

Bill No. HB 1925, 1st Eng.

Amendment No. \_\_\_\_ Barcode 935422

CHAMBER ACTION

Senate

House

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Senator Peaden moved the following amendment:

**Senate Amendment (with title amendment)**

Delete everything after the enacting clause

and insert:

Section 1. Present subsections (3) through (8) of section 20.43, Florida Statutes, are redesignated as subsections (4) through (9), respectively, and a new subsection (3) is added to that section, to read:

20.43 Department of Health.--There is created a Department of Health.

(3) There is established within the Department of Health the Office of Minority Health.

Section 2. Paragraph (e) of subsection (2) of section 381.7353, Florida Statutes, is amended to read:

381.7353 Reducing Racial and Ethnic Health Disparities: Closing the Gap grant program; administration; department duties.--

(2) The department shall:

(e) Coordinate with existing community-based programs,

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1 such as chronic disease community intervention programs,  
2 cancer prevention and control programs, diabetes control  
3 programs, oral health care programs, the Healthy Start  
4 program, the Florida KidCare Program, the HIV/AIDS program,  
5 immunization programs, and other related programs at the state  
6 and local levels, to avoid duplication of effort and promote  
7 consistency.

8 Section 3. Paragraph (a) of subsection (2) of section  
9 381.7355, Florida Statutes, is amended to read:

10 381.7355 Project requirements; review criteria.--

11 (2) A proposal must include each of the following  
12 elements:

13 (a) The purpose and objectives of the proposal,  
14 including identification of the particular racial or ethnic  
15 disparity the project will address. The proposal must address  
16 one or more of the following priority areas:

17 1. Decreasing racial and ethnic disparities in  
18 maternal and infant mortality rates.

19 2. Decreasing racial and ethnic disparities in  
20 morbidity and mortality rates relating to cancer.

21 3. Decreasing racial and ethnic disparities in  
22 morbidity and mortality rates relating to HIV/AIDS.

23 4. Decreasing racial and ethnic disparities in  
24 morbidity and mortality rates relating to cardiovascular  
25 disease.

26 5. Decreasing racial and ethnic disparities in  
27 morbidity and mortality rates relating to diabetes.

28 6. Increasing adult and child immunization rates in  
29 certain racial and ethnic populations.

30 7. Decreasing racial and ethnic disparities relating  
31 to oral health care.

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1 Section 4. Subsection (5) of section 393.064, Florida  
2 Statutes, is amended to read:

3 393.064 Prevention.--

4 (5) The Department of Health ~~Children and Family~~  
5 ~~Services~~ shall have the authority, within available resources,  
6 to contract for the supervision and management of the Raymond  
7 C. Philips Research and Education Unit, and such contract  
8 shall include specific program objectives.

9 Section 5. Subsection (10) of section 394.4615,  
10 Florida Statutes, is amended to read:

11 394.4615 Clinical records; confidentiality.--

12 (10) Patients shall have reasonable access to their  
13 clinical records, unless such access is determined by the  
14 patient's physician to be a danger to the patient's life or  
15 safety ~~harmful to the patient~~. If the patient's right to  
16 inspect his or her clinical record is restricted by the  
17 facility, written notice of such restriction shall be given to  
18 the patient and the patient's guardian, guardian advocate,  
19 attorney, and representative. In addition, the restriction  
20 shall be recorded in the clinical record, together with the  
21 reasons for it. The restriction of a patient's right to  
22 inspect his or her clinical record shall expire after 7 days  
23 but may be renewed, after review, for subsequent 7-day  
24 periods.

25 Section 6. Paragraphs (a) and (e) of subsection (4)  
26 and paragraph (b) of subsection (7) of section 395.3025,  
27 Florida Statutes, are amended, and a new paragraph (1) is  
28 added to subsection (4) of that section, to read:

29 395.3025 Patient and personnel records; copies;  
30 examination.--

31 (4) Patient records are confidential and must not be

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1 disclosed without the consent of the person to whom they  
 2 pertain, but appropriate disclosure may be made without such  
 3 consent to:

4 (a) ~~licensed~~ Facility personnel and all licensed  
 5 health care practitioners ~~attending physicians~~ for use in  
 6 connection with the treatment of the patient.

7 (e) The Department of Health ~~agency~~ upon subpoena  
 8 issued pursuant to s. 456.071, but the records obtained  
 9 thereby must be used solely for the purpose of the department  
 10 ~~agency~~ and the appropriate professional board in its  
 11 investigation, prosecution, and appeal of disciplinary  
 12 proceedings. The administrator or records custodian in a  
 13 facility licensed under this chapter shall certify that a true  
 14 and complete copy of the records requested pursuant to a  
 15 subpoena or patient release have been provided to the  
 16 department or otherwise identify those documents that have not  
 17 been provided. If the department ~~agency~~ requests copies of the  
 18 records, the facility shall charge no more than its actual  
 19 copying costs, including reasonable staff time. The records  
 20 must be sealed and must not be available to the public  
 21 pursuant to s. 119.07(1) or any other statute providing access  
 22 to records, nor may they be available to the public as part of  
 23 the record of investigation for and prosecution in  
 24 disciplinary proceedings made available to the public by the  
 25 department ~~agency~~ or the appropriate regulatory board.  
 26 However, the department ~~agency~~ must make available, upon  
 27 written request by a practitioner against whom probable cause  
 28 has been found, any such records that form the basis of the  
 29 determination of probable cause.

30 (1) Researchers or facility personnel for research  
 31 purposes, provided that the researchers or facility personnel

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1 demonstrate compliance with the requirements of 45 C.F.R. s.

2 164.512(i).

3 (7)

4 (b) Absent a specific written release or authorization

5 permitting utilization of patient information for ~~solicitation~~

6 ~~or~~ marketing the sale of goods or services, any use of such

7 ~~that~~ information for that purpose ~~those purposes~~ is

8 prohibited. For purposes of this paragraph, the term

9 "marketing" is defined as set forth in 45 C.F.R. s. 164.501.

10 Section 7. Paragraph (b) of subsection (2) of section

11 395.7015, Florida Statutes, is amended to read:

12 395.7015 Annual assessment on health care entities.--

13 (2) There is imposed an annual assessment against

14 certain health care entities as described in this section:

15 (b) For the purpose of this section, "health care

16 entities" include the following:

17 1. Ambulatory surgical centers and mobile surgical

18 facilities licensed under s. 395.003. This subsection shall

19 only apply to mobile surgical facilities operating under

20 contracts entered into on or after July 1, 1998.

21 2. Clinical laboratories licensed under s. 483.091,

22 excluding any hospital laboratory defined under s. 483.041(6),

23 any clinical laboratory operated by the state or a political

24 subdivision of the state, any clinical laboratory which

25 qualifies as an exempt organization under s. 501(c)(3) of the

26 Internal Revenue Code of 1986, as amended, and which receives

27 70 percent or more of its gross revenues from services to

28 charity patients or Medicaid patients, and any blood, plasma,

29 or tissue bank procuring, storing, or distributing blood,

30 plasma, or tissue either for future manufacture or research or

31 distributed on a nonprofit basis, and further excluding any

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1 clinical laboratory which is wholly owned and operated by 6 or  
2 fewer physicians who are licensed pursuant to chapter 458 or  
3 chapter 459 and who practice in the same group practice, and  
4 at which no clinical laboratory work is performed for patients  
5 referred by any health care provider who is not a member of  
6 the same group.

7           3. Diagnostic-imaging centers that are freestanding  
8 outpatient facilities that provide specialized services for  
9 the identification or determination of a disease through  
10 examination and also provide sophisticated radiological  
11 services, and in which services are rendered by a physician  
12 licensed by the Board of Medicine under s. 458.311, ~~s.~~  
13 ~~458.313~~, or s. 458.315 ~~458.317~~, or by an osteopathic physician  
14 licensed by the Board of Osteopathic Medicine under s.  
15 459.006, s. 459.007, or s. 459.0075. For purposes of this  
16 paragraph, "sophisticated radiological services" means the  
17 following: magnetic resonance imaging; nuclear medicine;  
18 angiography; arteriography; computed tomography; positron  
19 emission tomography; digital vascular imaging; bronchography;  
20 lymphangiography; splenography; ultrasound, excluding  
21 ultrasound providers that are part of a private physician's  
22 office practice or when ultrasound is provided by two or more  
23 physicians licensed under chapter 458 or chapter 459 who are  
24 members of the same professional association and who practice  
25 in the same medical specialties; and such other sophisticated  
26 radiological services, excluding mammography, as adopted in  
27 rule by the board.

28           Section 8. Subsection (10) of section 400.141, Florida  
29 Statutes, is amended to read:

30           400.141 Administration and management of nursing home  
31 facilities.--Every licensed facility shall comply with all

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1 applicable standards and rules of the agency and shall:

2           (10) Keep full records of resident admissions and  
3 discharges; medical and general health status, including  
4 medical records, personal and social history, and identity and  
5 address of next of kin or other persons who may have  
6 responsibility for the affairs of the residents; and  
7 individual resident care plans including, but not limited to,  
8 prescribed services, service frequency and duration, and  
9 service goals. The records shall be open to inspection by the  
10 agency. A certified complete copy of the records shall be  
11 provided to the Department of Health upon subpoena issued  
12 pursuant to ss. 456.057 and 456.071. The provisions of chapter  
13 456 apply to records obtained pursuant to this section.

14  
15 Facilities that have been awarded a Gold Seal under the  
16 program established in s. 400.235 may develop a plan to  
17 provide certified nursing assistant training as prescribed by  
18 federal regulations and state rules and may apply to the  
19 agency for approval of their program.

20           Section 9. Subsection (3) is added to section 400.145,  
21 Florida Statutes, to read:

22           400.145 Records of care and treatment of resident;  
23 copies to be furnished.--

24           (3) The administrator or records custodian in a  
25 facility licensed under this part shall certify that a true  
26 and complete copy of the records requested pursuant to a  
27 subpoena or patient release has been provided to the  
28 department or otherwise identify those documents that have not  
29 been provided.

30           Section 10. Subsection (4) of section 400.211, Florida  
31 Statutes, is amended to read:

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1           400.211 Persons employed as nursing assistants;  
2 certification requirement.--

3           (4) When employed by a nursing home facility for a  
4 12-month period or longer, a nursing assistant, to maintain  
5 certification, shall submit to a performance review every 12  
6 months and must receive regular inservice education based on  
7 the outcome of such reviews. The inservice training must:

8           (a) Be sufficient to ensure the continuing competence  
9 of nursing assistants, must be at least 12 ~~18~~ hours per year,  
10 and may include hours accrued under s. 464.203(7)(~~8~~);

11           (b) Include, at a minimum:

12           1. Techniques for assisting with eating and proper  
13 feeding;

14           2. Principles of adequate nutrition and hydration;

15           3. Techniques for assisting and responding to the  
16 cognitively impaired resident or the resident with difficult  
17 behaviors;

18           4. Techniques for caring for the resident at the  
19 end-of-life; and

20           5. Recognizing changes that place a resident at risk  
21 for pressure ulcers and falls; and

22           (c) Address areas of weakness as determined in nursing  
23 assistant performance reviews and may address the special  
24 needs of residents as determined by the nursing home facility  
25 staff.

26  
27 Costs associated with this training may not be reimbursed from  
28 additional Medicaid funding through interim rate adjustments.

29           Section 11. Section 400.455, Florida Statutes, is  
30 created to read:

31           400.455 Certified copy of subpoenaed records.--Upon a



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1 subpoena issued by the Department of Health pursuant to s.  
2 456.057 or s. 456.071, a certified complete copy of the  
3 requested records shall be provided. The provisions of chapter  
4 456 apply to the records obtained pursuant to this section.

5 Section 12. Subsection (7) is added to section  
6 456.017, Florida Statutes, to read:

7 456.017 Examinations.--

8 (7) The department may post examination scores  
9 electronically on the Internet in lieu of mailing the scores  
10 to each applicant. Such electronic posting of the examination  
11 scores shall meet the requirements of chapter 120 if the  
12 department also posts with the examination scores a  
13 notification of rights, as set forth in chapter 120. The date  
14 of receipt for purposes of the requirements of chapter 120  
15 shall be the date the examination scores are posted  
16 electronically. The department shall also notify the examinee  
17 when scores are posted electronically of the availability of a  
18 post-examination review, if applicable.

19 Section 13. Paragraph (b) of subsection (1) of section  
20 456.0375, Florida Statutes, is amended to read:

21 456.0375 Registration of certain clinics;  
22 requirements; discipline; exemptions.--

23 (1)

24 (b) For purposes of this section, the term "clinic"  
25 does not include and the registration requirements herein do  
26 not apply to:

27 1. Entities licensed or registered by the state  
28 pursuant to chapter 390, chapter 394, chapter 395, chapter  
29 397, chapter 400, chapter 463, chapter 465, chapter 466,  
30 chapter 478, chapter 480, or chapter 484.

31 2. Preferred provider organizations under s. 627.6471,

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1 exclusive provider organizations under s. 627.6472, and  
2 independent provider organizations.

3 ~~3.2.~~ Entities exempt from federal taxation under 26  
4 U.S.C. s. 501(c)(3) and community college and university  
5 clinics.

6 ~~4.3.~~ Sole proprietorships, group practices,  
7 partnerships, or corporations that provide health care  
8 services by licensed health care practitioners pursuant to  
9 chapters 457, 458, 459, 460, 461, 462, 463, 466, 467, 484,  
10 486, 490, 491, or part I, part III, part X, part XIII, or part  
11 XIV of chapter 468, or s. 464.012, which are wholly owned by  
12 licensed health care practitioners or the licensed health care  
13 practitioner and the spouse, parent, or child of a licensed  
14 health care practitioner, so long as one of the owners who is  
15 a licensed health care practitioner is supervising the  
16 administrative services performed therein and is legally  
17 responsible for the entity's compliance with all federal and  
18 state laws. However, no health care practitioner may supervise  
19 the health care delivery services beyond the scope of the  
20 practitioner's license. Supervision of the administrative  
21 services for compliance with federal and state laws is  
22 different and distinct from supervision of the delivery of  
23 health care services. Health care delivery is the sole  
24 responsibility of the health care practitioner delivering  
25 health care services.

