapter 812, relating to theft, 10 2. robbery, and related crimes. 11 12 3. A violation of chapter 817, relating to fraudulent 13 practices. 14 4. A violation of chapter 800, relating to lewdness 15 and indecent exposure. A violation of chapter 784, relating to assault, 16 5. 17 battery, and culpable negligence. 6. A violation of chapter 827, relating to child 18 19 abuse. 7. A violation of chapter 415, relating to protection 20 from abuse, neglect, and exploitation. 21 22 8. A violation of chapter 39, relating to child abuse, 23 abandonment, and neglect. (e) Having been found guilty of, regardless of 24 adjudication, or entered a plea of nolo contendere or guilty 25 26 to, any offense prohibited under s. 435.03 or under any 27 similar statute of another jurisdiction; or having committed an act which constitutes domestic violence as defined in s. 28 29 741.28. (f) Making or filing a false report or record, which 30 the licensee knows to be false, intentionally or negligently 31 89 CODING: Words stricken are deletions; words underlined are additions.

6

1 failing to file a report or record required by state or 2 federal law, willfully impeding or obstructing such filing or 3 inducing another person to do so. Such reports or records 4 shall include only those which are signed in the nurse's 5 capacity as a licensed nurse.

(g) False, misleading, or deceptive advertising.

7 (h) Unprofessional conduct, which shall include, but 8 not be limited to, any departure from, or the failure to 9 conform to, the minimal standards of acceptable and prevailing 10 nursing practice, in which case actual injury need not be 11 established.

(i) Engaging or attempting to engage in the possession, sale, or distribution of controlled substances as set forth in chapter 893, for any other than legitimate purposes authorized by this part.

(j) Being unable to practice nursing with reasonable 16 17 skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, or chemicals or any other type of 18 19 material or as a result of any mental or physical condition. 20 In enforcing this paragraph, the department shall have, upon a finding of the secretary or the secretary's designee that 21 22 probable cause exists to believe that the licensee is unable 23 to practice nursing because of the reasons stated in this paragraph, the authority to issue an order to compel a 24 licensee to submit to a mental or physical examination by 25 26 physicians designated by the department. If the licensee 27 refuses to comply with such order, the department's order directing such examination may be enforced by filing a 28 29 petition for enforcement in the circuit court where the licensee resides or does business. The licensee against whom 30 the petition is filed shall not be named or identified by 31

90

1	initials in any public court records or documents, and the
2	proceedings shall be closed to the public. The department
3	shall be entitled to the summary procedure provided in s.
4	51.011. A nurse affected by the provisions of this paragraph
5	shall at reasonable intervals be afforded an opportunity to
б	demonstrate that she or he can resume the competent practice
7	of nursing with reasonable skill and safety to patients.
8	(k) Failing to report to the department any person who
9	the licensee knows is in violation of this part or of the
10	rules of the department or the board; however, if the licensee
11	verifies that such person is actively participating in a
12	board-approved program for the treatment of a physical or
13	mental condition, the licensee is required to report such
14	person only to an impaired professionals consultant.
15	(1) Knowingly violating any provision of this part, a
16	rule of the board or the department, or a lawful order of the
17	board or department previously entered in a disciplinary
18	proceeding or failing to comply with a lawfully issued
19	subpoena of the department.
20	(m) Failing to report to the department any licensee
21	under chapter 458 or under chapter 459 who the nurse knows has
22	violated the grounds for disciplinary action set out in the
23	law under which that person is licensed and who provides
24	health care services in a facility licensed under chapter 395,
25	or a health maintenance organization certificated under part I
26	of chapter 641, in which the nurse also provides services.
27	(n) Violating any provision of this chapter or chapter
28	456, or any rules adopted pursuant thereto.
29	(2) The board may enter an order denying licensure or
30	imposing any of the penalties in s. $456.072(2)$ against any
31	applicant for licensure or licensee who is found guilty of
	91
COD	I ING:Words stricken are deletions; words underlined are additions.

violating any provision of subsection (1) of this section or 1 2 who is found guilty of violating any provision of s. 3 456.072(1). When the board finds any person guilty of any of the grounds set forth in subsection (1), it may enter an order 4 imposing one or more of the following penalties: 5 6 (a) Refusal to certify to the department an 7 application for licensure. 8 (b) Revocation or suspension of a license with 9 reinstatement subject to the provisions of subsection (3). (c) Permanent revocation of a license. 10 11 (d) Restriction of practice. 12 (e) Imposition of an administrative fine not to exceed 13 \$1,000 for each count or separate offense. 14 (f) Issuance of a reprimand. 15 (q) Placement of the nurse on probation for a period of time and subject to such conditions as the board may 16 17 specify, including requiring the nurse to submit to treatment, 18 to attend continuing education courses, to take an 19 examination, or to work under the supervision of another 20 nurse. 21 Section 32. Subsection (3) of section 465.008, Florida 22 Statutes, is amended to read: 465.008 Renewal of license.--23 (3) Sixty days prior to the end of the biennium the 24 25 department shall mail a notice of renewal to the last known 26 address of the licensee. Section 33. Subsections (1) and (2) of section 27 28 465.016, Florida Statutes, are amended to read: 29 465.016 Disciplinary actions.--30 31 92 CODING: Words stricken are deletions; words underlined are additions.

1	(1) The following acts constitute shall be grounds for
2	denial of a license or disciplinary action, as specified in s.
3	456.072(2)disciplinary action set forth in this section:
4	(a) Obtaining a license by misrepresentation or fraud
5	or through an error of the department or the board.
6	(b) Procuring or attempting to procure a license for
7	any other person by making or causing to be made any false
8	representation.
9	(c) Permitting any person not licensed as a pharmacist
10	in this state or not registered as an intern in this state, or
11	permitting a registered intern who is not acting under the
12	direct and immediate personal supervision of a licensed
13	pharmacist, to fill, compound, or dispense any prescriptions
14	in a pharmacy owned and operated by such pharmacist or in a
15	pharmacy where such pharmacist is employed or on duty.
16	(d) Being unfit or incompetent to practice pharmacy by
17	reason of:
18	1. Habitual intoxication.
19	2. The misuse or abuse of any medicinal drug appearing
20	in any schedule set forth in chapter 893.
21	3. Any abnormal physical or mental condition which
22	threatens the safety of persons to whom she or he might sell
23	or dispense prescriptions, drugs, or medical supplies or for
24	whom she or he might manufacture, prepare, or package, or
25	supervise the manufacturing, preparation, or packaging of,
26	prescriptions, drugs, or medical supplies.
27	(e) Violating any of the requirements of this chapter;
28	or if licensed as a practitioner in this or any other state,
29	violating any of the requirements of their respective practice
30	act or violating chapter 499; 21 U.S.C. ss. 301-392, known as
31	the Federal Food, Drug, and Cosmetic Act; 21 U.S.C. ss. 821 et
	93
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

seq., known as the Comprehensive Drug Abuse Prevention and 1 Control Act; or chapter 893. 2 (f) Having been convicted or found guilty, regardless 3 4 of adjudication, in a court of this state or other 5 jurisdiction, of a crime which directly relates to the ability to practice pharmacy or to the practice of pharmacy. A plea 6 7 of nolo contendere constitutes a conviction for purposes of 8 this provision. 9 (g) Using in the compounding of a prescription, or furnishing upon prescription, an ingredient or article 10 different in any manner from the ingredient or article 11 12 prescribed, except as authorized in s. 465.019(6) or s. 465.025. 13 14 (h) Having been disciplined by a regulatory agency in 15 another state for any offense that would constitute a 16 violation of this chapter. 17 (i) Compounding, dispensing, or distributing a legend drug, including any controlled substance, other than in the 18 19 course of the professional practice of pharmacy. For purposes of this paragraph, it shall be legally presumed that the 20 compounding, dispensing, or distributing of legend drugs in 21 22 excessive or inappropriate quantities is not in the best 23 interests of the patient and is not in the course of the 24 professional practice of pharmacy. (j) Making or filing a report or record which the 25 26 licensee knows to be false, intentionally or negligently 27 failing to file a report or record required by federal or state law, willfully impeding or obstructing such filing, or 28 29 inducing another person to do so. Such reports or records include only those which the licensee is required to make or 30 file in her or his capacity as a licensed pharmacist. 31 94

Second Engrossed

1	(k) Failing to make prescription fee or price
2	information readily available by failing to provide such
3	information upon request and upon the presentation of a
4	prescription for pricing or dispensing. Nothing in this
5	section shall be construed to prohibit the quotation of price
6	information on a prescription drug to a potential consumer by
7	telephone.
8	(1) Placing in the stock of any pharmacy any part of
9	any prescription compounded or dispensed which is returned by
10	a patient; however, in a hospital, nursing home, correctional
11	facility, or extended care facility in which unit-dose
12	medication is dispensed to inpatients, each dose being
13	individually sealed and the individual unit dose or unit-dose
14	system labeled with the name of the drug, dosage strength,
15	manufacturer's control number, and expiration date, if any,
16	the unused unit dose of medication may be returned to the
17	pharmacy for redispensing. Each pharmacist shall maintain
18	appropriate records for any unused or returned medicinal
19	drugs.
20	(m) Being unable to practice pharmacy with reasonable
21	skill and safety by reason of illness, use of drugs,
22	narcotics, chemicals, or any other type of material or as a
23	result of any mental or physical condition. A pharmacist
24	affected under this paragraph shall at reasonable intervals be
25	afforded an opportunity to demonstrate that she or he can
26	resume the competent practice of pharmacy with reasonable
27	skill and safety to her or his customers.
28	(n) Violating a rule of the board or department or
29	violating an order of the board or department previously
30	entered in a disciplinary hearing.
31	
	95
COD	ING:Words stricken are deletions; words <u>underlined</u> are additions.

1	(o) Failing to report to the department any licensee
2	under chapter 458 or under chapter 459 who the pharmacist
3	knows has violated the grounds for disciplinary action set out
4	in the law under which that person is licensed and who
5	provides health care services in a facility licensed under
6	chapter 395, or a health maintenance organization certificated
7	under part I of chapter 641, in which the pharmacist also
8	provides services.
9	(p) Failing to notify the Board of Pharmacy in writing
10	within 20 days of the commencement or cessation of the
11	practice of the profession of pharmacy in Florida when such
12	commencement or cessation of the practice of the profession of
13	pharmacy in Florida was a result of a pending or completed
14	disciplinary action or investigation in another jurisdiction.
15	(q) Using or releasing a patient's records except as
16	authorized by this chapter and chapter 456.
17	(r) Violating any provision of this chapter or chapter
18	456, or any rules adopted pursuant thereto.
19	(2) The board may enter an order denying licensure or
20	imposing any of the penalties in s. $456.072(2)$ against any
21	applicant for licensure or licensee who is found guilty of
22	violating any provision of subsection (1) of this section or
23	who is found guilty of violating any provision of s.
24	456.072(1). When the board finds any person guilty of any of
25	the grounds set forth in subsection (1), it may enter an order
26	imposing one or more of the following penalties:
27	(a) Refusal to certify to the department an
28	application for licensure.
29	(b) Revocation or suspension of a license.
30	(c) Imposition of an administrative fine not to exceed
31	\$5,000 for each count or separate offense.
	96
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

1 (d) Issuance of a reprimand. 2 (e) Placement of the pharmacist on probation for a 3 period of time and subject to such conditions as the board may 4 specify, including, but not limited to, requiring the 5 pharmacist to submit to treatment, to attend continuing education courses, to submit to reexamination, or to work 6 7 under the supervision of another pharmacist. Section 34. Subsections (1) and (2) of section 8 9 466.028, Florida Statutes, are amended to read: 466.028 Grounds for disciplinary action; action by the 10 board.--11 12 (1) The following acts shall constitute grounds for 13 denial of a license or disciplinary action, as specified in s. 14 456.072(2) which the disciplinary actions specified in 15 subsection (2) may be taken: (a) Attempting to obtain, obtaining, or renewing a 16 17 license under this chapter by bribery, fraudulent misrepresentations, or through an error of the department or 18 19 the board. (b) Having a license to practice dentistry or dental 20 hygiene revoked, suspended, or otherwise acted against, 21 including the denial of licensure, by the licensing authority 22 23 of another state, territory, or country. (c) Being convicted or found guilty of or entering a 24 plea of nolo contendere to, regardless of adjudication, a 25 26 crime in any jurisdiction which relates to the practice of 27 dentistry or dental hygiene. A plea of nolo contendere shall create a rebuttable presumption of guilt to the underlying 28 29 criminal charges. (d) Advertising goods or services in a manner which is 30 fraudulent, false, deceptive, or misleading in form or content 31 97 CODING: Words stricken are deletions; words underlined are additions.

contrary to s. 466.019 or rules of the board adopted pursuant 1 2 thereto. 3 (e) Advertising, practicing, or attempting to practice 4 under a name other than one's own. 5 (f) Failing to report to the department any person who 6 the licensee knows, or has reason to believe, is clearly in 7 violation of this chapter or of the rules of the department or 8 the board. 9 (g) Aiding, assisting, procuring, or advising any 10 unlicensed person to practice dentistry or dental hygiene contrary to this chapter or to a rule of the department or the 11 12 board. 13 (h) Being employed by any corporation, organization, 14 group, or person other than a dentist or a professional 15 corporation or limited liability company composed of dentists to practice dentistry. 16 17 (i) Failing to perform any statutory or legal 18 obligation placed upon a licensee. 19 (j) Making or filing a report which the licensee knows 20 to be false, failing to file a report or record required by state or federal law, knowingly impeding or obstructing such 21 filing or inducing another person to do so. Such reports or 22 23 records shall include only those which are signed in the capacity as a licensee. 24 (k) Committing any act which would constitute sexual 25 26 battery, as defined in chapter 794, upon a patient or 27 intentionally touching the sexual organ of a patient. 28 (1) Making deceptive, untrue, or fraudulent 29 representations in or related to the practice of dentistry. (m) Failing to keep written dental records and medical 30 history records justifying the course of treatment of the 31 98

patient including, but not limited to, patient histories,
 examination results, test results, and X rays, if taken.

3 (n) Failing to make available to a patient or client, 4 or to her or his legal representative or to the department if 5 authorized in writing by the patient, copies of documents in 6 the possession or under control of the licensee which relate 7 to the patient or client.

8 (o) Performing professional services which have not 9 been duly authorized by the patient or client, or her or his 10 legal representative, except as provided in ss. 766.103 and 11 768.13.

12 (p) Prescribing, procuring, dispensing, administering, 13 mixing, or otherwise preparing a legend drug, including any 14 controlled substance, other than in the course of the 15 professional practice of the dentist. For the purposes of 16 this paragraph, it shall be legally presumed that prescribing, 17 procuring, dispensing, administering, mixing, or otherwise preparing legend drugs, including all controlled substances, 18 19 in excessive or inappropriate quantities is not in the best interest of the patient and is not in the course of the 20 professional practice of the dentist, without regard to her or 21 22 his intent.

(q) Prescribing, procuring, dispensing, or administering any medicinal drug appearing on any schedule set forth in chapter 893, by a dentist to herself or himself, except those prescribed, dispensed, or administered to the dentist by another practitioner authorized to prescribe them.

(r) Prescribing, procuring, ordering, dispensing,
administering, supplying, selling, or giving any drug which is
a Schedule II amphetamine or a Schedule II sympathomimetic
amine drug or a compound thereof, pursuant to chapter 893, to

99

1	or for any person except for the clinical investigation of the
2	effects of such drugs or compounds when an investigative
3	protocol therefor is submitted to, and reviewed and approved
4	by, the board before such investigation is begun.
5	(s) Being unable to practice her or his profession
6	with reasonable skill and safety to patients by reason of
7	illness or use of alcohol, drugs, narcotics, chemicals, or any
8	other type of material or as a result of any mental or
9	physical condition. In enforcing this paragraph, the
10	department shall have, upon a finding of the secretary or her
11	or his designee that probable cause exists to believe that the
12	licensee is unable to practice dentistry or dental hygiene
13	because of the reasons stated in this paragraph, the authority
14	to issue an order to compel a licensee to submit to a mental
15	or physical examination by physicians designated by the
16	department. If the licensee refuses to comply with such
17	order, the department's order directing such examination may
18	be enforced by filing a petition for enforcement in the
19	circuit court where the licensee resides or does business.
20	The licensee against whom the petition is filed shall not be
21	named or identified by initials in any public court records or
22	documents, and the proceedings shall be closed to the public.
23	The department shall be entitled to the summary procedure
24	provided in s. 51.011. A licensee affected under this
25	paragraph shall at reasonable intervals be afforded an
26	opportunity to demonstrate that she or he can resume the
27	competent practice of her or his profession with reasonable
28	skill and safety to patients.
29	(t) Fraud, deceit, or misconduct in the practice of
30	dentistry or dental hygiene.
31	
	100
COD	ING.Words etricken are deletions: words underlined are additions

(u) Failure to provide and maintain reasonable
 sanitary facilities and conditions.

3

(v) Failure to provide adequate radiation safeguards.

4 (w) Performing any procedure or prescribing any
5 therapy which, by the prevailing standards of dental practice
6 in the community, would constitute experimentation on human
7 subjects, without first obtaining full, informed, and written
8 consent.

9 (x) Being guilty of incompetence or negligence by failing to meet the minimum standards of performance in 10 diagnosis and treatment when measured against generally 11 12 prevailing peer performance, including, but not limited to, the undertaking of diagnosis and treatment for which the 13 14 dentist is not qualified by training or experience or being 15 guilty of dental malpractice. For purposes of this paragraph, it shall be legally presumed that a dentist is not guilty of 16 17 incompetence or negligence by declining to treat an individual if, in the dentist's professional judgment, the dentist or a 18 19 member of her or his clinical staff is not qualified by training and experience, or the dentist's treatment facility 20 is not clinically satisfactory or properly equipped to treat 21 the unique characteristics and health status of the dental 22 23 patient, provided the dentist refers the patient to a qualified dentist or facility for appropriate treatment. As 24 used in this paragraph, "dental malpractice" includes, but is 25 26 not limited to, three or more claims within the previous 27 5-year period which resulted in indemnity being paid, or any single indemnity paid in excess of \$5,000 in a judgment or 28 29 settlement, as a result of negligent conduct on the part of 30 the dentist.

31

•

1	(w) Prostiging on offering to prostige beyond the
1	(y) Practicing or offering to practice beyond the
2	scope permitted by law or accepting and performing
3	professional responsibilities which the licensee knows or has
4	reason to know that she or he is not competent to perform.
5	(z) Delegating professional responsibilities to a
6	person who is not qualified by training, experience, or
7	licensure to perform them.
8	(aa) The violation or the repeated violation of this
9	chapter, chapter 456, or any rule promulgated pursuant to
10	chapter 456 or this chapter; the violation of a lawful order
11	of the board or department previously entered in a
12	disciplinary hearing; or failure to comply with a lawfully
13	issued subpoena of the board or department.
14	(bb) Conspiring with another licensee or with any
15	person to commit an act, or committing an act, which would
16	tend to coerce, intimidate, or preclude another licensee from
17	lawfully advertising her or his services.
18	(cc) Being adjudged mentally incompetent in this or
19	any other state, the discipline for which shall last only so
20	long as the adjudication.
21	(dd) Presigning blank prescription or laboratory work
22	order forms.
23	(ee) Prescribing, ordering, dispensing, administering,
24	supplying, selling, or giving growth hormones, testosterone or
25	its analogs, human chorionic gonadotropin (HCG), or other
26	hormones for the purpose of muscle building or to enhance
27	athletic performance. For the purposes of this subsection, the
28	term "muscle building" does not include the treatment of
29	injured muscle. A prescription written for the drug products
30	listed above may be dispensed by the pharmacist with the
31	
	102
	102
COD	DING: Words stricken are deletions; words <u>underlined</u> are additions.

Second Engrossed

presumption that the prescription is for legitimate medical
 use.

3 Operating or causing to be operated a dental (ff) 4 office in such a manner as to result in dental treatment that 5 is below minimum acceptable standards of performance for the community. This includes, but is not limited to, the use of б 7 substandard materials or equipment, the imposition of time 8 limitations within which dental procedures are to be 9 performed, or the failure to maintain patient records as required by this chapter. 10

11 (gg) Administering anesthesia in a manner which12 violates rules of the board adopted pursuant to s. 466.017.

(hh) Failing to report to the department any licensee under chapter 458 or chapter 459 who the dentist knows has violated the grounds for disciplinary action set out in the law under which that person is licensed and who provides health care services in a facility licensed under chapter 395, or a health maintenance organization certificated under part I of chapter 641, in which the dentist also provides services.

(ii) Failing to report to the board, in writing,
within 30 days if action has been taken against one's license
to practice dentistry in another state, territory, or country.

23 (jj) Advertising specialty services in violation of 24 this chapter.

(kk) Allowing any person other than another dentist or a professional corporation or limited liability company composed of dentists to direct, control, or interfere with a dentist's clinical judgment; however, this paragraph may not be construed to limit a patient's right of informed consent. To direct, control, or interfere with a dentist's clinical judgment may not be interpreted to mean dental services

103

contractually excluded, the application of alternative 1 benefits that may be appropriate given the dentist's 2 3 prescribed course of treatment, or the application of 4 contractual provisions and scope of coverage determinations in comparison with a dentist's prescribed treatment on behalf of 5 a covered person by an insurer, health maintenance 6 7 organization, or a prepaid limited health service 8 organization. 9 (11) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. 10 (2) The board may enter an order denying licensure or 11 12 imposing any of the penalties in s. 456.072(2) against any 13 applicant for licensure or licensee who is found guilty of 14 violating any provision of subsection (1) of this section or 15 who is found guilty of violating any provision of s. 456.072(1). When the board finds any applicant or licensee 16 17 guilty of any of the grounds set forth in subsection (1), it 18 may enter an order imposing one or more of the following 19 penalties: 20 (a) Denial of an application for licensure. 21 (b) Revocation or suspension of a license. 22 (c) Imposition of an administrative fine not to exceed 23 \$3,000 for each count or separate offense. 24 (d) Issuance of a reprimand. (e) Placement of the licensee on probation for a 25 26 period of time and subject to such conditions as the board may 27 specify, including requiring the licensee to attend continuing 28 education courses or demonstrate competency through a written 29 or practical examination or to work under the supervision of 30 another licensee. 31 (f) Restricting the authorized scope of practice. 104

Section 35. Section 466.037, Florida Statutes, is 1 2 amended to read: 3 466.037 Suspension and revocation; administrative 4 fine.--The department may suspend or revoke the certificate of 5 any dental laboratory registered under s. 466.032, for failing 6 to comply with the provisions of this chapter or rules adopted 7 by the department under this chapter. The department may 8 impose an administrative fine not to exceed \$500 for each 9 count or separate offense. Section 36. Subsections (1) and (2) of section 10 467.203, Florida Statutes, are amended to read: 11 12 467.203 Disciplinary actions; penalties.--13 (1) The following acts constitute shall be grounds for 14 denial of a license or disciplinary action, as specified in s. 15 456.072(2) disciplinary action as set forth in this section: 16 (a) Procuring, attempting to procure, or renewing a 17 license to practice midwifery by bribery, by fraudulent 18 misrepresentation, or through an error of the department. 19 (b) Having a license to practice midwifery revoked, 20 suspended, or otherwise acted against, including being denied 21 licensure, by the licensing authority of another state, 22 territory, or country. 23 (c) Being convicted or found guilty, regardless of adjudication, in any jurisdiction of a crime which directly 24 relates to the practice of midwifery or to the ability to 25 26 practice midwifery. A plea of nolo contendere shall be considered a conviction for purposes of this provision. 27 28 (d) Making or filing a false report or record, which 29 the licensee knows to be false; intentionally or negligently failing to file a report or record required by state or 30 federal law; or willfully impeding or obstructing such filing 31 105 CODING: Words stricken are deletions; words underlined are additions. or inducing another to do so. Such reports or records shall
 include only those which are signed in the midwife's capacity
 as a licensed midwife.

4

28

(e) Advertising falsely, misleadingly, or deceptively.

5 (f) Engaging in unprofessional conduct, which 6 includes, but is not limited to, any departure from, or the 7 failure to conform to, the standards of practice of midwifery 8 as established by the department, in which case actual injury 9 need not be established.

(g) Being unable to practice midwifery with reasonable 10 skill and safety to patients by reason of illness; 11 12 drunkenness; or use of drugs, narcotics, chemicals, or other materials or as a result of any mental or physical condition. 13 14 A midwife affected under this paragraph shall, at reasonable 15 intervals, be afforded an opportunity to demonstrate that he 16 or she can resume the competent practice of midwifery with 17 reasonable skill and safety.

(h) Failing to report to the department any person whothe licensee knows is in violation of this chapter or of therules of the department.

(i) Willfully or repeatedly Violating any provision of this chapter, any rule of the department, or any lawful order of the department previously entered in a disciplinary proceeding or failing to comply with a lawfully issued subpoena of the department.

26 (j) Violating any provision of this chapter or chapter
27 456, or any rules adopted pursuant thereto.

(2) The department may enter an order denying

29 licensure or imposing any of the penalties in s. 456.072(2)

30 against any applicant for licensure or licensee who is found

31 guilty of violating any provision of subsection (1) of this

section or who is found guilty of violating any provision of 1 2 s. 456.072(1). When the department finds any person guilty of 3 any of the grounds set forth in subsection (1), it may enter 4 an order imposing one or more of the following penalties: 5 (a) Refusal to approve an application for licensure. 6 (b) Revocation or suspension of a license. 7 (c) Imposition of an administrative fine not to exceed \$1,000 for each count or separate offense. 8 9 (d) Issuance of a reprimand. 10 (e) Placement of the midwife on probation for such period of time and subject to such conditions as the 11 12 department may specify, including requiring the midwife to submit to treatment; undertake further relevant education or 13 14 training; take an examination; or work under the supervision 15 of another licensed midwife, a physician, or a nurse midwife licensed under part I of chapter 464. 16 17 Section 37. Subsections (1) and (2) of section 18 468.1295, Florida Statutes, are amended to read: 19 468.1295 Disciplinary proceedings.--20 (1) The following acts constitute grounds for denial of a license or disciplinary action, as specified in s. 21 456.072(2) both disciplinary actions as set forth in 22 23 subsection (2) and cease and desist or other related actions by the department as set forth in s. 456.065: 24 25 (a) Procuring or attempting to procure a license by 26 bribery, by fraudulent misrepresentation, or through an error 27 of the department or the board. 28 (b) Having a license revoked, suspended, or otherwise 29 acted against, including denial of licensure, by the licensing authority of another state, territory, or country. 30 31 107 CODING: Words stricken are deletions; words underlined are additions.

Second Engrossed

1	(c) Being convicted or found guilty of, or entering a
2	plea of nolo contendere to, regardless of adjudication, a
3	crime in any jurisdiction which directly relates to the
4	practice of speech-language pathology or audiology.
5	(d) Making or filing a report or record which the
6	licensee knows to be false, intentionally or negligently
7	failing to file a report or records required by state or
8	federal law, willfully impeding or obstructing such filing, or
9	inducing another person to impede or obstruct such filing.
10	Such report or record shall include only those reports or
11	records which are signed in one's capacity as a licensed
12	speech-language pathologist or audiologist.
13	(e) Advertising goods or services in a manner which is
14	fraudulent, false, deceptive, or misleading in form or
15	content.
16	(f) Being proven guilty of fraud or deceit or of
17	negligence, incompetency, or misconduct in the practice of
18	speech-language pathology or audiology.
19	(g) Violating a lawful order of the board or
20	department previously entered in a disciplinary hearing, or
21	failing to comply with a lawfully issued subpoena of the board
22	or department.
23	(h) Practicing with a revoked, suspended, inactive, or
24	delinquent license.
25	(i) Using, or causing or promoting the use of, any
26	advertising matter, promotional literature, testimonial,
27	guarantee, warranty, label, brand, insignia, or other
28	representation, however disseminated or published, which is
29	misleading, deceiving, or untruthful.
30	
31	
	108
CODING: Words stricken are deletions; words <u>underlined</u> are additions.	
.

CS for SB 1558

1	(j) Showing or demonstrating or, in the event of sale,
2	delivery of a product unusable or impractical for the purpose
3	represented or implied by such action.
4	(k) Failing to submit to the board on an annual basis,
5	or such other basis as may be provided by rule, certification
6	of testing and calibration of such equipment as designated by
7	the board and on the form approved by the board.
8	(1) Aiding, assisting, procuring, employing, or
9	advising any licensee or business entity to practice
10	speech-language pathology or audiology contrary to this part,
11	chapter 456, or any rule adopted pursuant thereto.
12	(m) Violating any provision of this part or chapter
13	456 or any rule adopted pursuant thereto.
14	(m) (m) (m) Misrepresenting the professional services
15	available in the fitting, sale, adjustment, service, or repair
16	of a hearing aid, or using any other term or title which might
17	connote the availability of professional services when such
18	use is not accurate.
19	(n) (o) Representing, advertising, or implying that a
20	hearing aid or its repair is guaranteed without providing full
21	disclosure of the identity of the guarantor; the nature,
22	extent, and duration of the guarantee; and the existence of
23	conditions or limitations imposed upon the guarantee.
24	(o) (p) Representing, directly or by implication, that
25	a hearing aid utilizing bone conduction has certain specified
26	features, such as the absence of anything in the ear or
27	leading to the ear, or the like, without disclosing clearly
28	and conspicuously that the instrument operates on the bone
29	conduction principle and that in many cases of hearing loss
30	this type of instrument may not be suitable.
31	
	109
	ING:Words stricken are deletions; words underlined are additions.
COD	THE MOLUS SULLEVEN ALE GELECIONS/ WOLUS <u>UNGELITHED</u> ALE AUGILIONS.

1	(p) (q) Stating or implying that the use of any hearing
2	aid will improve or preserve hearing or prevent or retard the
3	progression of a hearing impairment or that it will have any
4	similar or opposite effect.
5	(q) (r) Making any statement regarding the cure of the
б	cause of a hearing impairment by the use of a hearing aid.
7	(r) (s) Representing or implying that a hearing aid is
8	or will be "custom-made," "made to order," or
9	"prescription-made," or in any other sense specially
10	fabricated for an individual, when such is not the case.
11	<u>(s)</u> (t) Canvassing from house to house or by telephone,
12	either in person or by an agent, for the purpose of selling a
13	hearing aid, except that contacting persons who have evidenced
14	an interest in hearing aids, or have been referred as in need
15	of hearing aids, shall not be considered canvassing.
16	(t)(u) Failing to notify the department in writing of
17	a change in current mailing and place-of-practice address
18	within 30 days after such change.
19	<u>(u)</u> Failing to provide all information as described
20	in ss. 468.1225(5)(b), 468.1245(1), and 468.1246.
21	<u>(v)</u> Exercising influence on a client in such a
22	manner as to exploit the client for financial gain of the
23	licensee or of a third party.
24	(w)(x) Practicing or offering to practice beyond the
25	scope permitted by law or accepting and performing
26	professional responsibilities the licensee or
27	certificateholder knows, or has reason to know, the licensee
28	or certificateholder is not competent to perform.
29	<u>(x)</u> (y) Aiding, assisting, procuring, or employing any
30	unlicensed person to practice speech-language pathology or
31	audiology.
	110

(y) (z) Delegating or contracting for the performance 1 2 of professional responsibilities by a person when the licensee 3 delegating or contracting for performance of such 4 responsibilities knows, or has reason to know, such person is 5 not qualified by training, experience, and authorization to 6 perform them. 7 (z)(aa) Committing any act upon a patient or client 8 which would constitute sexual battery or which would 9 constitute sexual misconduct as defined pursuant to s. 468.1296. 10 (aa) (bb) Being unable to practice the profession for 11 12 which he or she is licensed or certified under this chapter with reasonable skill or competence as a result of any mental 13 14 or physical condition or by reason of illness, drunkenness, or use of drugs, narcotics, chemicals, or any other substance. In 15 enforcing this paragraph, upon a finding by the secretary, his 16 17 or her designee, or the board that probable cause exists to believe that the licensee or certificateholder is unable to 18 19 practice the profession because of the reasons stated in this paragraph, the department shall have the authority to compel a 20 licensee or certificateholder to submit to a mental or 21 physical examination by a physician, psychologist, clinical 22 23 social worker, marriage and family therapist, or mental health counselor designated by the department or board. 24 If the licensee or certificateholder refuses to comply with the 25 26 department's order directing the examination, such order may be enforced by filing a petition for enforcement in the 27 circuit court in the circuit in which the licensee or 28 29 certificateholder resides or does business. The department shall be entitled to the summary procedure provided in s. 30 51.011. A licensee or certificateholder affected under this 31 111

paragraph shall at reasonable intervals be afforded an 1 2 opportunity to demonstrate that he or she can resume the 3 competent practice for which he or she is licensed or 4 certified with reasonable skill and safety to patients. 5 (bb) Violating any provision of this chapter or 6 chapter 456, or any rules adopted pursuant thereto. 7 (2) The board may enter an order denying licensure or 8 imposing any of the penalties in s. 456.072(2) against any 9 applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or 10 who is found guilty of violating any provision of s. 11 12 456.072(1). When the board finds any person guilty of any of the acts set forth in subsection (1), it may issue an order 13 14 imposing one or more of the following penalties: 15 (a) Refusal to certify, or to certify with 16 restrictions, an application for licensure. 17 (b) Suspension or permanent revocation of a license. 18 (c) Issuance of a reprimand. 19 (d) Restriction of the authorized scope of practice. 20 (e) Imposition of an administrative fine not to exceed 21 \$1,000 for each count or separate offense. (f) Placement of the licensee or certificateholder on 22 probation for a period of time and subject to such conditions 23 as the board may specify. Those conditions may include, but 24 25 are not limited to, requiring the licensee or 26 certificateholder to undergo treatment, attend continuing education courses, submit to be reexamined, work under the 27 28 supervision of another licensee, or satisfy any terms which 29 are reasonably tailored to the violation found. 30 (q) Corrective action. 31 112

Section 38. Subsections (1) and (2) of section 1 2 468.1755, Florida Statutes, are amended to read: 3 468.1755 Disciplinary proceedings.--4 (1) The following acts shall constitute grounds for 5 denial of a license or disciplinary action, as specified in s. 6 456.072(2) which the disciplinary actions in subsection (2) 7 may be taken: 8 (a) Violation of any provision of s. 456.072(1) or s. 9 468.1745(1). 10 (b) Attempting to procure a license to practice nursing home administration by bribery, by fraudulent 11 12 misrepresentation, or through an error of the department or the board. 13 14 (c) Having a license to practice nursing home 15 administration revoked, suspended, or otherwise acted against, including the denial of licensure, by the licensing authority 16 17 of another state, territory, or country. 18 (d) Being convicted or found guilty, regardless of 19 adjudication, of a crime in any jurisdiction which relates to the practice of nursing home administration or the ability to 20 practice nursing home administration. Any plea of nolo 21 contendere shall be considered a conviction for purposes of 22 23 this part. (e) Making or filing a report or record which the 24 licensee knows to be false, intentionally failing to file a 25 26 report or record required by state or federal law, willfully 27 impeding or obstructing such filing, or inducing another person to impede or obstruct such filing. Such reports or 28 29 records shall include only those which are signed in the 30 capacity of a licensed nursing home administrator. 31 113 CODING: Words stricken are deletions; words underlined are additions.

1 (f) Authorizing the discharge or transfer of a 2 resident for a reason other than those provided in ss. 400.022 3 and 400.0255. 4 (g) Advertising goods or services in a manner which is 5 fraudulent, false, deceptive, or misleading in form or 6 content. 7 (h) Fraud or deceit, negligence, incompetence, or 8 misconduct in the practice of nursing home administration. 9 (i) A violation or repeated violations of this part, 10 chapter 456, or any rules promulgated pursuant thereto. (i) (j) Violation of a lawful order of the board or 11 12 department previously entered in a disciplinary hearing or 13 failing to comply with a lawfully issued subpoena of the board 14 or department. 15 (j)(k) Practicing with a revoked, suspended, inactive, 16 or delinguent license. 17 (k) (1) Repeatedly acting in a manner inconsistent with the health, safety, or welfare of the patients of the facility 18 19 in which he or she is the administrator. 20 (1) (m) Being unable to practice nursing home administration with reasonable skill and safety to patients by 21 reason of illness, drunkenness, use of drugs, narcotics, 22 23 chemicals, or any other material or substance or as a result of any mental or physical condition. In enforcing this 24 paragraph, upon a finding of the secretary or his or her 25 26 designee that probable cause exists to believe that the 27 licensee is unable to serve as a nursing home administrator due to the reasons stated in this paragraph, the department 28 29 shall have the authority to issue an order to compel the licensee to submit to a mental or physical examination by a 30 physician designated by the department. If the licensee 31 114

refuses to comply with such order, the department's order 1 directing such examination may be enforced by filing a 2 3 petition for enforcement in the circuit court where the 4 licensee resides or serves as a nursing home administrator. 5 The licensee against whom the petition is filed shall not be named or identified by initials in any public court records or 6 7 documents, and the proceedings shall be closed to the public. The department shall be entitled to the summary procedure 8 9 provided in s. 51.011. A licensee affected under this 10 paragraph shall have the opportunity, at reasonable intervals, to demonstrate that he or she can resume the competent 11 12 practice of nursing home administration with reasonable skill 13 and safety to patients. 14 (m)(n) Willfully or repeatedly violating any of the provisions of the law, code, or rules of the licensing or 15 16 supervising authority or agency of the state or political 17 subdivision thereof having jurisdiction of the operation and licensing of nursing homes. 18 19 (n)(o) Paying, giving, causing to be paid or given, or 20 offering to pay or to give to any person a commission or other valuable consideration for the solicitation or procurement, 21 22 either directly or indirectly, of nursing home usage. 23 (o)(p) Willfully permitting unauthorized disclosure of 24 information relating to a patient or his or her records. (p)(q) Discriminating with respect to patients, 25 26 employees, or staff on account of race, religion, color, sex, 27 or national origin. (q) Violating any provision of this chapter or chapter 28 29 456, or any rules adopted pursuant thereto. The board may enter an order denying licensure or 30 (2) imposing any of the penalties in s. 456.072(2) against any 31 115

applicant for licensure or licensee who is found guilty of 1 2 violating any provision of subsection (1) of this section or 3 who is found guilty of violating any provision of s. 4 456.072(1). When the board finds any nursing home 5 administrator guilty of any of the grounds set forth in subsection (1), it may enter an order imposing one or more of 6 7 the following penalties: 8 (a) Denial of an application for licensure. 9 (b) Revocation or suspension of a license. (c) Imposition of an administrative fine not to exceed 10 \$1,000 for each count or separate offense. 11 12 (d) Issuance of a reprimand. (e) Placement of the licensee on probation for a 13 14 period of time and subject to such conditions as the board may 15 specify, including requiring the licensee to attend continuing education courses or to work under the supervision of another 16 17 licensee. 18 (f) Restriction of the authorized scope of practice. 19 Section 39. Section 468.217, Florida Statutes, is 20 amended to read: 21 468.217 Denial of or refusal to renew license; 22 suspension and revocation of license and other disciplinary 23 measures.--The following acts constitute grounds for denial 24 (1)25 of a license or disciplinary action, as specified in s. 26 456.072(2) The board may deny or refuse to renew a license, 27 suspend or revoke a license, issue a reprimand, impose a fine, or impose probationary conditions upon a licensee, when the 28 29 licensee or applicant for license has been guilty of 30 unprofessional conduct which has endangered, or is likely to 31 116

endanger, the health, welfare, or safety of the public. 1 Such unprofessional conduct includes: 2 3 (a) Attempting to obtain, obtaining, or renewing a 4 license to practice occupational therapy by bribery, by 5 fraudulent misrepresentation, or through an error of the 6 department or the board. 7 (b) Having a license to practice occupational therapy 8 revoked, suspended, or otherwise acted against, including the 9 denial of licensure, by the licensing authority of another 10 state, territory, or country. (c) Being convicted or found guilty, regardless of 11 12 adjudication, of a crime in any jurisdiction which directly relates to the practice of occupational therapy or to the 13 14 ability to practice occupational therapy. A plea of nolo 15 contendere shall be considered a conviction for the purposes 16 of this part. 17 (d) False, deceptive, or misleading advertising. (e) Advertising, practicing, or attempting to practice 18 19 under a name other than one's own name. 20 (f) Failing to report to the department any person who 21 the licensee knows is in violation of this part or of the 22 rules of the department or of the board. 23 (g) Aiding, assisting, procuring, or advising any 24 unlicensed person to practice occupational therapy contrary to this part or to a rule of the department or the board. 25 26 (h) Failing to perform any statutory or legal 27 obligation placed upon a licensed occupational therapist or occupational therapy assistant. 28 29 (i) Making or filing a report which the licensee knows to be false, intentionally or negligently failing to file a 30 report or record required by state or federal law, willfully 31 117 CODING: Words stricken are deletions; words underlined are additions.

impeding or obstructing such filing or inducing another person 1 2 to do so. Such reports or records include only those which 3 are signed in the capacity as a licensed occupational 4 therapist or occupational therapy assistant. 5 (j) Paying or receiving any commission, bonus, б kickback, or rebate to or from, or engaging in any split-fee 7 arrangement in any form whatsoever with, a physician, 8 organization, agency, or person, either directly or 9 indirectly, for patients referred to providers of health care 10 goods and services, including, but not limited to, hospitals, nursing homes, clinical laboratories, ambulatory surgical 11 12 centers, or pharmacies. The provisions of this paragraph 13 shall not be construed to prevent an occupational therapist or 14 occupational therapy assistant from receiving a fee for 15 professional consultation services. (k) Exercising influence within a patient-therapist 16 17 relationship for purposes of engaging a patient in sexual activity. A patient is presumed to be incapable of giving 18 19 free, full, and informed consent to sexual activity with the patient's occupational therapist or occupational therapy 20 21 assistant. (1) Making deceptive, untrue, or fraudulent 22 23 representations in the practice of occupational therapy or employing a trick or scheme in the practice of occupational 24 therapy if such scheme or trick fails to conform to the 25 26 generally prevailing standards of treatment in the 27 occupational therapy community. (m) Soliciting patients, either personally or through 28 an agent, through the use of fraud, intimidation, undue 29 influence, or a form of overreaching or vexatious conduct. A 30 "solicitation" is any communication which directly or 31 118 CODING: Words stricken are deletions; words underlined are additions.

implicitly requests an immediate oral response from the 1 2 recipient. 3 (n) Failing to keep written records justifying the 4 course of treatment of the patient, including, but not limited 5 to, patient histories, examination results, and test results. 6 (o) Exercising influence on the patient or client in 7 such a manner as to exploit the patient or client for 8 financial gain of the licensee or of a third party which 9 includes, but is not limited to, the promoting or selling of services, goods, appliances, or drugs. 10 (p) Performing professional services which have not 11 12 been duly authorized by the patient or client, or his or her legal representative, except as provided in s. 768.13. 13 14 (q) Gross or repeated malpractice or the failure to 15 practice occupational therapy with that level of care, skill, and treatment which is recognized by a reasonably prudent 16 17 similar occupational therapist or occupational therapy assistant as being acceptable under similar conditions and 18 19 circumstances. 20 (r) Performing any procedure which, by the prevailing standards of occupational therapy practice in the community, 21 22 would constitute experimentation on a human subject without first obtaining full, informed, and written consent. 23 (s) Practicing or offering to practice beyond the 24 scope permitted by law or accepting and performing 25 26 professional responsibilities which the licensee knows or has 27 reason to know that he or she is not competent to perform. (t) Being unable to practice occupational therapy with 28 29 reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other 30 type of material or as a result of any mental or physical 31 119 CODING: Words stricken are deletions; words underlined are additions.

condition. In enforcing this paragraph, the department shall 1 have, upon probable cause, authority to compel an occupational 2 3 therapist or occupational therapy assistant to submit to a 4 mental or physical examination by physicians designated by the 5 department. The failure of an occupational therapist or occupational therapy assistant to submit to such examination 6 7 when so directed constitutes an admission of the allegations 8 against him or her, upon which a default and final order may 9 be entered without the taking of testimony or presentation of evidence, unless the failure was due to circumstances beyond 10 his or her control. An occupational therapist or occupational 11 12 therapy assistant affected under this paragraph shall at 13 reasonable intervals be afforded an opportunity to demonstrate 14 that he or she can resume the competent practice of 15 occupational therapy with reasonable skill and safety to 16 patients. In any proceeding under this paragraph, neither the 17 record of proceedings nor the orders entered by the board shall be used against an occupational therapist or 18 19 occupational therapy assistant in any other proceeding. 20 (u) Delegating professional responsibilities to a person when the licensee who is delegating such 21 22 responsibilities knows or has reason to know that such person 23 is not qualified by training, experience, or licensure to 24 perform them. 25 (v) Violating any provision of this part, a rule of 26 the board or department, or a lawful order of the board or 27 department previously entered in a disciplinary hearing or failing to comply with a lawfully issued subpoena of the 28 29 department. (w) Conspiring with another licensee or with any other 30 person to commit an act, or committing an act, which would 31 120

tend to coerce, intimidate, or preclude another licensee from 1 2 lawfully advertising his or her services. 3 (x) Violating any provision of this chapter or chapter 4 456, or any rules adopted pursuant thereto. 5 (2) The board may enter an order denying licensure or 6 imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of 7 8 violating any provision of subsection (1) of this section or 9 who is found guilty of violating any provision of s. 456.072(1). 10 (3) (3) (2) The board may not reinstate the license of an 11 12 occupational therapist or occupational therapy assistant, or cause a license to be issued to a person it has deemed 13 14 unqualified, until such time as the board is satisfied that 15 such person has complied with all the terms and conditions set forth in the final order and is capable of safely engaging in 16 17 the practice of occupational therapy. 18 Section 40. Subsections (1) and (2) of section 19 468.365, Florida Statutes, are amended to read: 468.365 Disciplinary grounds and actions.--20 (1) The following acts constitute grounds for denial 21 of a license or disciplinary action, as specified in s. 22 23 456.072(2) which the disciplinary actions in subsection (2) 24 may be taken: 25 (a) Procuring, attempting to procure, or renewing a 26 license as provided by this part by bribery, by fraudulent 27 misrepresentation, or through an error of the department or 28 the board. 29 (b) Having licensure, certification, registration, or other authority, by whatever name known, to deliver 30 respiratory care services revoked, suspended, or otherwise 31 121 CODING: Words stricken are deletions; words underlined are additions.