26 5. Clinical facilities affiliated with an accredited  
27 medical school at which training is provided for medical  
28 students, residents, or fellows.

29 6. Entities that own, directly or indirectly, entities  
30 licensed or registered by the state pursuant to chapter 390,  
31 chapter 394, chapter 395, chapter 397, chapter 400, chapter

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1 463, chapter 465, chapter 466, chapter 478, chapter 480, or  
2 chapter 484.

3 7. Entities that are owned, directly or indirectly, by  
4 an entity licensed or registered by the state pursuant to  
5 chapter 390, chapter 394, chapter 395, chapter 397, chapter  
6 400, chapter 463, chapter 465, chapter 466, chapter 478,  
7 chapter 480, or chapter 484.

8 8. Entities that are under common ownership, directly  
9 or indirectly, with an entity licensed or registered by the  
10 state pursuant to chapter 390, chapter 394, chapter 395,  
11 chapter 397, chapter 400, chapter 463, chapter 465, chapter  
12 466, chapter 478, chapter 480, or chapter 484.

13 9. Clinical facilities affiliated with an accredited  
14 medical school at which training is provided for medical  
15 students, residents, or fellows.

16 Section 14. The amendment made by this act to section  
17 456.0375(1)(b)6.-9., Florida Statutes, is intended to clarify  
18 the legislative intent of that paragraph as it existed at the  
19 time the paragraph initially took effect. Accordingly, section  
20 456.0375(1)(b)6.-9., Florida Statutes, as amended by this act  
21 shall operate retroactively to October 1, 2001.

22 Section 15. Paragraph (a) of subsection (4) of section  
23 456.039, Florida Statutes, is amended to read:

24 456.039 Designated health care professionals;  
25 information required for licensure.--

26 (4)(a) An applicant for initial licensure must submit  
27 a set of fingerprints to the Department of Health in  
28 accordance with s. 458.311, s. 458.3115, s. 458.3124, ~~s.~~  
29 ~~458.313~~, s. 459.0055, s. 460.406, or s. 461.006.

30 Section 16. Subsection (4) of section 456.041, Florida  
31 Statutes, is amended to read:

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1           456.041 Practitioner profile; creation.--  
 2           (4) The Department of Health shall include, with  
 3 respect to a practitioner licensed under chapter 458 or  
 4 chapter 459, a statement of how the practitioner has elected  
 5 to comply with the financial responsibility requirements of s.  
 6 458.320 or s. 459.0085. The department shall include, with  
 7 respect to practitioners subject to s. 456.048, a statement of  
 8 how the practitioner has elected to comply with the financial  
 9 responsibility requirements of that section. The department  
 10 shall include, with respect to practitioners licensed under  
 11 chapter 458, chapter 459, or chapter 461, information relating  
 12 to liability actions which has been reported under s. 456.049  
 13 or s. 627.912 within the previous 10 years for any paid claim  
 14 of \$50,000 or more ~~that exceeds \$5,000~~. Such claims  
 15 information shall be reported in the context of comparing an  
 16 individual practitioner's claims to the experience of other  
 17 practitioners within the same specialty, or profession if the  
 18 practitioner is not a specialist, to the extent such  
 19 information is available to the Department of Health. If  
 20 information relating to a liability action is included in a  
 21 practitioner's practitioner profile, the profile must also  
 22 include the following statement: "Settlement of a claim may  
 23 occur for a variety of reasons that do not necessarily reflect  
 24 negatively on the professional competence or conduct of the  
 25 practitioner. A payment in settlement of a medical  
 26 malpractice action or claim should not be construed as  
 27 creating a presumption that medical malpractice has occurred."  
 28           Section 17. Subsection (1) of section 456.049, Florida  
 29 Statutes, is amended to read:  
 30           456.049 Health care practitioners; reports on  
 31 professional liability claims and actions.--

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1           (1) Any practitioner of medicine licensed pursuant to  
2 the provisions of chapter 458, practitioner of osteopathic  
3 medicine licensed pursuant to the provisions of chapter 459,  
4 podiatric physician licensed pursuant to the provisions of  
5 chapter 461, or dentist licensed pursuant to the provisions of  
6 chapter 466 shall report to the department any claim or action  
7 for damages for personal injury alleged to have been caused by  
8 error, omission, or negligence in the performance of such  
9 licensee's professional services or based on a claimed  
10 performance of professional services without consent if the  
11 claim was not covered by an insurer required to report under  
12 s. 627.912 and the claim resulted in:

13           (a) A final judgment of \$50,000 or more or, for a  
14 dentist licensed under chapter 466, a final judgment of  
15 \$25,000 or more in any amount.

16           (b) A settlement of \$50,000 or more or, for a dentist  
17 licensed under chapter 466, a settlement of \$25,000 or more in  
18 any amount.

19           (c) A final disposition not resulting in payment on  
20 behalf of the licensee.

21  
22 Reports shall be filed with the department no later than 60  
23 days following the occurrence of any event listed in paragraph  
24 (a), paragraph (b), or paragraph (c).

25           Section 18. Paragraph (a) of subsection (7) and  
26 subsection (16) of section 456.057, Florida Statutes, are  
27 amended to read:

28           456.057 Ownership and control of patient records;  
29 report or copies of records to be furnished.--

30           (7)(a)1. The department may obtain patient records  
31 pursuant to a subpoena without written authorization from the

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1 patient if the department and the probable cause panel of the  
2 appropriate board, if any, find reasonable cause to believe  
3 that a health care practitioner has excessively or  
4 inappropriately prescribed any controlled substance specified  
5 in chapter 893 in violation of this chapter or any  
6 professional practice act or that a health care practitioner  
7 has practiced his or her profession below that level of care,  
8 skill, and treatment required as defined by this chapter or  
9 any professional practice act and also find that appropriate,  
10 reasonable attempts were made to obtain a patient release.  
11 However, if the matter under investigation was reported to the  
12 department as a professional liability claim or action  
13 pursuant to s. 456.049 or s. 627.912, an attempt to obtain a  
14 patient release is not required.

15           2. The department may obtain patient records and  
16 insurance information pursuant to a subpoena without written  
17 authorization from the patient if the department and the  
18 probable cause panel of the appropriate board, if any, find  
19 reasonable cause to believe that a health care practitioner  
20 has provided inadequate medical care based on termination of  
21 insurance and also find that appropriate, reasonable attempts  
22 were made to obtain a patient release.

23           3. The department may obtain patient records, billing  
24 records, insurance information, provider contracts, and all  
25 attachments thereto pursuant to a subpoena without written  
26 authorization from the patient if the department and probable  
27 cause panel of the appropriate board, if any, find reasonable  
28 cause to believe that a health care practitioner has submitted  
29 a claim, statement, or bill using a billing code that would  
30 result in payment greater in amount than would be paid using a  
31 billing code that accurately describes the services performed,

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1 requested payment for services that were not performed by that  
2 health care practitioner, used information derived from a  
3 written report of an automobile accident generated pursuant to  
4 chapter 316 to solicit or obtain patients personally or  
5 through an agent regardless of whether the information is  
6 derived directly from the report or a summary of that report  
7 or from another person, solicited patients fraudulently,  
8 received a kickback as defined in s. 456.054, violated the  
9 patient brokering provisions of s. 817.505, or presented or  
10 caused to be presented a false or fraudulent insurance claim  
11 within the meaning of s. 817.234(1)(a), and also find that,  
12 within the meaning of s. 817.234(1)(a), patient authorization  
13 cannot be obtained because the patient cannot be located or is  
14 deceased, incapacitated, or suspected of being a participant  
15 in the fraud or scheme, and if the subpoena is issued for  
16 specific and relevant records.

17 4. For purposes of this subsection, the department may  
18 obtain patient records pursuant to a subpoena without written  
19 authorization from the patient if the patient refuses to  
20 cooperate or if, in the department's discretion, an attempt to  
21 obtain a patient release would be detrimental to the  
22 investigation.

23 (16) A health care practitioner or records owner  
24 furnishing copies of reports or records or making the reports  
25 or records available for digital scanning pursuant to this  
26 section shall charge no more than the actual cost of copying,  
27 including reasonable staff time, or the amount specified in  
28 administrative rule by the appropriate board, or the  
29 department when there is no board. The health care  
30 practitioner or owner of the records shall certify that a true  
31 and complete copy of the records requested pursuant to a

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1 subpoena or patient release has been provided to the  
2 department or otherwise identify those documents that have not  
3 been provided.

4 Section 19. Subsection (3) of section 456.063, Florida  
5 Statutes, is amended to read:

6 456.063 Sexual misconduct; disqualification for  
7 license, certificate, or registration.--

8 (3) Licensed health care practitioners shall report  
9 allegations of sexual misconduct to the department, regardless  
10 of the practice setting in which the alleged sexual misconduct  
11 occurred. Each board, or the department if there is no board,  
12 may adopt rules to administer the requirements for reporting  
13 allegations of sexual misconduct, including rules to determine  
14 the sufficiency of the allegations.

15 Section 20. Paragraphs (d), (aa), and (bb) of  
16 subsection (1) and subsection (4) of section 456.072, Florida  
17 Statutes, are amended, paragraph (dd) is added to subsection  
18 (1), and subsection (7) is added to that section, to read:

19 456.072 Grounds for discipline; penalties;  
20 enforcement.--

21 (1) The following acts shall constitute grounds for  
22 which the disciplinary actions specified in subsection (2) may  
23 be taken:

24 (d) Using a Class III or a Class IV laser device or  
25 product, as defined by federal regulations, without having  
26 complied with the rules adopted pursuant to s. 404.24(2)  
27 ~~501.122(2)~~ governing the registration of such devices.

28 (aa) Performing or attempting to perform health care  
29 services on the wrong patient, a wrong-site procedure, a wrong  
30 procedure, or an unauthorized procedure or a procedure that is  
31 medically unnecessary or otherwise unrelated to the patient's



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1 diagnosis or medical condition. For the purposes of this  
2 paragraph, performing or attempting to perform health care  
3 services includes invasive actions taken in furtherance of the  
4 preparation of the patient, but does not include those  
5 preparations that are noninvasive.

6 (bb) Leaving a foreign body in a patient, such as a  
7 sponge, clamp, forceps, surgical needle, or other  
8 paraphernalia commonly used in surgical, examination, or other  
9 diagnostic procedures, unless leaving the foreign body is  
10 medically indicated and documented in the patient record. For  
11 the purposes of this paragraph, it shall be legally presumed  
12 that retention of a foreign body is not in the best interest  
13 of the patient and is not within the standard of care of the  
14 profession, unless medically indicated and documented in the  
15 patient record regardless of the intent of the professional.

16 (dd) Being terminated from an impaired practitioner  
17 program that is overseen by an impaired practitioner  
18 consultant as described in s. 456.076 for failure to comply  
19 with the terms of the monitoring or treatment contract entered  
20 into by the licensee without good cause.

21 (4) In any addition to any other discipline imposed  
22 through final order, or citation, entered on or after July 1,  
23 2001, that imposes a penalty or other form of discipline  
24 pursuant to this section or discipline imposed through final  
25 order, or citation, entered on or after July 1, 2001, for a  
26 violation of any practice act, the board, or the department  
27 when there is no board, shall assess costs related to the  
28 investigation and prosecution of the case, including costs  
29 associated with an attorney's time. The amount of costs to be  
30 assessed shall be determined by the board, or the department  
31 when there is no board, following its consideration of an

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1 affidavit of itemized costs and any written objections  
 2 thereto. In any case where ~~the board or the department imposes~~  
 3 a fine or assessment of costs imposed by the board or  
 4 department and ~~the fine or assessment~~ is not paid within a  
 5 reasonable time, such reasonable time to be prescribed in the  
 6 rules of the board, or the department when there is no board,  
 7 or in the order assessing such fines or costs, the department  
 8 or the Department of Legal Affairs may contract for the  
 9 collection of, or bring a civil action to recover, the fine or  
 10 assessment.

11 (7) In any formal administrative hearing conducted  
 12 under s. 120.57(1), the department shall establish grounds for  
 13 revocation or suspension of a license by clear and convincing  
 14 evidence. Any other forms of discipline shall be established  
 15 by the greater weight of the evidence.

16 Section 21. Subsections (1) and (5) of section  
 17 456.073, Florida Statutes, are amended to read:

18 456.073 Disciplinary proceedings.--Disciplinary  
 19 proceedings for each board shall be within the jurisdiction of  
 20 the department.

21 (1) The department, for the boards under its  
 22 jurisdiction, shall cause to be investigated any complaint  
 23 that is filed before it if the complaint is in writing, signed  
 24 by the complainant, and legally sufficient. A complaint is  
 25 legally sufficient if it contains ultimate facts that show  
 26 that a violation of this chapter, of any of the practice acts  
 27 relating to the professions regulated by the department, or of  
 28 any rule adopted by the department or a regulatory board in  
 29 the department has occurred. In order to determine legal  
 30 sufficiency, the department may require supporting information  
 31 or documentation. The department may investigate, and the

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1 department or the appropriate board may take appropriate final  
2 action on, a complaint even though the original complainant  
3 withdraws it or otherwise indicates a desire not to cause the  
4 complaint to be investigated or prosecuted to completion. The  
5 department may investigate an anonymous complaint if the  
6 complaint is in writing and is legally sufficient, if the  
7 alleged violation of law or rules is substantial, and if the  
8 department has reason to believe, after preliminary inquiry,  
9 that the violations alleged in the complaint are true. The  
10 department may investigate a complaint made by a confidential  
11 informant if the complaint is legally sufficient, if the  
12 alleged violation of law or rule is substantial, and if the  
13 department has reason to believe, after preliminary inquiry,  
14 that the allegations of the complainant are true. The  
15 department may initiate an investigation if it has reasonable  
16 cause to believe that a licensee or a group of licensees has  
17 violated a Florida statute, a rule of the department, or a  
18 rule of a board. ~~Except as provided in ss. 458.331(9),~~  
19 ~~459.015(9), 460.413(5), and 461.013(6),~~ When an investigation  
20 of any subject is undertaken, the department shall promptly  
21 furnish to the subject or the subject's attorney a copy of the  
22 complaint or document that resulted in the initiation of the  
23 investigation. The subject may submit a written response to  
24 the information contained in such complaint or document within  
25 30 ~~20~~ days after service to the subject of the complaint or  
26 document. The subject's written response shall be considered  
27 by the probable cause panel. The right to respond does not  
28 prohibit the issuance of a summary emergency order if  
29 necessary to protect the public. However, if the secretary, or  
30 the secretary's designee, and the chair of the respective  
31 board or the chair of its probable cause panel agree in

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1 writing that such notification would be detrimental to the  
2 investigation, the department may withhold notification. The  
3 department may conduct an investigation without notification  
4 to any subject if the act under investigation is a criminal  
5 offense.

6 (5)(a) A formal hearing before an administrative law  
7 judge from the Division of Administrative Hearings shall be  
8 requested held pursuant to chapter 120 if there are any  
9 disputed issues of material fact raised within 45 days after  
10 service of the administrative complaint. The administrative  
11 law judge shall issue a recommended order pursuant to chapter  
12 120. If any party raises an issue of disputed fact during an  
13 informal hearing, the hearing shall be terminated and a formal  
14 hearing pursuant to chapter 120 shall be held.

15 (b) Notwithstanding s. 120.569(2), the department  
16 shall notify the division within 45 days after receipt of a  
17 petition or request for a hearing which the department has  
18 determined requires a formal hearing before an administrative  
19 law judge.

20 Section 22. Section 456.077, Florida Statutes, is  
21 amended to read:

22 456.077 Authority to issue citations.--

23 (1) Notwithstanding s. 456.073, the board, or the  
24 department if there is no board, shall adopt rules to permit  
25 the issuance of citations. The citation shall be issued to the  
26 subject and shall contain the subject's name and address, the  
27 subject's license number if applicable, a brief factual  
28 statement, the sections of the law allegedly violated, and the  
29 penalty imposed. The citation must clearly state that the  
30 subject may choose, in lieu of accepting the citation, to  
31 follow the procedure under s. 456.073. If the subject disputes

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1 the matter in the citation, the procedures set forth in s.  
2 456.073 must be followed. However, if the subject does not  
3 dispute the matter in the citation with the department within  
4 30 days after the citation is served, the citation becomes a  
5 public final order and does not constitute ~~constitutes~~  
6 discipline for a first offense. The penalty shall be a fine or  
7 other conditions as established by rule.

8 (2) The board, or the department if there is no board,  
9 shall adopt rules designating violations for which a citation  
10 may be issued. Such rules shall designate as citation  
11 violations those violations for which there is no substantial  
12 threat to the public health, safety, and welfare. Violations  
13 for which a citation may be issued shall include violations of  
14 continuing education requirements; failure to timely pay  
15 required fees and fines; failure to comply with the  
16 requirements of ss. 381.026 and 381.0261 regarding the  
17 dissemination of information regarding patient rights; failure  
18 to comply with advertising requirements; failure to timely  
19 update practitioner profile and credentialing files; failure  
20 to display signs, licenses, and permits; failure to have  
21 required reference books available; and all other violations  
22 that do not pose a direct and serious threat to the health and  
23 safety of the patient.

24 (3) The department shall be entitled to recover the  
25 costs of investigation, in addition to any penalty provided  
26 according to board or department rule, as part of the penalty  
27 levied pursuant to the citation.

28 ~~(4) A citation must be issued within 6 months after~~  
29 ~~the filing of the complaint that is the basis for the~~  
30 ~~citation.~~

31 ~~(4)(5)~~ Service of a citation may be made by personal

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1 service or certified mail, restricted delivery, to the subject  
 2 at the subject's last known address.

3 ~~(5)(6)~~ A board has 6 months in which to enact rules  
 4 designating violations and penalties appropriate for citation  
 5 offenses. Failure to enact such rules gives the department  
 6 exclusive authority to adopt rules as required for  
 7 implementing this section. A board has continuous authority to  
 8 amend its rules adopted pursuant to this section.

9 Section 23. Section 456.078, Florida Statutes, is  
 10 amended to read:

11 456.078 Mediation.--

12 (1) Notwithstanding the provisions of s. 456.073, the  
 13 board, or the department when there is no board, shall adopt  
 14 rules to designate which violations of the applicable  
 15 professional practice act are appropriate for mediation. The  
 16 board, or the department when there is no board, ~~shall~~ may  
 17 designate as mediation offenses those complaints where harm  
 18 caused by the licensee is economic in nature, except  
 19 complaints involving fraud, or can be remedied by the  
 20 licensee, or does not result in an adverse incident. For the  
 21 purposes of this section, an adverse incident is defined as an  
 22 event that results in:

23 (a) The death of a patient;

24 (b) Brain or spinal damage to a patient;

25 (c) The performance of a surgical procedure on the  
 26 wrong patient;

27 (d) The performance of a wrong-site surgical  
 28 procedure;

29 (e) The performance of a wrong surgical procedure;

30 (f) The performance of a surgical procedure that is  
 31 medically unnecessary or otherwise unrelated to the patient's

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1 diagnosis or medical condition;

2       (g) The surgical repair of damage resulting to a  
3 patient from a planned surgical procedure, where the damage is  
4 not a recognized specific risk, as disclosed to the patient  
5 and documented through the informed-consent process; or

6       (h) The performance of procedures to remove unplanned  
7 foreign objects remaining from a surgical procedure.

8       (2) After the department determines a complaint is  
9 legally sufficient and the alleged violations are defined as  
10 mediation offenses, the department or any agent of the  
11 department may conduct informal mediation to resolve the  
12 complaint. If the complainant and the subject of the complaint  
13 agree to a resolution of a complaint within 14 days after  
14 contact by the mediator, the mediator shall notify the  
15 department of the terms of the resolution. The department or  
16 board shall take no further action unless the complainant and  
17 the subject each fail to record with the department an  
18 acknowledgment of satisfaction of the terms of mediation  
19 within 60 days of the mediator's notification to the  
20 department. A successful mediation shall include a statement  
21 of whether or not the resolution constitutes discipline.

22 However, in the event the complainant and subject fail to  
23 reach settlement terms or to record the required  
24 acknowledgment, the department shall process the complaint  
25 according to the provisions of s. 456.073.

26       (3) Conduct or statements made during mediation are  
27 inadmissible in any proceeding pursuant to s. 456.073.  
28 Further, any information relating to the mediation of a case  
29 shall be subject to the confidentiality provisions of s.  
30 456.073.

31       (4) Any licensee who completes a successful mediation

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1 shall pay the department's administrative costs for the  
 2 mediation. No licensee shall go through the mediation process  
 3 more than once if the allegation relates to the breach of the  
 4 standard of care for that health care professional. In any  
 5 event, no licensee shall go through the mediation process more  
 6 than three times without approval of the department. The  
 7 department may consider the subject and dates of the earlier  
 8 complaints in rendering its decision. Such decision shall not  
 9 be considered a final agency action for purposes of chapter  
 10 120.

11 (5) A board has 6 months in which to adopt rules  
 12 designating violations appropriate for mediation. Failure to  
 13 adopt such rules gives the department exclusive authority to  
 14 adopt rules as required for implementing this section ~~Any~~  
 15 ~~board created on or after January 1, 1995, shall have 6 months~~  
 16 ~~to adopt rules designating which violations are appropriate~~  
 17 ~~for mediation, after which time the department shall have~~  
 18 ~~exclusive authority to adopt rules pursuant to this section.~~ A  
 19 board shall have continuing authority to amend its rules  
 20 adopted pursuant to this section.

21 Section 24. Section 458.303, Florida Statutes, is  
 22 amended to read:

23 458.303 Provisions not applicable to other  
 24 practitioners; exceptions, etc.--

25 (1) The provisions of ss. 458.301, 458.303, 458.305,  
 26 458.307, 458.309, 458.311, ~~458.313,~~ 458.315, ~~458.317,~~ 458.319,  
 27 458.321, 458.327, 458.329, 458.331, 458.337, 458.339, 458.341,  
 28 458.343, 458.345, and 458.347 shall have no application to:

29 (a) Other duly licensed health care practitioners  
 30 acting within their scope of practice authorized by statute.

31 (b) Any physician lawfully licensed in another state



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1 or territory or foreign country, when meeting duly licensed  
 2 physicians of this state in consultation.

3 (c) Commissioned medical officers of the Armed Forces  
 4 of the United States and of the Public Health Service of the  
 5 United States while on active duty and while acting within the  
 6 scope of their military or public health responsibilities.

7 (d) Any person while actually serving without salary  
 8 or professional fees on the resident medical staff of a  
 9 hospital in this state, subject to the provisions of s.  
 10 458.321.

11 (e) Any person furnishing medical assistance in case  
 12 of an emergency.

13 (f) The domestic administration of recognized family  
 14 remedies.

15 (g) The practice of the religious tenets of any church  
 16 in this state.

17 (h) Any person or manufacturer who, without the use of  
 18 drugs or medicine, mechanically fits or sells lenses,  
 19 artificial eyes or limbs, or other apparatus or appliances or  
 20 is engaged in the mechanical examination of eyes for the  
 21 purpose of constructing or adjusting spectacles, eyeglasses,  
 22 or lenses.

23 (2) Nothing in s. 458.301, s. 458.303, s. 458.305, s.  
 24 458.307, s. 458.309, s. 458.311, ~~s. 458.313~~, s. 458.319, s.  
 25 458.321, s. 458.327, s. 458.329, s. 458.331, s. 458.337, s.  
 26 458.339, s. 458.341, s. 458.343, s. 458.345, or s. 458.347  
 27 shall be construed to prohibit any service rendered by a  
 28 registered nurse or a licensed practical nurse, if such  
 29 service is rendered under the direct supervision and control  
 30 of a licensed physician who provides specific direction for  
 31 any service to be performed and gives final approval to all

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1 services performed. Further, nothing in this or any other  
2 chapter shall be construed to prohibit any service rendered by  
3 a medical assistant in accordance with the provisions of s.  
4 458.3485.

5 Section 25. Section 458.311, Florida Statutes, is  
6 amended to read:

7 (Substantial rewording of section. See  
8 s. 458.311, F.S., for present text.)

9 458.311 Licensure; requirements; fees.--

10 (1) Any person desiring to be licensed as a physician  
11 shall apply to the department on forms furnished by the  
12 department. The department shall license each applicant who  
13 the board certifies has met the provisions of this section.

14 (2) Each applicant must demonstrate compliance with  
15 the following:

16 (a) Has completed the application form and remitted a  
17 nonrefundable application fee not to exceed \$500.

18 (b) Is at least 21 years of age.

19 (c) Is of good moral character.

20 (d) Has not committed any act or offense in this or  
21 any other jurisdiction which would constitute the basis for  
22 disciplining a physician pursuant to s. 458.331.

23 (e) Has submitted to the department a set of  
24 fingerprints on a form and under procedures specified by the  
25 department, along with a payment in an amount equal to the  
26 costs incurred by the department for the criminal history  
27 check of the applicant.

28 (f) Has caused to be submitted to the department core  
29 credentials verified by the Federation Credentials  
30 Verification Service of the Federation of State Medical  
31 Boards.

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1       (q) For an applicant holding a valid active license in  
2 another state, has submitted evidence of the active licensed  
3 practice of medicine in another jurisdiction for at least 2 of  
4 the immediately preceding 4 years or evidence of successful  
5 completion of either a board-approved postgraduate training  
6 program within 2 years preceding filing of an application or a  
7 board-approved clinical competency examination within the year  
8 preceding the filing of an application for licensure. For  
9 purposes of this paragraph, the term "active licensed practice  
10 of medicine" means that practice of medicine by physicians,  
11 including those employed by any governmental entity in  
12 community or public health, as defined by this chapter, those  
13 designated as medical directors under s. 641.495(11) who are  
14 practicing medicine, and those on the active teaching faculty  
15 of an accredited medical school. If the applicant fails to  
16 meet the requirements of this paragraph, the board may impose  
17 conditions on the license, including, but not limited to,  
18 supervision of practice.

19       (3) Each applicant must demonstrate that he or she has  
20 complied with one of the following:

21       (a) Is a graduate of an allopathic medical school or  
22 allopathic college recognized and approved by an accrediting  
23 agency recognized by the United States Department of Education  
24 or is a graduate of an allopathic medical school or allopathic  
25 college within a territorial jurisdiction of the United States  
26 recognized by the accrediting agency of the governmental body  
27 of that jurisdiction; or

28       (b) Is a graduate of an allopathic international  
29 medical school registered with the World Health Organization  
30 and has had his or her medical credentials evaluated by the  
31 Educational Commission for Foreign Medical Graduates, holds an

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1 active, valid certificate issued by that commission, and has  
2 passed the examination utilized by that commission. However, a  
3 graduate of an international medical school need not present  
4 the certificate issued by the Educational Commission for  
5 Foreign Medical Graduates or pass the examination utilized by  
6 that commission if the graduate has:

7       1. Received a bachelor's degree from an accredited  
8 United States college or university.

9       2. Studied at a medical school which is recognized by  
10 the World Health Organization.

11       3. Completed all of the formal requirements of the  
12 international medical school, except the internship or social  
13 service requirements, and passed part I of the National Board  
14 of Medical Examiners examination or the Educational Commission  
15 for Foreign Medical Graduates examination equivalent.

16       4. Completed an academic year of supervised clinical  
17 training in a hospital affiliated with a medical school  
18 approved by the Council on Medical Education of the American  
19 Medical Association and, upon completion, passed part II of  
20 the National Board of Medical Examiners examination or the  
21 Educational Commission for Foreign Medical Graduates  
22 examination equivalent.

23       (4) Each applicant must demonstrate that he or she has  
24 completed an Accreditation Council for Graduate Medical  
25 Education (ACGME) approved residency, as defined by board  
26 rule, of at least 2 years, or a fellowship of at least 2 years  
27 in one specialty area which is counted toward regular or  
28 subspecialty certification by a board recognized and certified  
29 by the American Board of Medical Specialties. However,  
30 applicants who meet the requirements of paragraph (3)(a) who  
31 completed their training prior to October 1, 2003, must

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1 demonstrate completion of at least 1 year of an approved  
2 residency.