1	acted against, including the denial of licensure,
2	certification, registration, or other authority to deliver
3	respiratory care services by the licensing authority of
4	another state, territory, or country.
5	(c) Being convicted or found guilty of, or entering a
6	plea of nolo contendere to, regardless of adjudication, a
7	crime in any jurisdiction which directly relates to
8	respiratory care services or to the ability to deliver such
9	services.
10	(d) Willfully making or filing a false report or
11	record, willfully failing to file a report or record required
12	by state or federal law, or willfully impeding or obstructing
13	such filing or inducing another person to do so. Such reports
14	or records include only those reports or records which require
15	the signature of a respiratory care practitioner or
16	respiratory therapist licensed pursuant to this part.
17	(e) Circulating false, misleading, or deceptive
18	advertising.
19	(f) Unprofessional conduct, which includes, but is not
20	limited to, any departure from, or failure to conform to,
21	acceptable standards related to the delivery of respiratory
22	care services, as set forth by the board in rules adopted
23	pursuant to this part.
24	(g) Engaging or attempting to engage in the
25	possession, sale, or distribution of controlled substances, as
26	set forth by law, for any purpose other than a legitimate
27	purpose.
28	(h) Willfully failing to report any violation of this
29	part.
30	
31	
	122
005	
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

1	(i) Willfully or repeatedly Violating a rule of the
1 2	(i) Willfully or repeatedly Violating a rule of the board or the department or a lawful order of the board or
∠ 3	department previously entered in a disciplinary hearing.
3 4	
+ 5	(j) Violation of any rule adopted pursuant to this
_	$\frac{1}{1}$
6 7	(j)(k) Engaging in the delivery of respiratory care
, 8	services with a revoked, suspended, or inactive license.
	(k) (1) Permitting, aiding, assisting, procuring, or
9	advising any person who is not licensed pursuant to this part,
10	contrary to this part or to any rule of the department or the
11	board.
12	(1) (m) Failing to perform any statutory or legal
13	obligation placed upon a respiratory care practitioner or
14	respiratory therapist licensed pursuant to this part.
15	(m) (n) Accepting and performing professional
16	responsibilities which the licensee knows, or has reason to
17	know, she or he is not competent to perform.
18	(n) (o) Delegating professional responsibilities to a
19	person when the licensee delegating such responsibilities
20	knows, or has reason to know, that such person is not
21	qualified by training, experience, or licensure to perform
22	them.
23	<u>(o)</u> (p) Gross or repeated malpractice or the failure to
24	deliver respiratory care services with that level of care,
25	skill, and treatment which is recognized by a reasonably
26	prudent respiratory care practitioner or respiratory therapist
27	with similar professional training as being acceptable under
28	similar conditions and circumstances.
29	<u>(p)</u> (q) Paying or receiving any commission, bonus,
30	kickback, or rebate to or from, or engaging in any split-fee
31	arrangement in any form whatsoever with, a person,
	123
COD	I JING:Words stricken are deletions; words underlined are additions.

organization, or agency, either directly or indirectly, for 1 goods or services rendered to patients referred by or to 2 providers of health care goods and services, including, but 3 not limited to, hospitals, nursing homes, clinical 4 5 laboratories, ambulatory surgical centers, or pharmacies. The provisions of this paragraph shall not be construed to prevent 6 7 the licensee from receiving a fee for professional consultation services. 8 9 (q) (r) Exercising influence within a respiratory care 10 relationship for the purpose of engaging a patient in sexual activity. A patient is presumed to be incapable of giving 11 12 free, full, and informed consent to sexual activity with the 13 patient's respiratory care practitioner or respiratory 14 therapist. (r)(s) Making deceptive, untrue, or fraudulent 15 16 representations in the delivery of respiratory care services 17 or employing a trick or scheme in the delivery of respiratory care services if such a scheme or trick fails to conform to 18 19 the generally prevailing standards of other licensees within 20 the community. (s)(t) Soliciting patients, either personally or 21 22 through an agent, through the use of fraud, deception, or otherwise misleading statements or through the exercise of 23 intimidation or undue influence. 24 25 (t) (u) Failing to keep written respiratory care 26 records justifying the reason for the action taken by the 27 licensee. (u) (v) Exercising influence on the patient in such a 28 manner as to exploit the patient for the financial gain of the 29 licensee or a third party, which includes, but is not limited 30 31 124 CODING: Words stricken are deletions; words underlined are additions. to, the promoting or selling of services, goods, appliances,
 or drugs.

3 <u>(v)(w)</u> Performing professional services which have not 4 been duly ordered by a physician licensed pursuant to chapter 5 458 or chapter 459 and which are not in accordance with 6 protocols established by the hospital, other health care 7 provider, or the board, except as provided in ss. 743.064, 8 766.103, and 768.13.

9 (w) (x) Being unable to deliver respiratory care 10 services with reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, 11 12 chemicals, or any other type of material as a result of any mental or physical condition. In enforcing this paragraph, 13 14 the department shall, upon probable cause, have authority to 15 compel a respiratory care practitioner or respiratory therapist to submit to a mental or physical examination by 16 17 physicians designated by the department. The cost of examination shall be borne by the licensee being examined. 18 19 The failure of a respiratory care practitioner or respiratory therapist to submit to such an examination when so directed 20 constitutes an admission of the allegations against her or 21 him, upon which a default and a final order may be entered 22 23 without the taking of testimony or presentation of evidence, unless the failure was due to circumstances beyond her or his 24 control. A respiratory care practitioner or respiratory 25 26 therapist affected under this paragraph shall at reasonable 27 intervals be afforded an opportunity to demonstrate that she or he can resume the competent delivery of respiratory care 28 29 services with reasonable skill and safety to her or his patients. In any proceeding under this paragraph, neither the 30 record of proceedings nor the orders entered by the board 31

125

shall be used against a respiratory care practitioner or 1 2 respiratory therapist in any other proceeding. 3 (x) Violating any provision of this chapter or chapter 4 456, or any rules adopted pursuant thereto. 5 (2) The board may enter an order denying licensure or 6 imposing any of the penalties in s. 456.072(2) against any 7 applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or 8 9 who is found guilty of violating any provision of s. 456.072(1). If the board finds any person guilty of any of the 10 grounds set forth in subsection (1), it may enter an order 11 12 imposing one or more of the following penalties: (a) Denial of an application for licensure. 13 14 (b) Revocation or suspension of licensure. (c) Imposition of an administrative fine not to exceed 15 16 \$1,000 for each count or separate offense. 17 (d) Placement of the respiratory care practitioner or 18 respiratory therapist on probation for such period of time and 19 subject to such conditions as the board may specify, including, but not limited to, requiring the respiratory care 20 21 practitioner or respiratory therapist to submit to treatment, 22 to attend continuing education courses, or to work under the 23 supervision of another respiratory care practitioner or 24 respiratory therapist. 25 (e) Issuance of a reprimand. 26 Section 41. Subsections (1) and (2) of section 468.518, Florida Statutes, are amended to read: 27 28 468.518 Grounds for disciplinary action. --29 (1) The following acts constitute grounds for denial 30 of a license or disciplinary action, as specified in s. 31 126 CODING: Words stricken are deletions; words underlined are additions.

456.072(2) which the disciplinary actions in subsection (2) 1 2 may be taken: 3 (a) Violating any provision of this part, any board or 4 agency rule adopted pursuant thereto, or any lawful order of 5 the board or agency previously entered in a disciplinary hearing held pursuant to this part, or failing to comply with 6 7 a lawfully issued subpoena of the agency. The provisions of this paragraph also apply to any order or subpoena previously 8 9 issued by the Department of Health during its period of regulatory control over this part. 10 (b) Being unable to engage in dietetics and nutrition 11 12 practice or nutrition counseling with reasonable skill and safety to patients by reason of illness or use of alcohol, 13 14 drugs, narcotics, chemicals, or any other type of material or 15 as a result of any mental or physical condition. 1. A licensee whose license is suspended or revoked 16 17 pursuant to this paragraph shall, at reasonable intervals, be given an opportunity to demonstrate that he or she can resume 18 19 the competent practice of dietetics and nutrition or nutrition counseling with reasonable skill and safety to patients. 20 21 2. Neither the record of the proceeding nor the orders 22 entered by the board in any proceeding under this paragraph 23 may be used against a licensee in any other proceeding. (c) Attempting to procure or procuring a license to 24 practice dietetics and nutrition or nutrition counseling by 25 26 fraud or material misrepresentation of material fact. 27 (d) Having a license to practice dietetics and nutrition or nutrition counseling revoked, suspended, or 28 29 otherwise acted against, including the denial of licensure by the licensing authority of another state, district, territory, 30 or country. 31 127

1 (e) Being convicted or found guilty of, or entering a
2 plea of nolo contendere to, regardless of adjudication, a
3 crime in any jurisdiction which directly relates to the
4 practice of dietetics and nutrition or nutrition counseling or
5 the ability to practice dietetics and nutrition or nutrition
6 counseling.
7 (f) Making or filing a report or record that the
8 licensee knows to be false, willfully failing to file a report
9 or record required by state or federal law, willfully impeding
10 or obstructing such filing, or inducing another person to
11 impede or obstruct such filing. Such reports or records
12 include only those that are signed in the capacity of a
13 licensed dietitian/nutritionist or licensed nutrition
14 counselor.
15 (g) Advertising goods or services in a manner that is
16 fraudulent, false, deceptive, or misleading in form or
17 content.
18 (h) Committing an act of fraud or deceit, or of
19 negligence, incompetency, or misconduct in the practice of
20 dietetics and nutrition or nutrition counseling.
21 (i) Practicing with a revoked, suspended, inactive, or
22 delinquent license.
23 (j) Treating or undertaking to treat human ailments by
24 means other than by dietetics and nutrition practice or
25 nutrition counseling.
26 (k) Failing to maintain acceptable standards of
27 practice as set forth by the board and the council in rules
28 adopted pursuant to this part.
29 (1) Engaging directly or indirectly in the dividing,
30 transferring, assigning, rebating, or refunding of fees
31 received for professional services, or profiting by means of a
128
CODING: Words stricken are deletions; words underlined are additions.

1 credit or other valuable consideration, such as an une	arned
2 commission, discount, or gratuity, with any person ref	erring a
3 patient or with any relative or business associate of	the
4 referring person. Nothing in this part prohibits the m	lembers
5 of any regularly and properly organized business entit	y that
6 is composed of licensees under this part and recognize	d under
7 the laws of this state from making any division of the	ir total
8 fees among themselves as they determine necessary.	
9 (m) Advertising, by or on behalf of a licensee	under
10 this part, any method of assessment or treatment which	is
11 experimental or without generally accepted scientific	
12 validation.	
13 (n) Violating any provision of this chapter or	chapter
14 456, or any rules adopted pursuant thereto.	
15 (2) <u>The board may enter an order denying licen</u>	sure or
16 imposing any of the penalties in s. 456.072(2) against	any
17 applicant for licensure or licensee who is found guilt	y of
18 violating any provision of subsection (1) of this sect	ion or
19 who is found guilty of violating any provision of s.	
20 456.072(1). When the board finds any licensee guilty of	any of
21 the grounds set forth in subsection (1), it may enter	an order
22 imposing one or more of the following penalties:	
23 (a) Denial of an application for licensure;	
24 (b) Revocation or suspension of a license;	
25 (c) Imposition of an administrative fine not to	, exceed
26 \$1,000 for each violation;	
27 (d) Issuance of a reprimand or letter of guidan	. ce;
28 (e) Placement of the licensee on probation for	a
29 period of time and subject to such conditions as the b	oard may
30 specify, including requiring the licensee to attend co	ntinuing
31 education courses or to work under the supervision of	â
129	
CODING:Words stricken are deletions; words underlined are	additions.

```
Second Engrossed
```

licensed dietitian/nutritionist or licensed nutrition 1 2 counselor; or 3 (f) Restriction of the authorized scope of practice of 4 the licensee. 5 Section 42. Section 468.719, Florida Statutes, is 6 amended to read: 7 468.719 Disciplinary actions.--(1) The following acts constitute shall be grounds for 8 9 denial of a license or disciplinary action, as specified in s. 10 456.072(2) disciplinary actions provided for in subsection (2): 11 12 (a) A violation of any law relating to the practice of athletic training, including, but not limited to, any 13 14 violation of this part, s. 456.072, or any rule adopted 15 pursuant thereto. 16 (a)(b) Failing to include the athletic trainer's name 17 and license number in any advertising, including, but not limited to, business cards and letterhead, related to the 18 19 practice of athletic training. Advertising shall not include clothing or other novelty items. 20 21 (b)(c) Committing incompetency or misconduct in the 22 practice of athletic training. 23 (c)(d) Committing fraud or deceit in the practice of athletic training. 24 25 (d)(e) Committing negligence, gross negligence, or 26 repeated negligence in the practice of athletic training. 27 (e)(f) While practicing athletic training, being unable to practice athletic training with reasonable skill and 28 29 safety to athletes by reason of illness or use of alcohol or drugs or as a result of any mental or physical condition. 30 31 130

Second Engrossed

(f) Violating any provision of this chapter or chapter 1 2 456, or any rules adopted pursuant thereto. 3 (2) The board may enter an order denying licensure or 4 imposing any of the penalties in s. 456.072(2) against any 5 applicant for licensure or licensee who is found guilty of 6 violating any provision of subsection (1) of this section or 7 who is found guilty of violating any provision of s. 456.072(1). When the board finds any person guilty of any of 8 9 the acts set forth in subsection (1), the board may enter an 10 order imposing one or more of the penalties provided in s. 456.072. 11 12 Section 43. Section 468.811, Florida Statutes, is amended to read: 13 14 468.811 Disciplinary proceedings.--15 (1) The following acts constitute are grounds for denial of a license or disciplinary action, as specified in s. 16 17 456.072(2): disciplinary action against a licensee and the issuance of cease and desist orders or other related action by 18 19 the department, pursuant to s. 456.072, against any person who 20 engages in or aids in a violation. 21 (a) Attempting to procure a license by fraudulent 22 misrepresentation. 23 (b) Having a license to practice orthotics, prosthetics, or pedorthics revoked, suspended, or otherwise 24 acted against, including the denial of licensure in another 25 26 jurisdiction. (c) Being convicted or found guilty of or pleading 27 nolo contendere to, regardless of adjudication, in any 28 29 jurisdiction, a crime that directly relates to the practice of orthotics, prosthetics, or pedorthics, including violations of 30 31 131 CODING: Words stricken are deletions; words underlined are additions.

federal laws or regulations regarding orthotics, prosthetics, 1 or pedorthics. 2 3 (d) Filing a report or record that the licensee knows 4 is false, intentionally or negligently failing to file a 5 report or record required by state or federal law, willfully impeding or obstructing such filing, or inducing another 6 7 person to impede or obstruct such filing. Such reports or 8 records include only reports or records that are signed in a 9 person's capacity as a licensee under this act. (e) Advertising goods or services in a fraudulent, 10 false, deceptive, or misleading manner. 11 12 (f) Violation of this act or chapter 456, or any rules 13 adopted thereunder. 14 (f)(g) Violation of an order of the board, agency, or 15 department previously entered in a disciplinary hearing or 16 failure to comply with a subpoena issued by the board, agency, 17 or department. 18 (g)(h) Practicing with a revoked, suspended, or 19 inactive license. (h)(i) Gross or repeated malpractice or the failure to 20 deliver orthotic, prosthetic, or pedorthic services with that 21 22 level of care and skill which is recognized by a reasonably 23 prudent licensed practitioner with similar professional training as being acceptable under similar conditions and 24 25 circumstances. 26 (i)(j) Failing to provide written notice of any 27 applicable warranty for an orthosis, prosthesis, or pedorthic device that is provided to a patient. 28 29 (j) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. 30 31 132 CODING: Words stricken are deletions; words underlined are additions.

The board may enter an order denying licensure or 1 (2) 2 imposing any of the penalties in s. 456.072(2) against any 3 applicant for licensure or licensee who is found guilty of 4 violating any provision of subsection (1) of this section or 5 who is found guilty of violating any provision of s. 6 456.072(1). The board may enter an order imposing one or more 7 of the penalties in s. 456.072(2) against any person who 8 violates any provision of subsection (1). 9 Section 44. Subsections (1) and (2) of section 478.52, Florida Statutes, are amended to read: 10 478.52 Disciplinary proceedings.--11 12 (1) The following acts constitute are grounds for 13 denial of a license or disciplinary action, as specified in s. 14 456.072(2) which the disciplinary actions in subsection (2) 15 may be taken: (a) Obtaining or attempting to obtain a license by 16 17 bribery, fraud, or knowing misrepresentation. 18 (b) Having a license or other authority to deliver 19 electrolysis services revoked, suspended, or otherwise acted against, including denial of licensure, in another 20 21 jurisdiction. 22 (c) Being convicted or found guilty of, or entering a 23 plea of nolo contendere to, regardless of adjudication, a crime, in any jurisdiction, which directly relates to the 24 25 practice of electrology. 26 (d) Willfully making or filing a false report or 27 record, willfully failing to file a report or record required for electrologists, or willfully impeding or obstructing the 28 29 filing of a report or record required by this act or inducing another person to do so. 30 31 133 CODING: Words stricken are deletions; words underlined are additions.

(e) Circulating false, misleading, or deceptive 1 2 advertising. 3 (f) Unprofessional conduct, including any departure 4 from, or failure to conform to, acceptable standards related 5 to the delivery of electrolysis services. 6 Engaging or attempting to engage in the illegal (g) 7 possession, sale, or distribution of any illegal or controlled 8 substance. 9 (h) Willfully failing to report any known violation of 10 this chapter. (i) Willfully or repeatedly violating a rule adopted 11 12 under this chapter, or an order of the board or department previously entered in a disciplinary hearing. 13 14 (j) Engaging in the delivery of electrolysis services without an active license. 15 16 (k) Employing an unlicensed person to practice 17 electrology. 18 (1) Failing to perform any statutory or legal 19 obligation placed upon an electrologist. 20 (m) Accepting and performing professional 21 responsibilities which the licensee knows, or has reason to 22 know, she or he is not competent to perform. 23 (n) Delegating professional responsibilities to a person the licensee knows, or has reason to know, is 24 unqualified by training, experience, or licensure to perform. 25 26 (o) Gross or repeated malpractice or the inability to 27 practice electrology with reasonable skill and safety. 28 (p) Judicially determined mental incompetency. 29 (q) Practicing or attempting to practice electrology 30 under a name other than her or his own. 31 134 CODING: Words stricken are deletions; words underlined are additions.

.

CS for SB 1558

1	(r) Being unable to practice electrology with
2	reasonable skill and safety because of a mental or physical
3	condition or illness, or the use of alcohol, controlled
4	substances, or any other substance which impairs one's ability
5	to practice.
6	1. The department may, upon probable cause, compel a
7	licensee to submit to a mental or physical examination by
8	physicians designated by the department. The cost of an
9	examination shall be borne by the licensee, and her or his
10	failure to submit to such an examination constitutes an
11	admission of the allegations against her or him, consequent
12	upon which a default and a final order may be entered without
13	the taking of testimony or presentation of evidence, unless
14	the failure was due to circumstances beyond her or his
15	control.
16	2. A licensee who is disciplined under this paragraph
17	shall, at reasonable intervals, be afforded an opportunity to
18	demonstrate that she or he can resume the practice of
19	electrology with reasonable skill and safety.
20	3. In any proceeding under this paragraph, the record
21	of proceedings or the orders entered by the board may not be
22	used against a licensee in any other proceeding.
23	(s) Disclosing the identity of or information about a
24	patient without written permission, except for information
25	which does not identify a patient and which is used for
26	training purposes in an approved electrolysis training
27	program.
28	(t) Practicing or attempting to practice any permanent
29	hair removal except as described in s. 478.42(5).
30	(u) Operating any electrolysis facility unless it has
31	been duly licensed as provided in this chapter.
	135
COD	ING:Words stricken are deletions; words underlined are additions.

1	(v) Violating any provision of this chapter or chapter
2	456, or any rules adopted pursuant thereto.
3	(2) The board may enter an order denying licensure or
4	imposing any of the penalties in s. 456.072(2) against any
5	applicant for licensure or licensee who is found guilty of
6	violating any provision of subsection (1) of this section or
7	who is found guilty of violating any provision of s.
8	456.072(1). When the board finds any person guilty of any of
9	the grounds set forth in subsection (1), including conduct
10	that would constitute a substantial violation of subsection
11	(1) which occurred prior to licensure, it may enter an order
12	imposing one or more of the following penalties:
13	(a) Deny the application for licensure.
14	(b) Revoke or suspend the license.
15	(c) Impose an administrative fine not to exceed \$5,000
16	for each count or separate offense.
17	(d) Place the licensee on probation for a specified
18	time and subject the licensee to such conditions as the board
19	determines necessary, including, but not limited to, requiring
20	treatment, continuing education courses, reexamination, or
21	working under the supervision of another licensee.
22	(e) Issue a reprimand to the licensee.
23	(f) Restriction of a licensee's practice.
24	Section 45. Subsections (1) and (2) of section
25	480.046, Florida Statutes, are amended to read:
26	480.046 Grounds for disciplinary action by the
27	board
28	(1) The following acts shall constitute grounds for
29	denial of a license or disciplinary action, as specified in s.
30	456.072(2)which disciplinary actions specified in subsection
31	
	136
	ING: Words stricken are deletions; words underlined are additions.
COD	THE WOLDS SULLARED ALE GELECIONS, WOLDS UNDELLINED ALE AUGILIONS.

Second Engrossed

CS for SB 1558

1 (2) may be taken against a massage therapist or massage establishment licensed under this act: 2 3 (a) Attempting to procure a license to practice 4 massage by bribery or fraudulent misrepresentation. 5 (b) Having a license to practice massage revoked, 6 suspended, or otherwise acted against, including the denial of 7 licensure, by the licensing authority of another state, 8 territory, or country. 9 (c) Being convicted or found guilty, regardless of adjudication, of a crime in any jurisdiction which directly 10 relates to the practice of massage or to the ability to 11 12 practice massage. Any plea of nolo contendere shall be considered a conviction for purposes of this chapter. 13 14 (d) False, deceptive, or misleading advertising. 15 (e) Aiding, assisting, procuring, or advising any 16 unlicensed person to practice massage contrary to the 17 provisions of this chapter or to a rule of the department or 18 the board. 19 (f) Making deceptive, untrue, or fraudulent 20 representations in the practice of massage. 21 (g) Being unable to practice massage with reasonable 22 skill and safety by reason of illness or use of alcohol, 23 drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical condition. In enforcing 24 this paragraph, the department shall have, upon probable 25 26 cause, authority to compel a massage therapist to submit to a 27 mental or physical examination by physicians designated by the department. Failure of a massage therapist to submit to such 28 29 examination when so directed, unless the failure was due to circumstances beyond her or his control, shall constitute an 30 admission of the allegations against her or him, consequent 31 137

-	
1	upon which a default and final order may be entered without
2	the taking of testimony or presentation of evidence. A
3	massage therapist affected under this paragraph shall at
4	reasonable intervals be afforded an opportunity to demonstrate
5	that she or he can resume the competent practice of massage
6	with reasonable skill and safety to clients.
7	(h) Gross or repeated malpractice or the failure to
8	practice massage with that level of care, skill, and treatment
9	which is recognized by a reasonably prudent massage therapist
10	as being acceptable under similar conditions and
11	circumstances.
12	(i) Practicing or offering to practice beyond the
13	scope permitted by law or accepting and performing
14	professional responsibilities which the licensee knows or has
15	reason to know that she or he is not competent to perform.
16	(j) Delegating professional responsibilities to a
17	person when the licensee delegating such responsibilities
18	knows or has reason to know that such person is not qualified
19	by training, experience, or licensure to perform.
20	(k) Violating any provision of this chapter, a rule of
21	the board or department, or a lawful order of the board or
22	department previously entered in a disciplinary hearing, or
23	failing to comply with a lawfully issued subpoena of the
24	department.
25	(1) Refusing to permit the department to inspect the
26	business premises of the licensee during regular business
27	hours.
28	(m) Failing to keep the equipment and premises of the
29	massage establishment in a clean and sanitary condition.
30	(n) Practicing massage at a site, location, or place
31	which is not duly licensed as a massage establishment, except
	138
COD	ING:Words stricken are deletions; words underlined are additions.

```
Second Engrossed
```

that a massage therapist, as provided by rules adopted by the 1 board, may provide massage services, excluding colonic 2 irrigation, at the residence of a client, at the office of the 3 4 client, at a sports event, at a convention, or at a trade 5 show. (o) Violating any provision of this chapter or chapter 6 7 456, or any rules adopted pursuant thereto. 8 (2) The board may enter an order denying licensure or 9 imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of 10 violating any provision of subsection (1) of this section or 11 12 who is found guilty of violating any provision of s. 456.072(1). When the board finds any person guilty of any of 13 14 the grounds set forth in subsection (1), it may enter an order 15 imposing one or more of the following penalties: 16 (a) Refusal to license an applicant. 17 (b) Revocation or suspension of a license. 18 (c) Issuance of a reprimand or censure. 19 (d) Imposition of an administrative fine not to exceed 20 \$1,000 for each count or separate offense. 21 Section 46. Section 483.825, Florida Statutes, is 22 amended to read: 23 483.825 Grounds for disciplinary action.--(1) The following acts constitute grounds for denial 24 of a license or disciplinary action, as specified in s. 25 26 456.072(2) which disciplinary actions specified in s. 483.827 27 may be taken against applicants, registrants, and licensees under this part: 28 29 (a)(1) Attempting to obtain, obtaining, or renewing a license or registration under this part by bribery, by 30 31 139 CODING: Words stricken are deletions; words underlined are additions.

fraudulent misrepresentation, or through an error of the 1 department or the board. 2 3 (b)(2) Engaging in or attempting to engage in, or 4 representing herself or himself as entitled to perform, any 5 clinical laboratory procedure or category of procedures not 6 authorized pursuant to her or his license. 7 (c)(3) Demonstrating incompetence or making consistent 8 errors in the performance of clinical laboratory examinations 9 or procedures or erroneous reporting. 10 (d) (4) Performing a test and rendering a report thereon to a person not authorized by law to receive such 11 12 services. (e)(5) Has been convicted or found guilty of, or 13 14 entered a plea of nolo contendere to, regardless of adjudication, a crime in any jurisdiction which directly 15 relates to the activities of clinical laboratory personnel or 16 17 involves moral turpitude or fraudulent or dishonest dealing. The record of a conviction certified or authenticated in such 18 19 form as to be admissible in evidence under the laws of the state shall be admissible as prima facie evidence of such 20 quilt. 21 22 (f)(6) Having been adjudged mentally or physically 23 incompetent. 24 (g) (7) Violating or Aiding and abetting in the 25 violation of any provision of this part or the rules adopted 26 hereunder. 27 (h) (8) Reporting a test result when no laboratory test was performed on a clinical specimen. 28 29 (i) (9) Knowingly advertising false services or 30 credentials. 31 140 CODING: Words stricken are deletions; words underlined are additions.

1	(j) (10) Having a license revoked, suspended, or
2	otherwise acted against, including the denial of licensure, by
3	the licensing authority of another jurisdiction. The licensing
4	authority's acceptance of a relinquishment of a license,
5	stipulation, consent order, or other settlement, offered in
6	response to or in anticipation of the filing of administrative
7	charges against the licensee, shall be construed as action
8	against the licensee.
9	(k) (11) Failing to report to the board, in writing,
10	within 30 days that an action under subsection (5), subsection
11	(6), or subsection (10) has been taken against the licensee or
12	one's license to practice as clinical laboratory personnel in
13	another state, territory, country, or other jurisdiction.
14	(1) (12) Being unable to perform or report clinical
15	laboratory examinations with reasonable skill and safety to
16	patients by reason of illness or use of alcohol, drugs,
17	narcotics, chemicals, or any other type of material or as a
18	result of any mental or physical condition. In enforcing this
19	subsection, the department shall have, upon a finding of the
20	secretary or his or her designee that probable cause exists to
21	believe that the licensee is unable to practice because of the
22	reasons stated in this subsection, the authority to issue an
23	order to compel a licensee to submit to a mental or physical
24	examination by physicians designated by the department. If
25	the licensee refuses to comply with such order, the
26	department's order directing such examination may be enforced
27	by filing a petition for enforcement in the circuit court
28	where the licensee resides or does business. The department
29	shall be entitled to the summary procedure provided in s.
30	51.011. A licensee affected under this subsection shall at
31	reasonable intervals be afforded an opportunity to demonstrate
	141

that he or she can resume competent practice with reasonable
 skill and safety to patients.

3 <u>(m)(13)</u> Delegating professional responsibilities to a 4 person when the licensee delegating such responsibilities 5 knows, or has reason to know, that such person is not 6 qualified by training, experience, or licensure to perform 7 them.

8 (n)(14) Violating a previous order of the board
9 entered in a disciplinary proceeding.

10 <u>(o)(15)</u> Failing to report to the department a person 11 or other licensee who the licensee knows is in violation of 12 this chapter or the rules of the department or board adopted 13 hereunder.

14 (p)(16) Making or filing a report which the licensee 15 knows to be false, intentionally or negligently failing to file a report or record required by state or federal law, 16 17 willfully impeding or obstructing such filing or inducing another person to do so, including, but not limited to, 18 19 impeding an agent of the state from obtaining a report or record for investigative purposes. Such reports or records 20 shall include only those generated in the capacity as a 21 22 licensed clinical laboratory personnel.

23 (q)(17) Paying or receiving any commission, bonus, 24 kickback, or rebate, or engaging in any split-fee arrangement in any form whatsoever with a physician, organization, agency, 25 26 or person, either directly or indirectly for patients referred 27 to providers of health care goods and services including, but not limited to, hospitals, nursing homes, clinical 28 laboratories, ambulatory surgical centers, or pharmacies. The 29 provisions of this subsection shall not be construed to 30 31

142

prevent a clinical laboratory professional from receiving a 1 fee for professional consultation services. 2 3 (r) (18) Exercising influence on a patient or client in 4 such a manner as to exploit the patient or client for the 5 financial gain of the licensee or other third party, which shall include, but not be limited to, the promoting, selling, 6 7 or withholding of services, goods, appliances, referrals, or 8 drugs. 9 (s)(19) Practicing or offering to practice beyond the 10 scope permitted by law or rule, or accepting or performing professional services or responsibilities which the licensee 11 12 knows or has reason to know that he or she is not competent to 13 perform. 14 (t)(20) Misrepresenting or concealing a material fact 15 at any time during any phase of the licensing, investigative, 16 or disciplinary process, procedure, or proceeding. 17 (u) (u) (21) Improperly interfering with an investigation or any disciplinary proceeding. 18 19 (v) (22) Engaging in or attempting to engage in sexual 20 misconduct, causing undue embarrassment or using disparaging language or language of a sexual nature towards a patient, 21 exploiting superior/subordinate, professional/patient, 22 23 instructor/student relationships for personal gain, sexual 24 gratification, or advantage. 25 (w) Violating any provision of this chapter or chapter 26 456, or any rules adopted pursuant thereto. 27 (2) The board may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any 28 29 applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or 30 31 143

who is found guilty of violating any provision of s. 1 2 456.072(1). 3 (3) In determining the amount of the fine to be levied 4 for a violation, as provided in subsection (1), the following 5 factors shall be considered: 6 The severity of the violation, including the (a) 7 probability that death or serious harm to the health or safety 8 of any person will result or has resulted, the severity of the actual or potential harm, and the extent to which the 9 provisions of this part were violated. 10 (b) Actions taken by the licensee to correct the 11 12 violation or to remedy complaints. 13 (c) Any previous violation by the licensee. 14 (d) The financial benefit to the licensee of 15 committing or continuing the violation. Section 47. Section 483.827, Florida Statutes, is 16 17 repealed. 18 Section 48. Subsection (6) of section 483.901, Florida 19 Statutes, is amended to read: 483.901 Medical physicists; definitions; licensure.--20 21 (6) LICENSE REQUIRED. -- An individual may not engage in the practice of medical physics, including the specialties of 22 23 diagnostic radiological physics, therapeutic radiological physics, medical nuclear radiological physics, or medical 24 health physics, without a license issued by the department for 25 26 the appropriate specialty. (a) The department shall adopt rules to administer 27 this section which specify license application and renewal 28 29 fees, continuing education requirements, and standards for practicing medical physics. The council shall recommend to 30 the department continuing education requirements that shall be 31 144 CODING: Words stricken are deletions; words underlined are additions.
1 a condition of license renewal. The department shall require 2 a minimum of 24 hours per biennium of continuing education 3 offered by an organization recommended by the council and 4 approved by the department. The department, upon 5 recommendation of the council, may adopt rules to specify 6 continuing education requirements for persons who hold a 7 license in more than one specialty.

8 (b) In order to apply for a medical physicist license 9 in one or more specialties, a person must file an individual 10 application for each specialty with the department. The 11 application must be on a form prescribed by the department and 12 must be accompanied by a nonrefundable application fee for 13 each specialty.

14 (c) The department may issue a license to an eligible 15 applicant if the applicant meets all license requirements. At any time before the department issues a license, the applicant 16 17 may request in writing that the application be withdrawn. То reapply, the applicant must submit a new application and an 18 19 additional nonrefundable application fee and must meet all current licensure requirements. 20

(d) The department shall review each completedapplication for a license which the department receives.

23 (e) On receipt of an application and fee as specified in this section, the department may issue a license to 24 practice medical physics in this state on or after October 1, 25 26 1997, to a person who is board certified in the medical 27 physics specialty in which the applicant applies to practice by the American Board of Radiology for diagnostic radiological 28 29 physics, therapeutic radiological physics, or medical nuclear radiological physics; by the American Board of Medical Physics 30 for diagnostic radiological physics, therapeutic radiological 31

145

physics, or medical nuclear radiological physics; or by the 1 2 American Board of Health Physics or an equivalent certifying 3 body approved by the department. 4 (f) A licensee shall: 5 Display the license in a place accessible to the 1. 6 public; and 7 2. Report immediately any change in the licensee's 8 address or name to the department. 9 (g) The following acts constitute are grounds for 10 denial of a license or disciplinary action, as specified in s. 456.072(2) which the disciplinary actions in paragraph (h) may 11 12 be taken: Obtaining or attempting to obtain a license by 13 1. 14 bribery, fraud, knowing misrepresentation, or concealment of 15 material fact or through an error of the department. Having a license denied, revoked, suspended, or 16 2. 17 otherwise acted against in another jurisdiction. Being convicted or found guilty of, or entering a 18 3. 19 plea of nolo contendere to, regardless of adjudication, a 20 crime in any jurisdiction which relates to the practice of, or 21 the ability to practice, the profession of medical physics. 22 4. Willfully failing to file a report or record 23 required for medical physics or willfully impeding or obstructing the filing of a report or record required by this 24 section or inducing another person to do so. 25 26 5. Making misleading, deceptive, or fraudulent 27 representations in or related to the practice of medical 28 physics. 29 6. Willfully failing to report any known violation of 30 this section or any rule adopted thereunder. 31 146 CODING: Words stricken are deletions; words underlined are additions.

1	7. Willfully or repeatedly violating a rule adopted
2	under this section or an order of the department.
3	7.8. Failing to perform any statutory or legal
4	obligation placed upon a licensee.
5	8. 9. Aiding, assisting, procuring, employing, or
б	advising any unlicensed person to practice medical physics
7	contrary to this section or any rule adopted thereunder.
8	9. 10. Delegating or contracting for the performance of
9	professional responsibilities by a person when the licensee
10	delegating or contracting such responsibilities knows, or has
11	reason to know, such person is not qualified by training,
12	experience, and authorization to perform them.
13	<u>10.11. Practicing or offering to practice beyond the</u>
14	scope permitted by law or accepting and performing
15	professional responsibilities the licensee knows, or has
16	reason to know, the licensee is not competent to perform.
17	<u>11.12.</u> Gross or repeated malpractice or the inability
18	to practice medical physics with reasonable skill and safety.
19	12.13. Judicially determined mental incompetency.
20	<u>13.14.</u> Being unable to practice medical physics with
21	reasonable skill and safety because of a mental or physical
22	condition or illness or the use of alcohol, controlled
23	substances, or any other substance which impairs one's ability
24	to practice.
25	a. The department may, upon probable cause, compel a
26	licensee to submit to a mental or physical examination by
27	physicians designated by the department. The cost of an
28	examination shall be borne by the licensee, and the licensee's
29	failure to submit to such an examination constitutes an
30	admission of the allegations against the licensee, consequent
31	upon which a default and a final order may be entered without
	147
	INC.Words etricter are deletions: words underlined are additions

the taking of testimony or presentation of evidence, unless 1 2 the failure was due to circumstances beyond the licensee's 3 control. 4 b. A licensee who is disciplined under this 5 subparagraph shall, at reasonable intervals, be afforded an 6 opportunity to demonstrate that the licensee can resume the 7 practice of medical physics with reasonable skill and safety. 8 c. With respect to any proceeding under this 9 subparagraph, the record of proceedings or the orders entered by the department may not be used against a licensee in any 10 11 other proceeding. 12 14. Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. 13 14 (h) The board may enter an order denying licensure or 15 imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of 16 17 violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 18 19 456.072(1). When the department finds any person guilty of any 20 of the grounds set forth in paragraph (g), including conduct 21 that would constitute a substantial violation of paragraph (g) 22 which occurred prior to licensure, it may enter an order 23 imposing one or more of the following penalties: 1. Deny the application for licensure. 24 25 2. Revoke or suspend the license. 26 3. Impose an administrative fine for each count or 27 separate offense. 28 4. Place the licensee on probation for a specified 29 time and subject the licensee to such conditions as the 30 department determines necessary, including requiring 31 148 CODING: Words stricken are deletions; words underlined are additions.

treatment, continuing education courses, or working under the 1 monitoring or supervision of another licensee. 2 3 5. Restrict a licensee's practice. 4 6. Issue a reprimand to the licensee. 5 (i) The department may not issue or reinstate a 6 license to a person it has deemed unqualified until it is 7 satisfied that such person has complied with the terms and 8 conditions of the final order and that the licensee can safely 9 practice medical physics. (j) Upon receipt of a complete application and the fee 10 set forth by rule, the department may issue a 11 12 physicist-in-training certificate to a person qualified to practice medical physics under direct supervision. The 13 14 department may establish by rule requirements for initial certification and renewal of a physicist-in-training 15 16 certificate. 17 Section 49. Subsections (1) and (2) of section 484.014, Florida Statutes, are amended to read: 18 19 484.014 Disciplinary actions.--20 (1) The following acts constitute relating to the practice of opticianry shall be grounds for denial of a 21 22 license or disciplinary action, as specified in s. 456.072(2) 23 both disciplinary action against an optician as set forth in this section and cease and desist or other related action by 24 25 the department as set forth in s. 456.065 against any person 26 operating an optical establishment who engages in, aids, or 27 abets any such violation: 28 (a) Procuring or attempting to procure a license by 29 misrepresentation, bribery, or fraud or through an error of 30 the department or the board. 31 149 CODING: Words stricken are deletions; words underlined are additions.

1	(b) Procuring or attempting to procure a license for
2	any other person by making or causing to be made any false
3	representation.
4	(c) Making or filing a report or record which the
5	licensee knows to be false, intentionally or negligently
6	failing to file a report or record required by federal or
7	state law, willfully impeding or obstructing such filing, or
8	inducing another person to do so. Such reports or records
9	shall include only those which the person is required to make
10	or file as an optician.
11	(d) Failing to make fee or price information readily
12	available by providing such information upon request or upon
13	the presentation of a prescription.
14	(e) Advertising goods or services in a manner which is
15	fraudulent, false, deceptive, or misleading in form or
16	content.
17	(f) Fraud or deceit, or negligence, incompetency, or
18	misconduct, in the authorized practice of opticianry.
19	(g) Violation or repeated violation of this part or of
20	chapter 456 or any rules promulgated pursuant thereto.
21	(g) (h) Practicing with a revoked, suspended, inactive,
22	or delinquent license.
23	(h)(i) Violation of a lawful order of the board or
24	department previously entered in a disciplinary hearing or
25	failing to comply with a lawfully issued subpoena of the
26	department.
27	(i)(j) Violation of any provision of s. 484.012.
28	<u>(j)</u> (k) Conspiring with another licensee or with any
29	person to commit an act, or committing an act, which would
30	coerce, intimidate, or preclude another licensee from lawfully
31	advertising her or his services.
	150
COD	ING:Words stricken are deletions; words underlined are additions.

1	(k) (l) Willfully submitting to any third-party payor a
2	claim for services which were not provided to a patient.
3	(1) (m) Failing to keep written prescription files.
4	(m) (m) Willfully failing to report any person who the
5	licensee knows is in violation of this part or of rules of the
б	department or the board.
7	(n)(o) Exercising influence on a client in such a
8	manner as to exploit the client for financial gain of the
9	licensee or of a third party.
10	(o)(p) Gross or repeated malpractice.
11	(p)(q) Permitting any person not licensed as an
12	optician in this state to fit or dispense any lenses,
13	spectacles, eyeglasses, or other optical devices which are
14	part of the practice of opticianry.
15	<u>(q)</u> (r) Being convicted or found guilty of, or entering
16	a plea of nolo contendere to, regardless of adjudication, in a
17	court of this state or other jurisdiction, a crime which
18	relates to the ability to practice opticianry or to the
19	practice of opticianry.
20	(r) (s) Having been disciplined by a regulatory agency
21	in another state for any offense that would constitute a
22	violation of Florida law or rules regulating opticianry.
23	<u>(s)</u> Being unable to practice opticianry with
24	reasonable skill and safety by reason of illness or use of
25	drugs, narcotics, chemicals, or any other type of material or
26	as a result of any mental or physical condition. An optician
27	affected under this paragraph shall at reasonable intervals be
28	afforded an opportunity to demonstrate that she or he can
29	resume the competent practice of opticianry with reasonable
30	skill and safety to her or his customers.
31	
	151
CODING: Words stricken are deletions; words <u>underlined</u> are additions.	

Second Engrossed

(t) Violating any provision of this chapter or chapter 1 2 456, or any rules adopted pursuant thereto. 3 (2) The board may enter an order denying licensure or 4 imposing any of the penalties in s. 456.072(2) against any 5 applicant for licensure or licensee who is found guilty of 6 violating any provision of subsection (1) of this section or 7 who is found guilty of violating any provision of s. 8 456.072(1). When the board finds any person guilty of any of 9 the grounds set forth in subsection (1), it may enter an order imposing one or more of the following penalties: 10 11 (a) Refusal to certify to the department an 12 application for licensure. 13 (b) Revocation or suspension of a license. 14 (c) Imposition of an administrative fine not to exceed 15 \$1,000 for each count or separate offense. 16 (d) Issuance of a reprimand. 17 (e) Placement of the optician on probation for a 18 period of time and subject to such conditions as the board may 19 specify, including requiring the optician to submit to 20 treatment or to work under the supervision of another 21 optician. 22 Section 50. Subsections (1) and (2) of section 484.056, Florida Statutes, are amended to read: 23 484.056 Disciplinary proceedings.--24 25 (1) The following acts constitute relating to the 26 practice of dispensing hearing aids shall be grounds for denial of a license or disciplinary action, as specified in s. 27 28 456.072(2) both disciplinary action against a hearing aid specialist as set forth in this section and cease and desist 29 or other related action by the department as set forth in s. 30 31 456.065 against any person owning or operating a hearing aid 152 CODING:Words stricken are deletions; words underlined are additions.

1 establishment who engages in, aids, or abets any such 2 violation: 3 (a) Violation of any provision of s. 456.072(1), s. 4 484.0512, or s. 484.053. 5 (b) Attempting to procure a license to dispense 6 hearing aids by bribery, by fraudulent misrepresentations, or 7 through an error of the department or the board. 8 (c) Having a license to dispense hearing aids revoked, 9 suspended, or otherwise acted against, including the denial of licensure, by the licensing authority of another state, 10 territory, or country. 11 12 (d) Being convicted or found guilty of, or entering a plea of nolo contendere to, regardless of adjudication, a 13 14 crime in any jurisdiction which directly relates to the 15 practice of dispensing hearing aids or the ability to practice dispensing hearing aids, including violations of any federal 16 17 laws or regulations regarding hearing aids. 18 (e) Making or filing a report or record which the 19 licensee knows to be false, intentionally or negligently failing to file a report or record required by state or 20 federal law, willfully impeding or obstructing such filing, or 21 22 inducing another person to impede or obstruct such filing. 23 Such reports or records shall include only those reports or records which are signed in one's capacity as a licensed 24 hearing aid specialist. 25 26 (f) Advertising goods or services in a manner which is 27 fraudulent, false, deceptive, or misleading in form or 28 content. 29 (g) Proof that the licensee is guilty of fraud or deceit or of negligence, incompetency, or misconduct in the 30 practice of dispensing hearing aids. 31 153 CODING: Words stricken are deletions; words underlined are additions.

1 (h) Violation or repeated violation of this part or of
2 chapter 456, or any rules promulgated pursuant thereto.
3 (h) (i) Violation of a lawful order of the board or
4 department previously entered in a disciplinary hearing or
5 failure to comply with a lawfully issued subpoena of the board
6 or department.
7 <u>(i)</u> Practicing with a revoked, suspended, inactive,
8 or delinquent license.
9 (j) (k) Using, or causing or promoting the use of, any
10 advertising matter, promotional literature, testimonial,
11 guarantee, warranty, label, brand, insignia, or other
12 representation, however disseminated or published, which is
13 misleading, deceiving, or untruthful.
14 $(k)(1)$ Showing or demonstrating, or, in the event of
15 sale, delivery of, a product unusable or impractical for the
16 purpose represented or implied by such action.
17 <u>(1)(m)</u> Misrepresentation of professional services
18 available in the fitting, sale, adjustment, service, or repair
19 of a hearing aid, or use of the terms "doctor," "clinic,"
20 "clinical," "medical audiologist," "clinical audiologist,"
21 "research audiologist," or "audiologic" or any other term or
22 title which might connote the availability of professional
23 services when such use is not accurate.
24 (m)(n) Representation, advertisement, or implication
25 that a hearing aid or its repair is guaranteed without
26 providing full disclosure of the identity of the guarantor;
27 the nature, extent, and duration of the guarantee; and the
28 existence of conditions or limitations imposed upon the
29 guarantee.
30 $(n)(o)$ Representing, directly or by implication, that
31 a hearing aid utilizing bone conduction has certain specified
154
CODING:Words stricken are deletions; words underlined are additions.

1	features, such as the absence of anything in the ear or
2	leading to the ear, or the like, without disclosing clearly
3	and conspicuously that the instrument operates on the bone
4	conduction principle and that in many cases of hearing loss
5	this type of instrument may not be suitable.
6	(o) (p) Making any predictions or prognostications as
7	to the future course of a hearing impairment, either in
8	general terms or with reference to an individual person.
9	<u>(p)</u> (q) Stating or implying that the use of any hearing
10	aid will improve or preserve hearing or prevent or retard the
11	progression of a hearing impairment or that it will have any
12	similar or opposite effect.
13	(q)(r) Making any statement regarding the cure of the
14	cause of a hearing impairment by the use of a hearing aid.
15	(r) (s) Representing or implying that a hearing aid is
16	or will be "custom-made," "made to order," or
17	"prescription-made" or in any other sense specially fabricated
18	for an individual person when such is not the case.
19	<u>(s)</u> (t) Canvassing from house to house or by telephone
20	either in person or by an agent for the purpose of selling a
21	hearing aid, except that contacting persons who have evidenced
22	an interest in hearing aids, or have been referred as in need
23	of hearing aids, shall not be considered canvassing.
24	<u>(t)</u> (u) Failure to submit to the board on an annual
25	basis, or such other basis as may be provided by rule,
26	certification of testing and calibration of audiometric
27	testing equipment on the form approved by the board.
28	<u>(u)</u> (v) Failing to provide all information as described
29	in s. 484.051(1).
30	
31	
	155
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

1 (v) (w) Exercising influence on a client in such a 2 manner as to exploit the client for financial gain of the 3 licensee or of a third party. 4 (w) Violating any provision of this chapter or chapter 5 456, or any rules adopted pursuant thereto. 6 (2)(a) The board may enter an order denying licensure 7 or imposing any of the penalties in s. 456.072(2) against any 8 applicant for licensure or licensee who is found guilty of 9 violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 10 456.072(1). Except as provided in paragraph (b), when the 11 12 board finds any hearing aid specialist to be guilty of any of the grounds set forth in subsection (1), it may enter an order 13 14 imposing one or more of the following penalties: 1. Denial of an application for licensure. 15 2. Revocation or suspension of a license. 16 3. Imposition of an administrative fine not to exceed 17 \$1,000 for each count or separate offense. 18 19 4. Issuance of a reprimand. 20 5. Placing the hearing aid specialist on probation for a period of time and subject to such conditions as the board 21 may specify, including requiring the hearing aid specialist to 22 23 attend continuing education courses or to work under the supervision of another hearing aid specialist. 24 6. Restricting the authorized scope of practice. 25 26 (b) The board shall revoke the license of any hearing 27 aid specialist found guilty of canvassing as described in this 28 section. 29 Section 51. Subsections (1) and (2) of section 30 486.125, Florida Statutes, are amended to read: 31 156 CODING: Words stricken are deletions; words underlined are additions.

486.125 Refusal, revocation, or suspension of license; 1 2 administrative fines and other disciplinary measures .--3 (1) The following acts shall constitute grounds for 4 denial of a license or disciplinary action, as specified in s. 5 456.072(2) which the disciplinary actions specified in 6 subsection (2) may be taken: 7 (a) Being unable to practice physical therapy with 8 reasonable skill and safety to patients by reason of illness 9 or use of alcohol, drugs, narcotics, chemicals, or any other type of material or as a result of any mental or physical 10 condition. 11 12 1. In enforcing this paragraph, upon a finding of the secretary or the secretary's designee that probable cause 13 14 exists to believe that the licensee is unable to practice 15 physical therapy due to the reasons stated in this paragraph, the department shall have the authority to compel a physical 16 17 therapist or physical therapist assistant to submit to a mental or physical examination by a physician designated by 18 19 the department. If the licensee refuses to comply with such order, the department's order directing such examination may 20 be enforced by filing a petition for enforcement in the 21 circuit court where the licensee resides or serves as a 22 23 physical therapy practitioner. The licensee against whom the petition is filed shall not be named or identified by initials 24 in any public court records or documents, and the proceedings 25 26 shall be closed to the public. The department shall be 27 entitled to the summary procedure provided in s. 51.011. 2. A physical therapist or physical therapist 28 29 assistant whose license is suspended or revoked pursuant to this subsection shall, at reasonable intervals, be given an 30 opportunity to demonstrate that she or he can resume the 31 157

competent practice of physical therapy with reasonable skill
 and safety to patients.

3 3. Neither the record of proceeding nor the orders
4 entered by the board in any proceeding under this subsection
5 may be used against a physical therapist or physical therapist
6 assistant in any other proceeding.

7 (b) Having committed fraud in the practice of physical
8 therapy or deceit in obtaining a license as a physical
9 therapist or as a physical therapist assistant.

10 (c) Being convicted or found guilty regardless of 11 adjudication, of a crime in any jurisdiction which directly 12 relates to the practice of physical therapy or to the ability 13 to practice physical therapy. The entry of any plea of nolo 14 contendere shall be considered a conviction for purpose of 15 this chapter.

16 (d) Having treated or undertaken to treat human 17 ailments by means other than by physical therapy, as defined 18 in this chapter.

(e) Failing to maintain acceptable standards of
physical therapy practice as set forth by the board in rules
adopted pursuant to this chapter.

22 (f) Engaging directly or indirectly in the dividing, 23 transferring, assigning, rebating, or refunding of fees received for professional services, or having been found to 24 profit by means of a credit or other valuable consideration, 25 26 such as an unearned commission, discount, or gratuity, with any person referring a patient or with any relative or 27 business associate of the referring person. Nothing in this 28 29 chapter shall be construed to prohibit the members of any regularly and properly organized business entity which is 30 comprised of physical therapists and which is recognized under 31

158

the laws of this state from making any division of their total 1 2 fees among themselves as they determine necessary. 3 (g) Having a license revoked or suspended; having had 4 other disciplinary action taken against her or him; or having 5 had her or his application for a license refused, revoked, or 6 suspended by the licensing authority of another state, 7 territory, or country. 8 (h) Violating any provision of this chapter, a rule of 9 the board or department, or a lawful order of the board or department previously entered in a disciplinary hearing. 10 (i) Making or filing a report or record which the 11 12 licensee knows to be false. Such reports or records shall include only those which are signed in the capacity of a 13 14 physical therapist. 15 (j) Practicing or offering to practice beyond the scope permitted by law or accepting and performing 16 17 professional responsibilities which the licensee knows or has reason to know that she or he is not competent to perform, 18 19 including, but not limited to, specific spinal manipulation. 20 (k) Violating any provision of this chapter or chapter 21 456, or any rules adopted pursuant thereto. 22 The board may enter an order denying licensure or (2) 23 imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of 24 25 violating any provision of subsection (1) of this section or 26 who is found guilty of violating any provision of s. 27 456.072(1). When the board finds any person guilty of any of 28 the grounds set forth in subsection (1), it may enter an order 29 imposing one or more of the following penalties: 30 (a) Refusal to certify to the department an 31 application for licensure. 159

(b) Revocation or suspension of a license. 1 2 (c) Restriction of practice. 3 (d) Imposition of an administrative fine not to exceed 4 \$1,000 for each count or separate offense. (e) Issuance of a reprimand. 5 6 (f) Placement of the physical therapist or physical 7 therapist assistant on probation for a period of time and 8 subject to such conditions as the board may specify, 9 including, but not limited to, requiring the physical therapist or physical therapist assistant to submit to 10 treatment, to attend continuing education courses, to submit 11 12 to reexamination, or to work under the supervision of another physical therapist. 13 14 (g) Recovery of actual costs of investigation and 15 prosecution. 16 Section 52. Section 490.009, Florida Statutes, is 17 amended to read: 490.009 Discipline.--18 19 (1) When the department or, in the case of 20 psychologists, the board finds that an applicant, provisional licensee, or licensee whom it regulates under this chapter has 21 committed any of the acts set forth in subsection (2), it may 22 23 issue an order imposing one or more of the following penalties: 24 25 (a) Denial of an application for licensure, either 26 temporarily or permanently. 27 (b) Revocation of an application for licensure, either temporarily or permanently. 28 29 (c) Suspension for a period of up to 5 years or 30 revocation of a license, after hearing. 31 160 CODING: Words stricken are deletions; words underlined are additions.

1 (d) Immediate suspension of a license pursuant to 2 120.60(6). 3 (e) Imposition of an administrative fine not to exceed 4 \$5,000 for each count or separate offense. 5 (f) Issuance of a public reprimand. 6 (g) Placement of an applicant or licensee on probation 7 for a period of time and subject to conditions specified by 8 the department or, in the case of psychologists, by the board, 9 including, but not limited to, requiring the applicant or 10 licensee to submit to treatment, to attend continuing education courses, to submit to reexamination, or to work 11 12 under the supervision of a designated licensee. (h) Restriction of practice. 13 14 (1) (1) (2) The following acts constitute of a licensee, 15 provisional licensee, or applicant are grounds for denial of a license or disciplinary action, as specified in s. 456.072(2) 16 17 which the disciplinary actions listed in subsection (1) may be 18 taken: 19 (a) Attempting to obtain, obtaining, or renewing a license under this chapter by bribery or fraudulent 20 misrepresentation or through an error of the board or 21 22 department. 23 (b) Having a license to practice a comparable profession revoked, suspended, or otherwise acted against, 24 including the denial of certification or licensure by another 25 26 state, territory, or country. (c) Being convicted or found guilty, regardless of 27 adjudication, of a crime in any jurisdiction which directly 28 29 relates to the practice of his or her profession or the ability to practice his or her profession. A plea of nolo 30 contendere creates a rebuttable presumption of guilt of the 31 161 CODING: Words stricken are deletions; words underlined are additions.

underlying criminal charges. However, the board shall allow 1 the person who is the subject of the disciplinary proceeding 2 3 to present any evidence relevant to the underlying charges and 4 circumstances surrounding the plea. 5 (d) False, deceptive, or misleading advertising or 6 obtaining a fee or other thing of value on the representation 7 that beneficial results from any treatment will be guaranteed. (e) Advertising, practicing, or attempting to practice 8 9 under a name other than one's own. (f) Maintaining a professional association with any 10 person who the applicant or licensee knows, or has reason to 11 12 believe, is in violation of this chapter or of a rule of the 13 department or, in the case of psychologists, of the department 14 or the board. 15 (g) Knowingly aiding, assisting, procuring, or 16 advising any nonlicensed person to hold himself or herself out 17 as licensed under this chapter. 18 (h) Failing to perform any statutory or legal 19 obligation placed upon a person licensed under this chapter. Willfully making or filing a false report or 20 (i) record; failing to file a report or record required by state 21 22 or federal law; willfully impeding or obstructing the filing 23 of a report or record; or inducing another person to make or file a false report or record or to impede or obstruct the 24 filing of a report or record. Such report or record includes 25 26 only a report or record which requires the signature of a 27 person licensed under this chapter. 28 (j) Paying a kickback, rebate, bonus, or other 29 remuneration for receiving a patient or client, or receiving a kickback, rebate, bonus, or other remuneration for referring a 30 patient or client to another provider of mental health care 31 162 CODING: Words stricken are deletions; words underlined are additions. services or to a provider of health care services or goods;
 referring a patient or client to oneself for services on a
 fee-paid basis when those services are already being paid for
 by some other public or private entity; or entering into a
 reciprocal referral agreement.

6 (k) Committing any act upon a patient or client which
7 would constitute sexual battery or which would constitute
8 sexual misconduct as defined in s. 490.0111.

9 (1) Making misleading, deceptive, untrue, or
10 fraudulent representations in the practice of any profession
11 licensed under this chapter.

(m) Soliciting patients or clients personally, or through an agent, through the use of fraud, intimidation, undue influence, or a form of overreaching or vexatious conduct.

16 (n) Failing to make available to a patient or client, 17 upon written request, copies of test results, reports, or 18 documents in the possession or under the control of the 19 licensee which have been prepared for and paid for by the 20 patient or client.

(o) Failing to respond within 30 days to a written communication from the department concerning any investigation by the department or to make available any relevant records with respect to any investigation about the licensee's conduct or background.

(p) Being unable to practice the profession for which he or she is licensed under this chapter with reasonable skill or competence as a result of any mental or physical condition or by reason of illness; drunkenness; or excessive use of drugs, narcotics, chemicals, or any other substance. In enforcing this paragraph, upon a finding by the secretary, the

163

secretary's designee, or the board that probable cause exists 1 2 to believe that the licensee is unable to practice the 3 profession because of the reasons stated in this paragraph, 4 the department shall have the authority to compel a licensee 5 to submit to a mental or physical examination by psychologists or physicians designated by the department or board. If the 6 7 licensee refuses to comply with the department's order, the department may file a petition for enforcement in the circuit 8 9 court of the circuit in which the licensee resides or does business. The licensee shall not be named or identified by 10 initials in the petition or in any other public court records 11 12 or documents, and the enforcement proceedings shall be closed 13 to the public. The department shall be entitled to the 14 summary procedure provided in s. 51.011. A licensee affected 15 under this paragraph shall be afforded an opportunity at reasonable intervals to demonstrate that he or she can resume 16 17 the competent practice for which he or she is licensed with reasonable skill and safety to patients. 18 19 (q) Violating provisions of this chapter, or of 20 chapter 456, or any rules adopted pursuant thereto. 21 (q)(r) Performing any treatment or prescribing any 22 therapy which, by the prevailing standards of the mental 23 health professions in the community, would constitute experimentation on human subjects, without first obtaining 24 full, informed, and written consent. 25 26 (r)(s) Failing to meet the minimum standards of 27 performance in professional activities when measured against generally prevailing peer performance, including the 28 29 undertaking of activities for which the licensee is not qualified by training or experience. 30 31 164 CODING: Words stricken are deletions; words underlined are additions.

i	
1	<u>(s)</u> (t) Delegating professional responsibilities to a
2	person whom the licensee knows or has reason to know is not
3	qualified by training or experience to perform such
4	responsibilities.
5	<u>(t)</u> Violating a rule relating to the regulation of
6	the profession or a lawful order of the department previously
7	entered in a disciplinary hearing.
8	<u>(u)</u> Failing to maintain in confidence a
9	communication made by a patient or client in the context of
10	such services, except as provided in s. 490.0147.
11	(v) (w) Making public statements which are derived from
12	test data, client contacts, or behavioral research and which
13	identify or damage research subjects or clients.
14	(w) Violating any provision of this chapter or chapter
15	456, or any rules adopted pursuant thereto.
16	(2) The department, or in the case of psychologists,
17	the board, may enter an order denying licensure or imposing
18	any of the penalties in s. 456.072(2) against any applicant
19	for licensure or licensee who is found guilty of violating any
20	provision of subsection (1) of this section or who is found
21	guilty of violating any provision of s. 456.072(1).
22	Section 53. Section 491.009, Florida Statutes, is
23	amended to read:
24	491.009 Discipline
25	(1) When the department or the board finds that an
26	applicant, licensee, provisional licensee, registered intern,
27	or certificateholder whom it regulates under this chapter has
28	committed any of the acts set forth in subsection (2), it may
29	issue an order imposing one or more of the following
30	penalties:
31	
	165
	ING.Words stricter are deletions: words underlined are additions

1 (a) Denial of an application for licensure, 2 registration, or certification, either temporarily or 3 permanently. 4 (b) Revocation of an application for licensure, 5 registration, or certification, either temporarily or 6 permanently. 7 (c) Suspension for a period of up to 5 years or 8 revocation of a license, registration, or certificate, after 9 hearing. 10 (d) Immediate suspension of a license, registration, or certificate pursuant to s. 120.60(6). 11 12 (e) Imposition of an administrative fine not to exceed 13 \$1,000 for each count or separate offense. 14 (f) Issuance of a public reprimand. (g) Placement of an applicant, licensee, registered 15 16 intern, or certificateholder on probation for a period of time 17 and subject to such conditions as the board may specify, including, but not limited to, requiring the applicant, 18 19 licensee, registered intern, or certificateholder to submit to treatment, to attend continuing education courses, to submit 20 to reexamination, or to work under the supervision of a 21 designated licensee or certificateholder. 22 23 (h) Restriction of practice. (1) (1) (2) The following acts constitute of a licensee, 24 provisional licensee, registered intern, certificateholder, or 25 26 applicant are grounds for denial of a license or disciplinary action, as specified in s. 456.072(2) which the disciplinary 27 actions listed in subsection (1) may be taken: 28 29 (a) Attempting to obtain, obtaining, or renewing a 30 license, registration, or certificate under this chapter by 31 166

bribery or fraudulent misrepresentation or through an error of
 the board or the department.

3 (b) Having a license, registration, or certificate to
4 practice a comparable profession revoked, suspended, or
5 otherwise acted against, including the denial of certification
6 or licensure by another state, territory, or country.

7 (c) Being convicted or found guilty of, regardless of 8 adjudication, or having entered a plea of nolo contendere to, 9 a crime in any jurisdiction which directly relates to the practice of his or her profession or the ability to practice 10 his or her profession. However, in the case of a plea of nolo 11 12 contendere, the board shall allow the person who is the subject of the disciplinary proceeding to present evidence in 13 14 mitigation relevant to the underlying charges and 15 circumstances surrounding the plea.

16 (d) False, deceptive, or misleading advertising or
17 obtaining a fee or other thing of value on the representation
18 that beneficial results from any treatment will be guaranteed.

19 (e) Advertising, practicing, or attempting to practice20 under a name other than one's own.

(f) Maintaining a professional association with any person who the applicant, licensee, registered intern, or certificateholder knows, or has reason to believe, is in violation of this chapter or of a rule of the department or the board.

(g) Knowingly aiding, assisting, procuring, or advising any nonlicensed, nonregistered, or noncertified person to hold himself or herself out as licensed, registered, or certified under this chapter.

30 31

167

(h) Failing to perform any statutory or legal 1 2 obligation placed upon a person licensed, registered, or 3 certified under this chapter. 4 (i) Willfully making or filing a false report or 5 record; failing to file a report or record required by state 6 or federal law; willfully impeding or obstructing the filing 7 of a report or record; or inducing another person to make or file a false report or record or to impede or obstruct the 8 9 filing of a report or record. Such report or record includes only a report or record which requires the signature of a 10 person licensed, registered, or certified under this chapter. 11 12 (j) Paying a kickback, rebate, bonus, or other remuneration for receiving a patient or client, or receiving a 13 14 kickback, rebate, bonus, or other remuneration for referring a 15 patient or client to another provider of mental health care services or to a provider of health care services or goods; 16 17 referring a patient or client to oneself for services on a fee-paid basis when those services are already being paid for 18 19 by some other public or private entity; or entering into a reciprocal referral agreement. 20 21 (k) Committing any act upon a patient or client which would constitute sexual battery or which would constitute 22 23 sexual misconduct as defined pursuant to s. 491.0111. (1) Making misleading, deceptive, untrue, or 24 25 fraudulent representations in the practice of any profession 26 licensed, registered, or certified under this chapter. 27 (m) Soliciting patients or clients personally, or through an agent, through the use of fraud, intimidation, 28 29 undue influence, or a form of overreaching or vexatious 30 conduct. 31 168 CODING: Words stricken are deletions; words underlined are additions.

Second Engrossed

CS for SB 1558

1	(n) Failing to make available to a patient or client,
2	upon written request, copies of tests, reports, or documents
3	in the possession or under the control of the licensee,
4	registered intern, or certificateholder which have been
5	prepared for and paid for by the patient or client.
6	(o) Failing to respond within 30 days to a written
7	communication from the department or the board concerning any
8	investigation by the department or the board, or failing to
9	make available any relevant records with respect to any
10	investigation about the licensee's, registered intern's, or
11	certificateholder's conduct or background.
12	(p) Being unable to practice the profession for which
13	he or she is licensed, registered, or certified under this
14	chapter with reasonable skill or competence as a result of any
15	mental or physical condition or by reason of illness;
16	drunkenness; or excessive use of drugs, narcotics, chemicals,
17	or any other substance. In enforcing this paragraph, upon a
18	finding by the secretary, the secretary's designee, or the
19	board that probable cause exists to believe that the licensee,
20	registered intern, or certificateholder is unable to practice
21	the profession because of the reasons stated in this
22	paragraph, the department shall have the authority to compel a
23	licensee, registered intern, or certificateholder to submit to
24	a mental or physical examination by psychologists, physicians,
25	or other licensees under this chapter, designated by the
26	department or board. If the licensee, registered intern, or
27	certificateholder refuses to comply with such order, the
28	department's order directing the examination may be enforced
29	by filing a petition for enforcement in the circuit court in
30	the circuit in which the licensee, registered intern, or
31	certificateholder resides or does business. The licensee,
	169
	T O 2

registered intern, or certificateholder against whom the 1 petition is filed shall not be named or identified by initials 2 3 in any public court records or documents, and the proceedings 4 shall be closed to the public. The department shall be 5 entitled to the summary procedure provided in s. 51.011. A licensee, registered intern, or certificateholder affected б 7 under this paragraph shall at reasonable intervals be afforded an opportunity to demonstrate that he or she can resume the 8 9 competent practice for which he or she is licensed, registered, or certified with reasonable skill and safety to 10 11 patients. 12 (q) Violating provisions of this chapter, or of 13 chapter 456, or any rules adopted pursuant thereto. 14 (q)(r) Performing any treatment or prescribing any 15 therapy which, by the prevailing standards of the mental health professions in the community, would constitute 16 17 experimentation on human subjects, without first obtaining 18 full, informed, and written consent. 19 (r)(s) Failing to meet the minimum standards of 20 performance in professional activities when measured against generally prevailing peer performance, including the 21 22 undertaking of activities for which the licensee, registered 23 intern, or certificateholder is not qualified by training or 24 experience. (s)(t) Delegating professional responsibilities to a 25 26 person whom the licensee, registered intern, or certificateholder knows or has reason to know is not qualified 27 by training or experience to perform such responsibilities. 28 29 (t) (u) Violating a rule relating to the regulation of the profession or a lawful order of the department or the 30 board previously entered in a disciplinary hearing. 31 170

certificateholder to maintain in confidence a communication made by a patient or client in the context of such services, except as provided in s. 491.0147. (v)(**) Making public statements which are derived from test data, client contacts, or behavioral research and which identify or damage research subjects or clients. (w) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 171	1	(u) (u) Failure of the licensee, registered intern, or
 except as provided in s. 491.0147. (v)(w) Making public statements which are derived from test data, client contacts, or behavioral research and which identify or damage research subjects or clients. (w) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 	2	certificateholder to maintain in confidence a communication
 (v)(w) Making public statements which are derived from test data, client contacts, or behavioral research and which identify or damage research subjects or clients. (w) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department by the department, is not in a deficit and has a reasonable cash 	3	made by a patient or client in the context of such services,
test data, client contacts, or behavioral research and which identify or damage research subjects or clients. (w) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash	4	except as provided in s. 491.0147.
identify or damage research subjects or clients. (w) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash	5	(v) (w) Making public statements which are derived from
 (w) Violating any provision of this chapter or chapter 456, or any rules adopted pursuant thereto. (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 	6	test data, client contacts, or behavioral research and which
 456, or any rules adopted pursuant thereto. (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 	7	identify or damage research subjects or clients.
 (2) The department, or in the case of psychologists, the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 	8	(w) Violating any provision of this chapter or chapter
the board, may enter an order denying licensure or imposing any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 4 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash	9	456, or any rules adopted pursuant thereto.
any of the penalties in s. 456.072(2) against any applicant for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash	10	(2) The department, or in the case of psychologists,
for licensure or licensee who is found guilty of violating any provision of subsection (1) of this section or who is found guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the apartment, is not in a deficit and has a reasonable cash 171	11	the board, may enter an order denying licensure or imposing
14provision of subsection (1) of this section or who is found15guilty of violating any provision of s. 456.072(1).16Section 54. Subsection (3) of section 456.065, Florida17Statutes, is amended to read:18456.065 Unlicensed practice of a health care19profession; intent; cease and desist notice; penalties;20enforcement; citations; fees; allocation and disposition of21moneys collected22(3) Because all enforcement costs should be covered by23professions regulated by the department, the department shall24impose, upon initial licensure and each licensure renewal, a25special fee of \$5 per licensee to fund efforts to combat26unlicensed activity. Such fee shall be in addition to all27other fees collected from each licensee. The board, with28concurrence of the department, or the department when there is30purpose, if such board, or profession regulated by the31department, is not in a deficit and has a reasonable cash171	12	any of the penalties in s. 456.072(2) against any applicant
guilty of violating any provision of s. 456.072(1). Section 54. Subsection (3) of section 456.065, Florida Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 171	13	for licensure or licensee who is found guilty of violating any
16Section 54. Subsection (3) of section 456.065, Florida17Statutes, is amended to read:18456.065 Unlicensed practice of a health care19profession; intent; cease and desist notice; penalties;20enforcement; citations; fees; allocation and disposition of21moneys collected22(3) Because all enforcement costs should be covered by23professions regulated by the department, the department shall24impose, upon initial licensure and each licensure renewal, a25special fee of \$5 per licensee to fund efforts to combat26unlicensed activity. Such fee shall be in addition to all27other fees collected from each licensee. The board, with28concurrence of the department, or the department when there is30purpose, if such board, or profession regulated by the31department, is not in a deficit and has a reasonable cash171	14	provision of subsection (1) of this section or who is found
Statutes, is amended to read: 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash	15	guilty of violating any provision of s. 456.072(1).
 456.065 Unlicensed practice of a health care profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 	16	Section 54. Subsection (3) of section 456.065, Florida
19 profession; intent; cease and desist notice; penalties; enforcement; citations; fees; allocation and disposition of moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash	17	Statutes, is amended to read:
<pre>enforcement; citations; fees; allocation and disposition of moneys collected</pre>	18	456.065 Unlicensed practice of a health care
21 moneys collected (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 171	19	profession; intent; cease and desist notice; penalties;
 (3) Because all enforcement costs should be covered by professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 	20	enforcement; citations; fees; allocation and disposition of
professions regulated by the department, the department shall impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash	21	moneys collected
<pre>impose, upon initial licensure and each licensure renewal, a special fee of \$5 per licensee to fund efforts to combat unlicensed activity. Such fee shall be in addition to all other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 171</pre>	22	(3) Because all enforcement costs should be covered by
<pre>25 special fee of \$5 per licensee to fund efforts to combat 26 unlicensed activity. Such fee shall be in addition to all 27 other fees collected from each licensee. The board, with 28 concurrence of the department, or the department when there is 29 no board, may earmark \$5 of the current licensure fee for this 30 purpose, if such board, or profession regulated by the 31 department, is not in a deficit and has a reasonable cash 171</pre>	23	professions regulated by the department, the department shall
26 unlicensed activity. Such fee shall be in addition to all 27 other fees collected from each licensee. The board, with 28 concurrence of the department, or the department when there is 29 no board, may earmark \$5 of the current licensure fee for this 30 purpose, if such board, or profession regulated by the 31 department, is not in a deficit and has a reasonable cash 171	24	impose, upon initial licensure and each licensure renewal, a
other fees collected from each licensee. The board, with concurrence of the department, or the department when there is no board, may earmark \$5 of the current licensure fee for this purpose, if such board, or profession regulated by the department, is not in a deficit and has a reasonable cash 171	25	special fee of \$5 per licensee to fund efforts to combat
28 concurrence of the department, or the department when there is 29 no board, may earmark \$5 of the current licensure fee for this 30 purpose, if such board, or profession regulated by the 31 department, is not in a deficit and has a reasonable cash 171	26	unlicensed activity. Such fee shall be in addition to all
29 no board, may earmark \$5 of the current licensure fee for this 30 purpose, if such board, or profession regulated by the 31 department, is not in a deficit and has a reasonable cash 171	27	other fees collected from each licensee. The board, with
<pre>30 purpose, if such board, or profession regulated by the 31 department, is not in a deficit and has a reasonable cash 171</pre>	28	concurrence of the department, or the department when there is
31 department, is not in a deficit and has a reasonable cash 171	29	no board, may earmark \$5 of the current licensure fee for this
171	30	purpose, if such board, or profession regulated by the
I	31	department, is not in a deficit and has a reasonable cash
I		171
CODING: Words Stricken are deletions, words underlined are additions.	COD	I ING:Words stricken are deletions; words underlined are additions.

balance. The department shall make direct charges to the 1 Medical Quality Assurance Trust Fund by profession. The 2 3 department shall seek board advice regarding enforcement methods and strategies. The department shall directly credit 4 5 the Medical Quality Assurance Trust Fund, by profession, with the revenues received from the department's efforts to enforce 6 7 licensure provisions. The department shall include all 8 financial and statistical data resulting from unlicensed 9 activity enforcement as a separate category in the quarterly management report provided for in s. 456.025. For an 10 unlicensed activity account, a balance which remains at the 11 12 end of a renewal cycle may, with concurrence of the applicable board and the department, be transferred to the operating fund 13 14 account of that profession. The department shall also use 15 these funds to inform and educate consumers generally on the importance of using licensed health care practitioners. 16 17 Section 55. Effective October 1, 2001, paragraphs (e) and (f) of subsection (4) of section 458.347, Florida 18 19 Statutes, are amended to read: 458.347 Physician assistants.--20 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.--21 22 (e) A supervisory physician may delegate to a fully 23 licensed physician assistant the authority to prescribe any medication used in the supervisory physician's practice unless 24 if such medication is listed on the formulary created pursuant 25 26 to paragraph (f). A fully licensed physician assistant may 27 only prescribe such medication under the following circumstances: 28 29 A physician assistant must clearly identify to the 1. patient that he or she is a physician assistant. Furthermore, 30 the physician assistant must inform the patient that the 31 172 CODING: Words stricken are deletions; words underlined are additions.

patient has the right to see the physician prior to any
 prescription being prescribed by the physician assistant.

2. The supervisory physician must notify the
department of his or her intent to delegate, on a
department-approved form, before delegating such authority and
notify the department of any change in prescriptive privileges
of the physician assistant.

8 3. The physician assistant must file with the 9 department, before commencing to prescribe, evidence that he or she has completed a continuing medical education course of 10 at least 3 classroom hours in prescriptive practice, conducted 11 12 by an accredited program approved by the boards, which course covers the limitations, responsibilities, and privileges 13 14 involved in prescribing medicinal drugs, or evidence that he 15 or she has received education comparable to the continuing education course as part of an accredited physician assistant 16 17 training program.

18 4. The physician assistant must file with the
19 department, before commencing to prescribe, evidence that the
20 physician assistant has a minimum of 3 months of clinical
21 experience in the specialty area of the supervising physician.

5. The physician assistant must file with the department a signed affidavit that he or she has completed a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal application.