3 (5)(a) Each applicant must demonstrate that he or she  
4 has complied with one of the following examination  
5 requirements:

6 1. Prior to January 1, 2000, has obtained a passing  
7 score, as established by rule of the board, on the licensure  
8 examination of the National Board of Medical Examiners (NBME),  
9 the licensure examination of the Federation of State Medical  
10 Boards of the United States, Inc. (FLEX), the United States  
11 Medical Licensing Examination (USMLE), or a combination  
12 thereof;

13 2. On or after January 1, 2000, has obtained a passing  
14 score on all three steps of the United States Medical  
15 Licensing Examination (USMLE); or

16 3. Has obtained a passing score on a state board  
17 examination or the Canadian licensing examination (LLMCC) if  
18 the applicant has a current active license in at least one  
19 other jurisdiction of the United States or Canada and has  
20 practiced pursuant to such licensure continuously for the  
21 immediately preceding 10 years without encumbrance on the  
22 license.

23 (b) As prescribed by board rule, the board may require  
24 an applicant who does not pass any step of the national  
25 licensing examination after five attempts to complete  
26 additional remedial education or training.

27 (c) As prescribed by board rule, the board may require  
28 an applicant who does not pass all steps of the United States  
29 Medical Licensing Examination (USMLE) within 7 years to  
30 complete additional remedial education or training or to  
31 retake the step of the examination which the applicant passed

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1 first.

2 (6) The department and the board shall ensure that  
3 applicants for licensure meet the criteria of this section  
4 through an investigative process.

5 (7) The board may not certify to the department for  
6 licensure any applicant who is under investigation in another  
7 jurisdiction for an offense which would constitute a violation  
8 of this chapter until such investigation is completed. Upon  
9 completion of the investigation, the provisions of s. 458.331  
10 shall apply. Furthermore, the department may not issue an  
11 unrestricted license to any individual who has committed any  
12 act or offense in any jurisdiction which would constitute the  
13 basis for disciplining a physician pursuant to s. 458.331.  
14 When the board finds that an individual has committed an act  
15 or offense in any jurisdiction which would constitute the  
16 basis for disciplining a physician pursuant to s. 458.331, the  
17 board may enter an order imposing one or more of the terms set  
18 forth in s. 456.072(2).

19 (8) The board may adopt rules pursuant to ss.  
20 120.536(1) and 120.54 necessary to carry out the provisions of  
21 this section, which shall be applied on a uniform and  
22 consistent basis.

23 (9) When the board determines that any applicant for  
24 licensure has failed to meet, to the board's satisfaction,  
25 each of the appropriate requirements set forth in this  
26 section, it may enter an order requiring one or more of the  
27 following terms:

28 (a) Refusal to certify to the department an  
29 application for licensure, certification, or registration;

30 (b) Certification to the department of an application  
31 for licensure, certification, or registration with

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1 restrictions on the scope of practice of the licensee; or  
2 (c) Certification to the department of an application  
3 for licensure, certification, or registration with placement  
4 of the physician on probation for a period of time and subject  
5 to such conditions as the board may specify, including, but  
6 not limited to, requiring the physician to submit to  
7 treatment, attend continuing education courses, submit to  
8 reexamination, or work under the supervision of another  
9 physician.

10 Section 26. Subsection (5) of section 458.3124,  
11 Florida Statutes, is amended to read:

12 458.3124 Restricted license; certain experienced  
13 foreign-trained physicians.--

14 (5) Notwithstanding s. 458.311(3) and ~~(4)(1)(f)~~, a  
15 person who successfully meets the requirements of this section  
16 and who successfully passes Step III of the United States  
17 Medical Licensing Examination is eligible for full licensure  
18 as a physician.

19 Section 27. Section 458.315, Florida Statutes, is  
20 amended to read:

21 (Substantial rewording of section. See  
22 s. 458.315, F.S., for present text.)

23 458.315 Limited licenses.--

24 (1) Any person desiring to obtain a limited license  
25 shall apply to the department on forms furnished by the  
26 department. The department shall license each applicant who  
27 the board certifies:

28 (a) Has submitted to the department, with an  
29 application and fee not to exceed \$300, a statement stating  
30 that he or she has been licensed to practice medicine in any  
31 jurisdiction or territory of the United States or Canada for

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1 at least 2 years and intends to practice only pursuant to the  
2 restrictions of a limited license granted pursuant to this  
3 section. However, if the physician will only use the limited  
4 license for noncompensated practice, and submits a statement  
5 from the employing agency or institution stating that he or  
6 she will not receive compensation for any service involving  
7 the practice of medicine, the application fee and all  
8 licensure fees shall be waived.

9       (b) Has submitted evidence of the active licensed  
10 practice of medicine in any jurisdiction or territory of the  
11 United States or Canada for at least 2 of the immediately  
12 preceding 4 years. For purposes of this paragraph, the term  
13 "active licensed practice of medicine" means that practice of  
14 medicine by physicians, including those employed by any  
15 government entity in community or public health, as defined by  
16 this chapter, those designated as medical directors under s.  
17 641.495(11) who are practicing medicine, and those on the  
18 active teaching faculty of an accredited medical school. If it  
19 has been more than 3 years since active practice was conducted  
20 by the applicant, a licensed physician approved by the board  
21 shall supervise the applicant for a period of 6 months after  
22 he or she is granted a limited license for practice, unless  
23 the board determines that a shorter period of supervision will  
24 be sufficient to ensure that the applicant is qualified for  
25 licensure. Procedures for such supervision shall be  
26 established by the board.

27       (c) Has submitted to the department a set of  
28 fingerprints on a form and under procedures by the department  
29 for the criminal history check of the applicant.

30       (d) Has not committed any act or offense in this or  
31 any other jurisdiction which would constitute the basis for



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1 disciplining a physician pursuant to s. 458.331.

2 (2) After approval of an application under this  
3 section, a limited license may not be issued until the  
4 applicant provides to the board an affidavit that there have  
5 been no substantial changes in his or her status since initial  
6 application.

7 (3) The recipient of a limited license used for  
8 noncompensated practice shall only practice in the employ of  
9 programs or facilities that provide uncompensated health care  
10 services by volunteer licensed health care professionals to  
11 low-income persons whose family income does not exceed 120  
12 percent of the federal poverty level or to uninsured persons.  
13 These facilities shall include, but not be limited to, the  
14 department, community and migrant health centers funded under  
15 s. 330 of the Public Health Service Act, and volunteer health  
16 care provider programs contracted with the department to  
17 provide uncompensated care under the provisions of s.  
18 766.1115.

19 (4) The recipient of a limited license used for  
20 compensated practice shall only practice in the employ of  
21 certain programs and facilities that provide health care  
22 services and are located within federally designated primary  
23 care health professional shortage areas, unless otherwise  
24 approved by the Secretary of Health. These programs and  
25 facilities shall include, but not be limited to, the  
26 department, the Department of Corrections, county or municipal  
27 correctional facilities, the Department of Juvenile Justice,  
28 the Department of Children and Family Services, and those  
29 programs and facilities funded under s. 330 of the Public  
30 Health Service Act.

31 (5) The recipient of a limited license shall, within

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1 30 days after accepting employment, notify the board of all  
2 approved institutions in which the licensee practices and all  
3 approved institutions in which the licensee's practice  
4 privileges have been denied. Evidence of noncompensated  
5 employment shall be required for the fee waiver under  
6 paragraph (1)(a).

7       (6) Upon renewal, a limited licenseholder shall, in  
8 addition to complying with other applicable provisions of this  
9 chapter, document compliance with the restrictions prescribed  
10 in this section.

11       (7) Any person holding an active or inactive license  
12 to practice medicine in the state may convert that license to  
13 a limited license for the purpose of providing volunteer,  
14 uncompensated care for low-income Floridians. The licensee  
15 must submit a statement from the employing agency or  
16 institution stating that he or she will not receive  
17 compensation for any service involving the practice of  
18 medicine. All licensure fees, including neurological injury  
19 compensation assessments, shall be waived.

20       (8) Nothing in this section limits in any way any  
21 policy by the board otherwise authorized by law to grant  
22 licenses to physicians duly licensed in other states under  
23 conditions less restrictive than the requirements of this  
24 section. Notwithstanding any other provision of this section,  
25 the board may refuse to authorize a physician otherwise  
26 qualified to practice in the employ of any agency or  
27 institution otherwise qualified if the agency or institution  
28 has caused or permitted violations of the provisions of this  
29 chapter which it knew or should have known were occurring.

30       Section 28. Subsection (4) of section 458.319, Florida  
31 Statutes, is amended to read:

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1 458.319 Renewal of license.--

2 (4) ~~Notwithstanding the provisions of s. 456.033, A~~  
3 physician may complete continuing education on end-of-life  
4 care and palliative care in lieu of continuing education in  
5 AIDS/HIV, if that physician has completed the AIDS/HIV  
6 continuing education in the immediately preceding biennium.

7 Section 29. Paragraph (c) of subsection (5) of section  
8 458.320, Florida Statutes, is amended to read:

9 458.320 Financial responsibility.--

10 (5) The requirements of subsections (1), (2), and (3)  
11 shall not apply to:

12 (c) Any person holding a limited license pursuant to  
13 s. 458.315 ~~458.317~~ and practicing under the scope of such  
14 limited license.

15 Section 30. Any physician who meets the requirements  
16 for limited licensure under section 458.315 or section  
17 459.0075, Florida Statutes, may be certified by the Board of  
18 Medicine or the Board of Osteopathic Medicine for a limited  
19 license to conduct clinical research if the physician  
20 previously held a Florida medical license that was  
21 unencumbered and not under investigation at the time that the  
22 license became null and void for nonrenewal or was voluntarily  
23 surrendered.

24 Section 31. Paragraph (t) of subsection (1) and  
25 subsections (6) and (9) of section 458.331, Florida Statutes,  
26 are amended to read:

27 458.331 Grounds for disciplinary action; action by the  
28 board and department.--

29 (1) The following acts constitute grounds for denial  
30 of a license or disciplinary action, as specified in s.

31 456.072(2):

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1           (t) Gross or repeated malpractice or the failure to  
2 practice medicine with that level of care, skill, and  
3 treatment which is recognized by a reasonably prudent similar  
4 physician as being acceptable under similar conditions and  
5 circumstances. The board shall give great weight to the  
6 provisions of s. 766.102 when enforcing this paragraph. As  
7 used in this paragraph, "repeated malpractice" includes, but  
8 is not limited to, three or more claims for medical  
9 malpractice within the previous 5-year period resulting in  
10 indemnities being paid in excess of ~~\$50,000~~~~\$25,000~~ each to  
11 the claimant in a judgment or settlement and which incidents  
12 involved negligent conduct by the physician. As used in this  
13 paragraph, "gross malpractice" or "the failure to practice  
14 medicine with that level of care, skill, and treatment which  
15 is recognized by a reasonably prudent similar physician as  
16 being acceptable under similar conditions and circumstances,"  
17 shall not be construed so as to require more than one  
18 instance, event, or act. Nothing in this paragraph shall be  
19 construed to require that a physician be incompetent to  
20 practice medicine in order to be disciplined pursuant to this  
21 paragraph.

22           (6) Upon the department's receipt from an insurer or  
23 self-insurer of a report of a closed claim against a physician  
24 pursuant to s. 627.912 or from a health care practitioner of a  
25 report pursuant to s. 456.049, or upon the receipt from a  
26 claimant of a presuit notice against a physician pursuant to  
27 s. 766.106, the department shall review each report and  
28 determine whether it potentially involved conduct by a  
29 licensee that is subject to disciplinary action, in which case  
30 the provisions of s. 456.073 shall apply. However, if it is  
31 reported that a physician has had three or more claims with

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1 indemnities exceeding~~\$50,000~~~~\$25,000~~ each within the previous  
2 5-year period, the department shall investigate the  
3 occurrences upon which the claims were based and determine if  
4 action by the department against the physician is warranted.

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

30 Section 32. Paragraph (c) of subsection (1) of section  
31 458.345, Florida Statutes, is amended to read:

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1           458.345 Registration of resident physicians, interns,  
2 and fellows; list of hospital employees; prescribing of  
3 medicinal drugs; penalty.--

4           (1) Any person desiring to practice as a resident  
5 physician, assistant resident physician, house physician,  
6 intern, or fellow in fellowship training which leads to  
7 subspecialty board certification in this state, or any person  
8 desiring to practice as a resident physician, assistant  
9 resident physician, house physician, intern, or fellow in  
10 fellowship training in a teaching hospital in this state as  
11 defined in s. 408.07(44) or s. 395.805(2), who does not hold a  
12 valid, active license issued under this chapter shall apply to  
13 the department to be registered and shall remit a fee not to  
14 exceed \$300 as set by the board. The department shall register  
15 any applicant the board certifies has met the following  
16 requirements:

17           (c) Is a graduate of a medical school or college as  
18 specified in s. 458.311(3)(1)(f).

19           Section 33. Paragraph (b) of subsection (7) of section  
20 458.347, Florida Statutes, is amended to read:

21           458.347 Physician assistants.--

22           (7) PHYSICIAN ASSISTANT LICENSURE.--

23           (b)1. Notwithstanding subparagraph (a)2. and  
24 sub-subparagraph (a)3.a., the department shall examine each  
25 applicant who the Board of Medicine certifies:

26           a. Has completed the application form and remitted a  
27 nonrefundable application fee not to exceed \$500 and an  
28 examination fee not to exceed \$300, plus the actual cost to  
29 the department to provide the examination. The examination fee  
30 is refundable if the applicant is found to be ineligible to  
31 take the examination. The department shall not require the

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1 applicant to pass a separate practical component of the  
2 examination. For examinations given after July 1, 1998,  
3 competencies measured through practical examinations shall be  
4 incorporated into the written examination through a  
5 multiple-choice format. The department shall translate the  
6 examination into the native language of any applicant who  
7 requests and agrees to pay all costs of such translation,  
8 provided that the translation request is filed with the board  
9 office no later than 9 months before the scheduled examination  
10 and the applicant remits translation fees as specified by the  
11 department no later than 6 months before the scheduled  
12 examination, and provided that the applicant demonstrates to  
13 the department the ability to communicate orally in basic  
14 English. If the applicant is unable to pay translation costs,  
15 the applicant may take the next available examination in  
16 English if the applicant submits a request in writing by the  
17 application deadline and if the applicant is otherwise  
18 eligible under this section. To demonstrate the ability to  
19 communicate orally in basic English, a passing score or grade  
20 is required, as determined by the department or organization  
21 that developed it, on the test for spoken English (TSE) by the  
22 Educational Testing Service (ETS), the test of English as a  
23 foreign language (TOEFL) by ETS, a high school or college  
24 level English course, or the English examination for  
25 citizenship, Immigration and Naturalization Service. A  
26 notarized copy of an Educational Commission for Foreign  
27 Medical Graduates (ECFMG) certificate may also be used to  
28 demonstrate the ability to communicate in basic English; and  
29       b.(I) Is an unlicensed physician who graduated from a  
30 foreign medical school listed with the World Health  
31 Organization who has not previously taken and failed the

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1 examination of the National Commission on Certification of  
2 Physician Assistants and who has been certified by the Board  
3 of Medicine as having met the requirements for licensure as a  
4 medical doctor by examination as set forth in s.  
5 458.311(2)-(7)(1), (3), (4), and (5), with the exception that  
6 the applicant is not required to have completed an approved  
7 residency of at least 1 year and the applicant is not required  
8 to have passed the licensing examination specified under s.  
9 458.311 or hold a valid, active certificate issued by the  
10 Educational Commission for Foreign Medical Graduates; was  
11 eligible and made initial application for certification as a  
12 physician assistant in this state between July 1, 1990, and  
13 June 30, 1991; and was a resident of this state on July 1,  
14 1990, or was licensed or certified in any state in the United  
15 States as a physician assistant on July 1, 1990; or  
16 (II) Completed all coursework requirements of the  
17 Master of Medical Science Physician Assistant Program offered  
18 through the Florida College of Physician's Assistants prior to  
19 its closure in August of 1996. Prior to taking the  
20 examination, such applicant must successfully complete any  
21 clinical rotations that were not completed under such program  
22 prior to its termination and any additional clinical rotations  
23 with an appropriate physician assistant preceptor, not to  
24 exceed 6 months, that are determined necessary by the council.  
25 The boards shall determine, based on recommendations from the  
26 council, the facilities under which such incomplete or  
27 additional clinical rotations may be completed and shall also  
28 determine what constitutes successful completion thereof,  
29 provided such requirements are comparable to those established  
30 by accredited physician assistant programs. This  
31 sub-sub-subparagraph is repealed July 1, 2001.



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1           2. The department may grant temporary licensure to an  
2 applicant who meets the requirements of subparagraph 1.  
3 Between meetings of the council, the department may grant  
4 temporary licensure to practice based on the completion of all  
5 temporary licensure requirements. All such administratively  
6 issued licenses shall be reviewed and acted on at the next  
7 regular meeting of the council. A temporary license expires 30  
8 days after receipt and notice of scores to the licenseholder  
9 from the first available examination specified in subparagraph  
10 1. following licensure by the department. An applicant who  
11 fails the proficiency examination is no longer temporarily  
12 licensed, but may apply for a one-time extension of temporary  
13 licensure after reapplying for the next available examination.  
14 Extended licensure shall expire upon failure of the  
15 licenseholder to sit for the next available examination or  
16 upon receipt and notice of scores to the licenseholder from  
17 such examination.

18           3. Notwithstanding any other provision of law, the  
19 examination specified pursuant to subparagraph 1. shall be  
20 administered by the department only five times. Applicants  
21 certified by the board for examination shall receive at least  
22 6 months' notice of eligibility prior to the administration of  
23 the initial examination. Subsequent examinations shall be  
24 administered at 1-year intervals following the reporting of  
25 the scores of the first and subsequent examinations. For the  
26 purposes of this paragraph, the department may develop,  
27 contract for the development of, purchase, or approve an  
28 examination that adequately measures an applicant's ability to  
29 practice with reasonable skill and safety. The minimum passing  
30 score on the examination shall be established by the  
31 department, with the advice of the board. Those applicants

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1 failing to pass that examination or any subsequent examination  
2 shall receive notice of the administration of the next  
3 examination with the notice of scores following such  
4 examination. Any applicant who passes the examination and  
5 meets the requirements of this section shall be licensed as a  
6 physician assistant with all rights defined thereby.

7 Section 34. Subsection (5) of section 459.008, Florida  
8 Statutes, is amended to read:

9 459.008 Renewal of licenses and certificates.--

10 (5) ~~Notwithstanding the provisions of s. 456.033,~~ An  
11 osteopathic physician may complete continuing education on  
12 end-of-life and palliative care in lieu of continuing  
13 education in AIDS/HIV, if that physician has completed the  
14 AIDS/HIV continuing education in the immediately preceding  
15 biennium.

16 Section 35. Subsections (6) and (9) of section  
17 459.015, Florida Statutes, are amended to read:

18 459.015 Grounds for disciplinary action; action by the  
19 board and department.--

20 (6) Upon the department's receipt from an insurer or  
21 self-insurer of a report of a closed claim against an  
22 osteopathic physician pursuant to s. 627.912 or from a health  
23 care practitioner of a report pursuant to s. 456.049, or upon  
24 the receipt from a claimant of a presuit notice against an  
25 osteopathic physician pursuant to s. 766.106, the department  
26 shall review each report and determine whether it potentially  
27 involved conduct by a licensee that is subject to disciplinary  
28 action, in which case the provisions of s. 456.073 shall  
29 apply. However, if it is reported that an osteopathic  
30 physician has had three or more claims with indemnities  
31 exceeding ~~\$50,000~~ ~~\$25,000~~ each within the previous 5-year

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1 period, the department shall investigate the occurrences upon  
2 which the claims were based and determine if action by the  
3 department against the osteopathic physician is warranted.

4 (9) When an investigation of an osteopathic physician  
5 is undertaken, the department shall promptly furnish to the  
6 osteopathic physician or his or her attorney a copy of the  
7 complaint or document which resulted in the initiation of the  
8 investigation. For purposes of this subsection, such documents  
9 include, but are not limited to: the pertinent portions of an  
10 annual report submitted to the department pursuant to s.  
11 395.0197(6); a report of an adverse incident which is provided  
12 to the department pursuant to s. 395.0197; a report of peer  
13 review disciplinary action submitted to the department  
14 pursuant to s. 395.0193(4) or s. 459.016, provided that the  
15 investigations, proceedings, and records relating to such peer  
16 review disciplinary action shall continue to retain their  
17 privileged status even as to the licensee who is the subject  
18 of the investigation, as provided by ss. 395.0193(8) and  
19 459.016(3); a report of a closed claim submitted pursuant to  
20 s. 627.912; a presuit notice submitted pursuant to s.  
21 766.106(2); and a petition brought under the Florida  
22 Birth-Related Neurological Injury Compensation Plan, pursuant  
23 to s. 766.305(2). The osteopathic physician may submit a  
24 written response to the information contained in the complaint  
25 or document which resulted in the initiation of the  
26 investigation within 30 ~~45~~ days after service to the  
27 osteopathic physician of the complaint or document. The  
28 osteopathic physician's written response shall be considered  
29 by the probable cause panel.

30 Section 36. Subsection (5) of section 460.413, Florida  
31 Statutes, is amended to read:

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1           460.413 Grounds for disciplinary action; action by  
2 board or department.--

3           (5) When an investigation of a chiropractic physician  
4 is undertaken, the department shall promptly furnish to the  
5 chiropractic physician or her or his attorney a copy of the  
6 complaint or document which resulted in the initiation of the  
7 investigation. The chiropractic physician may submit a written  
8 response to the information contained in such complaint or  
9 document within 30 ~~45~~ days after service to the chiropractic  
10 physician of the complaint or document. The chiropractic  
11 physician's written response shall be considered by the  
12 probable cause panel.

13           Section 37. Paragraph (s) of subsection (1) of section  
14 461.013, Florida Statutes, is amended to read:

15           461.013 Grounds for disciplinary action; action by the  
16 board; investigations by department.--

17           (1) The following acts constitute grounds for denial  
18 of a license or disciplinary action, as specified in s.

19 456.072(2):

20           (s) Gross or repeated malpractice or the failure to  
21 practice podiatric medicine at a level of care, skill, and  
22 treatment which is recognized by a reasonably prudent  
23 podiatric physician as being acceptable under similar  
24 conditions and circumstances. The board shall give great  
25 weight to the standards for malpractice in s. 766.102 in  
26 interpreting this section. As used in this paragraph,  
27 "repeated malpractice" includes, but is not limited to, three  
28 or more claims for medical malpractice within the previous  
29 5-year period resulting in indemnities being paid in excess of  
30 ~~\$50,000~~~~\$10,000~~ each to the claimant in a judgment or  
31 settlement and which incidents involved negligent conduct by

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1 the podiatric physicians. As used in this paragraph, "gross  
 2 malpractice" or "the failure to practice podiatric medicine  
 3 with the level of care, skill, and treatment which is  
 4 recognized by a reasonably prudent similar podiatric physician  
 5 as being acceptable under similar conditions and  
 6 circumstances" shall not be construed so as to require more  
 7 than one instance, event, or act.

8 Section 38. Sections 38-54 of this act may be cited as  
 9 the "Clara Ramsey Care of the Elderly Act."

10 Section 39. Certified Geriatric Specialist Preparation  
 11 Pilot Program.--

12 (1) The Agency for Workforce Innovation shall  
 13 establish a pilot program for delivery of geriatric nursing  
 14 education to certified nursing assistants who wish to become  
 15 certified geriatric specialists. The agency shall select two  
 16 pilot sites in nursing homes that have received the Gold Seal  
 17 designation under section 400.235, Florida Statutes; have been  
 18 designated as a teaching nursing home under section 430.80,  
 19 Florida Statutes; or have not received a class I or class II  
 20 deficiency within the 30 months preceding application for this  
 21 program.

22 (2) To be eligible to receive geriatric nursing  
 23 education, a certified nursing assistant must have been  
 24 employed by a participating nursing home for at least 1 year  
 25 and have received a high school diploma or its equivalent.

26 (3) The education shall be provided at the worksite  
 27 and in coordination with the certified nursing assistant's  
 28 work schedule.

29 (4) Faculty shall provide the instruction under an  
 30 approved nursing program pursuant to section 464.019, Florida  
 31 Statutes.

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1       (5) The education shall prepare the certified nursing  
2 assistant to meet the requirements for certification as a  
3 geriatric specialist. The didactic and clinical education  
4 shall include all portions of the practical nursing curriculum  
5 pursuant to section 464.019, Florida Statutes, except for  
6 pediatric and obstetric/maternal-child education, and shall  
7 include additional education in the care of ill, injured, or  
8 infirm geriatric patients and the maintenance of health, the  
9 prevention of injury, and the provision of palliative care for  
10 geriatric patients.

11           Section 40. Certified Geriatric Specialty Nursing  
12 Initiative Steering Committee.--

13           (1) In order to guide the implementation of the  
14 Certified Geriatric Specialist Preparation Pilot Program,  
15 there is created a Certified Geriatric Specialty Nursing  
16 Initiative Steering Committee. The steering committee shall be  
17 composed of the following members:

18           (a) The chair of the Board of Nursing or his or her  
19 designee;

20           (b) A representative of the Agency for Workforce  
21 Innovation, appointed by the Director of Workforce Innovation;

22           (c) A representative of Workforce Florida, Inc.,  
23 appointed by the chair of the Board of Directors of Workforce  
24 Florida, Inc.;

25           (d) A representative of the Department of Education,  
26 appointed by the Secretary of Education;

27           (e) A representative of the Agency for Health Care  
28 Administration, appointed by the Secretary of Health Care  
29 Administration;

30           (f) The Director of the Florida Center for Nursing;  
31 and

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1       (a) A representative of a Gold Seal nursing home that  
2 is not one of the pilot program sites, appointed by the  
3 Secretary of Health Care Administration.

4       (2) The steering committee shall:

5       (a) Provide consultation and guidance to the Agency  
6 for Workforce Innovation on matters of policy during the  
7 implementation of the pilot program; and

8       (b) Provide oversight to the evaluation of the pilot  
9 program.

10       (3) Members of the steering committee are entitled to  
11 reimbursement for per diem and travel expenses under section  
12 112.061, Florida Statutes.

13       (4) The steering committee shall complete its  
14 activities by June 30, 2006, and the authorization for the  
15 steering committee ends on that date.

16       Section 41. Evaluation of the Certified Geriatric  
17 Specialist Preparation Pilot Program.--The Agency for  
18 Workforce Innovation, in consultation with the Certified  
19 Geriatric Specialty Nursing Initiative Steering Committee,  
20 shall conduct, or contract for an evaluation of the pilot  
21 program. The agency shall ensure that an evaluation report is  
22 submitted to the Governor, the President of the Senate, and  
23 the Speaker of the House of Representatives by January 1,  
24 2006. The evaluation must address the experience and success  
25 of the certified nursing assistants in the pilot program and  
26 must contain recommendations regarding the expansion of the  
27 delivery of geriatric nursing education in nursing homes.

28       Section 42. Reports.--The Agency for Workforce  
29 Innovation shall submit status reports and recommendations  
30 regarding legislation necessary to further the implementation  
31 of the pilot program to the Governor, the President of the

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1 Senate, and the Speaker of the House of Representatives on  
2 January 1, 2004, January 1, 2005, and January 1, 2006.

3 Section 43. Section 464.0125, Florida Statutes, is  
4 created to read:

5 464.0125 Certified geriatric specialists;  
6 certification requirements.--

7 (1) DEFINITIONS; RESPONSIBILITIES.--

8 (a) As used in this section, the term:

9 1. "Certified geriatric specialist" means a person who  
10 meets the qualifications specified in this section and who is  
11 certified by the board to practice as a certified geriatric  
12 specialist.

13 2. "Geriatric patient" means any patient who is 60  
14 years of age or older.