6. The department shall issue a license and a
prescriber number to the physician assistant granting
authority for the prescribing of medicinal drugs authorized

173

within this paragraph upon completion of the foregoing 1 2 requirements. 3 7. The prescription must be written in a form that 4 complies with chapter 499 and must contain, in addition to the 5 supervisory physician's name, address, and telephone number, 6 the physician assistant's prescriber number. Unless it is a 7 drug sample dispensed by the physician assistant, the 8 prescription must be filled in a pharmacy permitted under 9 chapter 465 and must be dispensed in that pharmacy by a pharmacist licensed under chapter 465. The appearance of the 10 prescriber number creates a presumption that the physician 11 12 assistant is authorized to prescribe the medicinal drug and the prescription is valid. 13 14 8. The physician assistant must note the prescription 15 in the appropriate medical record, and the supervisory physician must review and sign each notation. For dispensing 16 17 purposes only, the failure of the supervisory physician to 18 comply with these requirements does not affect the validity of 19 the prescription. 20 This paragraph does not prohibit a supervisory 9. physician from delegating to a physician assistant the 21 22 authority to order medication for a hospitalized patient of 23 the supervisory physician. 24 25 This paragraph does not apply to facilities licensed pursuant 26 to chapter 395. (f)1. There is created a five-member committee 27 appointed by the Secretary of Health. The committee must be 28 29 composed of one fully licensed physician assistant licensed pursuant to this section or s. 459.022, two physicians 30 licensed pursuant to this chapter, one of whom supervises a 31 174

fully licensed physician assistant, one osteopathic physician 1 licensed pursuant to chapter 459, and one pharmacist licensed 2 3 pursuant to chapter 465 who is not licensed pursuant to this chapter or chapter 459. The council committee shall establish 4 5 a formulary of medicinal drugs that for which a fully licensed 6 physician assistant, licensed under this section or s. 7 459.022, may not prescribe. The formulary must may not include 8 controlled substances as defined in chapter 893, 9 antineoplastics, antipsychotics, radiopharmaceuticals, general 10 anesthetics and or radiographic contrast materials, and all or any parenteral preparations except insulin and epinephrine. 11 12 2. In establishing the formulary, the council shall consult with a pharmacist licensed under chapter 465, but not 13 14 licensed under this chapter or chapter 459, who shall be 15 selected by the Secretary of Health. 3.2. Only the council committee shall add to, delete 16 17 from, or modify the formulary. Any person who requests an addition, deletion, or modification of a medicinal drug listed 18 19 on such formulary has the burden of proof to show cause why such addition, deletion, or modification should be made. 20 21 4.3. The boards shall adopt the formulary required by this paragraph, and each addition, deletion, or modification 22 to the formulary, by rule. Notwithstanding any provision of 23 chapter 120 to the contrary, the formulary rule shall be 24 effective 60 days after the date it is filed with the 25 Secretary of State. Upon adoption of the formulary, the 26 department shall mail a copy of such formulary to each fully 27 licensed physician assistant, licensed under this section or 28 29 s. 459.022, and to each pharmacy licensed by the state. The boards shall establish, by rule, a fee not to exceed \$200 to 30 fund the provisions of this paragraph and paragraph (e). 31 175

Second Engrossed

Section 56. Effective October 1, 2001, subsection (4) 1 2 and paragraph (c) of subsection (9) of section 459.022, 3 Florida Statutes, are amended to read: 4 459.022 Physician assistants.--5 (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.--6 (a) The boards shall adopt, by rule, the general 7 principles that supervising physicians must use in developing 8 the scope of practice of a physician assistant under direct 9 supervision and under indirect supervision. These principles shall recognize the diversity of both specialty and practice 10 settings in which physician assistants are used. 11 12 (b) This chapter does not prevent third-party payors from reimbursing employers of physician assistants for covered 13 14 services rendered by licensed physician assistants. (c) Licensed physician assistants may not be denied 15 16 clinical hospital privileges, except for cause, so long as the 17 supervising physician is a staff member in good standing. 18 (d) A supervisory physician may delegate to a licensed 19 physician assistant, pursuant to a written protocol, the authority to act according to s. 154.04(1)(c). Such delegated 20 authority is limited to the supervising physician's practice 21 22 in connection with a county health department as defined and 23 established pursuant to chapter 154. The boards shall adopt rules governing the supervision of physician assistants by 24 physicians in county health departments. 25 26 (e) A supervisory physician may delegate to a fully 27 licensed physician assistant the authority to prescribe any medication used in the supervisory physician's practice unless 28 29 if such medication is listed on the formulary created pursuant to s. 458.347. A fully licensed physician assistant may only 30 prescribe such medication under the following circumstances: 31 176

1	1. A physician assistant must clearly identify to the
2	patient that she or he is a physician assistant. Furthermore,
3	the physician assistant must inform the patient that the
4	patient has the right to see the physician prior to any
5	prescription being prescribed by the physician assistant.
6	2. The supervisory physician must notify the
7	department of her or his intent to delegate, on a
8	department-approved form, before delegating such authority and
9	notify the department of any change in prescriptive privileges
10	of the physician assistant.
11	3. The physician assistant must file with the
12	department, before commencing to prescribe, evidence that she
13	or he has completed a continuing medical education course of
14	at least 3 classroom hours in prescriptive practice, conducted
15	by an accredited program approved by the boards, which course
16	covers the limitations, responsibilities, and privileges
17	involved in prescribing medicinal drugs, or evidence that she
18	or he has received education comparable to the continuing
19	education course as part of an accredited physician assistant
20	training program.
21	4. The physician assistant must file with the
22	department, before commencing to prescribe, evidence that the
23	physician assistant has a minimum of 3 months of clinical
24	experience in the specialty area of the supervising physician.
25	5. The physician assistant must file with the
26	department a signed affidavit that she or he has completed a
27	minimum of 10 continuing medical education hours in the
28	specialty practice in which the physician assistant has
29	prescriptive privileges with each licensure renewal
30	application.
31	
	177
COD	ING:Words stricken are deletions; words <u>underlined</u> are additions.

1	6. The department shall issue a license and a
2	prescriber number to the physician assistant granting
3	authority for the prescribing of medicinal drugs authorized
4	within this paragraph upon completion of the foregoing
5	requirements.
6	7. The prescription must be written in a form that
7	complies with chapter 499 and must contain, in addition to the
8	supervisory physician's name, address, and telephone number,
9	the physician assistant's prescriber number. <u>Unless it is a</u>
10	drug sample dispensed by the physician assistant, the
11	prescription must be filled in a pharmacy permitted under
12	chapter 465, and must be dispensed in that pharmacy by a
13	pharmacist licensed under chapter 465. The appearance of the
14	prescriber number creates a presumption that the physician
15	assistant is authorized to prescribe the medicinal drug and
16	the prescription is valid.
17	8. The physician assistant must note the prescription
18	in the appropriate medical record, and the supervisory
19	physician must review and sign each notation. For dispensing
20	purposes only, the failure of the supervisory physician to
21	comply with these requirements does not affect the validity of
22	the prescription.
23	9. This paragraph does not prohibit a supervisory
24	physician from delegating to a physician assistant the
25	authority to order medication for a hospitalized patient of
26	the supervisory physician.
27	
28	This paragraph does not apply to facilities licensed pursuant
29	to chapter 395.
30	(f)1. There is created a five-member committee
31	appointed by the Secretary of Health. The committee must be
	178
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

composed of one fully licensed physician assistant licensed 1 pursuant to this section or s. 458.347, two physicians 2 3 licensed pursuant to chapter 458, one of whom supervises a 4 fully licensed physician assistant, one osteopathic physician 5 licensed pursuant to this chapter, and one pharmacist licensed 6 pursuant to chapter 465 who is not licensed pursuant to this 7 chapter or chapter 458. The committee shall establish a formulary of medicinal drugs for which a fully licensed 8 9 physician assistant may prescribe. The formulary may not include controlled substances as defined in chapter 893, 10 antineoplastics, antipsychotics, radiopharmaceuticals, general 11 anesthetics or radiographic contrast materials, or any 12 parenteral preparations except insulin and epinephrine. 13 14 2. Only the committee shall add to, delete from, or modify the formulary. Any person who requests an addition, 15 16 deletion, or modification of a medicinal drug listed on such formulary has the burden of proof to show cause why such 17 addition, deletion, or modification should be made. 18 19 3. The boards shall adopt the formulary required by 20 this paragraph, and each addition, deletion, or modification 21 to the formulary, by rule. Notwithstanding any provision of chapter 120 to the contrary, the formulary rule shall be 22 effective 60 days after the date it is filed with the 23 Secretary of State. Upon adoption of the formulary, the 24 department shall mail a copy of such formulary to each fully 25 licensed physician assistant and to each pharmacy licensed by 26 the state. The boards shall establish, by rule, a fee not to 27 28 exceed \$200 to fund the provisions of this paragraph and 29 paragraph (e). 30 (9) COUNCIL ON PHYSICIAN ASSISTANTS. -- The Council on Physician Assistants is created within the department. 31 179

1 (c) The council shall: 2 1. Recommend to the department the licensure of 3 physician assistants. 4 2. Develop all rules regulating the use of physician 5 assistants by physicians under chapter 458 and this chapter, 6 except for rules relating to the formulary developed under s. 7 458.347(4)(f). The council shall also develop rules to ensure 8 that the continuity of supervision is maintained in each 9 practice setting. The boards shall consider adopting a proposed rule developed by the council at the regularly 10 scheduled meeting immediately following the submission of the 11 12 proposed rule by the council. A proposed rule submitted by the council may not be adopted by either board unless both 13 14 boards have accepted and approved the identical language 15 contained in the proposed rule. The language of all proposed rules submitted by the council must be approved by both boards 16 17 pursuant to each respective board's guidelines and standards 18 regarding the adoption of proposed rules. If either board 19 rejects the council's proposed rule, that board must specify its objection to the council with particularity and include 20 21 any recommendations it may have for the modification of the 22 proposed rule. 23 3. Make recommendations to the boards regarding all matters relating to physician assistants. 24 4. Address concerns and problems of practicing 25 26 physician assistants in order to improve safety in the clinical practices of licensed physician assistants. 27 28 Section 57. Subsections (6) is added to section 29 456.003, Florida Statutes, to read: 30 456.003 Legislative intent; requirements.--31 180 CODING: Words stricken are deletions; words underlined are additions.
1	(6) Unless expressly and specifically granted in
⊥ 2	statute, the duties conferred on the boards do not include the
3	enlargement, modification, or contravention of the lawful
4	scope of practice of the profession regulated by the boards.
т 5	This subsection shall not prohibit the boards, or the
6	department when there is no board, from taking disciplinary
7	action or issuing a declaratory statement.
8	Section 58. (1)(a) The Agency for Health Care
° 9	
	Administration shall create an Organ Transplant Task Force
10	within the Agency for Health Care Administration, which task
11	force must be funded by existing agency funds.
12	(b) Task force participants shall be responsible for
13	only the expenses that they generate individually through
14	participation. The agency shall be responsible for expenses
15	incidental to the production of any required data or reports.
16	(2) The task force shall consist of up to 15 members.
17	The task force chairperson shall be selected by majority vote
18	of a quorum present. Eight members shall constitute a quorum.
19	The membership shall include, but not be limited to, a balance
20	of members representing the Agency for Health Care
21	Administration, health care facilities that have existing
22	organ transplantation programs, individual organ transplant
23	health care practitioners, pediatric organ transplantation
24	programs, organ procurement agencies, and organ transplant
25	recipients or family members.
26	(3) The task force shall meet for the purpose of
27	studying and making recommendations regarding current and
28	future supply of organs in relation to the number of existing
29	organ transplantation programs and the future necessity of the
30	issuance of a certificate of need for proposed organ
31	transplantation programs. At a minimum, the task force shall
	181
_	101

submit a report to the Legislature which includes a summary of 1 the method of allocation and distribution of organs; a list of 2 facilities performing multiple organ transplants and the 3 4 number being performed; the number of Medicaid and charity 5 care patients who have received organ transplants by existing organ transplant programs; suggested mechanisms for funding 6 7 organ transplants, which shall include, but need not limited to, an organ transplant trust fund for the treatment of 8 9 Medicaid and charity patients; the impact of trends in health 10 care delivery and financing on organ transplantation; and the number of certificates of need applications reviewed by the 11 Agency for Health Care Administration in the last 5 years, 12 13 including the number approved or denied and the number 14 litigated. 15 (4) The task force shall meet at the call of the 16 chairperson. The task force shall submit a report to the Governor, the President of the Senate, and the Speaker of the 17 House of Representatives by January 15, 2002. The task force 18 19 is abolished effective December 31, 2002. 20 Section 59. Section 409.9205, Florida Statutes, is amended to read: 21 409.9205 Medicaid Fraud Control Unit; law enforcement 22 23 officers.--(1) Except as provided in s. 110.205, all positions in 24 the Medicaid Fraud Control Unit of the Department of Legal 25 26 Affairs are hereby transferred to the Career Service System. 27 (2) All investigators employed by the Medicaid Fraud Control Unit who have been certified under s. 943.1395 are law 28 enforcement officers of the state. Such investigators have 29 the authority to conduct criminal investigations, bear arms, 30 make arrests, and apply for, serve, and execute search 31 182

warrants, arrest warrants, capias, and other process 1 throughout the state pertaining to Medicaid fraud as described 2 3 in this chapter. The Attorney General shall provide 4 reasonable notice of criminal investigations conducted by the 5 Medicaid Fraud Control Unit to, and coordinate those investigations with, the sheriffs of the respective counties. 6 7 Investigators employed by the Medicaid Fraud Control Unit are 8 not eligible for membership in the Special Risk Class of the Florida Retirement System under s. 121.0515. 9 Section 60. Subsection (1) of section 483.245, Florida 10 Statutes, is amended to read: 11 12 483.245 Rebates prohibited; penalties.--13 (1) It is unlawful for any person to pay or receive 14 any commission, bonus, kickback, or rebate or engage in any 15 split-fee arrangement in any form whatsoever with any dialysis 16 facility, physician, surgeon, organization, agency, or person, 17 either directly or indirectly, for patients referred to a clinical laboratory licensed under this part. 18 19 Section 61. Subsection (3) of section 232.435, Florida Statutes, is amended to read: 20 21 232.435 Extracurricular athletic activities; athletic 22 trainers.--23 (3) (3) (a) To the extent practicable, a school district 24 program should include the following employment classification and advancement scheme: 25 26 1. First responder. -- To qualify as a first responder, 27 a person must possess a professional, temporary, part-time, adjunct, or substitute certificate pursuant to s. 231.17, be 28 29 certified in cardiopulmonary resuscitation, first aid, and have 15 semester hours in courses such as care and prevention 30 of athletic injuries, anatomy, physiology, nutrition, 31 183

counseling, and other similar courses approved by the 1 Commissioner of Education. This person may only administer 2 3 first aid and similar care. Teacher apprentice trainer I.--To qualify as a teacher apprentice trainer I, a person must 4 5 possess a professional, temporary, part-time, adjunct, or substitute certificate pursuant to s. 231.17, be certified in 6 7 first aid and cardiopulmonary resuscitation, and have earned a 8 minimum of 6 semester hours or the equivalent number of 9 inservice education points in the basic prevention and care of athletic injuries. 10 2. Teacher apprentice trainer II.--To qualify as a 11 12 teacher apprentice trainer II, a person must meet the requirements of teacher apprentice trainer I and also have 13 14 earned a minimum of 15 additional semester hours or the equivalent number of inservice education points in such 15 courses as anatomy, physiology, use of modalities, nutrition, 16 17 counseling, and other courses approved by the Commissioner of 18 Education. 19 2.3. Teacher athletic trainer.--To qualify as a 20 teacher athletic trainer, a person must possess a professional, temporary, part-time, adjunct, or substitute 21 certificate pursuant to s. 232.17, and be licensed as required 22 23 by part XIII of chapter 468 meet the requirements of teacher apprentice trainer II, be certified by the Department of 24 25 Education or a nationally recognized athletic trainer 26 association, and perform one or more of the following 27 functions: preventing athletic injuries; recognizing, 28 evaluating, managing, treating, and rehabilitating athletic 29 injuries; administering an athletic training program; and 30 educating and counseling athletes. 31 184

1	(b) If a school district uses the services of an
2	athletic trainer who is not a teacher athletic trainer or a
3	teacher apprentice trainer within the requirements of this
4	section, such athletic trainer must be licensed as required by
5	part XIII of chapter 468.
6	Section 62. Paragraph (b) of subsection (1) of section
7	383.14, Florida Statutes, is amended to read:
8	383.14 Screening for metabolic disorders, other
9	hereditary and congenital disorders, and environmental risk
10	factors
11	(1) SCREENING REQUIREMENTSTo help ensure access to
12	the maternal and child health care system, the Department of
13	Health shall promote the screening of all infants born in
14	Florida for phenylketonuria and other metabolic, hereditary,
15	and congenital disorders known to result in significant
16	impairment of health or intellect, as screening programs
17	accepted by current medical practice become available and
18	practical in the judgment of the department. The department
19	shall also promote the identification and screening of all
20	infants born in this state and their families for
21	environmental risk factors such as low income, poor education,
22	maternal and family stress, emotional instability, substance
23	abuse, and other high-risk conditions associated with
24	increased risk of infant mortality and morbidity to provide
25	early intervention, remediation, and prevention services,
26	including, but not limited to, parent support and training
27	programs, home visitation, and case management.
28	Identification, perinatal screening, and intervention efforts
29	shall begin prior to and immediately following the birth of
30	the child by the attending health care provider. Such efforts
31	shall be conducted in hospitals, perinatal centers, county
	185

health departments, school health programs that provide
 prenatal care, and birthing centers, and reported to the
 Office of Vital Statistics.

4 (b) Postnatal screening. -- A risk factor analysis using 5 the department's designated risk assessment instrument shall 6 also be conducted as part of the medical screening process 7 upon the birth of a child and submitted to the department's 8 Office of Vital Statistics for recording and other purposes 9 provided for in this chapter. The department's screening process for risk assessment shall include a scoring mechanism 10 and procedures that establish thresholds for notification, 11 12 further assessment, referral, and eligibility for services by professionals or paraprofessionals consistent with the level 13 14 of risk. Procedures for developing and using the screening instrument, notification, referral, and care coordination 15 16 services, reporting requirements, management information, and 17 maintenance of a computer-driven registry in the Office of Vital Statistics which ensures privacy safeguards must be 18 19 consistent with the provisions and plans established under chapter 411, Pub. L. No. 99-457, and this chapter. Procedures 20 established for reporting information and maintaining a 21 confidential registry must include a mechanism for a 22 23 centralized information depository at the state and county levels. The department shall coordinate with existing risk 24 assessment systems and information registries. The department 25 26 must ensure, to the maximum extent possible, that the 27 screening information registry is integrated with the department's automated data systems, including the Florida 28 29 On-line Recipient Integrated Data Access (FLORIDA) system. Tests and screenings must be performed by the State Public 30 Health Laboratory, in coordination with Children's Medical 31

186

Services, at such times and in such manner as is prescribed by 1 2 the department after consultation with the Genetics and Infant Screening Advisory Council and the State Coordinating Council 3 4 for School Readiness Programs. 5 Section 63. Section 395.0197, Florida Statutes, is 6 amended to read: 7 395.0197 Internal risk management program.--8 (1) Every licensed facility shall, as a part of its 9 administrative functions, establish an internal risk 10 management program that includes all of the following 11 components: 12 (a) The investigation and analysis of the frequency 13 and causes of general categories and specific types of adverse 14 incidents to patients. 15 (b) The development of appropriate measures to minimize the risk of adverse incidents to patients, including, 16 17 but not limited to: 1. Risk management and risk prevention education and 18 19 training of all nonphysician personnel as follows: 20 Such education and training of all nonphysician a. personnel as part of their initial orientation; and 21 22 At least 1 hour of such education and training b. 23 annually for all nonphysician personnel of the licensed facility working in clinical areas and providing patient care, 24 except those persons licensed as health care practitioners who 25 26 are required to complete continuing education coursework 27 pursuant to chapter 456 or the respective practice act. 28 2. A prohibition, except when emergency circumstances 29 require otherwise, against a staff member of the licensed facility attending a patient in the recovery room, unless the 30 staff member is authorized to attend the patient in the 31 187

recovery room and is in the company of at least one other 1 person. However, a licensed facility is exempt from the 2 3 two-person requirement if it has: 4 a. Live visual observation; 5 b. Electronic observation; or 6 c. Any other reasonable measure taken to ensure 7 patient protection and privacy. 8 3. A prohibition against an unlicensed person from assisting or participating in any surgical procedure unless 9 the facility has authorized the person to do so following a 10 competency assessment, and such assistance or participation is 11 12 done under the direct and immediate supervision of a licensed physician and is not otherwise an activity that may only be 13 14 performed by a licensed health care practitioner. 4. Development, implementation, and ongoing evaluation 15 of procedures, protocols, and systems to accurately identify 16 17 patients, planned procedures, and the correct site of the planned procedure so as to minimize the performance of a 18 19 surgical procedure on the wrong patient, a wrong surgical 20 procedure, a wrong-site surgical procedure, or a surgical 21 procedure otherwise unrelated to the patient's diagnosis or 22 medical condition. 23 (c) The analysis of patient grievances that relate to patient care and the quality of medical services. 24 25 (d) The development and implementation of an incident 26 reporting system based upon the affirmative duty of all health care providers and all agents and employees of the licensed 27 health care facility to report adverse incidents to the risk 28 29 manager, or to his or her designee, within 3 business days 30 after their occurrence. 31 188 CODING: Words stricken are deletions; words underlined are additions.

1	(2) The internal risk management program is the
2	responsibility of the governing board of the health care
3	facility. Each licensed facility shall hire a risk manager,
4	licensed under s. 395.10974 part IX of chapter 626 , who is
5	responsible for implementation and oversight of such
6	facility's internal risk management program as required by
7	this section. A risk manager must not be made responsible for
8	more than four internal risk management programs in separate
9	licensed facilities, unless the facilities are under one
10	corporate ownership or the risk management programs are in
11	rural hospitals.
12	(3) In addition to the programs mandated by this
13	section, other innovative approaches intended to reduce the
14	frequency and severity of medical malpractice and patient
15	injury claims shall be encouraged and their implementation and
16	operation facilitated. Such additional approaches may include
17	extending internal risk management programs to health care
18	providers' offices and the assuming of provider liability by a
19	licensed health care facility for acts or omissions occurring
20	within the licensed facility.
21	(4) The agency shall , after consulting with the
22	Department of Insurance, adopt rules governing the
23	establishment of internal risk management programs to meet the
24	needs of individual licensed facilities. Each internal risk
25	management program shall include the use of incident reports
26	to be filed with an individual of responsibility who is
27	competent in risk management techniques in the employ of each
28	licensed facility, such as an insurance coordinator, or who is
29	retained by the licensed facility as a consultant. The
30	individual responsible for the risk management program shall
31	have free access to all medical records of the licensed
	189
COD	ING:Words stricken are deletions; words <u>underlined</u> are additions.

 facility. The incident reports are part of the workpapers of the attorney defending the licensed facility in litigation relating to the licensed facility and are subject to discovery, but are not admissible as evidence in court. A
3 relating to the licensed facility and are subject to4 discovery, but are not admissible as evidence in court. A
4 discovery, but are not admissible as evidence in court. A
5 person filing an incident report is not subject to civil suit
6 by virtue of such incident report. As a part of each internal
7 risk management program, the incident reports shall be used to
8 develop categories of incidents which identify problem areas.
9 Once identified, procedures shall be adjusted to correct the
10 problem areas.
11 (5) For purposes of reporting to the agency pursuant
12 to this section, the term "adverse incident" means an event
13 over which health care personnel could exercise control and
14 which is associated in whole or in part with medical
15 intervention, rather than the condition for which such
16 intervention occurred, and which:
17 (a) Results in one of the following injuries:
18 1. Death;
19 2. Brain or spinal damage;
20 3. Permanent disfigurement;
4. Fracture or dislocation of bones or joints;
5. A resulting limitation of neurological, physical,
23 or sensory function which continues after discharge from the
24 facility;
25 6. Any condition that required specialized medical
26 attention or surgical intervention resulting from nonemergency
27 medical intervention, other than an emergency medical
28 condition, to which the patient has not given his or her
29 informed consent; or
30 7. Any condition that required the transfer of the
31 patient, within or outside the facility, to a unit providing a
190

more acute level of care due to the adverse incident, rather 1 than the patient's condition prior to the adverse incident; 2 (b) Was the performance of a surgical procedure on the 3 4 wrong patient, a wrong surgical procedure, a wrong-site 5 surgical procedure, or a surgical procedure otherwise 6 unrelated to the patient's diagnosis or medical condition; 7 (c) Required the surgical repair of damage resulting 8 to a patient from a planned surgical procedure, where the 9 damage was not a recognized specific risk, as disclosed to the 10 patient and documented through the informed-consent process; 11 or 12 (d) Was a procedure to remove unplanned foreign 13 objects remaining from a surgical procedure. 14 (6)(a) Each licensed facility subject to this section 15 shall submit an annual report to the agency summarizing the 16 incident reports that have been filed in the facility for that 17 year. The report shall include: 1. The total number of adverse incidents. 18 19 2. A listing, by category, of the types of operations, diagnostic or treatment procedures, or other actions causing 20 the injuries, and the number of incidents occurring within 21 22 each category. 23 A listing, by category, of the types of injuries 3. caused and the number of incidents occurring within each 24 25 category. 26 4. A code number using the health care professional's 27 licensure number and a separate code number identifying all other individuals directly involved in adverse incidents to 28 29 patients, the relationship of the individual to the licensed facility, and the number of incidents in which each individual 30 has been directly involved. Each licensed facility shall 31 191 CODING: Words stricken are deletions; words underlined are additions. 1 maintain names of the health care professionals and 2 individuals identified by code numbers for purposes of this 3 section. 4 5. A description of all malpractice claims filed 5 against the licensed facility, including the total number of

6 pending and closed claims and the nature of the incident which 7 led to, the persons involved in, and the status and 8 disposition of each claim. Each report shall update status and 9 disposition for all prior reports.

(b) The information reported to the agency pursuant to paragraph (a) which relates to persons licensed under chapter 458, chapter 459, chapter 461, or chapter 466 shall be reviewed by the agency. The agency shall determine whether any of the incidents potentially involved conduct by a health care professional who is subject to disciplinary action, in which case the provisions of s. 456.073 shall apply.

17 (c) The report submitted to the agency shall also contain the name and license number of the risk manager of the 18 19 licensed facility, a copy of its policy and procedures which govern the measures taken by the facility and its risk manager 20 to reduce the risk of injuries and adverse incidents, and the 21 results of such measures. The annual report is confidential 22 23 and is not available to the public pursuant to s. 119.07(1) or any other law providing access to public records. The annual 24 report is not discoverable or admissible in any civil or 25 26 administrative action, except in disciplinary proceedings by 27 the agency or the appropriate regulatory board. The annual report is not available to the public as part of the record of 28 29 investigation for and prosecution in disciplinary proceedings made available to the public by the agency or the appropriate 30 regulatory board. However, the agency or the appropriate 31

192

1	regulatory board shall make available, upon written request by
2	a health care professional against whom probable cause has
3	been found, any such records which form the basis of the
4	determination of probable cause.
5	(7) The licensed facility shall notify the agency no
б	later than 1 business day after the risk manager or his or her
7	designee has received a report pursuant to paragraph (1)(d)
8	and can determine within 1 business day that any of the
9	following adverse incidents has occurred, whether occurring in
10	the licensed facility or arising from health care prior to
11	admission in the licensed facility:
12	(a) The death of a patient;
13	(b) Brain or spinal damage to a patient;
14	(c) The performance of a surgical procedure on the
15	wrong patient;
16	(d) The performance of a wrong-site surgical
17	procedure; or
18	(e) The performance of a wrong surgical procedure.
19	
20	The notification must be made in writing and be provided by
21	facsimile device or overnight mail delivery. The notification
22	must include information regarding the identity of the
23	affected patient, the type of adverse incident, the initiation
24	of an investigation by the facility, and whether the events
25	causing or resulting in the adverse incident represent a
26	potential risk to other patients.
27	(8) Any of the following adverse incidents, whether
28	occurring in the licensed facility or arising from health care
29	prior to admission in the licensed facility, shall be reported
30	by the facility to the agency within 15 calendar days after
31	its occurrence:
	193

(a) The death of a patient; 1 2 (b) Brain or spinal damage to a patient; 3 (C) The performance of a surgical procedure on the 4 wrong patient; 5 The performance of a wrong-site surgical (d) 6 procedure; 7 The performance of a wrong surgical procedure; (e) The performance of a surgical procedure that is 8 (f) 9 medically unnecessary or otherwise unrelated to the patient's diagnosis or medical condition; 10 (g) The surgical repair of damage resulting to a 11 12 patient from a planned surgical procedure, where the damage is not a recognized specific risk, as disclosed to the patient 13 14 and documented through the informed-consent process; or 15 (h) The performance of procedures to remove unplanned 16 foreign objects remaining from a surgical procedure. 17 18 The agency may grant extensions to this reporting requirement 19 for more than 15 days upon justification submitted in writing 20 by the facility administrator to the agency. The agency may require an additional, final report. These reports shall not 21 22 be available to the public pursuant to s. 119.07(1) or any 23 other law providing access to public records, nor be discoverable or admissible in any civil or administrative 24 action, except in disciplinary proceedings by the agency or 25 the appropriate regulatory board, nor shall they be available 26 27 to the public as part of the record of investigation for and prosecution in disciplinary proceedings made available to the 28 29 public by the agency or the appropriate regulatory board. However, the agency or the appropriate regulatory board shall 30 make available, upon written request by a health care 31 194

1	professional against whom probable cause has been found, any
2	such records which form the basis of the determination of
3	probable cause. The agency may investigate, as it deems
4	appropriate, any such incident and prescribe measures that
5	must or may be taken in response to the incident. The agency
6	shall review each incident and determine whether it
7	potentially involved conduct by the health care professional
8	who is subject to disciplinary action, in which case the
9	provisions of s. 456.073 shall apply.
10	(9) The agency shall publish on the agency's website,
11	no less than quarterly, a summary and trend analysis of
12	adverse incident reports received pursuant to this section,
13	which shall not include information that would identify the
14	patient, the reporting facility, or the health care
15	practitioners involved. The agency shall publish on the
16	agency's website an annual summary and trend analysis of all
17	adverse incident reports and malpractice claims information
18	provided by facilities in their annual reports, which shall
19	not include information that would identify the patient, the
20	reporting facility, or the practitioners involved. The
21	purpose of the publication of the summary and trend analysis
22	is to promote the rapid dissemination of information relating
23	to adverse incidents and malpractice claims to assist in
24	avoidance of similar incidents and reduce morbidity and
25	mortality.
26	<u>(10)</u> The internal risk manager of each licensed
27	facility shall:
28	(a) Investigate every allegation of sexual misconduct
29	which is made against a member of the facility's personnel who
30	has direct patient contact, when the allegation is that the
31	
	195
COD	ING:Words stricken are deletions; words <u>underlined</u> are additions.

```
Second Engrossed
```

sexual misconduct occurred at the facility or on the grounds 1 2 of the facility. ; and 3 (b) Report every allegation of sexual misconduct to 4 the administrator of the licensed facility. 5 (c) Notify the family or guardian of the victim, if a 6 minor, that an allegation of sexual misconduct has been made 7 and that an investigation is being conducted.+ 8 (d) Report to the Department of Health every allegation of sexual misconduct, as defined in chapter 456 and 9 the respective practice act, by a licensed health care 10 practitioner that involves a patient. 11 12 (11)(10) Any witness who witnessed or who possesses 13 actual knowledge of the act that is the basis of an allegation 14 of sexual abuse shall: 15 (a) Notify the local police; and 16 (b) Notify the hospital risk manager and the 17 administrator. 18 19 For purposes of this subsection, "sexual abuse" means acts of a sexual nature committed for the sexual gratification of 20 anyone upon, or in the presence of, a vulnerable adult, 21 without the vulnerable adult's informed consent, or a minor. 22 "Sexual abuse" includes, but is not limited to, the acts 23 defined in s. 794.011(1)(h), fondling, exposure of a 24 vulnerable adult's or minor's sexual organs, or the use of the 25 26 vulnerable adult or minor to solicit for or engage in 27 prostitution or sexual performance. "Sexual abuse" does not include any act intended for a valid medical purpose or any 28 29 act which may reasonably be construed to be a normal 30 caregiving action. 31 196

(12) (11) A person who, with malice or with intent to 1 2 discredit or harm a licensed facility or any person, makes a 3 false allegation of sexual misconduct against a member of a 4 licensed facility's personnel is guilty of a misdemeanor of 5 the second degree, punishable as provided in s. 775.082 or s. 6 775.083. 7 (13)(12) In addition to any penalty imposed pursuant 8 to this section, the agency shall require a written plan of 9 correction from the facility. For a single incident or series of isolated incidents that are nonwillful violations of the 10 reporting requirements of this section, the agency shall first 11 12 seek to obtain corrective action by the facility. If the correction is not demonstrated within the timeframe 13 14 established by the agency or if there is a pattern of 15 nonwillful violations of this section, the agency may impose an administrative fine, not to exceed \$5,000 for any violation 16 17 of the reporting requirements of this section. The administrative fine for repeated nonwillful violations shall 18 19 not exceed \$10,000 for any violation. The administrative fine for each intentional and willful violation may not exceed 20 \$25,000 per violation, per day. The fine for an intentional 21 22 and willful violation of this section may not exceed \$250,000. 23 In determining the amount of fine to be levied, the agency shall be guided by s. 395.1065(2)(b). This subsection does not 24 apply to the notice requirements under subsection (7). 25 26 (14)(13) The agency shall have access to all licensed 27 facility records necessary to carry out the provisions of this section. The records obtained by the agency under subsection 28 29 (6), subsection (8), or subsection(10)(9) are not available to the public under s. 119.07(1), nor shall they be 30 discoverable or admissible in any civil or administrative 31 197

action, except in disciplinary proceedings by the agency or 1 the appropriate regulatory board, nor shall records obtained 2 3 pursuant to s. 456.071 be available to the public as part of 4 the record of investigation for and prosecution in 5 disciplinary proceedings made available to the public by the agency or the appropriate regulatory board. However, the 6 7 agency or the appropriate regulatory board shall make available, upon written request by a health care professional 8 9 against whom probable cause has been found, any such records which form the basis of the determination of probable cause, 10 except that, with respect to medical review committee records, 11 12 s. 766.101 controls.

13 (15)(14) The meetings of the committees and governing 14 board of a licensed facility held solely for the purpose of 15 achieving the objectives of risk management as provided by 16 this section shall not be open to the public under the 17 provisions of chapter 286. The records of such meetings are 18 confidential and exempt from s. 119.07(1), except as provided 19 in subsection(14)(13).

(16)(15) The agency shall review, as part of its 20 licensure inspection process, the internal risk management 21 22 program at each licensed facility regulated by this section to 23 determine whether the program meets standards established in statutes and rules, whether the program is being conducted in 24 a manner designed to reduce adverse incidents, and whether the 25 26 program is appropriately reporting incidents under this 27 section subsections (5), (6), (7), and (8).

28 <u>(17)(16)</u> There shall be no monetary liability on the 29 part of, and no cause of action for damages shall arise 30 against, any risk manager, licensed under <u>s. 395.10974</u> part IX 31 of chapter 626, for the implementation and oversight of the

198

internal risk management program in a facility licensed under 1 2 this chapter or chapter 390 as required by this section, for 3 any act or proceeding undertaken or performed within the scope 4 of the functions of such internal risk management program if 5 the risk manager acts without intentional fraud. (18) A privilege against civil liability is hereby 6 7 granted to any licensed risk manager or licensed facility with 8 regard to information furnished pursuant to this chapter, 9 unless the licensed risk manager or facility acted in bad faith or with malice in providing such information. 10 (19)(17) If the agency, through its receipt of any 11 12 reports required under this section the annual reports prescribed in subsection (6) or through any investigation, has 13 14 a reasonable belief that conduct by a staff member or employee of a licensed facility is grounds for disciplinary action by 15 the appropriate regulatory board, the agency shall report this 16 17 fact to such regulatory board. 18 (18) The agency shall annually publish a report 19 summarizing the information contained in the annual incident reports submitted by licensed facilities pursuant to 20 21 subsection (6) and disciplinary actions reported to the agency 22 pursuant to s. 395.0193. The report must, at a minimum, 23 summarize: 24 (a) Adverse incidents, by category of reported 25 incident, and by type of professional involved. 26 (b) Types of malpractice claims filed, by type of professional involved. 27 (c) Disciplinary actions taken against professionals, 28 29 by type of professional involved. 30 (20) It shall be unlawful for any person to coerce, intimidate, or preclude a risk manager from lawfully executing 31 199

his or her reporting obligations pursuant to this chapter. 1 2 Such unlawful action shall be subject to civil monetary 3 penalties not to exceed \$10,000 per violation. 4 Section 64. Section 395.10972, Florida Statutes, is 5 amended to read: 395.10972 Health Care Risk Manager Advisory 6 7 Council.--The Secretary of Health Care Administration may appoint a seven-member five-member advisory council to advise 8 9 the agency on matters pertaining to health care risk managers. The members of the council shall serve at the pleasure of the 10 secretary. The council shall designate a chair. The council 11 12 shall meet at the call of the secretary or at those times as may be required by rule of the agency. The members of the 13 14 advisory council shall receive no compensation for their 15 services, but shall be reimbursed for travel expenses as provided in s. 112.061. The council shall consist of 16 17 individuals representing the following areas: 18 (1) Two shall be active health care risk managers, 19 including one risk manager who is recommended by and a member 20 of the Florida Society of Healthcare Risk Management. 21 (2) One shall be an active hospital administrator. 22 (3) One shall be an employee of an insurer or 23 self-insurer of medical malpractice coverage. (4) One shall be a representative of the 24 health-care-consuming public. 25 26 (5) Two shall be licensed health care practitioners, 27 one of whom shall be licensed as a physician under chapter 458 28 or chapter 459. 29 Section 65. Paragraph (b) of subsection (2) of section 30 395.701, Florida Statutes, is amended to read: 31 200 CODING: Words stricken are deletions; words underlined are additions.

Second Engrossed

395.701 Annual assessments on net operating revenues 1 2 for inpatient and outpatient services to fund public medical 3 assistance; administrative fines for failure to pay 4 assessments when due; exemption .--5 (2) 6 (b) There is imposed upon each hospital an assessment 7 in an amount equal to 1 percent of the annual net operating 8 revenue for outpatient services for each hospital, such 9 revenue to be determined by the agency, based on the actual 10 experience of the hospital as reported to the agency. While prior year report worksheets may be reconciled to the 11 12 hospital's audited financial statements, no additional audited 13 financial components may be required for the purposes of 14 determining the amount of the assessment imposed pursuant to 15 this section other than those in effect on July 1, 2000. Within 6 months after the end of each hospital fiscal year, 16 17 the agency shall certify the amount of the assessment for each 18 hospital. The assessment shall be payable to and collected by 19 the agency in equal quarterly amounts, on or before the first 20 day of each calendar quarter, beginning with the first full calendar quarter that occurs after the agency certifies the 21 22 amount of the assessment for each hospital. All moneys 23 collected pursuant to this subsection shall be deposited into the Public Medical Assistance Trust Fund. 24 25 Section 66. Section 409.905, Florida Statutes, is 26 amended to read: 409.905 Mandatory Medicaid services. -- The agency may 27 make payments for the following services, which are required 28 29 of the state by Title XIX of the Social Security Act, furnished by Medicaid providers to recipients who are 30 determined to be eligible on the dates on which the services 31 201 CODING: Words stricken are deletions; words underlined are additions.

were provided. Any service under this section shall be 1 provided only when medically necessary and in accordance with 2 3 state and federal law. Mandatory services rendered by 4 providers in mobile units to Medicaid recipients may be 5 restricted by the agency.Nothing in this section shall be 6 construed to prevent or limit the agency from adjusting fees, 7 reimbursement rates, lengths of stay, number of visits, number of services, or any other adjustments necessary to comply with 8 9 the availability of moneys and any limitations or directions 10 provided for in the General Appropriations Act or chapter 216. (1) ADVANCED REGISTERED NURSE PRACTITIONER 11 12 SERVICES. -- The agency shall pay for services provided to a recipient by a licensed advanced registered nurse practitioner 13 14 who has a valid collaboration agreement with a licensed 15 physician on file with the Department of Health or who provides anesthesia services in accordance with established 16 17 protocol required by state law and approved by the medical staff of the facility in which the anesthetic service is 18 19 performed. Reimbursement for such services must be provided in an amount that equals not less than 80 percent of the 20 reimbursement to a physician who provides the same services, 21 22 unless otherwise provided for in the General Appropriations 23 Act. EARLY AND PERIODIC SCREENING, DIAGNOSIS, AND 24 (2) TREATMENT SERVICES. -- The agency shall pay for early and 25 26 periodic screening and diagnosis of a recipient under age 21 27 to ascertain physical and mental problems and conditions and provide treatment to correct or ameliorate these problems and 28 29 conditions. These services include all services determined by

30 the agency to be medically necessary for the treatment,

31 correction, or amelioration of these problems, including

202

personal care, private duty nursing, durable medical 1 equipment, physical therapy, occupational therapy, speech 2 3 therapy, respiratory therapy, and immunizations. 4 (3) FAMILY PLANNING SERVICES. -- The agency shall pay 5 for services necessary to enable a recipient voluntarily to plan family size or to space children. These services include б 7 information; education; counseling regarding the availability, benefits, and risks of each method of pregnancy prevention; 8 9 drugs and supplies; and necessary medical care and followup. 10 Each recipient participating in the family planning portion of the Medicaid program must be provided freedom to choose any 11 12 alternative method of family planning, as required by federal 13 law. 14 (4) HOME HEALTH CARE SERVICES. -- The agency shall pay 15 for nursing and home health aide services, supplies, appliances, and durable medical equipment, necessary to assist 16 17 a recipient living at home. An entity that provides services pursuant to this subsection shall be licensed under part IV of 18 19 chapter 400 or part II of chapter 499, if appropriate. These services, equipment, and supplies, or reimbursement therefor, 20 may be limited as provided in the General Appropriations Act 21 and do not include services, equipment, or supplies provided 22 23 to a person residing in a hospital or nursing facility. In providing home health care services, the agency may require 24 prior authorization of care based on diagnosis. 25 26 (5) HOSPITAL INPATIENT SERVICES. -- The agency shall pay for all covered services provided for the medical care and 27 treatment of a recipient who is admitted as an inpatient by a 28 29 licensed physician or dentist to a hospital licensed under part I of chapter 395. However, the agency shall limit the 30 payment for inpatient hospital services for a Medicaid 31 203

recipient 21 years of age or older to 45 days or the number of 1 days necessary to comply with the General Appropriations Act. 2 3 (a) The agency is authorized to implement 4 reimbursement and utilization management reforms in order to 5 comply with any limitations or directions in the General 6 Appropriations Act, which may include, but are not limited to: 7 prior authorization for inpatient psychiatric days; enhanced 8 utilization and concurrent review programs for highly utilized 9 services; reduction or elimination of covered days of service; adjusting reimbursement ceilings for variable costs; adjusting 10 reimbursement ceilings for fixed and property costs; and 11 12 implementing target rates of increase. 13 (b) A licensed hospital maintained primarily for the 14 care and treatment of patients having mental disorders or 15 mental diseases is not eligible to participate in the hospital 16 inpatient portion of the Medicaid program except as provided 17 in federal law. However, the department shall apply for a waiver, within 9 months after June 5, 1991, designed to 18 19 provide hospitalization services for mental health reasons to children and adults in the most cost-effective and lowest cost 20 setting possible. Such waiver shall include a request for the 21 22 opportunity to pay for care in hospitals known under federal law as "institutions for mental disease" or "IMD's." The 23 waiver proposal shall propose no additional aggregate cost to 24 the state or Federal Government, and shall be conducted in 25 26 Hillsborough County, Highlands County, Hardee County, Manatee 27 County, and Polk County. The waiver proposal may incorporate competitive bidding for hospital services, comprehensive 28 29 brokering, prepaid capitated arrangements, or other mechanisms deemed by the department to show promise in reducing the cost 30 of acute care and increasing the effectiveness of preventive 31

204

When developing the waiver proposal, the department 1 care. shall take into account price, quality, accessibility, 2 3 linkages of the hospital to community services and family 4 support programs, plans of the hospital to ensure the earliest 5 discharge possible, and the comprehensiveness of the mental 6 health and other health care services offered by participating 7 providers. 8 (c) Agency for Health Care Administration shall adjust 9 a hospital's current inpatient per diem rate to reflect the cost of serving the Medicaid population at that institution 10 if: 11 12 1. The hospital experiences an increase in Medicaid 13 caseload by more than 25 percent in any year, primarily 14 resulting from the closure of a hospital in the same service 15 area occurring after July 1, 1995; or The hospital's Medicaid per diem rate is at least 16 2. 17 25 percent below the Medicaid per patient cost for that year. 18 19 No later than November 1, 2000, the agency must provide estimated costs for any adjustment in a hospital inpatient per 20 diem pursuant to this paragraph to the Executive Office of the 21 22 Governor, the House of Representatives General Appropriations 23 Committee, and the Senate Budget Committee. Before the agency implements a change in a hospital's inpatient per diem rate 24 pursuant to this paragraph, the Legislature must have 25 26 specifically appropriated sufficient funds in the 2001-2002 27 General Appropriations Act to support the increase in cost as estimated by the agency. This paragraph is repealed on July 1, 28 29 2001. (6) HOSPITAL OUTPATIENT SERVICES. -- The agency shall 30 pay for preventive, diagnostic, therapeutic, or palliative 31 205 CODING: Words stricken are deletions; words underlined are additions.

care and other services provided to a recipient in the 1 outpatient portion of a hospital licensed under part I of 2 chapter 395, and provided under the direction of a licensed 3 4 physician or licensed dentist, except that payment for such 5 care and services is limited to \$1,500 per state fiscal year per recipient, unless an exception has been made by the 6 7 agency, and with the exception of a Medicaid recipient under 8 age 21, in which case the only limitation is medical 9 necessity.

(7) INDEPENDENT LABORATORY SERVICES.--The agency shall
pay for medically necessary diagnostic laboratory procedures
ordered by a licensed physician or other licensed practitioner
of the healing arts which are provided for a recipient in a
laboratory that meets the requirements for Medicare
participation and is licensed under chapter 483, if required.

(8) NURSING FACILITY SERVICES. -- The agency shall pay 16 17 for 24-hour-a-day nursing and rehabilitative services for a recipient in a nursing facility licensed under part II of 18 19 chapter 400 or in a rural hospital, as defined in s. 395.602, or in a Medicare certified skilled nursing facility operated 20 by a hospital, as defined by s. 395.002(11), that is licensed 21 under part I of chapter 395, and in accordance with provisions 22 23 set forth in s. 409.908(2)(a), which services are ordered by and provided under the direction of a licensed physician. 24 However, if a nursing facility has been destroyed or otherwise 25 26 made uninhabitable by natural disaster or other emergency and 27 another nursing facility is not available, the agency must pay for similar services temporarily in a hospital licensed under 28 29 part I of chapter 395 provided federal funding is approved and 30 available.

31

206

1	(9) PHYSICIAN SERVICESThe agency shall pay for
2	covered services and procedures rendered to a recipient by, or
3	under the personal supervision of, a person licensed under
4	state law to practice medicine or osteopathic medicine. These
5	services may be furnished in the physician's office, the
6	Medicaid recipient's home, a hospital, a nursing facility, or
7	elsewhere, but shall be medically necessary for the treatment
8	of an injury, illness, or disease within the scope of the
9	practice of medicine or osteopathic medicine as defined by
10	state law. The agency shall not pay for services that are
11	clinically unproven, experimental, or for purely cosmetic
12	purposes.
13	(10) PORTABLE X-RAY SERVICESThe agency shall pay
14	for professional and technical portable radiological services
15	ordered by a licensed physician or other licensed practitioner
16	of the healing arts which are provided by a licensed
17	professional in a setting other than a hospital, clinic, or
18	office of a physician or practitioner of the healing arts, on
19	behalf of a recipient.
20	(11) RURAL HEALTH CLINIC SERVICESThe agency shall
21	pay for outpatient primary health care services for a
22	recipient provided by a clinic certified by and participating
23	in the Medicare program which is located in a federally
24	designated, rural, medically underserved area and has on its
25	staff one or more licensed primary care nurse practitioners or
26	physician assistants, and a licensed staff supervising
27	physician or a consulting supervising physician.
28	(12) TRANSPORTATION SERVICESThe agency shall ensure
29	that appropriate transportation services are available for a
30	Medicaid recipient in need of transport to a qualified
31	Medicaid provider for medically necessary and
	207
COD	I J ING: Words stricken are deletions; words underlined are additions.

Medicaid-compensable services, provided a client's ability to 1 2 choose a specific transportation provider shall be limited to 3 those options resulting from policies established by the 4 agency to meet the fiscal limitations of the General 5 Appropriations Act. The agency may pay for transportation and other related travel expenses as necessary only if these б 7 services are not otherwise available. Section 67. Section 409.906, Florida Statutes, is 8 9 amended to read: 409.906 Optional Medicaid services.--Subject to 10

specific appropriations, the agency may make payments for 11 12 services which are optional to the state under Title XIX of the Social Security Act and are furnished by Medicaid 13 14 providers to recipients who are determined to be eligible on the dates on which the services were provided. Any optional 15 service that is provided shall be provided only when medically 16 17 necessary and in accordance with state and federal law. Optional services rendered by providers in mobile units to 18 19 Medicaid recipients may be restricted or prohibited by the 20 agency.Nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, 21 lengths of stay, number of visits, or number of services, or 22 23 making any other adjustments necessary to comply with the availability of moneys and any limitations or directions 24 provided for in the General Appropriations Act or chapter 216. 25 26 If necessary to safeguard the state's systems of providing 27 services to elderly and disabled persons and subject to the notice and review provisions of s. 216.177, the Governor may 28 29 direct the Agency for Health Care Administration to amend the 30 Medicaid state plan to delete the optional Medicaid service 31

208

known as "Intermediate Care Facilities for the Developmentally 1 Disabled." Optional services may include: 2 (1) ADULT DENTURE SERVICES. -- The agency may pay for 3 4 dentures, the procedures required to seat dentures, and the repair and reline of dentures, provided by or under the 5 direction of a licensed dentist, for a recipient who is age 21 6 7 or older. However, Medicaid will not provide reimbursement for 8 dental services provided in a mobile dental unit, except for a 9 mobile dental unit: 10 (a) Owned by, operated by, or having a contractual agreement with the Department of Health and complying with 11 12 Medicaid's county health department clinic services program 13 specifications as a county health department clinic services 14 provider. (b) Owned by, operated by, or having a contractual 15 16 arrangement with a federally qualified health center and 17 complying with Medicaid's federally qualified health center 18 specifications as a federally qualified health center 19 provider. 20 (c) Rendering dental services to Medicaid recipients, 21 years of age and older, at nursing facilities. 21 22 (d) Owned by, operated by, or having a contractual 23 agreement with a state-approved dental educational 24 institution. 25 (2) ADULT HEALTH SCREENING SERVICES.--The agency may 26 pay for an annual routine physical examination, conducted by 27 or under the direction of a licensed physician, for a recipient age 21 or older, without regard to medical 28 29 necessity, in order to detect and prevent disease, disability, or other health condition or its progression. 30 31 209 CODING: Words stricken are deletions; words underlined are additions.

1	(3) AMBULATORY SURGICAL CENTER SERVICESThe agency
2	may pay for services provided to a recipient in an ambulatory
3	surgical center licensed under part I of chapter 395, by or
4	under the direction of a licensed physician or dentist.
5	(4) BIRTH CENTER SERVICESThe agency may pay for
6	examinations and delivery, recovery, and newborn assessment,
7	and related services, provided in a licensed birth center
8	staffed with licensed physicians, certified nurse midwives,
9	and midwives licensed in accordance with chapter 467, to a
10	recipient expected to experience a low-risk pregnancy and
11	delivery.
12	(5) CASE MANAGEMENT SERVICESThe agency may pay for
13	primary care case management services rendered to a recipient
14	pursuant to a federally approved waiver, and targeted case
15	management services for specific groups of targeted
16	recipients, for which funding has been provided and which are
17	rendered pursuant to federal guidelines. The agency is
18	authorized to limit reimbursement for targeted case management
19	services in order to comply with any limitations or directions
20	provided for in the General Appropriations Act.
21	Notwithstanding s. 216.292, the Department of Children and
22	Family Services may transfer general funds to the Agency for
23	Health Care Administration to fund state match requirements
24	exceeding the amount specified in the General Appropriations
25	Act for targeted case management services.
26	(6) CHILDREN'S DENTAL SERVICESThe agency may pay
27	for diagnostic, preventive, or corrective procedures,
28	including orthodontia in severe cases, provided to a recipient
29	under age 21, by or under the supervision of a licensed
30	dentist. Services provided under this program include
31	treatment of the teeth and associated structures of the oral
	210
COD	ING: Words stricken are deletions; words underlined are additions.

cavity, as well as treatment of disease, injury, or impairment 1 2 that may affect the oral or general health of the individual. 3 However, Medicaid will not provide reimbursement for dental 4 services provided in a mobile dental unit, except for a mobile 5 dental unit: 6 (a) Owned by, operated by, or having a contractual 7 agreement with the Department of Health and complying with 8 Medicaid's county health department clinic services program 9 specifications as a county health department clinic services 10 provider. (b) Owned by, operated by, or having a contractual 11 12 arrangement with a federally qualified health center and 13 complying with Medicaid's federally qualified health center 14 specifications as a federally qualified health center 15 provider. 16 (c) Rendering dental services to Medicaid recipients, 17 21 years of age and older, at nursing facilities. 18 (d) Owned by, operated by, or having a contractual 19 agreement with a state-approved dental educational 20 institution. 21 (7) CHIROPRACTIC SERVICES.--The agency may pay for 22 manual manipulation of the spine and initial services, 23 screening, and X rays provided to a recipient by a licensed 24 chiropractic physician. (8) COMMUNITY MENTAL HEALTH SERVICES. -- The agency may 25 pay for rehabilitative services provided to a recipient by a 26 mental health or substance abuse provider licensed by the 27 agency and under contract with the agency or the Department of 28 29 Children and Family Services to provide such services. Those services which are psychiatric in nature shall be rendered or 30 recommended by a psychiatrist, and those services which are 31 211

30

medical in nature shall be rendered or recommended by a 1 physician or psychiatrist. The agency must develop a provider 2 3 enrollment process for community mental health providers which 4 bases provider enrollment on an assessment of service need. 5 The provider enrollment process shall be designed to control costs, prevent fraud and abuse, consider provider expertise 6 7 and capacity, and assess provider success in managing 8 utilization of care and measuring treatment outcomes. 9 Providers will be selected through a competitive procurement or selective contracting process. In addition to other 10 community mental health providers, the agency shall consider 11 12 for enrollment mental health programs licensed under chapter 13 395 and group practices licensed under chapter 458, chapter 14 459, chapter 490, or chapter 491. The agency is also 15 authorized to continue operation of its behavioral health 16 utilization management program and may develop new services if 17 these actions are necessary to ensure savings from the implementation of the utilization management system. The 18 19 agency shall coordinate the implementation of this enrollment process with the Department of Children and Family Services 20 and the Department of Juvenile Justice. The agency is 21 authorized to utilize diagnostic criteria in setting 22 23 reimbursement rates, to preauthorize certain high-cost or highly utilized services, to limit or eliminate coverage for 24 certain services, or to make any other adjustments necessary 25 26 to comply with any limitations or directions provided for in 27 the General Appropriations Act. (9) DIALYSIS FACILITY SERVICES. -- Subject to specific 28 29 appropriations being provided for this purpose, the agency may

31 facility in accordance with Title XVIII of the Social Security

pay a dialysis facility that is approved as a dialysis

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

212

Act, for dialysis services that are provided to a Medicaid
 recipient under the direction of a physician licensed to
 practice medicine or osteopathic medicine in this state,
 including dialysis services provided in the recipient's home
 by a hospital-based or freestanding dialysis facility.

6 (10) DURABLE MEDICAL EQUIPMENT.--The agency may
7 authorize and pay for certain durable medical equipment and
8 supplies provided to a Medicaid recipient as medically
9 necessary.

10 (11) HEALTHY START SERVICES. -- The agency may pay for a continuum of risk-appropriate medical and psychosocial 11 12 services for the Healthy Start program in accordance with a 13 federal waiver. The agency may not implement the federal 14 waiver unless the waiver permits the state to limit enrollment or the amount, duration, and scope of services to ensure that 15 expenditures will not exceed funds appropriated by the 16 17 Legislature or available from local sources. If the Health Care Financing Administration does not approve a federal 18 19 waiver for Healthy Start services, the agency, in consultation with the Department of Health and the Florida Association of 20 Healthy Start Coalitions, is authorized to establish a 21 22 Medicaid certified-match program for Healthy Start services. 23 Participation in the Healthy Start certified-match program shall be voluntary, and reimbursement shall be limited to the 24 federal Medicaid share to Medicaid-enrolled Healthy Start 25 26 coalitions for services provided to Medicaid recipients. The 27 agency shall take no action to implement a certified-match program without ensuring that the amendment and review 28 29 requirements of ss. 216.177 and 216.181 have been met. (12) HEARING SERVICES. -- The agency may pay for hearing 30 and related services, including hearing evaluations, hearing 31

213

aid devices, dispensing of the hearing aid, and related 1 repairs, if provided to a recipient by a licensed hearing aid 2 3 specialist, otolaryngologist, otologist, audiologist, or 4 physician. (13) HOME AND COMMUNITY-BASED SERVICES.--The agency 5 6 may pay for home-based or community-based services that are 7 rendered to a recipient in accordance with a federally 8 approved waiver program. 9 (14) HOSPICE CARE SERVICES. -- The agency may pay for all reasonable and necessary services for the palliation or 10 management of a recipient's terminal illness, if the services 11 12 are provided by a hospice that is licensed under part VI of chapter 400 and meets Medicare certification requirements. 13 14 (15) INTERMEDIATE CARE FACILITY FOR THE 15 DEVELOPMENTALLY DISABLED SERVICES. -- The agency may pay for health-related care and services provided on a 24-hour-a-day 16 17 basis by a facility licensed and certified as a Medicaid Intermediate Care Facility for the Developmentally Disabled, 18 19 for a recipient who needs such care because of a developmental disability. 20 21 (16) INTERMEDIATE CARE SERVICES.--The agency may pay 22 for 24-hour-a-day intermediate care nursing and rehabilitation 23 services rendered to a recipient in a nursing facility licensed under part II of chapter 400, if the services are 24 ordered by and provided under the direction of a physician. 25 26 (17) OPTOMETRIC SERVICES. -- The agency may pay for services provided to a recipient, including examination, 27 diagnosis, treatment, and management, related to ocular 28 29 pathology, if the services are provided by a licensed 30 optometrist or physician. 31 214

1	(18) PHYSICIAN ASSISTANT SERVICESThe agency may pay
2	for all services provided to a recipient by a physician
3	assistant licensed under s. 458.347 or s. 459.022.
4	Reimbursement for such services must be not less than 80
5	percent of the reimbursement that would be paid to a physician
6	who provided the same services.
7	(19) PODIATRIC SERVICESThe agency may pay for
8	services, including diagnosis and medical, surgical,
9	palliative, and mechanical treatment, related to ailments of
10	the human foot and lower leg, if provided to a recipient by a
11	podiatric physician licensed under state law.
12	(20) PRESCRIBED DRUG SERVICESThe agency may pay for
13	medications that are prescribed for a recipient by a physician
14	or other licensed practitioner of the healing arts authorized
15	to prescribe medications and that are dispensed to the
16	recipient by a licensed pharmacist or physician in accordance
17	with applicable state and federal law.
18	(21) REGISTERED NURSE FIRST ASSISTANT SERVICESThe
19	agency may pay for all services provided to a recipient by a
20	registered nurse first assistant as described in s. 464.027.
21	Reimbursement for such services may not be less than 80
22	percent of the reimbursement that would be paid to a physician
23	providing the same services.
24	(22) STATE HOSPITAL SERVICESThe agency may pay for
25	all-inclusive psychiatric inpatient hospital care provided to
26	a recipient age 65 or older in a state mental hospital.
27	(23) VISUAL SERVICESThe agency may pay for visual
28	examinations, eyeglasses, and eyeglass repairs for a
29	recipient, if they are prescribed by a licensed physician
30	specializing in diseases of the eye or by a licensed
31	optometrist.
	215
	CT7

_	
1	(24) CHILD-WELFARE-TARGETED CASE MANAGEMENTThe
2	Agency for Health Care Administration, in consultation with
3	the Department of Children and Family Services, may establish
4	a targeted case-management pilot project in those counties
5	identified by the Department of Children and Family Services
б	and for the community-based child welfare project in Sarasota
7	and Manatee counties, as authorized under s. 409.1671. These
8	projects shall be established for the purpose of determining
9	the impact of targeted case management on the child welfare
10	program and the earnings from the child welfare program.
11	Results of the pilot projects shall be reported to the Child
12	Welfare Estimating Conference and the Social Services
13	Estimating Conference established under s. 216.136. The number
14	of projects may not be increased until requested by the
15	Department of Children and Family Services, recommended by the
16	Child Welfare Estimating Conference and the Social Services
17	Estimating Conference, and approved by the Legislature. The
18	covered group of individuals who are eligible to receive
19	targeted case management include children who are eligible for
20	Medicaid; who are between the ages of birth through 21; and
21	who are under protective supervision or postplacement
22	supervision, under foster-care supervision, or in shelter care
23	or foster care. The number of individuals who are eligible to
24	receive targeted case management shall be limited to the
25	number for whom the Department of Children and Family Services
26	has available matching funds to cover the costs. The general
27	revenue funds required to match the funds for services
28	provided by the community-based child welfare projects are
29	limited to funds available for services described under s.
30	409.1671. The Department of Children and Family Services may
31	
	216
	216
transfer the general revenue matching funds as billed by the 1 2 Agency for Health Care Administration. 3 Section 68. Present subsections (7) through (11) of 4 section 456.013, Florida Statutes, are renumbered as 5 subsections (8) through (12), respectively, and a new 6 subsection (7) is added to that section to read: 7 456.013 Department; general licensing provisions .--8 (7) The boards, or the department when there is no 9 board, shall require the completion of a 2-hour course relating to prevention of medical errors as part of the 10 licensure and renewal process. The 2-hour course shall count 11 12 towards the total number of continuing education hours 13 required for the profession. The course shall be approved by 14 the board or department, as appropriate, and shall include a study of root-cause analysis, error reduction and prevention, 15 and patient safety. If the course is being offered by a 16 facility licensed pursuant to chapter 395 for its employees, 17 18 the board may approve up to 1 hour of the 2-hour course to be 19 specifically related to error reduction and prevention methods 20 used in that facility. 21 Section 69. Subsection (19) is added to section 456.057, Florida Statutes, to read: 22 23 456.057 Ownership and control of patient records; report or copies of records to be furnished .--24 (19) The board, or department when there is no board, 25 26 may temporarily or permanently appoint a person or entity as a custodian of medical records in the event of the death of a 27 practitioner, the mental or physical incapacitation of the 28 29 practitioner, or the abandonment of medical records by a 30 practitioner. The custodian appointed shall comply with all 31 217

```
Second Engrossed
```

provisions of this section, including the release of patient 1 2 records. Section 70. Subsection (3) is added to section 3 456.063, Florida Statutes, to read: 4 5 456.063 Sexual misconduct; disqualification for 6 license, certificate, or registration .--7 (3) Licensed health care practitioners shall report 8 allegations of sexual misconduct to the department, regardless 9 of the practice setting in which the alleged sexual misconduct 10 occurred. Section 71. Paragraphs (c) and (q) of subsection (1) 11 12 of section 456.072, Florida Statutes, are amended, paragraphs 13 (aa), (bb), and (cc) are added to that subsection, paragraphs 14 (c), (d), and (e) of subsection (2) and subsection (4) are 15 amended, and paragraphs (i) and (j) are added to subsection 16 (2) of that section, to read: 17 456.072 Grounds for discipline; penalties; 18 enforcement. --19 (1) The following acts shall constitute grounds for 20 which the disciplinary actions specified in subsection (2) may 21 be taken: 22 (c) Being convicted or found guilty of, or entering a 23 plea of guilty or nolo contendere to, regardless of adjudication, a crime in any jurisdiction which relates to the 24 practice of, or the ability to practice, a licensee's 25 26 profession. 27 (q) Violating any provision of this chapter, the applicable professional practice act, a rule of the department 28 29 or the board, or a lawful order of the department or the board, or failing to comply with a lawfully issued subpoena of 30 the department. 31 218

1	(aa) Performing or attempting to perform health care
1 2	services on the wrong patient, a wrong-site procedure, a wrong
3	procedure, or an unauthorized procedure or a procedure that is
4	medically unnecessary or otherwise unrelated to the patient's
т 5	diagnosis or medical condition. For the purposes of this
6	paragraph, performing or attempting to perform health care
7	services includes the preparation of the patient.
, 8	(bb) Leaving a foreign body in a patient, such as a
9	sponge, clamp, forceps, surgical needle, or other
10	paraphernalia commonly used in surgical, examination, or other
11	diagnostic procedures. For the purposes of this paragraph, it
12	shall be legally presumed that retention of a foreign body is
13	not in the best interest of the patient and is not within the
14	standard of care of the profession, regardless of the intent
15	of the professional.
16	(cc) Violating any provision of this chapter, the
17	applicable practice act, or any rules adopted pursuant
18	thereto.
19	(2) When the board, or the department when there is no
20	board, finds any person guilty of the grounds set forth in
21	subsection (1) or of any grounds set forth in the applicable
22	practice act, including conduct constituting a substantial
23	violation of subsection (1) or a violation of the applicable
24	practice act which occurred prior to obtaining a license, it
25	may enter an order imposing one or more of the following
26	penalties:
27	(c) Restriction of practice or license, including, but
28	not limited to, restricting the licensee from practicing in
29	certain settings, restricting the licensee to work only under
30	designated conditions or in certain settings, restricting the
31	licensee from performing or providing designated clinical and
	219
COD	TNC. Words strictor are deletions: words underlined are additions

administrative services, restricting the licensee from 1 2 practicing more than a designated number of hours, or any 3 other restriction found to be necessary for the protection of the public health, safety, and welfare. 4 5 (d) Imposition of an administrative fine not to exceed 6 \$10,000 for each count or separate offense. If the violation 7 is for fraud or making a false or fraudulent representation, 8 the board, or the department if there is no board, must impose 9 a fine of \$10,000 per count or offense. (e) Issuance of a reprimand or letter of concern. 10 (i) Refund of fees billed and collected from the 11 patient or a third party on behalf of the patient. 12 13 (j) Requirement that the practitioner undergo remedial 14 education. 15 In determining what action is appropriate, the board, or 16 17 department when there is no board, must first consider what 18 sanctions are necessary to protect the public or to compensate 19 the patient. Only after those sanctions have been imposed may the disciplining authority consider and include in the order 20 requirements designed to rehabilitate the practitioner. All 21 costs associated with compliance with orders issued under this 22 23 subsection are the obligation of the practitioner. (4) In addition to any other discipline imposed 24 25 through final order, or citation, entered on or after July 1, 26 2001, pursuant to this section or discipline imposed through final order, or citation, entered on or after July 1, 2001, 27 for a violation of any practice act, the board, or the 28 29 department when there is no board, shall may assess costs related to the investigation and prosecution of the case. In 30 any case where the board or the department imposes a fine or 31 220

1	assessment and the fine or assessment is not paid within a
2	reasonable time, such reasonable time to be prescribed in the
3	rules of the board, or the department when there is no board,
4	or in the order assessing such fines or costs, the department
5	or the Department of Legal Affairs may contract for the
6	collection of, or bring a civil action to recover, the fine or
7	assessment.
8	Section 72. Paragraphs (a) and (c) of subsection (9)
9	of section 456.073, Florida Statutes, are amended, and,
10	effective upon this act becoming a law, subsection (13) is
11	added to that section, to read:
12	456.073 Disciplinary proceedingsDisciplinary
13	proceedings for each board shall be within the jurisdiction of
14	the department.
15	(9)(a) The department shall periodically notify the
16	person who filed the complaint, as well as the patient or the
17	patient's legal representative, of the status of the
18	investigation, indicating whether probable cause has been
19	found and the status of any civil action or administrative
20	proceeding or appeal.
21	(c) In any disciplinary case for which probable cause
22	is not found, the department shall so inform the person who
23	filed the complaint and notify that person that he or she may,
24	within 60 days, provide any additional information to the
25	department probable cause panel which may be relevant to the
26	decision. To facilitate the provision of additional
27	information, the person who filed the complaint may receive,
28	upon request, a copy of the department's expert report that
29	supported the recommendation for closure, if such a report was
30	relied upon by the department. In no way does this require the
31	department to procure an expert opinion or report if none was
	221
רט <i>י</i>	TNG •Words stricken are deletions; words underlined are additions

1	used. Additionally, the identity of the expert shall remain
2	<u>confidential.</u> In any administrative proceeding under s.
3	120.57, the person who filed the disciplinary complaint shall
4	have the right to present oral or written communication
5	relating to the alleged disciplinary violations or to the
6	appropriate penalty.
7	(13) Notwithstanding any provision of law to the
8	contrary, an administrative complaint against a licensee shall
9	be filed within 6 years after the time of the incident or
10	occurrence giving rise to the complaint against the licensee.
11	If such incident or occurrence involved criminal actions,
12	diversion of controlled substances, sexual misconduct, or
13	impairment by the licensee, this subsection does not apply to
14	bar initiation of an investigation or filing of an
15	administrative complaint beyond the 6-year timeframe. In those
16	cases covered by this subsection in which it can be shown that
17	fraud, concealment, or intentional misrepresentation of fact
18	prevented the discovery of the violation of law, the period of
19	limitations is extended forward, but in no event to exceed 12
20	years after the time of the incident or occurrence.
21	Section 73. Subsection (1) of section 456.074, Florida
22	Statutes, is amended to read:
23	456.074 Certain health care practitioners; immediate
24	suspension of license
25	(1) The department shall issue an emergency order
26	suspending the license of any person licensed under chapter
27	458, chapter 459, chapter 460, chapter 461, chapter 462,
28	chapter 463, chapter 464, chapter 465, chapter 466, or chapter
29	484 who pleads guilty to, is convicted or found guilty of, or
30	who enters a plea of nolo contendere to, regardless of
31	adjudication, a felony under chapter 409 <u>, chapter 817,</u> or
	222
COD	I NG: Words stricken are deletions; words underlined are additions.

```
Second Engrossed
```

chapter 893 or under 21 U.S.C. ss. 801-970 or under 42 U.S.C. 1 2 ss. 1395-1396. 3 Section 74. Subsections (2) and (6) of section 4 456.077, Florida Statutes, are amended to read: 5 456.077 Authority to issue citations .--6 (2) The board, or the department if there is no board, 7 shall adopt rules designating violations for which a citation 8 may be issued. Such rules shall designate as citation 9 violations those violations for which there is no substantial 10 threat to the public health, safety, and welfare. Violations for which a citation may be issued shall include violations of 11 12 continuing education requirements, failure to timely pay required fees and fines, failure to comply with the 13 14 requirements of ss. 381.026 and 381.0261 regarding the 15 dissemination of information regarding patient rights, failure to comply with advertising requirements, failure to timely 16 17 update practitioner profile and credentialing files, failure to display signs, licenses, and permits, failure to have 18 19 required reference books available, and all other violations 20 that do not pose a direct and serious threat to the health and safety of the patient. 21 (6) A board created on or after January 1, 1992,has 6 22 23 months in which to enact rules designating violations and penalties appropriate for citation offenses. Failure to enact 24 such rules gives the department exclusive authority to adopt 25 26 rules as required for implementing this section. A board has 27 continuous authority to amend its rules adopted pursuant to this section. 28 29 Section 75. Section 456.081, Florida Statutes, is 30 amended to read: 31 223 CODING: Words stricken are deletions; words underlined are additions.

1	456.081 Publication of informationThe department
2	and the boards shall have the authority to advise licensees
3	periodically, through the publication of a newsletter, about
4	information that the department or the board determines is of
5	interest to the industry. The department and the boards shall
6	maintain a website which contains copies of the newsletter;
7	information relating to adverse incident reports without
8	identifying the patient, practitioner, or facility in which
9	the adverse incident occurred until 10 days after probable
10	cause is found, at which time the name of the practitioner and
11	facility shall become public as part of the investigative
12	file; information about error prevention and safety
13	strategies; and information concerning best practices.Unless
14	otherwise prohibited by law, the department and the boards
15	shall publish on the website a summary of final orders entered
16	after July 1, 2001, resulting in disciplinary action fines,
17	suspensions, or revocations, and any other information the
18	department or the board determines is of interest to the
19	public. In order to provide useful and timely information at
20	minimal cost, the department and boards may consult with, and
21	include information provided by, professional associations and
22	national organizations.
23	Section 76. Subsection (9) of section 458.331, Florida
24	Statutes, is amended to read:
25	458.331 Grounds for disciplinary action; action by the
26	board and department
27	(9) When an investigation of a physician is
28	undertaken, the department shall promptly furnish to the
29	physician or the physician's attorney a copy of the complaint
30	or document which resulted in the initiation of the
31	investigation. For purposes of this subsection, such
	224
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

documents include, but are not limited to: the pertinent 1 portions of an annual report submitted to the department 2 3 pursuant to s. 395.0197(6); a report of an adverse incident 4 which is provided to the department pursuant to s. 5 395.0197(8); a report of peer review disciplinary action submitted to the department pursuant to s. 395.0193(4) or s. б 7 458.337, providing that the investigations, proceedings, and records relating to such peer review disciplinary action shall 8 9 continue to retain their privileged status even as to the licensee who is the subject of the investigation, as provided 10 by ss. 395.0193(8) and 458.337(3); a report of a closed claim 11 12 submitted pursuant to s. 627.912; a presuit notice submitted pursuant to s. 766.106(2); and a petition brought under the 13 14 Florida Birth-Related Neurological Injury Compensation Plan, 15 pursuant to s. 766.305(2). The physician may submit a written response to the information contained in the complaint or 16 17 document which resulted in the initiation of the investigation within 45 days after service to the physician of the complaint 18 19 or document. The physician's written response shall be 20 considered by the probable cause panel. Section 77. Subsection (9) of section 459.015, Florida 21 Statutes, is amended to read: 22 23 459.015 Grounds for disciplinary action; action by the 24 board and department. --(9) When an investigation of an osteopathic physician 25 26 is undertaken, the department shall promptly furnish to the 27 osteopathic physician or his or her attorney a copy of the complaint or document which resulted in the initiation of the 28 29 investigation. For purposes of this subsection, such documents include, but are not limited to: the pertinent portions of an 30 annual report submitted to the department pursuant to s. 31 225

1	395.0197(6); a report of an adverse incident which is provided
2	to the department pursuant to s. 395.0197 (8) ; a report of peer
3	review disciplinary action submitted to the department
4	pursuant to s. 395.0193(4) or s. 459.016, provided that the
5	investigations, proceedings, and records relating to such peer
6	review disciplinary action shall continue to retain their
7	privileged status even as to the licensee who is the subject
8	of the investigation, as provided by ss. 395.0193(8) and
9	459.016(3); a report of a closed claim submitted pursuant to
10	s. 627.912; a presuit notice submitted pursuant to s.
11	766.106(2); and a petition brought under the Florida
12	Birth-Related Neurological Injury Compensation Plan, pursuant
13	to s. 766.305(2). The osteopathic physician may submit a
14	written response to the information contained in the complaint
15	or document which resulted in the initiation of the
16	investigation within 45 days after service to the osteopathic
17	physician of the complaint or document. The osteopathic
18	physician's written response shall be considered by the
19	probable cause panel.
20	Section 78. Effective January 1, 2002, subsection (4)
21	of section 641.51, Florida Statutes, is amended to read:
22	641.51 Quality assurance program; second medical
23	opinion requirement
24	(4) The organization shall ensure that only a
25	physician with an active, unencumbered license licensed under
26	chapter 458 or chapter 459 , or an allopathic or osteopathic
27	physician with an active, unencumbered license in another
28	state with similar licensing requirements may render an
29	adverse determination regarding a service provided by a
30	physician licensed in this state. The organization shall
31	submit to the treating provider and the subscriber written
	226

notification regarding the organization's adverse 1 2 determination within 2 working days after the subscriber or 3 provider is notified of the adverse determination. The written 4 notification must include the utilization review criteria or 5 benefits provisions used in the adverse determination, identify the physician who rendered the adverse determination, 6 7 and be signed by an authorized representative of the 8 organization or the physician who rendered the adverse 9 determination. The organization must include with the notification of an adverse determination information 10 concerning the appeal process for adverse determinations. This 11 12 provision does not create authority for the Board of Medicine 13 or Board of Osteopathic Medicine to regulate the organization; 14 however, the Board of Medicine and the Board of Osteopathic 15 Medicine continue to have jurisdiction over licensees of their 16 respective boards. 17 Section 79. Subsection (5) of section 465.019, Florida 18 Statutes, is amended to read: 19 465.019 Institutional pharmacies; permits.--20 (5) All institutional pharmacies shall be under the professional supervision of a consultant pharmacist, and the 21 22 compounding and dispensing of medicinal drugs shall be done 23 only by a licensed pharmacist. Every institutional pharmacy that employs or otherwise utilizes pharmacy technicians shall 24 have a written policy and procedures manual specifying those 25 26 duties, tasks, and functions which a pharmacy technician is 27 allowed to perform. 28 Section 80. Section 465.0196, Florida Statutes, is 29 amended to read: 465.0196 Special pharmacy permits. -- Any person 30 31 desiring a permit to operate a pharmacy which does not fall 227 CODING: Words stricken are deletions; words underlined are additions.

within the definitions set forth in s. 465.003(11)(a)1., 2., 1 and 3. shall apply to the department for a special pharmacy 2 3 permit. If the board certifies that the application complies 4 with the applicable laws and rules of the board governing the 5 practice of the profession of pharmacy, the department shall 6 issue the permit. No permit shall be issued unless a licensed 7 pharmacist is designated to undertake the professional 8 supervision of the compounding and dispensing of all drugs 9 dispensed by the pharmacy. The licensed pharmacist shall be responsible for maintaining all drug records and for providing 10 for the security of the area in the facility in which the 11 12 compounding, storing, and dispensing of medicinal drugs occurs. The permittee shall notify the department within 10 13 14 days of any change of the licensed pharmacist responsible for 15 such duties. Every permittee that employs or otherwise utilizes pharmacy technicians shall have a written policy and 16 17 procedures manual specifying those duties, tasks, and 18 functions which a pharmacy technician is allowed to perform. 19 Section 81. Effective upon this act becoming a law and 20 operating retroactively to July 1, 2000, section 22 of Chapter 21 2000-256, Laws of Florida, is amended to read: Section 22. The amendments to ss. 395.701 and 22 23 395.7015, Florida Statutes, by this act shall take effect July 24 1, 2000 only upon the Agency for Health Care Administration receiving written confirmation from the federal Health Care 25 26 Financing Administration that the changes contained in such 27 amendments will not adversely affect the use of the remaining assessments as state match for the state's Medicaid program. 28 29 Section 82. The Department of Health and the Agency 30 for Health Care Administration shall conduct a review of all 31 statutorily imposed reporting requirements for health care 228

practitioners and health facilities. The department and the 1 2 agency shall report back to the Legislature on or before 3 November 1, 2001, with recommendations and suggested statutory changes to streamline reporting requirements to avoid 4 5 duplicative, overlapping, and unnecessary reports or data 6 elements. 7 Section 83. Paragraph (r) is added to subsection (1) 8 of section 468.1755, Florida Statutes, and, for the purpose of 9 incorporating the amendment to section 456.072(1), Florida Statutes, in a reference thereto, paragraph (a) of subsection 10 (1) of that section is reenacted, to read: 11 12 468.1755 Disciplinary proceedings.--(1) The following acts shall constitute grounds for 13 14 which the disciplinary actions in subsection (2) may be taken: 15 (a) Violation of any provision of s. 456.072(1) or s. 468.1745(1). 16 17 (r) Failing to implement an ongoing quality assurance program directed by an interdisciplinary team that meets at 18 19 least every other month. 20 (2) When the board finds any nursing home administrator guilty of any of the grounds set forth in 21 22 subsection (1), it may enter an order imposing one or more of 23 the following penalties: (a) Denial of an application for licensure. 24 (b) Revocation or suspension of a license. 25 26 (c) Imposition of an administrative fine not to exceed 27 \$1,000 for each count or separate offense. 28 (d) Issuance of a reprimand. 29 (e) Placement of the licensee on probation for a period of time and subject to such conditions as the board may 30 specify, including requiring the licensee to attend continuing 31 229 CODING: Words stricken are deletions; words underlined are additions.

education courses or to work under the supervision of another 1 2 licensee. 3 (f) Restriction of the authorized scope of practice. 4 Section 84. For the purpose of incorporating the 5 amendment to section 468.1755(1), Florida Statutes, in 6 reference thereto, subsection (3) of section 468.1695, Florida 7 Statutes, and section 468.1735, Florida Statutes, are 8 reenacted to read: 9 468.1695 Licensure by examination.--(3) The department shall issue a license to practice 10 nursing home administration to any applicant who successfully 11 12 completes the examination in accordance with this section and otherwise meets the requirements of this part. The department 13 14 shall not issue a license to any applicant who is under investigation in this state or another jurisdiction for an 15 offense which would constitute a violation of s. 468.1745 or 16 17 s. 468.1755. Upon completion of the investigation, the provisions of s. 468.1755 shall apply. 18 19 468.1735 Provisional license.--The board may establish 20 by rule requirements for issuance of a provisional license. Α provisional license shall be issued only to fill a position of 21 nursing home administrator that unexpectedly becomes vacant 22 23 due to illness, sudden death of the administrator, or abandonment of position and shall be issued for one single 24 period as provided by rule not to exceed 6 months. 25 The department shall not issue a provisional license to any 26 27 applicant who is under investigation in this state or another jurisdiction for an offense which would constitute a violation 28 29 of s. 468.1745 or s. 468.1755. Upon completion of the investigation, the provisions of s. 468.1755 shall apply. 30 The provisional license may be issued to a person who does not 31 230

meet all of the licensing requirements established by this 1 part, but the board shall by rule establish minimal 2 3 requirements to ensure protection of the public health, 4 safety, and welfare. The provisional license shall be issued 5 to the person who is designated as the responsible person next in command in the event of the administrator's departure. 6 The 7 board may set an application fee not to exceed \$500 for a 8 provisional license. 9 Section 85. For the purpose of incorporating the amendment to section 456.072(1), Florida Statutes, in a 10 reference thereto, paragraph (a) of subsection (1) of section 11 12 484.056, Florida Statutes, is reenacted to read: 13 484.056 Disciplinary proceedings.--14 (1) The following acts relating to the practice of 15 dispensing hearing aids shall be grounds for both disciplinary 16 action against a hearing aid specialist as set forth in this 17 section and cease and desist or other related action by the department as set forth in s. 456.065 against any person 18 19 owning or operating a hearing aid establishment who engages 20 in, aids, or abets any such violation: 21 (a) Violation of any provision of s. 456.072(1), s. 484.0512, or s. 484.053. 22 23 Section 86. Paragraph (a) of subsection (1), paragraph (a) of subsection (7), and subsection (8) of section 766.101, 24 Florida Statutes, are amended to read: 25 26 766.101 Medical review committee, immunity from 27 liability.--(1) As used in this section: 28 29 The term "medical review committee" or "committee" (a) 30 means: 31 231 CODING: Words stricken are deletions; words underlined are additions.