15 3. "Practice of certified geriatric specialty nursing"  
16 means the performance of selected acts in facilities licensed  
17 under part II or part III of chapter 400, including the  
18 administration of treatments and medications, in the care of  
19 ill, injured, or infirm geriatric patients and the promotion  
20 of wellness, maintenance of health, and prevention of illness  
21 of geriatric patients under the direction of a registered  
22 nurse, a licensed physician, a licensed osteopathic physician,  
23 a licensed podiatric physician, or a licensed dentist. The  
24 scope of practice of a certified geriatric specialist includes  
25 the practice of practical nursing as defined in s. 464.003 for  
26 geriatric patients only, except for any act in which  
27 instruction and clinical knowledge of pediatric nursing or  
28 obstetric/maternal-child nursing is required. A certified  
29 geriatric specialist, while providing nursing services in  
30 facilities licensed under part II or part III of chapter 400,  
31 may supervise the activities of certified nursing assistants



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1 and other unlicensed personnel providing services in such  
2 facilities in accordance with rules adopted by the board.

3 (b) The certified geriatric specialist shall be  
4 responsible and accountable for making decisions that are  
5 based upon the individual's educational preparation and  
6 experience in performing certified geriatric specialty  
7 nursing.

8 (2) CERTIFICATION.--

9 (a) Any certified nursing assistant desiring to be  
10 certified as a certified geriatric specialist shall apply to  
11 the department and submit proof that he or she holds a current  
12 certificate as a certified nursing assistant under this part  
13 and has satisfactorily completed the following requirements:

14 1. Is in good mental and physical health, is a  
15 recipient of a high school diploma or its equivalent and has  
16 completed the requirements for graduation from an approved  
17 program for nursing or its equivalent, as determined by the  
18 board, for the preparation of licensed practical nurses,  
19 except for instruction and clinical knowledge of pediatric  
20 nursing or obstetric/maternal-child nursing. Any program that  
21 is approved on July 1, 2003, by the board for the preparation  
22 of registered nurses or licensed practical nurses may provide  
23 education for the preparation of certified geriatric  
24 specialists without further board approval.

25 2. Has the ability to communicate in the English  
26 language, which may be determined by an examination given by  
27 the department.

28 3. Has provided sufficient information, which must be  
29 submitted by the department for a statewide criminal records  
30 correspondence check through the Department of Law  
31 Enforcement.

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1       (b) Each applicant who meets the requirements of this  
2 subsection shall, unless denied pursuant to s. 464.018, be  
3 entitled to certification as a certified geriatric specialist.  
4 The board shall certify, and the department shall issue a  
5 certificate to practice as a certified geriatric specialist  
6 to, any certified nursing assistant meeting the qualifications  
7 in this section. The board shall establish an application fee  
8 not to exceed \$100 and a biennial renewal fee not to exceed  
9 \$50. The board may adopt rules to administer this section.

10       (c) A person receiving certification under this  
11 section shall:

- 12           1. Work only within the confines of a facility  
13 licensed under part II or part III of chapter 400.  
14           2. Care for geriatric patients only.  
15           3. Comply with the minimum standards of practice for  
16 nurses and be subject to disciplinary action for violations of  
17 s. 464.018.

18       (3) ARTICULATION.--Any certified geriatric specialist  
19 who completes the additional instruction and coursework in an  
20 approved nursing program pursuant to s. 464.019 for the  
21 preparation of practical nursing in the areas of pediatric  
22 nursing and obstetric/maternal-child nursing shall, unless  
23 denied pursuant to s. 464.018, be entitled to licensure as a  
24 licensed practical nurse if the applicant otherwise meets the  
25 requirements of s. 464.008.

26       (4) TITLES AND ABBREVIATIONS; RESTRICTIONS;  
27 PENALTIES.--

28       (a) Only persons who hold certificates to practice as  
29 certified geriatric specialists in this state or who are  
30 performing services within the practice of certified geriatric  
31 specialty nursing pursuant to the exception set forth in s.

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1 464.022(8) shall have the right to use the title "Certified  
2 Geriatric Specialist" and the abbreviation "C.G.S."

3 (b) No person shall practice or advertise as, or  
4 assume the title of, certified geriatric specialist or use the  
5 abbreviation "C.G.S." or take any other action that would lead  
6 the public to believe that person was certified as such or is  
7 performing services within the practice of certified geriatric  
8 specialty nursing pursuant to the exception set forth in s.  
9 464.022(8), unless that person is certified to practice as  
10 such.

11 (c) A violation of this subsection is a misdemeanor of  
12 the first degree, punishable as provided in s. 775.082 or s.  
13 775.083.

14 (5) VIOLATIONS AND PENALTIES.--Practicing certified  
15 geriatric specialty nursing, as defined in this section,  
16 without holding an active certificate to do so constitutes a  
17 felony of the third degree, punishable as provided in s.  
18 775.082, s. 775.083, or s. 775.084.

19 Section 44. Paragraph (b) of subsection (1) of section  
20 381.00315, Florida Statutes, is amended to read:

21 381.00315 Public health advisories; public health  
22 emergencies.--The State Health Officer is responsible for  
23 declaring public health emergencies and issuing public health  
24 advisories.

25 (1) As used in this section, the term:

26 (b) "Public health emergency" means any occurrence, or  
27 threat thereof, whether natural or man made, which results or  
28 may result in substantial injury or harm to the public health  
29 from infectious disease, chemical agents, nuclear agents,  
30 biological toxins, or situations involving mass casualties or  
31 natural disasters. Prior to declaring a public health

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1 emergency, the State Health Officer shall, to the extent  
2 possible, consult with the Governor and shall notify the Chief  
3 of Domestic Security Initiatives as created in s. 943.03. The  
4 declaration of a public health emergency shall continue until  
5 the State Health Officer finds that the threat or danger has  
6 been dealt with to the extent that the emergency conditions no  
7 longer exist and he or she terminates the declaration.  
8 However, a declaration of a public health emergency may not  
9 continue for longer than 60 days unless the Governor concurs  
10 in the renewal of the declaration. The State Health Officer,  
11 upon declaration of a public health emergency, may take  
12 actions that are necessary to protect the public health. Such  
13 actions include, but are not limited to:

14       1. Directing manufacturers of prescription drugs or  
15 over-the-counter drugs who are permitted under chapter 499 and  
16 wholesalers of prescription drugs located in this state who  
17 are permitted under chapter 499 to give priority to the  
18 shipping of specified drugs to pharmacies and health care  
19 providers within geographic areas that have been identified by  
20 the State Health Officer. The State Health Officer must  
21 identify the drugs to be shipped. Manufacturers and  
22 wholesalers located in the state must respond to the State  
23 Health Officer's priority shipping directive before shipping  
24 the specified drugs.

25       2. Notwithstanding chapters 465 and 499 and rules  
26 adopted thereunder, directing pharmacists employed by the  
27 department to compound bulk prescription drugs and provide  
28 these bulk prescription drugs to physicians and nurses of  
29 county health departments or any qualified person authorized  
30 by the State Health Officer for administration to persons as  
31 part of a prophylactic or treatment regimen.

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1           3. Notwithstanding s. 456.036, temporarily  
2 reactivating the inactive license of the following health care  
3 practitioners, when such practitioners are needed to respond  
4 to the public health emergency: physicians licensed under  
5 chapter 458 or chapter 459; physician assistants licensed  
6 under chapter 458 or chapter 459; certified geriatric  
7 specialists certified under part I of chapter 464; licensed  
8 practical nurses, registered nurses, and advanced registered  
9 nurse practitioners licensed under part I of chapter 464;  
10 respiratory therapists licensed under part V of chapter 468;  
11 and emergency medical technicians and paramedics certified  
12 under part III of chapter 401. Only those health care  
13 practitioners specified in this paragraph who possess an  
14 unencumbered inactive license and who request that such  
15 license be reactivated are eligible for reactivation. An  
16 inactive license that is reactivated under this paragraph  
17 shall return to inactive status when the public health  
18 emergency ends or prior to the end of the public health  
19 emergency if the State Health Officer determines that the  
20 health care practitioner is no longer needed to provide  
21 services during the public health emergency. Such licenses may  
22 only be reactivated for a period not to exceed 90 days without  
23 meeting the requirements of s. 456.036 or chapter 401, as  
24 applicable.

25           4. Ordering an individual to be examined, tested,  
26 vaccinated, treated, or quarantined for communicable diseases  
27 that have significant morbidity or mortality and present a  
28 severe danger to public health. Individuals who are unable or  
29 unwilling to be examined, tested, vaccinated, or treated for  
30 reasons of health, religion, or conscience may be subjected to  
31 quarantine.

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1 a. Examination, testing, vaccination, or treatment may  
 2 be performed by any qualified person authorized by the State  
 3 Health Officer.

4 b. If the individual poses a danger to the public  
 5 health, the State Health Officer may subject the individual to  
 6 quarantine. If there is no practical method to quarantine the  
 7 individual, the State Health Officer may use any means  
 8 necessary to vaccinate or treat the individual.

9  
 10 Any order of the State Health Officer given to effectuate this  
 11 paragraph shall be immediately enforceable by a law  
 12 enforcement officer under s. 381.0012.

13 Section 45. Subsection (14) of section 400.021,  
 14 Florida Statutes, is amended to read:

15 400.021 Definitions.--When used in this part, unless  
 16 the context otherwise requires, the term:

17 (14) "Nursing service" means such services or acts as  
 18 may be rendered, directly or indirectly, to and in behalf of a  
 19 person by individuals as defined in ss. ~~s.~~ 464.003 and  
 20 464.0125.

21 Section 46. Subsection (1) of section 400.211, Florida  
 22 Statutes, is amended to read:

23 400.211 Persons employed as nursing assistants;  
 24 certification requirement.--

25 (1) To serve as a nursing assistant in any nursing  
 26 home, a person must be certified as a nursing assistant under  
 27 part II of chapter 464, unless the person is a registered  
 28 nurse, a ~~or~~ practical nurse, or a certified geriatric  
 29 specialist certified or licensed in accordance with part I of  
 30 chapter 464 or an applicant for such licensure who is  
 31 permitted to practice nursing in accordance with rules adopted

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1 by the Board of Nursing pursuant to part I of chapter 464.

2 Section 47. Paragraphs (a) and (c) of subsection (3)  
3 of section 400.23, Florida Statutes, are amended to read:

4 400.23 Rules; evaluation and deficiencies; licensure  
5 status.--

6 (3)(a) The agency shall adopt rules providing for the  
7 minimum staffing requirements for nursing homes. These  
8 requirements shall include, for each nursing home facility, a  
9 minimum certified nursing assistant staffing of 2.3 hours of  
10 direct care per resident per day beginning January 1, 2002,  
11 increasing to 2.6 hours of direct care per resident per day  
12 beginning January 1, 2003, and increasing to 2.9 hours of  
13 direct care per resident per day beginning January 1, 2004.  
14 Beginning January 1, 2002, no facility shall staff below one  
15 certified nursing assistant per 20 residents, and a minimum  
16 licensed nursing staffing of 1.0 hour of direct resident care  
17 per resident per day but never below one licensed nurse per 40  
18 residents. For purposes of computing nursing staffing minimums  
19 and ratios, certified geriatric specialists shall be  
20 considered licensed nursing staff. Nursing assistants employed  
21 under s. 400.211(2) may be included in computing the staffing  
22 ratio for certified nursing assistants only if they provide  
23 nursing assistance services to residents on a full-time basis.  
24 Each nursing home must document compliance with staffing  
25 standards as required under this paragraph and post daily the  
26 names of staff on duty for the benefit of facility residents  
27 and the public. The agency shall recognize the use of licensed  
28 nurses for compliance with minimum staffing requirements for  
29 certified nursing assistants, provided that the facility  
30 otherwise meets the minimum staffing requirements for licensed  
31 nurses and that the licensed nurses so recognized are

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1 performing the duties of a certified nursing assistant. Unless  
2 otherwise approved by the agency, licensed nurses counted  
3 towards the minimum staffing requirements for certified  
4 nursing assistants must exclusively perform the duties of a  
5 certified nursing assistant for the entire shift and shall not  
6 also be counted towards the minimum staffing requirements for  
7 licensed nurses. If the agency approved a facility's request  
8 to use a licensed nurse to perform both licensed nursing and  
9 certified nursing assistant duties, the facility must allocate  
10 the amount of staff time specifically spent on certified  
11 nursing assistant duties for the purpose of documenting  
12 compliance with minimum staffing requirements for certified  
13 and licensed nursing staff. In no event may the hours of a  
14 licensed nurse with dual job responsibilities be counted  
15 twice.

16 (c) Licensed practical nurses licensed under chapter  
17 464 who are providing nursing services in nursing home  
18 facilities under this part may supervise the activities of  
19 other licensed practical nurses, certified geriatric  
20 specialists, certified nursing assistants, and other  
21 unlicensed personnel providing services in such facilities in  
22 accordance with rules adopted by the Board of Nursing.

23 Section 48. Paragraph (b) of subsection (2) of section  
24 409.908, Florida Statutes, is amended to read:

25 409.908 Reimbursement of Medicaid providers.--Subject  
26 to specific appropriations, the agency shall reimburse  
27 Medicaid providers, in accordance with state and federal law,  
28 according to methodologies set forth in the rules of the  
29 agency and in policy manuals and handbooks incorporated by  
30 reference therein. These methodologies may include fee  
31 schedules, reimbursement methods based on cost reporting,



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1 negotiated fees, competitive bidding pursuant to s. 287.057,  
2 and other mechanisms the agency considers efficient and  
3 effective for purchasing services or goods on behalf of  
4 recipients. If a provider is reimbursed based on cost  
5 reporting and submits a cost report late and that cost report  
6 would have been used to set a lower reimbursement rate for a  
7 rate semester, then the provider's rate for that semester  
8 shall be retroactively calculated using the new cost report,  
9 and full payment at the recalculated rate shall be affected  
10 retroactively. Medicare-granted extensions for filing cost  
11 reports, if applicable, shall also apply to Medicaid cost  
12 reports. Payment for Medicaid compensable services made on  
13 behalf of Medicaid eligible persons is subject to the  
14 availability of moneys and any limitations or directions  
15 provided for in the General Appropriations Act or chapter 216.  
16 Further, nothing in this section shall be construed to prevent  
17 or limit the agency from adjusting fees, reimbursement rates,  
18 lengths of stay, number of visits, or number of services, or  
19 making any other adjustments necessary to comply with the  
20 availability of moneys and any limitations or directions  
21 provided for in the General Appropriations Act, provided the  
22 adjustment is consistent with legislative intent.