1 1.a. A committee of a hospital or ambulatory surgical 2 center licensed under chapter 395 or a health maintenance 3 organization certificated under part I of chapter 641, 4 b. A committee of a physician-hospital organization, a 5 provider-sponsored organization, or an integrated delivery 6 system, 7 c. A committee of a state or local professional 8 society of health care providers, d. A committee of a medical staff of a licensed 9 hospital or nursing home, provided the medical staff operates 10 pursuant to written bylaws that have been approved by the 11 12 governing board of the hospital or nursing home, 13 e. A committee of the Department of Corrections or the 14 Correctional Medical Authority as created under s. 945.602, or 15 employees, agents, or consultants of either the department or 16 the authority or both, 17 f. A committee of a professional service corporation 18 formed under chapter 621 or a corporation organized under 19 chapter 607 or chapter 617, which is formed and operated for 20 the practice of medicine as defined in s. 458.305(3), and 21 which has at least 25 health care providers who routinely 22 provide health care services directly to patients, 23 g. A committee of a mental health treatment facility licensed under chapter 394 or a community mental health center 24 as defined in s. 394.907, provided the quality assurance 25 26 program operates pursuant to the guidelines which have been 27 approved by the governing board of the agency, 28 h. A committee of a substance abuse treatment and 29 education prevention program licensed under chapter 397 30 provided the quality assurance program operates pursuant to 31 232

Second Engrossed

the guidelines which have been approved by the governing board 1 2 of the agency, 3 i. A peer review or utilization review committee 4 organized under chapter 440, or 5 j. A committee of the Department of Health, a county 6 health department, healthy start coalition, or certified rural 7 health network, when reviewing quality of care, or employees of these entities when reviewing mortality records, or 8 9 k. A continuous quality improvement committee of a pharmacy licensed pursuant to chapter 465, 10 11 12 which committee is formed to evaluate and improve the quality of health care rendered by providers of health service or to 13 14 determine that health services rendered were professionally 15 indicated or were performed in compliance with the applicable standard of care or that the cost of health care rendered was 16 17 considered reasonable by the providers of professional health 18 services in the area; or 19 2. A committee of an insurer, self-insurer, or joint underwriting association of medical malpractice insurance, or 20 other persons conducting review under s. 766.106. 21 22 (7)(a) It is the intent of the Legislature to encourage medical review committees to contribute further to 23 the quality of health care in this state by reviewing 24 complaints against physicians in the manner described in this 25 26 paragraph. Accordingly, the Department of Health Business and Professional Regulation may enter into a letter of agreement 27 with a professional society of physicians licensed under 28 29 chapter 458 or chapter 459, under which agreement the medical or peer review committees of the professional society will 30 conduct a review of any complaint or case referred to the 31 233 CODING: Words stricken are deletions; words underlined are additions.

society by the department which involves a question as to 1 whether a physician's actions represented a breach of the 2 3 prevailing professional standard of care. The prevailing 4 professional standard of care is that level of care, skill, 5 and treatment which, in light of all relevant surrounding 6 circumstances, is recognized as acceptable and appropriate by 7 reasonably prudent similar health care providers. The letter 8 of agreement must specify that the professional society will 9 submit an advisory report to the department within a reasonable time following the department's written and 10 appropriately supported request to the professional society. 11 12 The advisory report, which is not binding upon the department, constitutes the professional opinion of the medical review 13 14 committee and must include: A statement of relevant factual findings. 15 1. The judgment of the committee as to whether the 16 2. 17 physician's actions represented a breach of the prevailing 18 professional standard of care. 19 (8) No cause of action of any nature by a person 20 licensed pursuant to chapter 458, chapter 459, chapter 461, chapter 463, part I of chapter 464, chapter 465, or chapter 21 466 shall arise against another person licensed pursuant to 22 23 chapter 458, chapter 459, chapter 461, chapter 463, part I of chapter 464, chapter 465, or chapter 466 for furnishing 24 information to a duly appointed medical review committee, to 25 26 an internal risk management program established under s. 27 395.0197, to the Department of Health or the Agency for Health Care Administration Business and Professional Regulation, or 28 29 to the appropriate regulatory board if the information furnished concerns patient care at a facility licensed 30 pursuant to part I of chapter 395 where both persons provide 31 234

1	health care services, if the information is not intentionally
2	fraudulent, and if the information is within the scope of the
3	functions of the committee, department, or board. However, if
4	such information is otherwise available from original sources,
5	it is not immune from discovery or use in a civil action
6	merely because it was presented during a proceeding of the
7	committee, department, or board.
8	Section 87. For the purpose of incorporating the
9	amendment to section 766.101(1)(a), Florida Statutes, in
10	references thereto, paragraph (a) of subsection (1) of section
11	440.105, Florida Statutes, and subsection (6) of section
12	626.989, Florida Statutes, are reenacted to read:
13	440.105 Prohibited activities; reports; penalties;
14	limitations
15	(1)(a) Any insurance carrier, any individual
16	self-insured, any commercial or group self-insurance fund, any
17	professional practitioner licensed or regulated by the
18	Department of Business and Professional Regulation, except as
19	otherwise provided by law, any medical review committee as
20	defined in s. 766.101, any private medical review committee,
21	and any insurer, agent, or other person licensed under the
22	insurance code, or any employee thereof, having knowledge or
23	who believes that a fraudulent act or any other act or
24	practice which, upon conviction, constitutes a felony or
25	misdemeanor under this chapter is being or has been committed
26	shall send to the Division of Insurance Fraud, Bureau of
27	Workers' Compensation Fraud, a report or information pertinent
28	to such knowledge or belief and such additional information
29	relative thereto as the bureau may require. The bureau shall
30	review such information or reports and select such information
31	or reports as, in its judgment, may require further

235

investigation. It shall then cause an independent examination 1 of the facts surrounding such information or report to be made 2 3 to determine the extent, if any, to which a fraudulent act or 4 any other act or practice which, upon conviction, constitutes 5 a felony or a misdemeanor under this chapter is being committed. The bureau shall report any alleged violations of 6 7 law which its investigations disclose to the appropriate licensing agency and state attorney or other prosecuting 8 9 agency having jurisdiction with respect to any such violations of this chapter. If prosecution by the state attorney or other 10 prosecuting agency having jurisdiction with respect to such 11 12 violation is not begun within 60 days of the bureau's report, the state attorney or other prosecuting agency having 13 14 jurisdiction with respect to such violation shall inform the bureau of the reasons for the lack of prosecution. 15 16 626.989 Investigation by department or Division of

17 Insurance Fraud; compliance; immunity; confidential 18 information; reports to division; division investigator's 19 power of arrest.--

20 (6) Any person, other than an insurer, agent, or other person licensed under the code, or an employee thereof, having 21 knowledge or who believes that a fraudulent insurance act or 22 23 any other act or practice which, upon conviction, constitutes a felony or a misdemeanor under the code, or under s. 817.234, 24 is being or has been committed may send to the Division of 25 26 Insurance Fraud a report or information pertinent to such knowledge or belief and such additional information relative 27 thereto as the department may request. Any professional 28 practitioner licensed or regulated by the Department of 29 Business and Professional Regulation, except as otherwise 30 provided by law, any medical review committee as defined in s. 31

236

766.101, any private medical review committee, and any 1 2 insurer, agent, or other person licensed under the code, or an 3 employee thereof, having knowledge or who believes that a 4 fraudulent insurance act or any other act or practice which, 5 upon conviction, constitutes a felony or a misdemeanor under 6 the code, or under s. 817.234, is being or has been committed 7 shall send to the Division of Insurance Fraud a report or 8 information pertinent to such knowledge or belief and such 9 additional information relative thereto as the department may require. The Division of Insurance Fraud shall review such 10 information or reports and select such information or reports 11 12 as, in its judgment, may require further investigation. It shall then cause an independent examination of the facts 13 14 surrounding such information or report to be made to determine 15 the extent, if any, to which a fraudulent insurance act or any 16 other act or practice which, upon conviction, constitutes a 17 felony or a misdemeanor under the code, or under s. 817.234, is being committed. The Division of Insurance Fraud shall 18 19 report any alleged violations of law which its investigations disclose to the appropriate licensing agency and state 20 attorney or other prosecuting agency having jurisdiction with 21 respect to any such violation, as provided in s. 624.310. If 22 23 prosecution by the state attorney or other prosecuting agency having jurisdiction with respect to such violation is not 24 begun within 60 days of the division's report, the state 25 26 attorney or other prosecuting agency having jurisdiction with 27 respect to such violation shall inform the division of the reasons for the lack of prosecution. 28 29 Section 88. Paragraph (c) of subsection (4) of section 30 766.1115, Florida Statutes, is amended to read: 31 237

1	766.1115 Health care providers; creation of agency
2	relationship with governmental contractors
3	(4) CONTRACT REQUIREMENTSA health care provider
4	that executes a contract with a governmental contractor to
5	deliver health care services on or after April 17, 1992, as an
6	agent of the governmental contractor is an agent for purposes
7	of s. 768.28(9), while acting within the scope of duties
8	pursuant to the contract, if the contract complies with the
9	requirements of this section and regardless of whether the
10	individual treated is later found to be ineligible. A health
11	care provider under contract with the state may not be named
12	as a defendant in any action arising out of the medical care
13	or treatment provided on or after April 17, 1992, pursuant to
14	contracts entered into under this section. The contract must
15	provide that:
16	(c) Adverse incidents and information on treatment
17	outcomes must be reported by any health care provider to the
18	governmental contractor if such incidents and information
19	pertain to a patient treated pursuant to the contract. The
20	health care provider shall submit the reports required by s.
21	<u>395.0197</u> annually submit an adverse incident report that
22	includes all information required by s. 395.0197(6)(a), unless
23	the adverse incident involves a result described by s.
24	395.0197(8), in which case it shall be reported within 15 days
25	after the occurrence of such incident. If an incident involves
26	a professional licensed by the Department of Health or a
27	facility licensed by the Agency for Health Care
28	Administration, the governmental contractor shall submit such
29	incident reports to the appropriate department or agency,
30	which shall review each incident and determine whether it
31	involves conduct by the licensee that is subject to
	238

disciplinary action. All patient medical records and any 1 2 identifying information contained in adverse incident reports 3 and treatment outcomes which are obtained by governmental 4 entities pursuant to this paragraph are confidential and 5 exempt from the provisions of s. 119.07(1) and s. 24(a), Art. 6 I of the State Constitution. 7 Section 89. Section 456.047, Florida Statutes, is 8 amended to read: 9 456.047 Standardized credentialing for health care 10 practitioners.--(1) INTENT.--The Legislature recognizes that an 11 12 efficient and effective health care practitioner credentialing 13 program helps to ensure access to quality health care and also 14 recognizes that health care practitioner credentialing 15 activities have increased significantly as a result of health 16 care reform and recent changes in health care delivery and 17 reimbursement systems. Moreover, the resulting duplication of health care practitioner credentialing activities is 18 19 unnecessarily costly and cumbersome for both the practitioner and the entity granting practice privileges. Therefore, it is 20 the intent of this section that a credentials collection 21 22 program be established which provides that, once a health care 23 practitioner's core credentials data are collected, they need not be collected again, except for corrections, updates, and 24 modifications thereto. Furthermore, it is the intent of the 25 26 Legislature that the department and all entities and 27 practitioners work cooperatively to ensure the integrity and accuracy of the program.Participation under this section 28 29 shall include those individuals licensed under chapter 458, chapter 459, chapter 460, chapter 461, or s. 464.012. However, 30 the department shall, with the approval of the applicable 31 239

board, include other professions under the jurisdiction of the 1 Division of Medical Quality Assurance in this program, 2 3 provided they meet the requirements of s. 456.039 or s. 4 456.0391. 5 (2) DEFINITIONS.--As used in this section, the term: 6 (a) "Certified" or "accredited," as applicable, means 7 approved by a quality assessment program, from the National 8 Committee for Quality Assurance, the Joint Commission on 9 Accreditation of Healthcare Organizations, the American Accreditation HealthCare Commission/URAC, or any such other 10 nationally recognized and accepted organization authorized by 11 12 the department, used to assess and certify any credentials 13 verification program, entity, or organization that verifies 14 the credentials of any health care practitioner. 15 (b) "Core credentials data" means data that is primary 16 source verified and includes the following data: current name, 17 any former name, and any alias, any professional education, professional training, licensure, current Drug Enforcement 18 19 Administration certification, social security number, specialty board certification, Educational Commission for 20 Foreign Medical Graduates certification, and hospital or other 21 22 institutional affiliations, evidence of professional liability 23 coverage or evidence of financial responsibility as required by s. 458.320, s. 459.0085, or s. 456.048, history of claims, 24 25 suits, judgments, or settlements, final disciplinary action 26 reported pursuant to s. 456.039(1)(a)8. or s. 456.0391(1)(a)8. 27 The department may by rule designate additional core credentials data elements, and Medicare or Medicaid sanctions. 28 29 "Credential" or "credentialing" means the process (C) of assessing and verifying the qualifications of a licensed 30 31 240

health care practitioner or applicant for licensure as a 1 health care practitioner. 2 3 (d) "Credentials verification organization" means any 4 organization certified or accredited as a credentials 5 verification organization. (e) "Department" means the Department of Health, 6 7 Division of Medical Quality Assurance. 8 (f) "Designated credentials verification organization" 9 means the credentials verification organization which is selected by the health care practitioner, if the health care 10 practitioner chooses to make such a designation. 11 12 (g) "Drug Enforcement Administration certification" means certification issued by the Drug Enforcement 13 14 Administration for purposes of administration or prescription of controlled substances. Submission of such certification 15 under this section must include evidence that the 16 certification is current and must also include all current 17 addresses to which the certificate is issued. 18 19 (h) "Health care entity" means: 20 1. Any health care facility or other health care 21 organization licensed or certified to provide approved medical 22 and allied health services in this state; 23 2. Any entity licensed by the Department of Insurance as a prepaid health care plan or health maintenance 24 organization or as an insurer to provide coverage for health 25 26 care services through a network of providers or similar organization licensed under chapter 627, chapter 636, chapter 27 641, or chapter 651; or 28 29 3. Any accredited medical school in this state. (i) "Health care practitioner" means any person 30 licensed, or, for credentialing purposes only, any person 31 241 CODING: Words stricken are deletions; words underlined are additions.

1	applying for licensure, under chapter 458, chapter 459,
2	chapter 460, chapter 461, or s. 464.012 or any person licensed
3	or applying for licensure under a chapter subsequently made
4	subject to this section by the department with the approval of
5	the applicable board, except a person registered or applying
6	for registration pursuant to s. 458.345 or s. 459.021.
7	(j) "Hospital or other institutional affiliations"
8	means each hospital or other institution for which the health
9	care practitioner or applicant has provided medical services.
10	Submission of such information under this section must
11	include, for each hospital or other institution, the name and
12	address of the hospital or institution, the staff status of
13	the health care practitioner or applicant at that hospital or
14	institution, and the dates of affiliation with that hospital
15	or institution.
16	<u>(j)</u> (k) "National accrediting organization" means an
17	organization that awards accreditation or certification to
18	hospitals, managed care organizations, credentials
19	verification organizations, or other health care
20	organizations, including, but not limited to, the Joint
21	Commission on Accreditation of Healthcare Organizations, the
22	American Accreditation HealthCare Commission/URAC, and the
23	National Committee for Quality Assurance.
24	(k) "Primary source verification" means verification
25	of professional qualifications based on evidence obtained
26	directly from the issuing source of the applicable
27	qualification or from any other source deemed as a primary
28	source for such verification by the department or an
29	accrediting body approved by the department.
30	
31	
	242
	ING: Words stricken are deletions; words underlined are additions.
COD	THE MOLUS SULLARED ALE GELECIONS, WOLUS UNGELITHED ALE AUGILIONS.

.

CS for SB 1558

1	(l) "Professional training" means any internship,
2	residency, or fellowship relating to the profession for which
3	the health care practitioner is licensed or seeking licensure.
4	(m) "Specialty board certification" means
5	certification in a specialty issued by a specialty board
6	recognized by the board in this state that regulates the
7	profession for which the health care practitioner is licensed
8	or seeking licensure.
9	(3) STANDARDIZED CREDENTIALS VERIFICATION PROGRAM
10	(a) Every health care practitioner shall:
11	1. Report all core credentials data to the department
12	which is not already on file with the department, either by
13	designating a credentials verification organization to submit
14	the data or by submitting the data directly.
15	2. Notify the department within 45 days of any
16	corrections, updates, or modifications to the core credentials
17	data either through his or her designated credentials
18	verification organization or by submitting the data directly.
19	Corrections, updates, and modifications to the core
20	credentials data provided the department under this section
21	shall comply with the updating requirements of s. 456.039(3)
22	or s. 456.0391(3) related to profiling.
23	(b) The department shall:
24	1. Maintain a complete, current file of <u>applicable</u>
25	core credentials data on each health care practitioner, which
26	shall include data provided in accordance with subparagraph
27	(a)1. and all updates provided in accordance with subparagraph
28	(a)2.
29	2. Release the core credentials data that is otherwise
30	confidential or exempt from the provisions of chapter 119 and
31	s. 24(a), Art. I of the State Constitution and any
	243
	ING:Words stricken are deletions; words underlined are additions.
COD	ing. words stricken are derectons, words <u>undertined</u> are additions.

corrections, updates, and modifications thereto, if authorized
 by the health care practitioner.

3 3. Charge a fee to access the core credentials data,
4 which may not exceed the actual cost, including prorated setup
5 and operating costs, pursuant to the requirements of chapter
6 119.

4. Develop standardized forms to be used by the health
care practitioner or designated credentials verification
organization for the initial reporting of core credentials
data, for the health care practitioner to authorize the
release of core credentials data, and for the subsequent
reporting of corrections, updates, and modifications thereto.

13 (c) A registered credentials verification organization 14 may be designated by a health care practitioner to assist the 15 health care practitioner to comply with the requirements of 16 subparagraph (a)2. A designated credentials verification 17 organization shall:

Timely comply with the requirements of subparagraph
 (a)2., pursuant to rules adopted by the department.

Not provide the health care practitioner's core
 <u>credentials</u> data, including all corrections, updates, and
 modifications, without the authorization of the practitioner.

(d) This section shall not be construed to restrict in any way the authority of the health care entity to credential and to approve or deny an application for hospital staff membership, clinical privileges, or managed care network participation.

28

(4) DUPLICATION OF DATA PROHIBITED.--

(a) A health care entity or credentials verification
organization is prohibited from collecting or attempting to
collect duplicate core credentials data from any health care

244

Second Engrossed

practitioner if the information is available from the 1 department. This section shall not be construed to restrict 2 3 the right of any health care entity or credentials 4 verification organization to collect additional information 5 from the health care practitioner which is not included in the core credentials data file. This section shall not be 6 7 construed to prohibit a health care entity or credentials verification organization from obtaining all necessary 8 9 attestation and release form signatures and dates. (b) Effective July 1, 2002, a state agency in this 10 state which credentials health care practitioners may not 11 12 collect or attempt to collect duplicate core credentials data from any individual health care practitioner if the 13 14 information is already available from the department. This 15 section shall not be construed to restrict the right of any such state agency to request additional information not 16 17 included in the core credentials credential data file, but which is deemed necessary for the agency's specific 18 19 credentialing purposes. 20 (5) STANDARDS AND REGISTRATION. -- Any credentials verification organization that does business in this state 21 must be fully accredited or certified as a credentials 22 23 verification organization by a national accrediting organization as specified in paragraph (2)(a) and must 24 register with the department. The department may charge a 25 26 reasonable registration fee, not to exceed an amount sufficient to cover its actual expenses in providing and 27 enforcing such registration. The department shall establish by 28 29 rule for biennial renewal of such registration. Failure by a registered credentials verification organization to maintain 30 full accreditation or certification, to provide data as 31 245

authorized by the health care practitioner, to report to the 1 department changes, updates, and modifications to a health 2 3 care practitioner's records within the time period specified in subparagraph (3)(a)2., or to comply with the prohibition 4 5 against collection of duplicate core credentials data from a practitioner may result in denial of an application for 6 7 renewal of registration or in revocation or suspension of a 8 registration. 9 (6) PRIMARY SOURCE VERIFIED DATA.--Health care 10 entities and credentials verification organizations may rely upon any data that has been primary source verified by the 11 12 department or its designee to meet primary source verification requirements of national accrediting organizations. 13 14 (7)(6) LIABILITY.--No civil, criminal, or 15 administrative action may be instituted, and there shall be no liability, against any registered credentials verification 16 17 organization or health care entity on account of its reliance 18 on any data obtained directly from the department. 19 (8)(7) LIABILITY INSURANCE REQUIREMENTS.--Each 20 credentials verification organization doing business in this state shall maintain liability insurance appropriate to meet 21 22 the certification or accreditation requirements established in 23 this section. (9)(8) RULES.--The department shall adopt rules 24 necessary to develop and implement the standardized core 25 26 credentials data collection program established by this 27 section. Section 90. Section 232.61, Florida Statutes, is 28 29 amended to read: 30 232.61 Governing organization for athletics; adoption 31 of bylaws.--246

1	(1) The organization shall adopt bylaws that, unless
2	specifically provided by statute, establish eligibility
3	requirements for all students who participate in high school
4	athletic competition in its member schools. The bylaws
5	governing residence and transfer shall allow the student to be
6	eligible in the school in which he or she first enrolls each
7	school year, or makes himself or herself a candidate for an
8	athletic team by engaging in a practice prior to enrolling in
9	any member school. The student shall be eligible in that
10	school so long as he or she remains enrolled in that school.
11	Subsequent eligibility shall be determined and enforced
12	through the organization's bylaws.
13	(2) The organization shall also adopt bylaws that
14	specifically prohibit the recruiting of students for athletic
15	purposes. The bylaws shall prescribe penalties and an appeals
16	process for athletic recruiting violations.
17	(3) The organization shall adopt bylaws that require
18	all students participating in interscholastic athletic
19	competition or who are candidates for an interscholastic
20	athletic team to satisfactorily pass a medical evaluation each
21	year prior to participating in interscholastic athletic
22	competition or engaging in any practice, tryout, workout, or
23	other physical activity associated with the student's
24	candidacy for an interscholastic athletic team. Such medical
25	evaluation can only be administered by a practitioner licensed
26	under the provisions of chapter 458, chapter 459, chapter 460,
27	or s. 464.012, and in good standing with the practitioner's
28	regulatory board. The bylaws shall establish requirements for
29	eliciting a student's medical history and performing the
30	medical evaluation required under this subsection, which shall
31	include minimum standards for the physical capabilities
	247
	24/

necessary for participation in interscholastic athletic 1 2 competition as contained in a uniform preparticipation 3 physical evaluation form. The evaluation form shall provide 4 place for the signature of the practitioner performing the 5 evaluation with an attestation that each examination procedure 6 listed on the form was performed by the practitioner or by 7 someone under the direct supervision of the practitioner. The 8 form shall also contain a place for the practitioner to 9 indicate if a referral to another practitioner was made in lieu of completion of a certain examination procedure. The 10 form shall provide a place for the practitioner to whom the 11 12 student was referred to complete the remaining sections and attest to that portion of the examination. Practitioners 13 14 administering medical evaluations pursuant to this section must know the minimum standards established by the 15 organization and certify that the student meets the standards. 16 17 If the practitioner determines that there are any abnormal findings in the cardiovascular system, the student may not 18 19 participate unless a subsequent EKG or other cardiovascular 20 assessment indicates that the abnormality will not place the 21 student at risk during such participation. Results of such medical evaluation must be provided to the school. No student 22 23 shall be eligible to participate in any interscholastic athletic competition or engage in any practice, tryout, 24 workout, or other physical activity associated with the 25 26 student's candidacy for an interscholastic athletic team until the results of the medical evaluation verifying that the 27 student has satisfactorily passed the evaluation have been 28 29 received and approved by the school. 30 (4) Notwithstanding the provisions of subsection (3), a student may participate in interscholastic athletic 31 248

competition or be a candidate for an interscholastic athletic 1 2 team if the parent or guardian of the student objects in 3 writing to the student undergoing a medical evaluation because 4 such evaluation is contrary to his or her religious tenets or 5 practices, provided that no person or entity shall be held 6 liable for any injury or other damages suffered by such 7 student. 8 Section 91. Section 240.4075, Florida Statutes, is 9 amended to read: 240.4075 Nursing Student Loan Forgiveness Program.--10 (1) To encourage qualified personnel to seek 11 12 employment in areas of this state in which critical nursing shortages exist, there is established the Nursing Student Loan 13 14 Forgiveness Program. The primary function of the program is to increase employment and retention of registered nurses and 15 licensed practical nurses in nursing homes and hospitals in 16 17 the state and in state-operated medical and health care 18 facilities, public schools, birth centers, and federally 19 sponsored community health centers and teaching hospitals by making repayments toward loans received by students from 20 federal or state programs or commercial lending institutions 21 for the support of postsecondary study in accredited or 22 23 approved nursing programs. (2) To be eligible, a candidate must have graduated 24 25 from an accredited or approved nursing program and have 26 received a Florida license as a licensed practical nurse or a registered nurse or a Florida certificate as an advanced 27 registered nurse practitioner. 28 29 (3) Only loans to pay the costs of tuition, books, and 30 living expenses shall be covered, at an amount not to exceed \$4,000 for each year of education towards the degree obtained. 31 249 CODING: Words stricken are deletions; words underlined are additions.

1	(4) Receipt of funds pursuant to this program shall be
⊥ 2	contingent upon continued proof of employment in the
3	designated facilities in this state. Loan principal payments
4	shall be made by the Department of Health Education directly
т 5	to the federal or state programs or commercial lending
6	institutions holding the loan as follows:
7	(a) Twenty-five percent of the loan principal and
, 8	accrued interest shall be retired after the first year of
° 9	
	nursing;
10	(b) Fifty percent of the loan principal and accrued
11	interest shall be retired after the second year of nursing;
12	(c) Seventy-five percent of the loan principal and
13	accrued interest shall be retired after the third year of
14	nursing; and
15	(d) The remaining loan principal and accrued interest
16	shall be retired after the fourth year of nursing.
17	
18	In no case may payment for any nurse exceed \$4,000 in any
19	12-month period.
20	(5) There is created the Nursing Student Loan
21	Forgiveness Trust Fund to be administered by the Department of
22	<u>Health</u> Education pursuant to this section and s. 240.4076 and
23	department rules. The Comptroller shall authorize
24	expenditures from the trust fund upon receipt of vouchers
25	approved by the Department of <u>Health</u> Education . All moneys
26	collected from the private health care industry and other
27	private sources for the purposes of this section shall be
28	deposited into the Nursing Student Loan Forgiveness Trust
29	Fund. Any balance in the trust fund at the end of any fiscal
30	year shall remain therein and shall be available for carrying
31	out the purposes of this section and s. 240.4076.
	250

1	(6) In addition to licensing fees imposed under part I
1 2	(6) In addition to licensing fees imposed under part I of chapter 464, there is hereby levied and imposed an
⊿ 3	
	additional fee of \$5, which fee shall be paid upon licensure
4	or renewal of nursing licensure. Revenues collected from the
5	fee imposed in this subsection shall be deposited in the
6	Nursing Student Loan Forgiveness Trust Fund of the Department
7	of <u>Health</u> Education and will be used solely for the purpose of
8	carrying out the provisions of this section and s. 240.4076.
9	Up to 50 percent of the revenues appropriated to implement
10	this subsection may be used for the nursing scholarship
11	program established pursuant to s. 240.4076.
12	(7)(a) Funds contained in the Nursing Student Loan
13	Forgiveness Trust Fund which are to be used for loan
14	forgiveness for those nurses employed by hospitals, birth
15	centers, and nursing homes must be matched on a
16	dollar-for-dollar basis by contributions from the employing
17	institutions, except that this provision shall not apply to
18	state-operated medical and health care facilities, <u>public</u>
19	schools, county health departments, federally sponsored
20	community health centers, or teaching hospitals as defined in
21	s. 408.07, family practice teaching hospitals as defined in s.
22	395.805, or specialty hospitals for children as used in s.
23	409.9119. If in any given fiscal quarter there are
24	insufficient funds in the trust fund to grant all eligible
25	applicant requests, awards shall be based on the following
26	priority of employer: county health departments; federally
27	sponsored community health centers; state-operated medical and
28	health care facilities; public schools; teaching hospitals as
29	defined in s. 408.07; family practice teaching hospitals as
30	defined in s. 395.805; specialty hospitals for children as
31	
	251
	ZJI

used in s. 409.9119; and other hospitals, birth centers, and 1 2 nursing homes. 3 (b) All Nursing Student Loan Forgiveness Trust Fund 4 moneys shall be invested pursuant to s. 18.125. Interest 5 income accruing to that portion of the trust fund not matched 6 shall increase the total funds available for loan forgiveness 7 and scholarships. Pledged contributions shall not be eligible 8 for matching prior to the actual collection of the total 9 private contribution for the year. (8) The Department of Health Education may solicit 10 technical assistance relating to the conduct of this program 11 12 from the Department of Education Health. 13 (9) The Department of Health Education is authorized 14 to recover from the Nursing Student Loan Forgiveness Trust 15 Fund its costs for administering the Nursing Student Loan 16 Forgiveness Program. 17 (10) The Department of Health Education may adopt rules necessary to administer this program. 18 19 (11) This section shall be implemented only as 20 specifically funded. 21 Section 92. Section 240.4076, Florida Statutes, is 22 amended to read: 23 240.4076 Nursing scholarship program.--(1) There is established within the Department of 24 25 Health Education a scholarship program for the purpose of 26 attracting capable and promising students to the nursing 27 profession. 28 (2) A scholarship applicant shall be enrolled as a 29 full-time or part-time student in the upper division of an approved nursing program leading to the award of a 30 baccalaureate degree or graduate degree to qualify for a 31 252 CODING: Words stricken are deletions; words underlined are additions.
1	nursing faculty position or as an or any advanced registered					
2	nurse practitioner degree or be enrolled as a full-time or					
3	part-time student in an approved program leading to the award					
4	of an associate degree in nursing or a diploma in nursing .					
5	(3) A scholarship may be awarded for no more than 2					
6	years, in an amount not to exceed \$8,000 per year. However,					
7	registered nurses pursuing <u>a graduate degree for a faculty</u>					
8	position or to practice as an advanced registered nurse					
9	practitioner degree may receive up to \$12,000 per year.					
10	Beginning July 1, 1998, these amounts shall be adjusted by the					
11	amount of increase or decrease in the consumer price index for					
12	urban consumers published by the United States Department of					
13	Commerce.					
14	(4) Credit for repayment of a scholarship shall be as					
15	follows:					
16	(a) For each full year of scholarship assistance, the					
17	recipient agrees to work for 12 months in a faculty position					
18	in a college of nursing or community college nursing program					
19	in this state or at a health care facility in a medically					
20	underserved area as approved by the Department of <u>Health</u>					
21	Education. Scholarship recipients who attend school on a					
22	part-time basis shall have their employment service obligation					
23	prorated in proportion to the amount of scholarship payments					
24	received.					
25	(b) Eligible health care facilities include <u>nursing</u>					
26	homes and hospitals in this state, state-operated medical or					
27	health care facilities, public schools, county health					
28	departments, federally sponsored community health centers,					
29	colleges of nursing in universities in this state, and					
30	community college nursing programs in this state or teaching					
31	hospitals as defined in s. 408.07. The recipient shall be					
	253					
COD	INC.Words etricter are deletions: words underlined are additions					

encouraged to complete the service obligation at a single
 employment site. If continuous employment at the same site is
 not feasible, the recipient may apply to the department for a
 transfer to another approved health care facility.

5 (c) Any recipient who does not complete an appropriate 6 program of studies or who does not become licensed shall repay 7 to the Department of Health Education, on a schedule to be 8 determined by the department, the entire amount of the 9 scholarship plus 18 percent interest accruing from the date of 10 the scholarship payment. Moneys repaid shall be deposited into the Nursing Student Loan Forgiveness Trust Fund established in 11 12 s. 240.4075. However, the department may provide additional time for repayment if the department finds that circumstances 13 14 beyond the control of the recipient caused or contributed to the default. 15

(d) Any recipient who does not accept employment as a 16 17 nurse at an approved health care facility or who does not 18 complete 12 months of approved employment for each year of 19 scholarship assistance received shall repay to the Department 20 of Health Education an amount equal to two times the entire amount of the scholarship plus interest accruing from the date 21 22 of the scholarship payment at the maximum allowable interest 23 rate permitted by law. Repayment shall be made within 1 year of notice that the recipient is considered to be in default. 24 However, the department may provide additional time for 25 26 repayment if the department finds that circumstances beyond 27 the control of the recipient caused or contributed to the 28 default.

(5) Scholarship payments shall be transmitted to the
recipient upon receipt of documentation that the recipient is
enrolled in an approved nursing program. The Department of

254

Health Education shall develop a formula to prorate payments 1 2 to scholarship recipients so as not to exceed the maximum 3 amount per academic year. 4 (6) The Department of Health Education shall adopt 5 rules, including rules to address extraordinary circumstances 6 that may cause a recipient to default on either the school 7 enrollment or employment contractual agreement, to implement this section and may solicit technical assistance relating to 8 9 the conduct of this program from the Department of Health. (7) The Department of Health Education is authorized 10 to recover from the Nursing Student Loan Forgiveness Trust 11 12 Fund its costs for administering the nursing scholarship 13 program. 14 Section 93. All powers, duties, and functions, rules, 15 records, personnel, property, and unexpended balances of appropriations, allocations, or other funds of the Department 16 17 of Education relating to the Nursing Student Loan Forgiveness Program and the nursing scholarship program are transferred by 18 19 a type two transfer, as defined in s. 20.06(2), Florida 20 Statutes, to the Department of Health. 21 Section 94. Effective July 1, 2003, section 464.005, Florida Statutes, is amended to read: 22 23 464.005 Board headquarters. -- The board shall maintain 24 its official headquarters in Tallahassee the city in which it has been domiciled for the past 5 years. 25 26 Section 95. Subsections (1) and (2) of section 27 464.008, Florida Statutes, are amended to read: 464.008 Licensure by examination.--28 29 (1) Any person desiring to be licensed as a registered nurse or licensed practical nurse shall apply to the 30 31 255 CODING: Words stricken are deletions; words underlined are additions. 1 department to take the licensure examination. The department 2 shall examine each applicant who:

_

3 (a) Has completed the application form and remitted a 4 fee set by the board not to exceed \$150 and has remitted an 5 examination fee set by the board not to exceed \$75 plus the 6 actual per applicant cost to the department for purchase of 7 the examination from the National Council of State Boards of 8 Nursing or a similar national organization.

9 (b) Has provided sufficient information on or after 10 October 1, 1989, which must be submitted by the department for 11 a statewide criminal records correspondence check through the 12 Department of Law Enforcement.

(c) Is in good mental and physical health, is a 13 14 recipient of a high school diploma or the equivalent, and has 15 completed the requirements for graduation from an approved program, or its equivalent as determined by the board, for the 16 17 preparation of registered nurses or licensed practical nurses, 18 whichever is applicable. Courses successfully completed in a 19 professional nursing program which are at least equivalent to 20 a practical nursing program may be used to satisfy the 21 education requirements for licensure as a licensed practical 22 nurse.

(d) Has the ability to communicate in the English
language, which may be determined by an examination given by
the department.

(2) Each applicant who passes the examination and
provides proof of meeting the educational requirements
specified in subsection (1)graduation from an approved
nursing program shall, unless denied pursuant to s. 464.018,
be entitled to licensure as a registered professional nurse or
a licensed practical nurse, whichever is applicable.

256

Section 96. Section 464.009, Florida Statutes, is 1 2 amended to read: 3 464.009 Licensure by endorsement.--4 (1) The department shall issue the appropriate license 5 by endorsement to practice professional or practical nursing 6 to an applicant who, upon applying to the department and 7 remitting a fee set by the board not to exceed \$100, 8 demonstrates to the board that he or she: 9 (a) Holds a valid license to practice professional or practical nursing in another state of the United States, 10 provided that, when the applicant secured his or her original 11 12 license, the requirements for licensure were substantially 13 equivalent to or more stringent than those existing in Florida 14 at that time; or (b) Meets the qualifications for licensure in s. 15 464.008 and has successfully completed a state, regional, or 16 17 national examination which is substantially equivalent to or 18 more stringent than the examination given by the department. 19 (2) Such examinations and requirements from other 20 states shall be presumed to be substantially equivalent to or more stringent than those in this state. Such presumption 21 22 shall not arise until January 1, 1980. However, the board may, 23 by rule, specify states the examinations and requirements of which shall not be presumed to be substantially equivalent to 24 25 those of this state. 26 (3) The applicant must submit to the department a set 27 of fingerprints on a form and under procedures specified by 28 the department, along with a payment in an amount equal to the 29 costs incurred by the Department of Health for the criminal background check of the applicant. The Department of Health 30 31 shall submit the fingerprints provided by the applicant to the 257

Second Engrossed

Florida Department of Law Enforcement for a statewide criminal 1 history check, and the Florida Department of Law Enforcement 2 3 shall forward the fingerprints to the Federal Bureau of Investigation for a national criminal history check of the 4 5 applicant. The Department of Health shall review the results 6 of the criminal history check, issue a license to an applicant 7 who has met all of the other requirements for licensure and has no criminal history, and shall refer all applicants with 8 9 criminal histories back to the board for determination as to whether a license should be issued and under what conditions. 10 (4) (4) (3) The department shall not issue a license by 11 12 endorsement to any applicant who is under investigation in another state for an act which would constitute a violation of 13 14 this part or chapter 456 until such time as the investigation 15 is complete, at which time the provisions of s. 464.018 shall 16 apply. 17 (5) The department shall develop an electronic applicant notification process and provide electronic 18 notification when the application has been received and when 19 20 background screenings have been completed, and shall issue a license within 30 days after completion of all required data 21 collection and verification. This 30-day period to issue a 22 23 license shall be tolled if the applicant must appear before the board due to information provided on the application or 24 obtained through screening and data collection and 25 26 verification procedures. 27 Section 97. Section 464.0195, Florida Statutes, is created to read: 28 29 464.0195 Florida Center for Nursing; goals.--There is 30 established the Florida Center for Nursing to address issues of supply and demand for nursing, including issues of 31 258

recruitment, retention, and utilization of nurse workforce 1 2 resources. The Legislature finds that the center will repay 3 the state's investment by providing an ongoing strategy for 4 the allocation of the state's resources directed towards 5 nursing. The primary goals for the center shall be to: 6 (1) Develop a strategic statewide plan for nursing 7 manpower in this state by: 8 (a) Establishing and maintaining a database on nursing 9 supply and demand in the state, to include current supply and demand, and future projections; and 10 11 (b) Selecting from the plan priorities to be 12 addressed. 13 (2) Convene various groups representative of nurses, 14 other health care providers, business and industry, consumers, 15 legislators, and educators to: 16 (a) Review and comment on data analysis prepared for 17 the center; (b) Recommend systemic changes, including strategies 18 19 for implementation of recommended changes; and 20 (c) Evaluate and report the results of these efforts 21 to the Legislature and others. 22 Enhance and promote recognition, reward, and (3) 23 renewal activities for nurses in the state by: Promoting nursing excellence programs such as 24 (a) 25 magnet recognition by the American Nurses Credentialing 26 Center; 27 (b) Proposing and creating additional reward, recognition, and renewal activities for nurses; and 28 29 (c) Promoting media and positive image-building 30 efforts for nursing. 31 259 CODING: Words stricken are deletions; words underlined are additions.

Section 98. Section 464.0196, Florida Statutes, is 1 2 created to read: 3 464.0196 Florida Center for Nursing; board of 4 directors.--5 (1) The Florida Center for Nursing shall be governed 6 by a policy-setting board of directors. The board shall 7 consist of 16 members, with a simple majority of the board 8 being nurses representative of various practice areas. Other 9 members shall include representatives of other health care professions, business and industry, health care providers, and 10 consumers. The members of the board shall be appointed by the 11 12 Governor as follows: 13 (a) Four members recommended by the President of the 14 Senate, at least one of whom shall be a registered nurse 15 recommended by the Florida Organization of Nurse Executives and at least one other representative of the hospital industry 16 17 recommended by the Florida Hospital Association; 18 (b) Four members recommended by the Speaker of the 19 House of Representatives, at least one of whom shall be a 20 registered nurse recommended by the Florida Nurses Association 21 and at least one other representative of the long-term care 22 industry; 23 (c) Four members recommended by the Governor, two of whom shall be registered nurses; and 24 25 (d) Four nurse educators recommended by the State Board of Education, one of whom shall be a dean of a College 26 of Nursing at a state university, one other shall be a 27 director of a nursing program in a state community college. 28 29 The initial terms of the members shall be as (2) 30 follows: 31 260

-							
1	(a) Of the members appointed pursuant to paragraph						
2	(1)(a), two shall be appointed for terms expiring June 30,						
3	2005, one for a term expiring June 30, 2004, and one for a						
4	term expiring June 30, 2003.						
5	(b) Of the members appointed pursuant to paragraph						
6	(1)(b), one shall be appointed for a term expiring June 30,						
7	2005, two for terms expiring June 30, 2004, and one for a term						
8	expiring June 20, 2003.						
9	(c) Of the members appointed pursuant to paragraph						
10	(1)(c), one shall be appointed for a term expiring June 30,						
11	2005, one for a term expiring June 30, 2004, and two for terms						
12	expiring June 30, 2003.						
13	(d) Of the members appointed pursuant to paragraph						
14	(1)(d), the terms of two members recommended by the State						
15	Board of Education shall expire June 30, 2005; the term of the						
16	member who is a dean of a College of Nursing at a state						
17	university shall expire June 30, 2004; and the term of the						
18	member who is a director of a state community college nursing						
19	program shall expire June 30, 2003.						
20							
21	After the initial appointments expire, the terms of all the						
22	members shall be for 3 years, with no member serving more than						
23	two consecutive terms.						
24	(3) The board shall have the following powers and						
25	<u>duties:</u>						
26	(a) To employ an executive director.						
27	(b) To determine operational policy.						
28	(c) To elect a chair and officers, to serve 2-year						
29	terms. The chair and officers may not succeed themselves.						
30	(d) To establish committees of the board as needed.						
31							
	261						
COL	ING: Words stricken are deletions; words underlined are additions.						
COD	THE WOLDS SUICKEN ALE GETECTONS, WOLDS <u>UNDELITIED</u> ALE AUGILIONS.						

1	(e) To appoint a multidisciplinary advisory council					
2	for input and advice on policy matters.					
3	(f) To implement the major functions of the center as					
4	established in the goals set out in s. 464.0195.					
5	(g) To seek and accept nonstate funds for sustaining					
6	the center and carrying out center policy.					
7	(4) The members of the board are entitled to receive					
8	per diem and allowances prescribed by law for state boards and					
9	commissions.					
10	Section 99. Section 464.0197, Florida Statutes, is					
11	created to read:					
12	464.0197 Florida Center for Nursing; state budget					
13	supportThe Legislature finds that it is imperative that the					
14	state protect its investment and progress made in nursing					
15	efforts to date. The Legislature finds that the Florida Center					
16	for Nursing is the appropriate means to do so. The center					
17	shall have state budget support for its operations so that it					
18	may have adequate resources for the tasks the Legislature has					
19	<u>set out in s. 464.0195.</u>					
20	Section 100. The Board of Nursing within the					
21	Department of Health shall hold in abeyance until July 1,					
22	2002, the development of any rule pursuant to s. 464.019(2),					
23	Florida Statutes, which relates to the establishment of					
24	faculty/student clinical ratios. The Board of Nursing and the					
25	Department of Education shall submit to the President of the					
26	Senate and the Speaker of the House of Representatives by					
27	December 31, 2001, an implementation plan that details both					
28	the impact and the cost of any such proposed rule change.					
29	Section 101. Subsection (1) of section 464.0205,					
30	Florida Statutes, is amended to read:					
31	464.0205 Retired volunteer nurse certificate					
	262					
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.					

I							
1	(1) Any retired practical or registered nurse desiring						
2	to serve indigent, underserved, or critical need populations						
3	in this state may apply to the department for a retired						
4	volunteer nurse certificate by providing:						
5	(a) A complete application.						
6	(b) An application and processing fee of \$25.						
7	(b) (c) Verification that the applicant had been						
8	licensed to practice nursing in any jurisdiction in the United						
9	States for at least 10 years, had retired or plans to retire,						
10	intends to practice nursing only pursuant to the limitations						
11	provided by the retired volunteer nurse certificate, and has						
12	not committed any act that would constitute a violation under						
13	s. 464.018(1).						
14	(c) (d) Proof that the applicant meets the requirements						
15	for licensure under s. 464.008 or s. 464.009.						
16	Section 102. The Florida Legislature's Office of						
17	Program Policy Analysis and Government Accountability shall						
18	study the feasibility of maintaining the entire Medical						
19	Quality Assurance function, including enforcement, within one						
20	department, as recommended by the Auditor General in						
21	Operational Report Number 01-063. The study shall be completed						
22	and a report issued to the Legislature on or before November						
23	<u>30, 2001.</u>						
24	Section 103. Effective October 1, 2001, section						
25	456.0375, Florida Statutes, is created to read:						
26	456.0375 Registration of certain clinics;						
27	requirements; discipline; exemptions						
28	(1)(a) As used in this section, the term "clinic"						
29	means a business operating in a single structure or facility,						
30	or in a group of adjacent structures or facilities operating						
31	under the same business name or management, at which health						
	263						
000	205						

care services are provided to individuals and which tender 1 2 charges for reimbursement for such services. (b) For purposes of this section, the term "clinic" 3 4 does not include and the registration requirements herein do 5 not apply to: 6 1. Entities licensed or registered by the state 7 pursuant to chapter 390, chapter 394, chapter 395, chapter 8 397, chapter 400, chapter 463, chapter 465, chapter 466, 9 chapter 478, chapter 480, or chapter 484. 2. Entities exempt from federal taxation under 26 10 U.S.C. s. 501(c)(3). 11 12 3. Sole proprietorships, group practices, partnerships, or corporations that provide health care 13 14 services by licensed health care practitioners pursuant to chapters 457, 458, 459, 460, 461, 462, 463, 466, 467, 484, 15 486, 490, 491, or parts I, III, X, XIII, or XIV of chapter 16 17 468, or s. 464.012, which are wholly owned by licensed health care practitioners or the licensed health care practitioner 18 19 and the spouse, parent, or child of a licensed health care 20 practitioner, so long as one of the owners who is a licensed health care practitioner is supervising the services performed 21 therein and is legally responsible for the entity's compliance 22 23 with all federal and state laws. However, no health care practitioner may supervise services beyond the scope of the 24 practitioner's license. 25 26 (2)(a) Every clinic, as defined in paragraph (1)(a), 27 must register, and must at all times maintain a valid 28 registration, with the Department of Health. Each clinic 29 location shall be registered separately even though operated under the same business name or management, and each clinic 30 31 shall appoint a medical director or clinical director. 264

i						
1	(b) The department shall adopt rules necessary to					
2	implement the registration program, including rules					
3	establishing the specific registration procedures, forms, and					
4	fees. Registration fees must be reasonably calculated to					
5	cover the cost of registration and must be of such amount that					
6	the total fees collected do not exceed the cost of					
7	administering and enforcing compliance with this section.					
8	Registration may be conducted electronically. The registration					
9	program must require:					
10	1. The clinic to file the registration form with the					
11	department within 60 days after the effective date of this					
12	section or prior to the inception of operation. The					
13	registration expires automatically 2 years after its date of					
14	issuance and must be renewed biennially.					
15	2. The registration form to contain the name,					
16	residence and business address, phone number, and license					
17	number of the medical director or clinical director for the					
18	<u>clinic.</u>					
19	3. The clinic to display the registration certificate					
20	in a conspicuous location within the clinic readily visible to					
21	all patients.					
22	(3)(a) Each clinic must employ or contract with a					
23	physician maintaining a full and unencumbered physician					
24	license in accordance with chapter 458, chapter 459, chapter					
25	460, or chapter 461 to serve as the medical director.					
26	However, if the clinic is limited to providing health care					
27	services pursuant to chapter 457, chapter 484, chapter 486,					
28	chapter 490, or chapter 491 or part I, part III, part X, part					
29	XIII, or part XIV of chapter 468, the clinic may appoint a					
30	health care practitioner licensed under that chapter to serve					
31	as a clinical director who is responsible for the clinic's					
	265					
007	205					

activities. A health care practitioner may not serve as the 1 2 clinical director if the services provided at the clinic are 3 beyond the scope of that practitioner's license. 4 (b) The medical director or clinical director shall 5 agree in writing to accept legal responsibility for the 6 following activities on behalf of the clinic. The medical 7 director or the clinical director shall: 8 1. Have signs identifying the medical director or 9 clinical director posted in a conspicuous location within the clinic readily visible to all patients. 10 2. Ensure that all practitioners providing health care 11 12 services or supplies to patients maintain a current active and 13 unencumbered Florida license. 14 3. Review any patient referral contracts or agreements 15 executed by the clinic. 16 4. Ensure that all health care practitioners at the 17 clinic have active appropriate certification or licensure for the level of care being provided. 18 19 5. Serve as the clinic records holder as defined in s. 20 456.057. 21 6. Ensure compliance with the recordkeeping, office 22 surgery, and adverse incident reporting requirements of 23 chapter 456, the respective practice acts, and rules adopted 24 thereunder. 7. Conduct systematic reviews of clinic billings to 25 26 ensure that the billings are not fraudulent or unlawful. Upon discovery of an unlawful charge, the medical director shall 27 28 take immediate corrective action. 29 (c) Any contract to serve as a medical director or a clinical director entered into or renewed by a physician or a 30 licensed health care practitioner in violation of this section 31 266

is void as contrary to public policy. This section shall 1 2 apply to contracts entered into or renewed on or after October 3 1, 2001. 4 (d) The department, in consultation with the boards, 5 shall adopt rules specifying limitations on the number of 6 registered clinics and licensees for which a medical director 7 or a clinical director may assume responsibility for purposes 8 of this section. In determining the quality of supervision a 9 medical director or a clinical director can provide, the department shall consider the number of clinic employees, 10 clinic location, and services provided by the clinic. 11 12 (4)(a) All charges or reimbursement claims made by or on behalf of a clinic that is required to be registered under 13 14 this section, but that is not so registered, are unlawful 15 charges and therefore are noncompensable and unenforceable. (b) Any person establishing, operating, or managing an 16 17 unregistered clinic otherwise required to be registered under 18 this section commits a felony of the third degree, punishable 19 as provided in s. 775.082, s. 775.083, or s. 775.084. 20 (c) Any licensed health care practitioner who violates this section is subject to discipline in accordance with 21 chapter 456 and the respective practice act. 22 23 (d) The department shall revoke the registration of any clinic registered under this section for operating in 24 violation of the requirements of this section or the rules 25 26 adopted by the department. (e) The department shall investigate allegations of 27 noncompliance with this section and the rules adopted pursuant 28 29 to this section. Section 104. The sum of \$100,000 is appropriated from 30 31 the registration fees collected from clinics pursuant to s. 267

456.0375, Florida Statutes, and one-half of one full-time 1 2 equivalent position is authorized, to the Department of Health 3 for the purposes of regulating medical clinics pursuant to s. 4 456.0375, Florida Statutes. The appropriated funds shall be 5 deposited into the Medical Quality Assurance Trust Fund. Section 105. Subsection (3) of section 456.031, 6 7 Florida Statutes, is amended to read: 8 456.031 Requirement for instruction on domestic 9 violence.--10 (3)(a) In lieu of completing a course as required in subsection (1), a licensee or certificateholder may complete a 11 12 course in end-of-life care and palliative health care, if the 13 licensee or certificateholder has completed an approved 14 domestic violence course in the immediately preceding 15 biennium. 16 (b) In lieu of completing a course as required by 17 subsection (1), a person licensed under chapter 466 who has 18 completed an approved domestic-violence education course in 19 the immediately preceding 2 years may complete a course 20 approved by the Board of Dentistry. 21 Section 106. Subsection (9) of section 456.033, Florida Statutes, is amended to read: 22 23 456.033 Requirement for instruction for certain licensees on human immunodeficiency virus and acquired immune 24 25 deficiency syndrome .---26 (9)(a) In lieu of completing a course as required in 27 subsection (1), the licensee may complete a course in 28 end-of-life care and palliative health care, so long as the 29 licensee completed an approved AIDS/HIV course in the 30 immediately preceding biennium. 31 268

(b) In lieu of completing a course as required by 1 2 subsection (1), a person licensed under chapter 466 who has 3 completed an approved AIDS/HIV course in the immediately 4 preceding 2 years may complete a course approved by the Board 5 of Dentistry. 6 Section 107. (1) Subsection (9) is added to section 7 627.419, Florida Statutes, to read: 8 627.419 Construction of policies.--9 (9) With respect to any group or individual insurer covering dental services, each claimant, or dentist acting for 10 a claimant, who has had a claim denied as not medically or 11 12 dentally necessary or who has had a claim payment based on an alternate dental service in accordance with accepted dental 13 14 standards for adequate and appropriate care must be provided an opportunity for an appeal to the insurer's licensed dentist 15 who is responsible for the medical necessity reviews under the 16 17 plan or is a member of the plan's peer review group. The appeal may be by telephone, and the insurer's dentist must 18 19 respond within a reasonable time, not to exceed 15 business 20 days. 21 (2) This section shall apply to policies issued or 22 renewed on or after July 1, 2001. 23 Section 108. Paragraph (d) of subsection (3) of section 468.302, Florida Statutes, is amended to read: 24 468.302 Use of radiation; identification of certified 25 26 persons; limitations; exceptions.--(3) 27 28 (d) A person holding a certificate as a general 29 radiographer may not perform nuclear medicine and radiation 30 therapy procedures, except as provided in this paragraph. A person who is a general radiographer certified pursuant to 31 269

Second Engrossed

this part who receives additional training and skills in 1 radiation therapy technology procedures as referenced in this 2 3 paragraph may assist with managing patients undergoing radiation therapy treatments if that assistance is provided to 4 5 a person registered with the American Registry of Radiologic 6 Technologists in radiation therapy who is also certified 7 pursuant to this part as a radiation therapy technologist. 8 Both the general radiographer and the radiation therapy 9 technologist must perform these radiation therapy services under the general supervision of a physician licensed under 10 chapter 458 or chapter 459 who is trained and skilled in 11 12 performing radiation therapy treatments. The radiation therapy technologist identified under this paragraph may not delegate 13 14 any function to the general radiographer which could reasonably be expected to create an unnecessary danger to a 15 patient's life, health, or safety. The general radiographer 16 17 identified under this section may not, however, perform the following services while assisting the radiation therapy 18 19 technologist: radiation treatment planning, calculation of 20 radiation therapy doses, or any of the duties of a medical 21 physicist. The general radiographer identified under this section must successfully complete a training program in the 22 23 following areas before assisting with radiation therapy technology duties: 24 1. Principles of radiation therapy treatment; 25 26 2. Biological effects of radiation; 27 3. Radiation exposure and monitoring; 28 4. Radiation safety and protection; 29 5. Evaluation and handling of radiographic treatment 30 equipment and accessories; and 31 270 CODING: Words stricken are deletions; words underlined are additions.

6. Patient positioning for radiation therapy 1 2 treatment. 3 4 In addition, a general radiographer may participate in 5 additional approved programs as provided by rule of the 6 department. 7 Section 109. Subsections (8) and (9) of section 468.352, Florida Statutes, are amended to read: 8 9 468.352 Definitions.--As used in this part, unless the context otherwise requires, the term: 10 "Registered respiratory therapist" means any 11 (8) 12 person licensed pursuant to this part who is employed to deliver respiratory care services under the order of a 13 14 physician licensed pursuant to chapter 458 or chapter 459, and 15 in accordance with protocols established by a hospital, other health care provider, or the board, and who functions in 16 situations of unsupervised patient contact requiring 17 18 individual judgment. 19 (9) "Certified respiratory therapist" or "respiratory 20 care practitioner" means any person licensed pursuant to this part who is employed to deliver respiratory care services 21 under the order of a physician licensed pursuant to chapter 22 23 458 or chapter 459, and in accordance with protocols established by a hospital, other health care provider, or the 24 25 board. 26 Section 110. Subsections (1) and (2) of section 27 468.355, Florida Statutes, are amended to read: 28 468.355 Eligibility for licensure; temporary 29 licensure.--30 31 271 CODING: Words stricken are deletions; words underlined are additions.

1 (1) To be eligible for licensure by the board as a 2 certified respiratory therapist respiratory care practitioner, 3 an applicant must: 4 (a) Be at least 18 years old. 5 (b) Possess a high school diploma or a graduate 6 equivalency diploma. 7 (c) Meet at least one of the following criteria: 8 1. The applicant has successfully completed a training 9 program for respiratory therapy technicians or respiratory therapists approved by the Commission on Accreditation of 10 Allied Health Education Programs, or the equivalent thereof, 11 12 as accepted by the board. 2. The applicant is currently a "Certified Respiratory 13 14 Therapist Therapy Technician" certified by the National Board for Respiratory Care, or the equivalent thereof, as accepted 15 16 by the board. 17 3. The applicant is currently a "Registered Respiratory Therapist" registered by the National Board for 18 19 Respiratory Care, or the equivalent thereof, as accepted by 20 the board. 21 22 The criteria set forth in subparagraphs 2. and 3. 23 notwithstanding, the board shall periodically review the examinations and standards of the National Board for 24 25 Respiratory Care and may reject those examinations and 26 standards if they are deemed inappropriate. (2) To be eligible for licensure by the board as a 27 28 registered respiratory therapist, an applicant must: 29 (a) Be at least 18 years old. 30 (b) Possess a high school diploma or a graduate 31 equivalency diploma. 272

1 (c) Meet at least one of the following criteria: 2 1. The applicant has successfully completed a training 3 program for registered respiratory therapists approved by the 4 Commission on Accreditation of Allied Health Education 5 Programs, or the equivalent thereof, as accepted by the board. 6 2. The applicant is currently a "Registered 7 Respiratory Therapist" registered by the National Board for 8 Respiratory Care, or the equivalent thereof, as accepted by 9 the board. 10 The criteria set forth in subparagraphs 1. and 2. 11 12 notwithstanding, the board shall periodically review the examinations and standards of the National Board for 13 14 Respiratory Care and may reject those examinations and 15 standards if they are deemed inappropriate. Section 111. Section 468.357, Florida Statutes, is 16 17 amended to read: 18 468.357 Licensure by examination.--19 (1) A person who desires to be licensed as a certified 20 respiratory therapist respiratory care practitioner may submit 21 an application to take the examination, in accordance with 22 board rule. 23 (a) Each applicant may take the examination who is determined by the board to have: 24 1. Completed the application form and remitted the 25 26 applicable fee set by the board; 27 2. Submitted required documentation as required in s. 468.355; and 28 29 3. Remitted an examination fee set by the examination 30 provider. 31 273 CODING: Words stricken are deletions; words underlined are additions.

1	(b) Examinations for licensure of certified						
2	respiratory therapist respiratory care practitioners must be						
3	conducted no less than two times a year in such geographical						
4	locations or by such methods as are deemed advantageous to the						
5	majority of the applicants.						
6	(c) The examination given for certified respiratory						
7	therapist respiratory care practitioners shall be the same as						
8							
9	entry-level certification of respiratory therapists therapy						
10	technicians. However, an equivalent examination may be						
11	accepted by the board in lieu of that examination.						
12	(2) Each applicant who passes the examination shall be						
13	entitled to licensure as a <u>certified respiratory therapist</u>						
14	respiratory care practitioner, and the department shall issue						
15	a license pursuant to this part to any applicant who						
16	successfully completes the examination in accordance with this						
17	section. However, the department shall not issue a license to						
18	any applicant who is under investigation in another						
19	jurisdiction for an offense which would constitute a violation						
20	of this part. Upon completion of such an investigation, if the						
21	applicant is found guilty of such an offense, the applicable						
22	provisions of s. 468.365 will apply.						
23	Section 112. Subsections (1) and (2) of section						
24	468.358, Florida Statutes, are amended to read:						
25	468.358 Licensure by endorsement						
26	(1) Licensure as a <u>certified respiratory therapist</u>						
27	respiratory care practitioner shall be granted by endorsement						
28	to an individual who holds the "Certified Respiratory						
29	Therapist Therapy Technician" credential issued by the						
30	National Board for Respiratory Care or an equivalent						
31	credential acceptable to the board. Licensure by this						
	274						
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.						

mechanism requires verification by oath and submission of 1 evidence satisfactory to the board that such credential is 2 3 held. 4 (2) Licensure as a registered respiratory therapist 5 shall be granted by endorsement to an individual who holds the б "Registered Respiratory Therapist" credential issued by the 7 National Board for Respiratory Care or an equivalent 8 credential acceptable to the board. Licensure by this 9 mechanism requires verification by oath and submission of evidence satisfactory to the board that such credential is 10 held. 11 12 Section 113. Section 468.359, Florida Statutes, is 13 amended to read: 14 468.359 Assumption of title and use of 15 abbreviations.--16 (1) Only persons who are licensed pursuant to this 17 part as respiratory care practitioners have the right to use 18 the title "Respiratory Care Practitioner" and the abbreviation 19 "RCP." 20 (2) Only persons who are licensed pursuant to this part as registered respiratory therapists have the right to 21 22 use the title "Registered Respiratory Therapist" and the 23 abbreviation "RRT," when delivering services pursuant to this part provided such persons have passed the Registry 24 25 Examination for Respiratory Therapists given by the National 26 Board for Respiratory Care. 27 (3) Only persons who are licensed pursuant to this part as certified respiratory therapists have the right to use 28 29 the title "Certified Respiratory Therapist" and the abbreviation "CRT" when delivering services pursuant to this 30 part.graduates of board-approved programs for respiratory 31 275

1	care practitioners may use the term "Graduate Respiratory					
2	Therapy Technician" and the abbreviation "GRTT."					
3	(4) Only persons who are graduates of board-approved					
4	programs for respiratory therapists may use the term "Graduate					
5	Respiratory Therapist" and the abbreviation "GRT."					
6	(4) (5) No person in this state shall deliver					
7	respiratory care services; advertise as, or assume the title					
8	of, respiratory care practitioner, certified respiratory					
9	therapist, or registered respiratory therapist; or use the					
10	abbreviation "RCP <u>,</u> " <u>"CRT," or "RRT</u> " that would lead the public					
11	to believe that such person is licensed pursuant to this part					
12	unless such person is so licensed; or take any other action					
13	that would lead the public to believe that such person is					
14	licensed pursuant to this part unless such person is so					
15	licensed.					
16	Section 114. Subsections (2), (3), and (4) of section					
17	468.1155, Florida Statutes, are amended to read:					
18	468.1155 Provisional license; requirements					
19	(2) The department shall issue a provisional license					
20	to practice speech-language pathology to each applicant who					
21	the board certifies has:					
22	(a) Completed the application form and remitted the					
23	required fees, including a nonrefundable application fee.					
24	(b) Received a master's degree or is currently					
25	enrolled in a doctoral degree program with a major emphasis in					
26	speech-language pathology from an institution of higher					
27	learning which \underline{is} , \underline{or} at the time the applicant was enrolled					
28	and graduated , was <u>,</u> accredited by an accrediting agency					
29	recognized by the Council for Higher Education Commission on					
30	Recognition of Postsecondary Accreditation or from an					
31	institution which is publicly recognized as a member in good					
	276					
רטי	TNG.Words stricken are deletions; words underlined are additions					

1	standing with the Association of Universities and Colleges of
2	Canada. An applicant who graduated from or is currently
3	enrolled in a program at a university or college outside the
4	United States or Canada must present documentation of the
5	determination of equivalency to standards established by the
6	Council for Higher Education Commission on Recognition of
7	Postsecondary Accreditation in order to qualify. The
8	applicant must have completed 60 semester hours that include:
9	1. Fundamental information applicable to the normal
10	development and use of speech, hearing, and language;
11	information about training in management of speech, hearing,
12	and language disorders; and information supplementary to these
13	fields.
14	2. Six semester hours in audiology.
15	3. Thirty of the required 60 semester hours in courses
16	acceptable toward a graduate degree by the college or
17	university in which these courses were taken, of which 24
18	semester hours must be in speech-language pathology.
19	(c) Completed 300 supervised clinical clock hours with
20	200 clock hours in the area of speech-language pathology <u>or</u>
21	completed the number of clock hours required by an accredited
22	institution meeting national certification standards. The
23	supervised clinical clock hours shall be completed within the
24	training institution or one of its cooperating programs.
25	(3) The department shall issue a provisional license
26	to practice audiology to each applicant who the board
27	certifies has:
28	(a) Completed the application form and remitted the
29	required fees, including a nonrefundable application fee.
30	(b) Received a master's degree or <u>is currently</u>
31	enrolled in a doctoral degree program with a major emphasis in
	277

Second Engrossed

audiology from an institution of higher learning which is, or 1 at the time the applicant was enrolled and graduated was, 2 3 accredited by an accrediting agency recognized by the Council 4 for Higher Education Commission on Recognition of 5 Postsecondary Accreditation or from an institution which is 6 publicly recognized as a member in good standing with the 7 Association of Universities and Colleges of Canada. An applicant who graduated from or is currently enrolled in a 8 9 program at a university or college outside the United States or Canada must present documentation of the determination of 10 equivalency to standards established by the Council for Higher 11 12 Education Commission on Recognition of Postsecondary Accreditation in order to qualify. The applicant must have 13 14 completed 60 semester hours that include: 1. Fundamental information applicable to the normal 15 development and use of speech, hearing, and language; 16 17 information about training in management of speech, hearing, 18 and language disorders; and information supplementary to these 19 fields. 20 2. Six semester hours in speech-language pathology. Thirty of the required 60 semester hours in courses 21 3. 22 acceptable toward a graduate degree by the college or 23 university in which these courses were taken, of which 24 semester hours must be in audiology. 24 (c) Completed 300 supervised clinical clock hours with 25 26 200 clock hours in the area of audiology or completed the 27 number of clock hours required by an accredited institution meeting national certification standards. The supervised 28 29 clinical clock hours shall be completed within the training institution or one of its cooperating programs. 30 31 278 CODING: Words stricken are deletions; words underlined are additions.

1 (4) An applicant for a provisional license who has 2 received a master's degree or is currently enrolled in a 3 doctoral degree program with a major emphasis in speech-language pathology as provided in subsection (2), or 4 5 audiology as provided in subsection (3), and who seeks 6 licensure in the area in which the applicant is not currently 7 licensed, must have completed 30 semester hours in courses 8 acceptable toward a graduate degree and 200 supervised 9 clinical clock hours in the second discipline from an accredited institution. 10 Section 115. Paragraph (b) of subsection (1) and 11 12 paragraph (b) of subsection (2) of section 468.1215, Florida Statutes, are amended to read: 13 14 468.1215 Speech-language pathology assistant and 15 audiology assistant; certification. --(1) The department shall issue a certificate as a 16 17 speech-language pathology assistant to each applicant who the board certifies has: 18 19 (b) Earned a bachelor's degree from a college or 20 university accredited by a regional association of colleges 21 and schools recognized by the Department of Education which includes at least 24 semester hours of coursework as approved 22 23 by the board at an institution accredited by an accrediting agency recognized by the Council for Higher Education 24 Commission on Recognition of Postsecondary Accreditation. 25 26 (2) The department shall issue a certificate as an 27 audiology assistant to each applicant who the board certifies 28 has: 29 (b) Completed at least 24 semester hours of coursework 30 as approved by the board at an institution accredited by an accrediting agency recognized by the Council for Higher 31 279 CODING: Words stricken are deletions; words underlined are additions.

Education Commission on Recognition of Postsecondary 1 2 Accreditation. 3 Section 116. Subsection (3) of section 480.033, 4 Florida Statutes, is amended to read: 5 480.033 Definitions.--As used in this act: 6 (3) "Massage" means the manipulation of the soft 7 superficial tissues of the human body with the hand, foot, 8 arm, or elbow, whether or not such manipulation is aided by 9 hydrotherapy, including colonic irrigation, or thermal therapy; any electrical or mechanical device; or the 10 application to the human body of a chemical or herbal 11 12 preparation. Section 117. Subsection (3) of section 484.002, 13 14 Florida Statutes, is amended, and subsection (8) is added to that section, to read: 15 484.002 Definitions.--As used in this part: 16 17 (3) "Opticianry" means the preparation and dispensing 18 of lenses, spectacles, eyeglasses, contact lenses, and other 19 optical devices to the intended user or agent thereof, upon 20 the written prescription of a licensed allopathic or osteopathic physician medical doctor or optometrist who is 21 22 duly licensed to practice or upon presentation of a duplicate 23 prescription. The selection of frame designs, the actual sales transaction, and the transfer of physical possession of 24 25 lenses, spectacles, eyeglasses, contact lenses, and other 26 optical devices subsequent to performance of all services of 27 the optician shall not be considered the practice of opticianry; however, such physical possession shall not be 28 29 transferred until the optician has completed the fitting of the optical device upon the customer. The practice of 30 opticianry also includes the duplication of lenses accurately 31 280

1	as to power, without prescription. A board-certified optician					
1 2	qualified and operating under rules established by the board					
3	may fill, fit, adapt, or dispense any soft contact lens					
4	prescription. Such optician may fill, fit, adapt, or dispense					
+ 5	any extended wear or hard contact lens prescription to the					
6 7	extent authorized to do so by the prescribing <u>allopathic or</u>					
	osteopathic physician medical doctor or optometrist.					
8	(8) "Contact lenses" means a prescribed medical device					
9	intended to be worn directly against the cornea of the eye to					
10	correct vision conditions, act as a therapeutic device, or					
11	provide a cosmetic effect.					
12	(9) "Optical Dispensing" means interpreting but not					
13	altering a prescription of a licensed physician or optometrist					
14	and designing, adapting, fitting, or replacing the prescribed					
15	optical aids, pursuant to such prescription, to or for the					
16	intended wearer, duplicating lenses, accurately as to power					
17	without a prescription and duplicating nonprescription eyewear					
18	and parts of eyewear. "Optical Dispensing" does not include					
19	selecting frames, transferring an optical aid to the wearer					
20	after an optician has completed fitting it, or providing					
21	instruction in the general care and use of an optical aid,					
22	including placement, removal, hygiene, or cleaning.					
23	Section 118. Subsection (2) of section 484.006,					
24	Florida Statutes, is amended to read:					
25	484.006 Certain rules prohibited					
26	(2) No rule or policy of the board shall prohibit any					
27	optician from practicing jointly with optometrists or					
28	allopathic or osteopathic physicians medical doctors licensed					
29	in this state.					
30	Section 119. Subsections (1) and (2) of section					
31	484.012, Florida Statutes, are amended to read:					
	281					
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.					

484.012 Prescriptions; filing; duplication of 1 2 prescriptions; duplication of lenses.--3 (1) Any prescription written by a duly licensed 4 allopathic or osteopathic physician medical doctor or 5 optometrist for any lenses, spectacles, eyeglasses, contact 6 lenses, or other optical devices shall be kept on file for a 7 period of 2 years with the optical establishment that fills such prescription. However, the licensed optician may 8 9 maintain a copy of the prescription. (2) Upon request by the intended user of the 10 prescribed lenses, spectacles, eyeglasses, contact lenses, or 11 12 other optical devices, or by an agent of the intended user, the optician who fills the original prescription shall 13 duplicate, on a form prescribed by rule of the board, the 14 original prescription. However, for medical reasons only, the 15 prescribing allopathic or osteopathic physician medical doctor 16 17 or optometrist may, upon the original prescription, prohibit 18 its duplication. Any duplication shall be considered a valid 19 prescription to be filled for a period of 5 years from the date of the original prescription, except that a contact lens 20 prescription shall be considered a valid prescription to be 21 filled for a period of 2 years from the date of the original 22 23 prescription. 24 Section 120. Section 484.013, Florida Statutes, is 25 amended to read: 26 484.013 Violations and penalties.--27 (1) It is unlawful for any person: 28 (a) To make a false or fraudulent statement, either 29 for herself or himself or for another person, in any 30 application, affidavit, or statement presented to the board or in any proceeding before the board. 31 282 CODING: Words stricken are deletions; words underlined are additions.

1 (b) To prepare or dispense lenses, spectacles, 2 eyeglasses, contact lenses, or other optical devices when such 3 person is not licensed as an optician in this state. 4 (c) To prepare or dispense lenses, spectacles, 5 eyeglasses, contact lenses, or other optical devices without 6 first being furnished with a prescription as provided for in 7 s. 484.012. 8 (2) It is unlawful for any person other than an 9 optician licensed under this part to use the title "optician" or otherwise lead the public to believe that she or he is 10 engaged in the practice of opticianry. 11 12 (3) It is unlawful for any optician to engage in the 13 diagnosis of the human eyes, attempt to determine the 14 refractive powers of the human eyes, or, in any manner, 15 attempt to prescribe for or treat diseases or ailments of 16 human beings. 17 (4) It is unlawful for any person to open or operate, 18 either alone or with any other person or persons, an optical 19 establishment which does not have the permit required by this 20 part. 21 (5)(a) Except as otherwise provided in paragraph (b), a Any person who violates any a provision of this section 22 23 commits a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083. 24 25 (b) A person who knowingly violates paragraph (1)(c) 26 commits a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084. 27 28 Section 121. Paragraph (g) of subsection (3) of 29 section 921.0022, Florida Statutes, is amended to read: 30 921.0022 Criminal Punishment Code; offense severity 31 ranking chart.--283

Second Engrossed

1	(3) OFFEN	ISE SEVERI'	TY RANKING CHART
2			
3	Florida	Felony	
4	Statute	Degree	Description
5			
6			
7			(g) LEVEL 7
8	316.193(3)(c)2.	3rd	DUI resulting in serious bodily
9			injury.
10	327.35(3)(c)2.	3rd	Vessel BUI resulting in serious
11			bodily injury.
12	402.319(2)	2nd	Misrepresentation and negligence
13			or intentional act resulting in
14			great bodily harm, permanent
15			disfiguration, permanent
16			disability, or death.
17	409.920(2)	3rd	Medicaid provider fraud.
18	456.065(2)	3rd	Practicing a health care
19			profession without a license.
20	456.065(2)	2nd	Practicing a health care
21			profession without a license
22			which results in serious bodily
23			injury.
24	458.327(1)	3rd	Practicing medicine without a
25			license.
26	459.013(1)	3rd	Practicing osteopathic medicine
27			without a license.
28	460.411(1)	3rd	Practicing chiropractic medicine
29			without a license.
30	461.012(1)	3rd	Practicing podiatric medicine
31			without a license.
			284
ריטי	 ING•Words etriaber	+ are dele	tions: words underlined are additions

Second Engrossed

1	462.17	3rd	Practicing naturopathy without a	
2			license.	
3	463.015(1)	3rd	Practicing optometry without a	
4			license.	
5	464.016(1)	3rd	Practicing nursing without a	
6			license.	
7	465.015(2)	3rd	Practicing pharmacy without a	
8			license.	
9	466.026(1)	3rd	Practicing dentistry or dental	
10			hygiene without a license.	
11	467.201	3rd	Practicing midwifery without a	
12			license.	
13	468.366	3rd	Delivering respiratory care	
14			services without a license.	
15	483.828(1)	3rd	Practicing as clinical laboratory	
16			personnel without a license.	
17	483.901(9)	3rd	Practicing medical physics	
18			without a license.	
19	<u>484.013(1)(c)</u>	<u>3rd</u>	Preparing or dispensing optical	
20			devices without a prescription.	
21	484.053	3rd	Dispensing hearing aids without a	
22			license.	
23	494.0018(2)	lst	Conviction of any violation of	
24			ss. 494.001-494.0077 in which the	
25			total money and property	
26			unlawfully obtained exceeded	
27			\$50,000 and there were five or	
28			more victims.	
29				
30				
31				
			285	
COD	CODING:Words stricken are deletions; words underlined are additions.			

Second Engrossed

-			
1	560.123(8)(b)1.	3rd	Failure to report currency or
2			payment instruments exceeding
3			\$300 but less than \$20,000 by
4			money transmitter.
5	560.125(5)(a)	3rd	Money transmitter business by
6			unauthorized person, currency or
7			payment instruments exceeding
8			\$300 but less than \$20,000.
9	655.50(10)(b)1.	3rd	Failure to report financial
10			transactions exceeding \$300 but
11			less than \$20,000 by financial
12			institution.
13	782.051(3)	2nd	Attempted felony murder of a
14			person by a person other than the
15			perpetrator or the perpetrator of
16			an attempted felony.
17	782.07(1)	2nd	Killing of a human being by the
18			act, procurement, or culpable
19			negligence of another
20			(manslaughter).
21	782.071	2nd	Killing of human being or viable
22			fetus by the operation of a motor
23			vehicle in a reckless manner
24			(vehicular homicide).
25	782.072	2nd	Killing of a human being by the
26			operation of a vessel in a
27			reckless manner (vessel
28			homicide).
29	784.045(1)(a)1.	2nd	Aggravated battery; intentionally
30			causing great bodily harm or
31			disfigurement.
			286
COD	ING:Words stricken	are delet	lions; words <u>underlined</u> are additions.

Second Engrossed

-			
1	784.045(1)(a)2.	2nd	Aggravated battery; using deadly
2			weapon.
3	784.045(1)(b)	2nd	Aggravated battery; perpetrator
4			aware victim pregnant.
5	784.048(4)	3rd	Aggravated stalking; violation of
6			injunction or court order.
7	784.07(2)(d)	lst	Aggravated battery on law
8			enforcement officer.
9	784.08(2)(a)	lst	Aggravated battery on a person 65
10			years of age or older.
11	784.081(1)	1st	Aggravated battery on specified
12			official or employee.
13	784.082(1)	1st	Aggravated battery by detained
14			person on visitor or other
15			detainee.
16	784.083(1)	1st	Aggravated battery on code
17			inspector.
18	790.07(4)	1st	Specified weapons violation
19			subsequent to previous conviction
20			of s. 790.07(1) or (2).
21	790.16(1)	lst	Discharge of a machine gun under
22			specified circumstances.
23	790.166(3)	2nd	Possessing, selling, using, or
24			attempting to use a hoax weapon
25			of mass destruction.
26	796.03	2nd	Procuring any person under 16
27			years for prostitution.
28	800.04(5)(c)1.	2nd	Lewd or lascivious molestation;
29			victim less than 12 years of age;
30			offender less than 18 years.
31			
			287
005	TNC - Norda statistica		287
	WORDS STREEP		TOUS, WORDS HUDER THEO ARE ADDITIONS

1	800.04(5)(c)2.	2nd	Lewd or lascivious molestation;
2			victim 12 years of age or older
3			but less than 16 years; offender
4			18 years or older.
5	806.01(2)	2nd	Maliciously damage structure by
б			fire or explosive.
7	810.02(3)(a)	2nd	Burglary of occupied dwelling;
8			unarmed; no assault or battery.
9	810.02(3)(b)	2nd	Burglary of unoccupied dwelling;
10			unarmed; no assault or battery.
11	810.02(3)(d)	2nd	Burglary of occupied conveyance;
12			unarmed; no assault or battery.
13	812.014(2)(a)	1st	Property stolen, valued at
14			\$100,000 or more; property stolen
15			while causing other property
16			damage; 1st degree grand theft.
17	812.019(2)	1st	Stolen property; initiates,
18			organizes, plans, etc., the theft
19			of property and traffics in
20			stolen property.
21	812.131(2)(a)	2nd	Robbery by sudden snatching.
22	812.133(2)(b)	1st	Carjacking; no firearm, deadly
23			weapon, or other weapon.
24	825.102(3)(b)	2nd	Neglecting an elderly person or
25			disabled adult causing great
26			bodily harm, disability, or
27			disfigurement.
28	825.1025(2)	2nd	Lewd or lascivious battery upon
29			an elderly person or disabled
30			adult.
31			
			288
COP	ING. Words stricken	are dolo	zoo
1	825.103(2)(b)	2nd	Exploiting an elderly person or
-----	---	-----	-----------------------------------
2			disabled adult and property is
3			valued at \$20,000 or more, but
4			less than \$100,000.
5	827.03(3)(b)	2nd	Neglect of a child causing great
6			bodily harm, disability, or
7			disfigurement.
8	827.04(3)	3rd	Impregnation of a child under 16
9			years of age by person 21 years
10			of age or older.
11	837.05(2)	3rd	Giving false information about
12			alleged capital felony to a law
13			enforcement officer.
14	872.06	2nd	Abuse of a dead human body.
15	893.13(1)(c)1.	1st	Sell, manufacture, or deliver
16			cocaine (or other drug prohibited
17			under s. 893.03(1)(a), (1)(b),
18			(1)(d), $(2)(a)$, $(2)(b)$, or
19			(2)(c)4.) within 1,000 feet of a
20			child care facility or school.
21	893.13(1)(e)1.	1st	Sell, manufacture, or deliver
22			cocaine or other drug prohibited
23			under s. 893.03(1)(a), (1)(b),
24			(1)(d), $(2)(a)$, $(2)(b)$, or
25			(2)(c)4., within 1,000 feet of
26			property used for religious
27			services or a specified business
28			site.
29			
30			
31			
			289
COD	CODING: Words stricken are deletions; words <u>underlined</u> are additions.		