23 (2)

24 (b) Subject to any limitations or directions provided  
25 for in the General Appropriations Act, the agency shall  
26 establish and implement a Florida Title XIX Long-Term Care  
27 Reimbursement Plan (Medicaid) for nursing home care in order  
28 to provide care and services in conformance with the  
29 applicable state and federal laws, rules, regulations, and  
30 quality and safety standards and to ensure that individuals  
31 eligible for medical assistance have reasonable geographic

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1 access to such care.

2           1. Changes of ownership or of licensed operator do not  
3 qualify for increases in reimbursement rates associated with  
4 the change of ownership or of licensed operator. The agency  
5 shall amend the Title XIX Long Term Care Reimbursement Plan to  
6 provide that the initial nursing home reimbursement rates, for  
7 the operating, patient care, and MAR components, associated  
8 with related and unrelated party changes of ownership or  
9 licensed operator filed on or after September 1, 2001, are  
10 equivalent to the previous owner's reimbursement rate.

11           2. The agency shall amend the long-term care  
12 reimbursement plan and cost reporting system to create direct  
13 care and indirect care subcomponents of the patient care  
14 component of the per diem rate. These two subcomponents  
15 together shall equal the patient care component of the per  
16 diem rate. Separate cost-based ceilings shall be calculated  
17 for each patient care subcomponent. The direct care  
18 subcomponent of the per diem rate shall be limited by the  
19 cost-based class ceiling, and the indirect care subcomponent  
20 shall be limited by the lower of the cost-based class ceiling,  
21 by the target rate class ceiling, or by the individual  
22 provider target. The agency shall adjust the patient care  
23 component effective January 1, 2002. The cost to adjust the  
24 direct care subcomponent shall be net of the total funds  
25 previously allocated for the case mix add-on. The agency shall  
26 make the required changes to the nursing home cost reporting  
27 forms to implement this requirement effective January 1, 2002.

28           3. The direct care subcomponent shall include salaries  
29 and benefits of direct care staff providing nursing services  
30 including registered nurses, licensed practical nurses,  
31 certified geriatric specialists, certified under part I of

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1 chapter 464, and certified nursing assistants who deliver care  
2 directly to residents in the nursing home facility. This  
3 excludes nursing administration, MDS, and care plan  
4 coordinators, staff development, and staffing coordinator.

5         4. All other patient care costs shall be included in  
6 the indirect care cost subcomponent of the patient care per  
7 diem rate. There shall be no costs directly or indirectly  
8 allocated to the direct care subcomponent from a home office  
9 or management company.

10         5. On July 1 of each year, the agency shall report to  
11 the Legislature direct and indirect care costs, including  
12 average direct and indirect care costs per resident per  
13 facility and direct care and indirect care salaries and  
14 benefits per category of staff member per facility.

15         6. In order to offset the cost of general and  
16 professional liability insurance, the agency shall amend the  
17 plan to allow for interim rate adjustments to reflect  
18 increases in the cost of general or professional liability  
19 insurance for nursing homes. This provision shall be  
20 implemented to the extent existing appropriations are  
21 available.

22  
23 It is the intent of the Legislature that the reimbursement  
24 plan achieve the goal of providing access to health care for  
25 nursing home residents who require large amounts of care while  
26 encouraging diversion services as an alternative to nursing  
27 home care for residents who can be served within the  
28 community. The agency shall base the establishment of any  
29 maximum rate of payment, whether overall or component, on the  
30 available moneys as provided for in the General Appropriations  
31 Act. The agency may base the maximum rate of payment on the

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1 results of scientifically valid analysis and conclusions  
2 derived from objective statistical data pertinent to the  
3 particular maximum rate of payment.

4 Section 49. Subsection (2) of section 458.303, Florida  
5 Statutes, is amended to read:

6 458.303 Provisions not applicable to other  
7 practitioners; exceptions, etc.--

8 (2) Nothing in s. 458.301, s. 458.303, s. 458.305, s.  
9 458.307, s. 458.309, s. 458.311, s. 458.313, s. 458.319, s.  
10 458.321, s. 458.327, s. 458.329, s. 458.331, s. 458.337, s.  
11 458.339, s. 458.341, s. 458.343, s. 458.345, or s. 458.347  
12 shall be construed to prohibit any service rendered by a  
13 registered nurse, ~~or~~ a licensed practical nurse, or a  
14 certified geriatric specialist certified under part I of  
15 chapter 464, if such service is rendered under the direct  
16 supervision and control of a licensed physician who provides  
17 specific direction for any service to be performed and gives  
18 final approval to all services performed. Further, nothing in  
19 this or any other chapter shall be construed to prohibit any  
20 service rendered by a medical assistant in accordance with the  
21 provisions of s. 458.3485.

22 Section 50. Subsection (1) and paragraph (a) of  
23 subsection (2) of section 1009.65, Florida Statutes, are  
24 amended to read:

25 1009.65 Medical Education Reimbursement and Loan  
26 Repayment Program.--

27 (1) To encourage qualified medical professionals to  
28 practice in underserved locations where there are shortages of  
29 such personnel, there is established the Medical Education  
30 Reimbursement and Loan Repayment Program. The function of the  
31 program is to make payments that offset loans and educational

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1 expenses incurred by students for studies leading to a medical  
2 or nursing degree, medical or nursing licensure, or advanced  
3 registered nurse practitioner certification or physician  
4 assistant licensure. The following licensed or certified  
5 health care professionals are eligible to participate in this  
6 program: medical doctors with primary care specialties,  
7 doctors of osteopathic medicine with primary care specialties,  
8 physician's assistants, certified geriatric specialists  
9 certified under part I of chapter 464, licensed practical  
10 nurses and registered nurses, and advanced registered nurse  
11 practitioners with primary care specialties such as certified  
12 nurse midwives. Primary care medical specialties for  
13 physicians include obstetrics, gynecology, general and family  
14 practice, internal medicine, pediatrics, and other specialties  
15 which may be identified by the Department of Health.

16 (2) From the funds available, the Department of Health  
17 shall make payments to selected medical professionals as  
18 follows:

19 (a) Up to \$4,000 per year for certified geriatric  
20 specialists certified under part I of chapter 464, licensed  
21 practical nurses, and registered nurses, up to \$10,000 per  
22 year for advanced registered nurse practitioners and  
23 physician's assistants, and up to \$20,000 per year for  
24 physicians. Penalties for noncompliance shall be the same as  
25 those in the National Health Services Corps Loan Repayment  
26 Program. Educational expenses include costs for tuition,  
27 matriculation, registration, books, laboratory and other fees,  
28 other educational costs, and reasonable living expenses as  
29 determined by the Department of Health.

30 Section 51. Subsection (2) of section 1009.66, Florida  
31 Statutes, is amended to read:

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1           1009.66 Nursing Student Loan Forgiveness Program.--  
2           (2) To be eligible, a candidate must have graduated  
3 from an accredited or approved nursing program and have  
4 received a Florida license as a licensed practical nurse, a  
5 certified geriatric specialist certified under part I of  
6 chapter 464, or a registered nurse or a Florida certificate as  
7 an advanced registered nurse practitioner.

8           Section 52. The sum of \$157,017 is appropriated from  
9 the General Revenue Fund to the Agency for Workforce  
10 Innovation to support the work of the Certified Geriatric  
11 Specialty Nursing Initiative Steering Committee, to administer  
12 the pilot sites, contract for an evaluation, and to provide,  
13 if necessary, nursing faculty, substitute certified nursing  
14 assistants for those who are in clinical education, and  
15 technical support to the pilot sites during the 2003-2004  
16 fiscal year.

17           Section 53. Subsection (6) is added to section  
18 464.201, Florida Statutes, to read:

19           464.201 Definitions.--As used in this part, the term:

20           (6) "Practice of a certified nursing assistant" means  
21 providing care and assisting persons with tasks relating to  
22 the activities of daily living. Such tasks are those  
23 associated with personal care, maintaining mobility, nutrition  
24 and hydration, toileting and elimination, assistive devices,  
25 safety and cleanliness, data gathering, reporting abnormal  
26 signs and symptoms, post mortem care, patient socialization  
27 and reality orientation, end-of-life care, CPR and emergency  
28 care, residents' or patients' rights, documentation of nursing  
29 assistant services, and other tasks that a certified nurse  
30 assistant may perform after training beyond that required for  
31 initial certification and upon validation of competence in

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1 that skill by a registered nurse. This section does not  
 2 restrict the ability of any person who is otherwise trained  
 3 and educated from performing such tasks.

4 Section 54. Section 464.202, Florida Statutes, is  
 5 amended to read:

6 464.202 Duties and powers of the board.--The board  
 7 shall maintain, or contract with or approve another entity to  
 8 maintain, a state registry of certified nursing assistants.  
 9 The registry must consist of the name of each certified  
 10 nursing assistant in this state; other identifying information  
 11 defined by board rule; certification status; the effective  
 12 date of certification; other information required by state or  
 13 federal law; information regarding any crime or any abuse,  
 14 neglect, or exploitation as provided under chapter 435; and  
 15 any disciplinary action taken against the certified nursing  
 16 assistant. The registry shall be accessible to the public, the  
 17 certificateholder, employers, and other state agencies. The  
 18 board shall adopt by rule testing procedures for use in  
 19 certifying nursing assistants and shall adopt rules regulating  
 20 the practice of certified nursing assistants which specify the  
 21 scope of practice authorized and level of supervision required  
 22 for the practice of certified nursing assistants to enforce  
 23 ~~this part~~. The board may contract with or approve another  
 24 entity or organization to provide the examination services,  
 25 including the development and administration of examinations.  
 26 The board shall require that the contract provider offer  
 27 certified nursing assistant applications via the Internet, and  
 28 may require the contract provider to accept certified nursing  
 29 assistant applications for processing via the Internet. The  
 30 board shall require the contract provider to provide the  
 31 preliminary results of the certified nursing examination on

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1 the date the test is administered. The provider shall pay all  
 2 reasonable costs and expenses incurred by the board in  
 3 evaluating the provider's application and performance during  
 4 the delivery of services, including examination services and  
 5 procedures for maintaining the certified nursing assistant  
 6 registry.

7 Section 55. Paragraph (a) of subsection (4) of section  
 8 464.0205, Florida Statutes, is amended to read:

9 464.0205 Retired volunteer nurse certificate.--

10 (4) A retired volunteer nurse receiving certification  
 11 from the board shall:

12 (a) Work under the direct supervision of the director  
 13 of a county health department, a physician working under a  
 14 limited license issued pursuant to s. 458.315 ~~458.317~~ or s.  
 15 459.0075, a physician licensed under chapter 458 or chapter  
 16 459, an advanced registered nurse practitioner certified under  
 17 s. 464.012, or a registered nurse licensed under s. 464.008 or  
 18 s. 464.009.

19 Section 56. Subsections (1) and (5) of section  
 20 464.203, Florida Statutes, are amended and subsections (8) and  
 21 (9) are added to that section, to read:

22 464.203 Certified nursing assistants; certification  
 23 requirement.--

24 (1) The board shall issue a certificate to practice as  
 25 a certified nursing assistant to any person who demonstrates a  
 26 minimum competency to read and write and successfully passes  
 27 the required statewide criminal screening through the  
 28 Department of Law Enforcement, including Level I screening  
 29 pursuant to chapter 435, or, if the applicant has not  
 30 maintained continuous residency within the state for 5 years  
 31 immediately preceding the date of application, Level II



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1 screening which includes a fingerprint check through the  
 2 Department of Law Enforcement and the Federal Bureau of  
 3 Investigation pursuant to chapter 435, ~~Level I or Level II~~  
 4 ~~screening pursuant to s. 400.215~~ and meets one of the  
 5 following requirements:

6 (a) Has successfully completed an approved training  
 7 program and achieved a minimum score, established by rule of  
 8 the board, on the nursing assistant competency examination,  
 9 which consists of a written portion and skills-demonstration  
 10 portion approved by the board and administered at a site and  
 11 by personnel approved by the department.

12 (b) Has achieved a minimum score, established by rule  
 13 of the board, on the nursing assistant competency examination,  
 14 which consists of a written portion and skills-demonstration  
 15 portion, approved by the board and administered at a site and  
 16 by personnel approved by the department and:

- 17 1. Has a high school diploma, or its equivalent; or
- 18 2. Is at least 18 years of age.

19 (c) Is currently certified in another state; is listed  
 20 on that state's certified nursing assistant registry; and has  
 21 not been found to have committed abuse, neglect, or  
 22 exploitation in that state.

23 (d) Has completed the curriculum developed under the  
 24 Enterprise Florida Jobs and Education Partnership Grant and  
 25 achieved a minimum score, established by rule of the board, on  
 26 the nursing assistant competency examination, which consists  
 27 of a written portion and skills-demonstration portion,  
 28 approved by the board and administered at a site and by  
 29 personnel approved by the department.

30 (5) Certification as a nursing assistant, in  
 31 accordance with this part, may be renewed ~~continues in effect~~

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1 until such time as the nursing assistant allows a period of 24  
 2 consecutive months to pass during which period the nursing  
 3 assistant fails to perform any nursing-related services for  
 4 monetary compensation. When a nursing assistant fails to  
 5 perform any nursing-related services for monetary compensation  
 6 for a period of 24 consecutive months, the nursing assistant  
 7 must complete a new training and competency evaluation program  
 8 or a new competency evaluation program.

9       (8) The department shall renew a certificate upon  
 10 receipt of the renewal application and imposition of a fee of  
 11 not less than \$20 and not more than \$50 biennially. The  
 12 department shall adopt rules establishing a procedure for the  
 13 biennial renewal of certificates. Any certificate not renewed  
 14 by July 1, 2005, shall be void.

15       (9) Notwithstanding any provision of law to the  
 16 contrary, any entity required to conduct a Level I or Level II  
 17 screening, pursuant to chapter 435, is exempt from rescreening  
 18 any certified nursing assistant upon employment if the  
 19 screening date on the certificate issued by the board is  
 20 within the last 12 months, the certified nursing assistant has  
 21 not been unemployed for more than 180 days, and the nursing  
 22 assistant attests under penalty of perjury to not having been  
 23 convicted of a disqualifying offense since the completion of  
 24 such screening.