Second Engrossed

1	893.13(4)(a)	lst	Deliver to minor cocaine (or
2			other s. 893.03(1)(a), (1)(b),
3			(1)(d), (2)(a), (2)(b), or
4			(2)(c)4. drugs).
5	893.135(1)(a)1.	1st	Trafficking in cannabis, more
б			than 50 lbs., less than 2,000
7			lbs.
8	893.135		
9	(1)(b)1.a.	lst	Trafficking in cocaine, more than
10			28 grams, less than 200 grams.
11	893.135		
12	(1)(c)1.a.	lst	Trafficking in illegal drugs,
13			more than 4 grams, less than 14
14			grams.
15	893.135		
16	(1)(d)1.	1st	Trafficking in phencyclidine,
17			more than 28 grams, less than 200
18			grams.
19	893.135(1)(e)1.	lst	Trafficking in methaqualone, more
20			than 200 grams, less than 5
21			kilograms.
22	893.135(1)(f)1.	lst	Trafficking in amphetamine, more
23			than 14 grams, less than 28
24			grams.
25	893.135		
26	(1)(g)1.a.	lst	Trafficking in flunitrazepam, 4
27			grams or more, less than 14
28			grams.
29			
30			
31			
			290
COD	ING:Words stricken	are dele	etions; words <u>underlined</u> are additions.

Second Engrossed

1 893.135 2 (1)(h)1.a. Trafficking in 1st 3 gamma-hydroxybutyric acid (GHB), 4 1 kilogram or more, less than 5 5 kilograms. 6 893.135 7 Trafficking in 1,4-Butanediol, 1 (1)(i)1.a. 1st 8 kilogram or more, less then 5 9 kilograms. 893.135 10 11 Trafficking in Phenethylamines, (1)(j)2.a. 1st 12 10 grams or more, less than 200 13 grams. 14 896.101(5)(a) 3rd Money laundering, financial 15 transactions exceeding \$300 but 16 less than \$20,000. Structuring transactions to evade 17 896.104(4)(a)1. 3rd 18 reporting or registration 19 requirements, financial 20 transactions exceeding \$300 but 21 less than \$20,000. 22 Section 122. Section 484.015, Florida Statutes, is 23 amended to read: 484.015 Authority to inspect.--Duly authorized agents 24 25 and employees of the department shall have the power to 26 inspect in a lawful manner at all reasonable hours an any establishment of any kind in the state in which lenses, 27 28 spectacles, eyeglasses, contact lenses, and any other optical 29 devices are prepared or and dispensed, for the purposes of: 30 (1) Determining if any provision of this part, or any rule promulgated under its authority, is being violated; 31 291 CODING: Words stricken are deletions; words underlined are additions.

Second Engrossed

CS for SB 1558

1	(2) Securing samples or specimens of any lenses,
2	spectacles, eyeglasses, contact lenses, or other optical
3	devices, after paying or offering to pay for such sample or
4	specimen; or
5	(3) Securing such other evidence as may be needed for
6	prosecution under this part.
7	Section 123. Subsection (1) of section 484.0445,
8	Florida Statutes, is amended to read:
9	484.0445 Training program
10	(1) The board shall establish by rule a training
11	program <u>for a minimum</u> not to exceed 6 months in length, which
12	may include a board-approved home study course. Upon
13	submitting to the department the registration fee, the
14	applicant may register and enter the training program. Upon
15	completion of the training program, the trainee shall take the
16	first available written and practical examinations offered by
17	the department. The department shall administer the written
18	and practical examinations as prescribed by board rule. If
19	the trainee fails either the written or the practical
20	examination, she or he may repeat the training program one
21	time and retake the failed examination, provided she or he
22	takes the next available examination. No person may remain in
23	trainee status or further perform any services authorized for
24	a trainee if she or he fails either the written or the
25	practical examination twice; but, a trainee may continue to
26	function as a trainee until she or he has received the results
27	of the examinations. Any applicant who has failed an
28	examination twice and is no longer functioning as a trainee
29	shall be eligible for reexamination as provided in s.
30	484.045(2).
31	
	292
ר <u>רי</u> ט	ING: Words stricken are deletions; words underlined are additions.
COD	indenotas seriesen are derectons, words <u>undertined</u> are addictons.

1 Section 124. Section 484.045, Florida Statutes, is 2 amended to read: 484.045 Licensure by examination. --3 4 (1) Any person desiring to be licensed as a hearing 5 aid specialist shall apply to the department on a form 6 approved by the department to take the licensure examination, 7 which shall include a clinical practical component. 8 (2) The department shall license examine each 9 applicant who the board certifies: (a) Has completed the application form and remitted 10 11 the required fees applicable fee to the board and has paid the 12 examination fee; (b) Is of good moral character; 13 14 (c) Is 18 years of age or older; 15 (d) Is a graduate of an accredited high school or its 16 equivalent; and 17 (e)1. Has met the requirements of the training program set forth in s. 484.0445; or 18 19 2.a. Has a valid, current license as a hearing aid specialist or its equivalent from another state and has been 20 21 actively practicing in such capacity for at least 12 months; 22 or 23 Is currently certified by the National Board for b. Certification in Hearing Instrument Sciences and has been 24 actively practicing for at least 12 months. Persons qualifying 25 26 under this sub-subparagraph need not take the written or practical examination, but must take and pass a test on 27 Florida laws and rules relating to the fitting and dispensing 28 29 of hearing aids. 30 (f) Has passed an examination, as prescribed by board 31 rule; and 293

1	(g) Has demonstrated, in a manner designated by rule
2	of the board, knowledge of state laws and rules relating to
3	the fitting and dispensing of hearing aids.
4	(3) A person who fails the examination may make
5	application for reexamination to the appropriate examining
6	entity, as prescribed by board rule.
7	(2) On or after October 1, 1990, every applicant who
8	is qualified to take the examination shall be allowed to take
9	the examination three times. If, after October 1, 1990, an
10	applicant fails the examination three times, the applicant
11	shall no longer be eligible to take the examination.
12	(3) The department shall issue a license to practice
13	dispensing hearing aids to any applicant who successfully
14	completes the examination in accordance with this section.
15	Section 125. Effective January 1, 2002, subsection (1)
16	of section 490.012, Florida Statutes, is amended to read:
17	490.012 Violations; penalties; injunction
18	(1)(a) No person shall hold herself or himself out by
19	any professional title, name, or description incorporating the
20	word "psychologist" unless such person holds a valid, active
21	license as a psychologist under this chapter.
22	(b) No person shall hold herself or himself out by any
23	professional title, name, or description incorporating the
24	words "school psychologist" unless such person holds a valid,
25	active license as a school psychologist under this chapter or
26	is certified as a school psychologist by the Department of
27	Education.
28	<u>(c)</u> (1)(a) No person shall hold herself or himself out
29	by any title or description incorporating the words, or
30	permutations of them, "psychologist, " "psychology,"
31	"psychological," "psychodiagnostic," or "school psychologist,"
	294
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

1	on deganibe one test on nonent of prochelesized unless such
1	or describe any test or report as psychological, unless such
2	person holds a valid, active license under this chapter or is
3	exempt from the provisions of this chapter.
4	(d)(b) No person shall hold herself or himself out by
5	any title or description incorporating the word, or a
6	permutation of the word, "psychotherapy" unless such person
7	holds a valid, active license under chapter 458, chapter 459,
8	chapter 490, or chapter 491, or such person is certified as an
9	advanced registered nurse practitioner, pursuant to s.
10	464.012, who has been determined by the Board of Nursing as a
11	specialist in psychiatric mental health.
12	<u>(e)</u> No person licensed or provisionally licensed
13	pursuant to this chapter shall hold herself or himself out by
14	any title or description which indicates licensure other than
15	that which has been granted to her or him.
16	Section 126. Effective January 1, 2002, Florida
17	Statutes, is amended to read:
18	490.014 Exemptions
19	(1)(a) No provision of this chapter shall be construed
20	to limit the practice of physicians licensed pursuant to
21	chapter 458 or chapter 459 so long as they do not hold
22	themselves out to the public as psychologists or use a
23	professional title protected by this chapter.
24	(b) No provision of this chapter shall be construed to
25	limit the practice of nursing, clinical social work, marriage
26	and family therapy, mental health counseling, or other
27	recognized businesses or professions, or to prevent qualified
28	members of other professions from doing work of a nature
29	consistent with their training, so long as they do not hold
30	themselves out to the public as psychologists or use a title
31	or description protected by this chapter. Nothing in this
	295
005	295

subsection shall be construed to exempt any person from the 1 provisions of s. 490.012. 2 3 (2) No person shall be required to be licensed or 4 provisionally licensed under this chapter who: 5 (a) Is a salaried employee of a government agency; 6 developmental services program, mental health, alcohol, or 7 drug abuse facility operating pursuant to chapter 393, chapter 394, or chapter 397; subsidized child care program, subsidized 8 9 child care case management program, or child care resource and referral program operating pursuant to chapter 402; 10 child-placing or child-caring agency licensed pursuant to 11 12 chapter 409; domestic violence center certified pursuant to chapter 39; accredited academic institution; or research 13 14 institution, if such employee is performing duties for which 15 he or she was trained and hired solely within the confines of such agency, facility, or institution, so long as the employee 16 17 is not held out to the public as a psychologist pursuant to s. 18 490.012(1)(a). 19 (b) Is a salaried employee of a private, nonprofit 20 organization providing counseling services to children, youth, and families, if such services are provided for no charge, if 21 22 such employee is performing duties for which he or she was 23 trained and hired, so long as the employee is not held out to the public as a psychologist pursuant to s. 490.012(1)(a). 24 (c) Is a student who is pursuing a course of study 25 26 which leads to a degree in medicine or a profession regulated by this chapter who is providing services in a training 27 setting, provided such activities or services constitute part 28 29 of a supervised course of study, or is a graduate accumulating the experience required for any licensure under this chapter, 30 provided such graduate or student is designated by a title 31 296

such as "intern" or "trainee" which clearly indicates the 1 2 in-training status of the student. 3 (d) Is certified in school psychology by the 4 Department of Education and is performing psychological 5 services as an employee of a public or private educational 6 institution. Such exemption shall not be construed to 7 authorize any unlicensed practice which is not performed as a direct employee of an educational institution. 8 9 (e) Is not a resident of the state but offers services in this state, provided: 10 Such services are performed for no more than 5 days 11 1. 12 in any month and no more than 15 days in any calendar year; 13 and 14 2. Such nonresident is licensed or certified by a 15 state or territory of the United States, or by a foreign 16 country or province, the standards of which were, at the date 17 of his or her licensure or certification, equivalent to or higher than the requirements of this chapter in the opinion of 18 19 the department or, in the case of psychologists, in the opinion of the board. 20 21 (f) Is a rabbi, priest, minister, or member of the 22 clergy of any religious denomination or sect when engaging in 23 activities which are within the scope of the performance of his or her regular or specialized ministerial duties and for 24 which no separate charge is made, or when such activities are 25 performed, with or without charge, for or under the auspices 26 27 or sponsorship, individually or in conjunction with others, of an established and legally cognizable church, denomination, or 28 29 sect, and when the person rendering service remains accountable to the established authority thereof. 30 31 297 CODING: Words stricken are deletions; words underlined are additions.

i	
1	(3) No provision of this chapter shall be construed to
2	limit the practice of any individual who solely engages in
3	behavior analysis so long as he or she does not hold himself
4	or herself out to the public as possessing a license issued
5	pursuant to this chapter or use a title <u>or description</u>
6	protected by this chapter.
7	(4) Nothing in this section shall exempt any person
8	from the provisions provision of s. $490.012(1)(a)-(b)(a)-(b)$.
9	(5) Except as stipulated by the board, the exemptions
10	contained in this section do not apply to any person licensed
11	under this chapter whose license has been suspended or revoked
12	by the board or another jurisdiction.
13	Section 127. Effective January 1, 2002, paragraphs
14	(i), (j), and (k) of subsection (1) of section 491.012,
15	Florida Statutes, are amended to read:
16	491.012 Violations; penalty; injunction
17	(1) It is unlawful and a violation of this chapter for
18	any person to:
19	(i) Practice clinical social work in this state , as
20	the practice is defined in s. 491.003(7), for compensation,
21	unless the person holds a valid, active license to practice
22	clinical social work issued pursuant to this chapter or is an
23	intern registered pursuant to s. 491.0045.
24	(j) Practice marriage and family therapy in this
25	state, as the practice is defined in s. 491.003(8), for
26	compensation, unless the person holds a valid, active license
27	to practice marriage and family therapy issued pursuant to
28	this chapter or is an intern registered pursuant to s.
29	<u>491.0045</u> .
30	(k) Practice mental health counseling in this state,
31	as the practice is defined in s. 491.003(9), for compensation,
	298
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

unless the person holds a valid, active license to practice 1 2 mental health counseling issued pursuant to this chapter or is 3 an intern registered pursuant to s. 491.0045. 4 Section 128. Effective January 1, 2002, paragraphs (a) 5 and (b) of subsection (4) of section 491.014, Florida 6 Statutes, are amended to read: 7 491.014 Exemptions.--(4) No person shall be required to be licensed, 8 9 provisionally licensed, registered, or certified under this chapter who: 10 (a) Is a salaried employee of a government agency; 11 12 developmental services program, mental health, alcohol, or drug abuse facility operating pursuant to chapter 393, chapter 13 14 394, or chapter 397; subsidized child care program, subsidized 15 child care case management program, or child care resource and referral program operating pursuant to chapter 402; 16 17 child-placing or child-caring agency licensed pursuant to 18 chapter 409; domestic violence center certified pursuant to 19 chapter 39; accredited academic institution; or research institution, if such employee is performing duties for which 20 he or she was trained and hired solely within the confines of 21 such agency, facility, or institution, so long as the employee 22 23 is not held out to the public as a clinical social worker, mental health counselor, or marriage and family therapist. 24 (b) Is a salaried employee of a private, nonprofit 25 26 organization providing counseling services to children, youth, 27 and families, if such services are provided for no charge, if such employee is performing duties for which he or she was 28 29 trained and hired, so long as the employee is not held out to the public as a clinical social worker, mental health 30 31 counselor, or marriage and family therapist. 299

Section 129. Subsection (4) of section 458.319, 1 2 Florida Statutes, is amended to read: 3 458.319 Renewal of license.--4 (4) Notwithstanding the provisions of s. 456.033, a 5 physician may complete continuing education on end-of-life 6 care and palliative health care in lieu of continuing 7 education in AIDS/HIV, if that physician has completed the 8 AIDS/HIV continuing education in the immediately preceding 9 biennium. 10 Section 130. Subsection (5) of section 459.008, Florida Statutes, is amended to read: 11 459.008 Renewal of licenses and certificates.--12 (5) Notwithstanding the provisions of s. 456.033, an 13 14 osteopathic physician may complete continuing education on 15 end-of-life and palliative health care in lieu of continuing education in AIDS/HIV, if that physician has completed the 16 17 AIDS/HIV continuing education in the immediately preceding 18 biennium. 19 Section 131. Subsection (4) of section 765.101, 20 Florida Statutes, is amended to read: 21 765.101 Definitions.--As used in this chapter: 22 "End-stage condition" means an irreversible a (4) 23 condition that is caused by injury, disease, or illness which has resulted in progressively severe and permanent 24 deterioration, indicated by incapacity and complete physical 25 26 dependency and for which, to a reasonable degree of medical 27 probability certainty, treatment of the irreversible condition 28 would be medically ineffective. 29 Section 132. Subsection (4) of section 765.102, 30 Florida Statutes, is amended to read: 765.102 Legislative findings and intent.--31 300 CODING: Words stricken are deletions; words underlined are additions.

-			
1	(4) The Legislature recognizes the need for all health		
2	care professionals to rapidly increase their understanding of		
3	end-of-life and palliative health care. Therefore, the		
4	Legislature encourages the professional regulatory boards to		
5	adopt appropriate standards and guidelines regarding		
б	end-of-life care and pain management and encourages		
7	educational institutions established to train health care		
8	professionals and allied health professionals to implement		
9	curricula to train such professionals to provide end-of-life		
10	care, including pain management and palliative care.		
11	Section 133. Section 765.1025, Florida Statutes, is		
12	created to read:		
13	765.1025 Palliative careFor purposes of this		
14	chapter:		
15	(1) Palliative care is the comprehensive management of		
16	the physical, psychological, social, spiritual, and		
17	existential needs of patients. Palliative care is especially		
18	suited to the care of persons who have incurable, progressive		
19	illness.		
20	(2) Palliative care must include:		
21	(a) An opportunity to discuss and plan for end-of-life		
22	care.		
23	(b) Assurance that physical and mental suffering will		
24	be carefully attended to.		
25	(c) Assurance that preferences for withholding and		
26	withdrawing life-sustaining interventions will be honored.		
27	(d) Assurance that the personal goals of the dying		
28	person will be addressed.		
29	(e) Assurance that the dignity of the dying person		
30	will be a priority.		
31			
	301		
007			

(f) Assurance that health care providers will not 1 2 abandon the dying person. 3 (g) Assurance that the burden to family and others 4 will be addressed. 5 (h) Assurance that advance directives for care will be 6 respected regardless of the location of care. 7 (i) Assurance that organizational mechanisms are in 8 place to evaluate the availability and quality of end-of-life, 9 palliative, and hospice care services, including the evaluation of administrative and regulatory barriers. 10 (j) Assurance that necessary health care services will 11 12 be provided and that relevant reimbursement policies are 13 available. 14 (k) Assurance that the goals expressed in paragraphs (a)-(j) will be accomplished in a culturally appropriate 15 16 manner. 17 Section 134. Subsection (2) of section 765.1103, Florida Statutes, is amended to read: 18 19 765.1103 Pain management and palliative care.--20 (2) Health care providers and practitioners regulated 21 under chapter 458, chapter 459, or chapter 464 must, as 22 appropriate, comply with a request for pain management or 23 palliative care from a patient under their care or, for an incapacitated patient under their care, from a surrogate, 24 25 proxy, guardian, or other representative permitted to make 26 health care decisions for the incapacitated patient. Facilities regulated under chapter 400 or chapter 395 must 27 28 comply with the pain management or palliative care measures 29 ordered by the patient's physician. When the patient is receiving care as an admitted patient of a facility or a 30 provider or is a subscriber of a health care facility, health 31 302

1	care provider, or health care practitioner regulated under
2	chapter 395, chapter 400, chapter 458, chapter 459, chapter
3	464, or chapter 641, such facility, provider, or practitioner
4	must, when appropriate, comply with a request for pain
5	management or palliative care from a capacitated patient or an
6	incapacitated patient's health care surrogate or proxy,
7	court-appointed guardian as provided in chapter 744, or
8	attorney in fact as provided in chapter 709. The
9	court-appointed guardian or attorney in fact must have been
10	delegated authority to make health care decisions on behalf of
11	the patient.
12	Section 135. Paragraph (b) of subsection (1) of
13	section 765.205, Florida Statutes, is amended to read:
14	765.205 Responsibility of the surrogate
15	(1) The surrogate, in accordance with the principal's
16	instructions, unless such authority has been expressly limited
17	by the principal, shall:
18	(b) Consult expeditiously with appropriate health care
19	providers to provide informed consent, and make only health
20	care decisions for the principal which he or she believes the
21	principal would have made under the circumstances if the
22	principal were capable of making such decisions. If there is
23	no indication of what the principal would have chosen, the
24	surrogate may consider the patient's best interest in deciding
25	that proposed treatments are to be withheld or that treatments
26	currently in effect are to be withdrawn.
27	Section 136. Subsections (2) and (3) of section
28	765.401, Florida Statutes, are amended to read:
29	765.401 The proxy
30	(2) Any health care decision made under this part must
31	be based on the proxy's informed consent and on the decision
	303
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

1	the proxy reasonably believes the patient would have made
2	under the circumstances. If there is no indication of what the
3	patient would have chosen, the proxy may consider the
4	patient's best interest in deciding that proposed treatments
5	are to be withheld or that treatments currently in effect are
6	to be withdrawn.
7	(3) Before exercising the incapacitated patient's
8	rights to select or decline health care, the proxy must comply
9	with the provisions of ss. 765.205 and 765.305, except that a
10	proxy's decision to withhold or withdraw life-prolonging
11	procedures must be supported by clear and convincing evidence
12	that the decision would have been the one the patient would
13	have chosen had the patient been competent or, if there is no
14	indication of what the patient would have chosen, that the
15	decision is in the patient's best interest.
16	Section 137. The Legislature finds that the area of
17	specialty training is of great importance to the citizens of
18	this state and that specialty training and certification
19	creates a higher level of proficiency for the practitioner and
20	improves the delivery of health care to Floridians. Because
21	much confusion exists among the patient population and
22	practitioners as to the requirements for board certification,
23	the Legislature directs the Department of Health to conduct a
24	study of the area of specialty certification relating to the
25	Board of Medicine, the Board of Osteopathic Medicine, and the
26	Board of Dentistry. The study should review current statutes
27	and rules to determine if any barriers exist in board
28	recognition of certifying organizations and if restrictions
29	placed on a licensee's speech both target an identifiable harm
30	and mitigate against such harm in a direct and effective
31	manner. A final report shall be provided no later than January
	304
	504

1, 2002, to the President of the Senate and the Speaker of the 1 2 House of Representatives for distribution to the chairs of the 3 health-care-related committees. 4 Section 138. Paragraph (d) of subsection (2) of 5 section 499.012, Florida Statutes, is amended to read: 6 499.012 Wholesale distribution; definitions; permits; 7 general requirements. --8 (2) The following types of wholesaler permits are 9 established: 10 (d) A retail pharmacy wholesaler's permit. A retail pharmacy wholesaler is a retail pharmacy engaged in wholesale 11 12 distribution of prescription drugs within this state under the following conditions: 13 14 1. The pharmacy must obtain a retail pharmacy wholesaler's permit pursuant to ss. 499.001-499.081 and the 15 16 rules adopted under those sections. 2. The wholesale distribution activity does not exceed 17 18 30 percent of the total annual purchases of prescription 19 drugs. If the wholesale distribution activity exceeds the 20 30-percent maximum, the pharmacy must obtain a prescription drug wholesaler's permit. 21 22 3. The transfer of prescription drugs that appear in 23 any schedule contained in chapter 893 is subject to chapter 893 and the federal Comprehensive Drug Abuse Prevention and 24 25 Control Act of 1970. 26 4. The transfer is between a retail pharmacy and 27 another retail pharmacy, a Modified Class II institutional pharmacy, or a health care practitioner licensed in this state 28 29 and authorized by law to dispense or prescribe prescription 30 drugs. 31 305 CODING: Words stricken are deletions; words underlined are additions.

1	5. All records of sales of prescription drugs subject
2	to this section must be maintained separate and distinct from
3	other records and comply with the recordkeeping requirements
4	of ss. 499.001-499.081.
5	Section 139. The Legislature finds that personal
6	identifying information, name, age, diagnosis, address, bank
7	account numbers, and debit and credit card numbers contained
8	in the records relating to an individual's personal health or
9	eligibility for health-related services made or received by
10	the individual's physician and public or private health
11	facility should be held confidential. Furthermore, the
12	Legislature finds that every person has an expectation of and
13	a right to privacy in all matters concerning her or his
14	personal health when medical services are provided. Matters of
15	personal health are traditionally private and confidential
16	concerns between the patient and the health care provider. The
17	private and confidential nature of personal health matters
18	pervades both the public and private sectors. For these
19	reasons, it is the express intent of the Legislature to
20	protect confidential information and the individual's
21	expectations of the right to privacy in all matters regarding
22	her or his personal health and not to have such information
23	exploited for purposes of solicitation or marketing the sale
24	of goods and services.
25	Section 140. Subsection (5) of section 456.057,
26	Florida Statutes, is amended to read:
27	456.057 Ownership and control of patient records;
28	report or copies of records to be furnished
29	(5) <u>(a)</u> Except as otherwise provided in this section
30	and in s. 440.13(4)(c), such records may not be furnished to,
31	and the medical condition of a patient may not be discussed
	306
COD	ING: Words stricken are deletions; words <u>underlined</u> are additions.

with, any person other than the patient or the patient's legal 1 representative or other health care practitioners and 2 3 providers involved in the care or treatment of the patient, 4 except upon written authorization of the patient. However, 5 such records may be furnished without written authorization under the following circumstances: б 7 1.(a) To any person, firm, or corporation that has 8 procured or furnished such examination or treatment with the 9 patient's consent. 10 2.(b) When compulsory physical examination is made pursuant to Rule 1.360, Florida Rules of Civil Procedure, in 11 12 which case copies of the medical records shall be furnished to both the defendant and the plaintiff. 13 14 3.(c) In any civil or criminal action, unless 15 otherwise prohibited by law, upon the issuance of a subpoena from a court of competent jurisdiction and proper notice to 16 17 the patient or the patient's legal representative by the party seeking such records. 18 19 4.(d) For statistical and scientific research, 20 provided the information is abstracted in such a way as to protect the identity of the patient or provided written 21 22 permission is received from the patient or the patient's legal 23 representative. 24 (b) Absent a specific written release or authorization permitting utilization of patient information for solicitation 25 26 or marketing the sale of goods or services, any use of that 27 information for those purposes is prohibited. Section 141. Subsection (7) of section 395.3025, 28 29 Florida Statutes is amended to read: 395.3025 Patient and personnel records; copies; 30 examination. --31 307 CODING: Words stricken are deletions; words underlined are additions.

1			
1	(7)(a) If the content of any record of patient		
2	treatment is provided under this section, the recipient, if		
3	other than the patient or the patient's representative, may		
4	use such information only for the purpose provided and may not		
5	further disclose any information to any other person or		
6	entity, unless expressly permitted by the written consent of		
7	the patient. A general authorization for the release of		
8	medical information is not sufficient for this purpose. The		
9	content of such patient treatment record is confidential and		
10	exempt from the provisions of s. 119.07(1) and s. 24(a), Art.		
11	I of the State Constitution.		
12	(b) Absent a specific written release or authorization		
13	permitting utilization of patient information for solicitation		
14	or marketing the sale of goods or services, any use of that		
15	information for those purposes is prohibited.		
16	Section 142. Subsection (1) of section 400.1415,		
17	Florida Statutes, is amended to read:		
18	400.1415 Patient records; penalties for alteration		
19	(1) Any person who fraudulently alters, defaces, or		
20	falsifies any medical record or releases medical records for		
21	the purposes of solicitation or marketing the sale of goods or		
22	services absent a specific written release or authorization		
23	permitting utilization of patient information, or other		
24	nursing home record, or causes or procures any of these		
25	offenses to be committed, commits a misdemeanor of the second		
26	degree, punishable as provided in s. 775.082 or s. 775.083.		
27	Section 143. Section 626.9651, Florida Statutes, is		
28	created to read:		
29	626.9651 PrivacyThe department shall adopt rules		
30	consistent with other provisions of the Florida Insurance Code		
31	to govern the use of a consumer's nonpublic personal financial		
	200		
	308		
COD	CODING: Words stricken are deletions; words <u>underlined</u> are additions.		

and health information. These rules must be based on, 1 2 consistent with, and not more restrictive than the Privacy of 3 Consumer Financial and Health Information Regulation, adopted 4 September 26, 2000, by the National Association of Insurance 5 Commissioners; however, the rules must permit the use and 6 disclosure of nonpublic personal health information for 7 scientific, medical, or public policy research, in accordance with federal law. In addition, these rules must be consistent 8 9 with, and not more restrictive than, the standards contained in Title V of the Gramm-Leach-Bliley Act of 1999, Pub. L. No. 10 106-102. If the department determines that a health insurer or 11 12 health maintenance organization is in compliance with, or is actively undertaking compliance with, the consumer privacy 13 14 protection rules adopted by the United States Department of Health and Human Services, in conformance with the Health 15 Insurance Portability and Affordability Act, that health 16 17 insurer or health maintenance organization is in compliance with this section. 18 19 Section 144. Effective upon becoming law, subsections 20 (14), (15), and (16) are added to section 400.141, Florida Statutes, to read: 21 400.141 Administration and management of nursing home 22 23 facilities.--Every licensed facility shall comply with all applicable standards and rules of the agency and shall: 24 (14) Before November 30 of each year, subject to the 25 26 availability of an adequate supply of the necessary vaccine, provide for immunizations against influenza viruses to all its 27 consenting residents in accordance with the recommendations of 28 29 the U.S. Centers for Disease Control and Prevention, subject to exemptions for medical contraindications and religious or 30 personal beliefs. Subject to these exemptions, any consenting 31 309

person who becomes a resident of the facility after November 1 2 30 but before March 31 of the following year must be immunized 3 within 5 working days after becoming a resident. Immunization 4 shall not be provided to any resident who provides 5 documentation that he or she has been immunized as required by 6 this subsection. This subsection does not prohibit a resident 7 from receiving the immunization from his or her personal 8 physician if he or she so chooses. A resident who chooses to 9 receive the immunization from his or her personal physician shall provide proof of immunization to the facility. The 10 agency may adopt and enforce any rules necessary to comply 11 12 with or implement this subsection. 13 (15) Assess all residents for eligibility for 14 pneumococcal polysaccharide vaccination (PPV) and vaccinate 15 residents when indicated within 60 days after the effective date of this act in accordance with the recommendations of the 16 17 U.S. Centers for Disease Control and Prevention, subject to exemptions for medical contraindications and religious or 18 19 personal beliefs. Residents admitted after the effective date 20 of this act shall be assessed within 5 working days of 21 admission and, when indicated, vaccinated within 60 days in accordance with the recommendations of the United States 22 23 Centers for Disease Control and Prevention, subject to exemptions for medical contradictions and religious or 24 personal beliefs. Immunization shall not be provided to any 25 26 resident who provides documentation that he or she has been immunized as required by this subsection. This subsection does 27 not prohibit a resident from receiving the immunization from 28 29 his or her personal physician if he or she so chooses. A resident who chooses to receive the immunization from his or 30 her personal physician shall provide proof of immunization to 31 310

the facility. The agency may adopt and enforce any rules 1 2 necessary to comply with or implement this subsection. (16) Annually encourage and promote to its employees 3 4 the benefits associated with immunizations against influenza 5 viruses in accordance with the recommendations of the U.S. 6 Centers for Disease Control and Prevention. The agency may 7 adopt and enforce any rules necessary to comply with or 8 implement this subsection. 9 Facilities that have been awarded a Gold Seal under the 10 program established in s. 400.235 may develop a plan to 11 12 provide certified nursing assistant training as prescribed by 13 federal regulations and state rules and may apply to the 14 agency for approval of its program. 15 Section 145. There is established the Office of 16 Community Partners within the Department of Health for the 17 purpose of receiving, coordinating, and dispensing federal funds set aside to expand the delivery of social services 18 19 through eligible private community organizations and programs. 20 The office shall provide policy direction and promote civic initiatives which seek to preserve and strengthen families and 21 communities. The Department of Health, the Department of 22 23 Children and Family Services, the Department of Juvenile Justice, and the Department of Corrections may request 24 transfer of general revenue funds between agencies, as 25 26 approved by the Legislative Budget Commission, as necessary to 27 match federal funds received by the Office of Community Partners for these initiatives. 28 29 Section 146. Section 458.3147, Florida Statutes, is 30 created to read: 31 311 CODING: Words stricken are deletions; words underlined are additions.

1	
1	458.3147 Medical school eligibility of military
2	academy students or graduates Any Florida resident who is a
3	student at or a graduate of any of the United States military
4	academies who has command approval to apply to medical school
5	prior to assignment to the medical corps of the United States
6	military shall be admitted to any medical school in the State
7	University System. Each medical school in the State University
8	System shall admit two such applicants each academic year.
9	Section 147. Section 409.91188, Florida Statutes, is
10	amended to read:
11	409.91188 Specialty prepaid health plans for Medicaid
12	recipients with HIV or AIDSThe Agency for Health Care
13	Administration is authorized to contract with specialty
14	prepaid health plans and pay them on a prepaid capitated basis
15	to provide Medicaid benefits to Medicaid-eligible recipients
16	who have human immunodeficiency syndrome (HIV) or acquired
17	immunodeficiency syndrome (AIDS). The agency shall apply for
18	and is authorized to implement federal waivers or other
19	necessary federal authorization to implement the prepaid
20	health plans authorized by this section. The agency shall
21	procure the specialty prepaid health plans through a
22	competitive procurement. In awarding a contract to a managed
23	care plan, the agency shall take into account price, quality,
24	accessibility, linkages to community-based organizations, and
25	the comprehensiveness of the benefit package offered by the
26	plan. The agency may bid the HIV/AIDS specialty plans on a
27	county, regional, or statewide basis. Qualified plans must be
28	licensed under chapter 641. The agency shall monitor and
29	evaluate the implementation of this waiver program if it is
30	approved by the Federal Government and shall report on its
31	status to the President of the Senate and the Speaker of the
	312

House of Representatives by February 1, 2001. To improve 1 2 coordination of medical care delivery and to increase 3 cost-efficiency for the Medicaid program in treating HIV 4 disease, the Agency for Healthcare Administration shall seek 5 all necessary federal waivers to allow participation in the 6 Medipass HIV disease management program for Medicare 7 beneficiaries who test positive for HIV infection and who also 8 qualify for Medicaid benefits such as prescription medications 9 not covered by Medicare. 10 Section 148. Effective June 1, 2001, subsection (1) of section 71 of chapter 98-171, Laws of Florida, is repealed. 11 12 Section 149. Effective July 1, 2001, and applicable to 13 births occurring on or after that date, subsection (2) of 14 section 766.302, Florida Statutes, is amended to read: 766.302 Definitions; ss. 766.301-766.316.--As used in 15 ss. 766.301-766.316, the term: 16 17 (2) "Birth-related neurological injury" means injury to the brain or spinal cord of a live infant weighing at least 18 19 2,500 grams for a single gestation or, in the case of a 20 multiple gestation, a live infant weighing at least 2,000 grams at birth caused by oxygen deprivation or mechanical 21 22 injury occurring in the course of labor, delivery, or 23 resuscitation in the immediate postdelivery period in a hospital, which renders the infant permanently and 24 substantially mentally and physically impaired. This 25 26 definition shall apply to live births only and shall not 27 include disability or death caused by genetic or congenital abnormality. 28 29 Section 150. Effective July 1, 2001, and applicable to births occurring on or after that date, paragraph (b) of 30 31 313 CODING: Words stricken are deletions; words underlined are additions.

subsection (1) of section 766.31, Florida Statutes, is amended 1 2 to read: 3 766.31 Administrative law judge awards for 4 birth-related neurological injuries; notice of award .--5 (1) Upon determining that an infant has sustained a 6 birth-related neurological injury and that obstetrical 7 services were delivered by a participating physician at the birth, the administrative law judge shall make an award 8 9 providing compensation for the following items relative to such injury: 10 11 (b)1. Periodic payments of an award to the parents or 12 legal guardians of the infant found to have sustained a 13 birth-related neurological injury, which award shall not 14 exceed \$100,000. However, at the discretion of the administrative law judge, such award may be made in a lump 15 16 sum. 17 2. Payment for funeral expenses not to exceed \$1,500. 18 Section 766.308, Florida Statutes, is Section 151. 19 repealed. 20 Section 152. Section 468.805, Florida Statutes, is 21 amended to read: 22 468.805 Grandfathering.--23 (1)(a) A person who has practiced orthotics, 24 prosthetics, or pedorthics in this state for the required period between since July 1, 1990, and March 1, 1998, who, 25 26 before March 1, 1998, applied applies to the department for a 27 license to practice orthotics, prosthetics, or pedorthics, and who received certification in orthotics, prosthetics, or 28 29 pedorthics from a national certifying body and had his or her application fully approved by the board before October 1, 30 2000, may be licensed as a prosthetist, an orthotist, a 31 314

prosthetist-orthotist, an orthotic fitter, an orthotic fitter 1 assistant, or a pedorthist, as applicable determined from the 2 3 person's experience, certification, and educational 4 preparation, without meeting the educational requirements set 5 forth in s. 468.803, upon receipt of the application fee and licensing fee and after the board has completed an 6 7 investigation into the applicant's background and experience. 8 The board shall require an application fee not to exceed \$500, 9 which shall be nonrefundable. The board shall complete its investigation within 6 months after receipt of the completed 10 application. 11 12 (b) The period of experience required for licensure under this subsection section is 5 years for a prosthetist or 13 14 an orthotist and +2 years for an orthotic fitter, an orthotic fitter assistant, or a pedorthist. Each applicant shall 15 document experience in the; and 5 years for an orthotist whose 16 17 scope of practice for the profession applied for as is defined under s. 468.80(7). 18 19 (2)(a) An applicant for licensure as an orthotist, a 20 prosthetist, or a prosthetist-orthotist who cannot demonstrate 21 5 years of experience as required by subsection (1), but who has practiced as an orthotist, a prosthetist, or a 22 23 prosthetist-orthotist in this state for at least 2 years between July 1, 1990, and March 1, 1998, and A person who has 24 25 received certification as an orthotist, a prosthetist, or a 26 prosthetist-orthotist from a national certifying body before July 1, 1998, and who has practiced orthotics or prosthetics 27 in this state for at least 2 years but less than 5 years is 28 29 eligible for a provisional license. (b) An applicant for provisional licensure shall 30 submit proof that he or she has been actively practicing as a 31 315

nationally certified orthotist, prosthetist, or 1 2 prosthetist-orthotist, an application fee, and a provisional 3 license fee. 4 (b)(c) A provisional licensee is required to practice 5 under supervision of a fully licensed orthotist, prosthetist, 6 or prosthetist-orthotist for up to 3 years in order to meet 7 the 5-year experience requirement of subsection (1) to be licensed as an orthotist, a prosthetist, or a 8 9 prosthetist-orthotist. The provisional licensee must 10 demonstrate that the supervised practice includes experience in the scope of practice of the profession as defined under s. 11 12 468.80. 13 (d) After appropriate investigation, the board shall 14 license as an orthotist, prosthetist, or prosthetist-orthotist 15 the provisional licensee who has successfully completed the 16 period of experience required and otherwise meets the 17 requirements of subsection (1). 18 (e) The board shall require an application fee, not to 19 exceed \$500, which is nonrefundable, and a provisional licensure fee, not to exceed \$500. 20 21 (3) Upon receipt of the nonrefundable application fee and the appropriate licensing fee, the board shall complete an 22 23 investigation into the applicant's background and experience. The board shall complete its investigation within 6 months 24 25 after receipt of the completed application. The 90-day period 26 for approval or denial of a license required under s. 120.60 does not apply to applications for licensure or provisional 27 licensure under this section. 28 29 (4) The board by rule shall establish the following 30 fees not to exceed \$500 each: 31 316

1	(a) Application fee for licensure under subsection									
2	(1).									
3	(b) Application fee for provisional licensure under									
4	subsection (2).									
5	(c) Application fee for licensure following									
6	provisional licensure under subsection (2).									
7	(d) Initial licensure fee.									
8	(e) Provisional licensure fee.									
9	(5) (3) An applicant who has received certification as									
10	an orthotist, a prosthetist, a prosthetist-orthotist, or a									
11	pedorthist from a national certifying body which requires the									
12	successful completion of an examination, may be licensed under									
13	this section without taking an additional examination. An									
14	applicant who has not received certification from a national									
15	certifying body which requires the successful completion of an									
16	examination shall be required to take an examination as									
17	determined by the board. This examination shall be designed to									
18	determine if the applicant has the minimum qualifications									
19	needed to be licensed under this section. The board may charge									
20	an examination fee and the actual per applicant cost to the									
21	department for purchase or development of the examination.									
22	(6) (4) An applicant who successfully completed prior									
23	to March 1, 1998, at least one-half of the examination									
24	required for national certification and successfully completed									
25	the remaining portion of the examination and became certified									
26	prior to <u>October 1, 2000</u> July 1, 1998 , shall be considered as									
27	nationally certified by March 1, 1998, for purposes of this									
28	section.									
29	(7)(5) This section is repealed July 1, 2002.									
30	Section 153. <u>Section 1 of chapter 99-158, Laws of</u>									
31	Florida, is repealed.									
	317									
	TNC.Words attriates are deletions, words underlined are additions									

1		Se	ection	154.	Except a	as of	therwis	e provided	herei	n, t	his
2	act	shall	l take	effect	July 1,	200	01.				
3											
4											
5											
6											
7											
8											
9											
10											
11											
12											
13											
14											
15											
16											
17											
18											
19											
20											
21											
22											
23											
24											
25											
26 27											
27 28											
20 29											
30											
31											
51											
						318					
COD	ING:W	lords	stric}	ken are	deletic	ons;	words	underlined	are a	ddit	ions.

Second Engrossed