25       Section 57. Subsection (1) of section 464.204, Florida  
 26 Statutes, is amended to read:

27       464.204 Denial, suspension, or revocation of  
 28 certification; disciplinary actions.--

29       (1) The following acts constitute grounds for which  
 30 the board may impose disciplinary sanctions as specified in  
 31 subsection (2):

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1 (a) Obtaining or attempting to obtain certification or  
2 an exemption, or possessing or attempting to possess  
3 certification or a letter of exemption, by bribery,  
4 misrepresentation, deceit, or through an error of the board.

5 (b) ~~Intentionally~~ Violating any provision of part I or  
6 part II of this chapter, chapter 456, or the rules adopted by  
7 the board.

8 Section 58. Paragraph (a) of subsection (2) of section  
9 466.004, Florida Statutes, is amended to read:

10 466.004 Board of Dentistry.--

11 (2) To advise the board, it is the intent of the  
12 Legislature that councils be appointed as specified in  
13 paragraphs (a), (b), and (c). The department shall provide  
14 administrative support to the councils and shall provide  
15 public notice of meetings and agenda of the councils. Councils  
16 shall include at least one board member who shall chair the  
17 council and shall include nonboard members. All council  
18 members shall be appointed by the board chair. Council  
19 members shall be appointed for 4-year terms, and all members  
20 shall be eligible for reimbursement of expenses in the manner  
21 of board members.

22 (a) A Council on Dental Hygiene shall be appointed by  
23 the board chair and shall include one dental hygienist member  
24 of the board, who shall chair the council, one dental member  
25 of the board, and three dental hygienists who are actively  
26 engaged in the practice of dental hygiene in this state. The  
27 council shall meet at the request of the board chair, a  
28 majority of the members of the board, or the council chair, if  
29 the council meets at least twice each year. The council is  
30 charged with the responsibility of and shall meet for the  
31 purpose of developing rules and policies for recommendation to

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1 ~~the board, which the board shall consider,~~ on matters  
2 pertaining to that part of dentistry consisting of  
3 educational, preventive, or therapeutic dental hygiene  
4 services; dental hygiene licensure, discipline, or regulation;  
5 and dental hygiene education. Rule and policy recommendations  
6 of the council shall be considered by the board at its next  
7 regularly scheduled meeting in the same manner it considers  
8 rule and policy recommendations from designated subcommittees  
9 of the board. Any rule or policy proposed by the board  
10 pertaining to the specified part of dentistry defined by this  
11 paragraph shall be referred to the council for a  
12 recommendation prior to final action by the board.

13 Section 59. Section 466.055, Florida Statutes, is  
14 created to read:

15 466.055 Board of Dentistry Empowerment Act.--

16 (1) If requested by the Board of Dentistry, it shall  
17 direct the department whom to appoint as executive director  
18 pursuant to the rules of the state personnel system. The  
19 committee conducting interviews of candidates for executive  
20 director shall consist of the board chairman or his designee  
21 and the secretary or his or her designee. A list of final  
22 candidates shall be submitted to the board, which shall  
23 approve the candidate to be hired. The approval process shall  
24 include the right of the board to interview the list of  
25 submitted candidates. The board may reject all the candidates  
26 on the submitted list and request that a new list be submitted  
27 by the interview committee. The executive director shall  
28 perform those duties and responsibilities specific to the  
29 Board of Dentistry and shall exclusively serve the Board of  
30 Dentistry. The board shall monitor the performance of the  
31 executive director, based on established performance standards

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1 and should the board determine, by a majority vote, that the  
2 performance of the executive director is consistently below  
3 the performance standards of the board and thus unacceptable,  
4 the board shall promptly notify the department of its  
5 findings, in writing, and the department shall take  
6 appropriate action to replace the executive director, pursuant  
7 to the state personnel rules.

8       (2) The executive director shall be responsible for  
9 overseeing the hiring of all other staff members who work  
10 directly for the executive director and who perform services  
11 for the board.

12       (3) The department shall contract for a dental intake  
13 officer when requested by the Board of Dentistry in accordance  
14 with the state personnel system and qualifications established  
15 for such position by the Board of Dentistry. The  
16 qualifications for the position shall include a requirement  
17 that the candidate be a licensed Florida dentist in good  
18 standing.

19       (4) The dental intake officer shall be responsible for  
20 determining the legal sufficiency of all dental complaints  
21 received by the department within 5 working days after the  
22 complaint is filed; advising the board regarding dental health  
23 regulation issues; and advising field investigators on dental  
24 issues related to the complaints to assure that complaints are  
25 properly investigated in a timely and efficacious manner.

26       (5) The Board of Dentistry, in consultation with the  
27 department, shall establish reasonable and comprehensive  
28 performance parameters for the prosecution of disciplinary  
29 cases by the department. Such parameters shall reflect the  
30 quality and quantity of services to be provided to the board,  
31 including, but not limited to, the proportion of cases that

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1 are successfully prosecuted through final hearing and appeal  
2 if such cases involve irremediable harm or injury or the  
3 immediate threat of irremediable harm or injury to the  
4 patient. The board shall conduct an annual evaluation to  
5 determine if the department has met the established  
6 performance parameters. A finding by the board that the  
7 department has failed to meet established parameters shall  
8 enable the board, by a majority vote, to instruct the  
9 department to retain sufficient outside contractual  
10 prosecutorial services pursuant to s. 287.057(3), to fulfill  
11 the immediate and foreseeable prosecutorial needs of the board.  
12 Contract negotiations and vendor selection shall be conducted  
13 in consultation with the chairman of the board or his  
14 designee. Each contract for prosecutorial services shall  
15 include, at a minimum, the performance parameters developed by  
16 the board for its assessment of the department.

17 (6) If requested, a representative of testing services  
18 of the Department of Health shall appear before the board, or  
19 a committee of the board, following the completion of each  
20 examination cycle to discuss examination issues. If the board  
21 identifies issues to be addressed, testing services shall  
22 report to the board, as requested at the next board meeting,  
23 on its progress in addressing the issues identified by the  
24 board.

25 (7)(a) In conjunction with each fiscal year budgetary  
26 cycle, the department, in consultation with the board, shall  
27 develop a Board of Dentistry spending plan encompassing  
28 anticipated revenue of all types along with all anticipated  
29 operating expenses of the board and associated support  
30 services of the department, which shall include all direct and  
31 allocated expenses necessary to enable the board to fulfill

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1 its responsibilities. All expenditure detail as provided  
2 herein shall reflect the methodology and calculations of the  
3 department in allocating common expenses among all regulatory  
4 boards.

5 (b) The Board of Dentistry shall have spending  
6 authority over discretionary budgetary items, as determined by  
7 the department and the board jointly. Discretionary budgetary  
8 items shall include the selection of board meeting venue,  
9 hotel facilities, and accommodations; travel of board members  
10 and necessary staff to all meetings of the board; attendance  
11 by board members at meetings and conferences deemed to be  
12 important by the board in fulfilling its responsibilities,  
13 monitoring performance, and confirming the accuracy of  
14 information provided to the board or others which relates to  
15 the duties and responsibilities of the board; and an  
16 operational contingency. Operational contingency is that  
17 portion of cash on hand that exceeds that required for the  
18 5-year spending plan as described in s. 456.005. The  
19 operational contingency may be used for a special project by  
20 the board in fulfilling its responsibilities if a deficit does  
21 not or would not exist for the profession. In exercising its  
22 spending authority over discretionary budget items, the board  
23 must adhere to all applicable state laws and directives;  
24 assure that all meeting locations are accessible to the public  
25 and licensees; assure that board meetings are conducted in an  
26 effective and efficient manner for the public and licensees;  
27 assure that the minimal number of board members or staff  
28 attend any meeting or conference; and assure the maximum use  
29 of technology. When requested by the board, the department  
30 shall provide timely procurement assistance to facilitate all  
31 discretionary expenditures of the board.

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1           (8)(a) The department shall submit a report to the  
2 Governor, the President of the Senate, and the Speaker of the  
3 House of Representatives by November 1 of each year on the  
4 effectiveness and efficiency of this section, including:  
5           1. The revenues, expenditures, and cash balances for  
6 the prior year, and a review of the adequacy of existing  
7 revenues;  
8           2. The nature and extent of all services provided to  
9 the board by the department;  
10           3. The total cost allocated by the department for each  
11 service provided by the department to the board and the amount  
12 and percent by which each cost is appropriate to dentistry's  
13 pro-rata share of the total cost of such services provided by  
14 the department to all affected boards, councils, and  
15 professions;  
16           4. The number of licensure examinations taken, the  
17 fees collected for licensure examination, and the time from  
18 which a candidate for licensure completed the required  
19 examination to the time in which the candidate received the  
20 results;  
21           5. The number of licenses issued, revoked, or  
22 suspended;  
23           6. The number of disciplinary complaints received,  
24 determined to be legally sufficient, investigated, referred to  
25 the board's probable cause panel, prosecuted, subject to final  
26 board action, and appealed; the number, maximum, and average  
27 duration of licenses suspended; the number of licenses  
28 revoked; the number of cases spanning more than 180,270, and  
29 365 days from receipt of complaints to submission to the  
30 board's probable cause panel; the proportion of cases which  
31 were eligible for and the number of cases actually resolved by



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1 citation; the proportion of cases where probable cause was  
2 found; the number of cases where probable cause was found that  
3 were not prosecuted or that did not result in stipulated  
4 agreements; the number of cases involving stipulated  
5 agreements; the number of cases involving stipulated  
6 agreements which were changed by the board and the number of  
7 cases involving stipulated agreements that were rejected  
8 without modification by the board; the number of cases taking  
9 in excess of 1 year from the date of receipt of a complaint to  
10 final board action; the number of cases involving formal  
11 hearings; the status of all cases appealed; the number of  
12 cases where licensure suspension or revocation was stayed  
13 pending appeal; the number of emergency suspension orders  
14 issued; the average and maximum range of costs of complaint  
15 investigations and prosecutions; and the amount of fines and  
16 expenses collected by type of cases prosecuted;

17 7. The status of the development and implementation of  
18 rules providing for disciplinary guidelines pursuant to s.  
19 456.079; and

20 8. Such recommendations for administrative and  
21 statutory changes necessary to facilitate efficient and  
22 cost-effective operation of the board and the department.

23 (b) The department shall include in the report any  
24 statement, comment, suggestion, recommendation, or objection  
25 made by the board in response to the report.

26 Section 60. Section 467.013, Florida Statutes, is  
27 amended to read:

28 467.013 Inactive status.--A licensee may request that  
29 his or her license be placed in an inactive status by making  
30 application to the department pursuant to department rule and  
31 paying a fee.

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1           ~~(1) An inactive license may be renewed for one~~  
2 ~~additional biennium upon application to the department and~~  
3 ~~payment of the applicable biennium renewal fee. The department~~  
4 ~~shall establish by rule procedures and fees for applying to~~  
5 ~~place a license on inactive status, renewing an inactive~~  
6 ~~license, and reactivating an inactive license. The fee for any~~  
7 ~~of these procedures may not exceed the biennial renewal fee~~  
8 ~~established by the department.~~

9           ~~(2) Any license that is not renewed by the end of the~~  
10 ~~biennium established by the department automatically reverts~~  
11 ~~to involuntary inactive status unless the licensee has applied~~  
12 ~~for voluntary inactive status. Such license may be reactivated~~  
13 ~~only if the licensee meets the requirements for reactivating~~  
14 ~~the license established by department rule.~~

15           ~~(3) A midwife who desires to reactivate an inactive~~  
16 ~~license shall apply to the department, complete the~~  
17 ~~reactivation application, remit the applicable fees, and~~  
18 ~~submit proof of compliance with the requirements for~~  
19 ~~continuing education established by department rule.~~

20           ~~(4) Each licensed midwife whose license has been~~  
21 ~~placed on inactive status for more than 1 year must complete~~  
22 ~~continuing education hours as a condition of reactivating the~~  
23 ~~inactive license.~~

24           ~~(5) The licensee shall submit to the department~~  
25 ~~evidence of participation in 10 hours of continuing education,~~  
26 ~~approved by the department and clinically related to the~~  
27 ~~practice of midwifery, for each year of the biennium in which~~  
28 ~~the license was inactive. This requirement is in addition to~~  
29 ~~submitting evidence of completing the continuing education~~  
30 ~~required for the most recent biennium in which the licensee~~  
31 ~~held an active license.~~

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1 Section 61. Section 467.0135, Florida Statutes, is  
2 amended to read:

3 467.0135 Fees.--The department shall establish fees  
4 for application, ~~examination~~, initial licensure, renewal of  
5 licensure, licensure by endorsement, inactive status,  
6 delinquent status, and reactivation of an inactive license.  
7 The appropriate fee must be paid at the time of application  
8 and is payable to the Department of Health, in accordance with  
9 rules adopted by the department. A fee is nonrefundable,  
10 unless otherwise provided by rule. A fee may not exceed:

11 ~~(1) Five hundred dollars for examination.~~

12 ~~(1)(2)~~ Five hundred dollars for initial licensure.

13 ~~(2)(3)~~ Five hundred dollars for renewal of an active  
14 license licensure.

15 ~~(3)(4)~~ Two hundred dollars for application, ~~which fee~~  
16 ~~is nonrefundable~~.

17 ~~(4)(5)~~ Five hundred dollars for renewal ~~reactivation~~  
18 of an inactive license.

19 ~~(5)(6)~~ Five hundred dollars for licensure by  
20 endorsement.

21  
22 A fee for inactive status, reactivation of an inactive  
23 license, or delinquency may not exceed the fee established by  
24 the department for biennial renewal of an active license. All  
25 fees collected under this section shall be deposited in the  
26 Medical Quality Assurance Trust Fund.

27 Section 62. Subsection (1) of section 467.017, Florida  
28 Statutes, is amended to read:

29 467.017 Emergency care plan; immunity.--

30 (1) Every licensed midwife shall develop a written  
31 plan for the appropriate delivery of emergency care. A copy

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1 of the plan shall accompany any application for license  
2 issuance and must be made available upon the request of the  
3 department or renewal. The plan shall address the following:

- 4 (a) Consultation with other health care providers.
- 5 (b) Emergency transfer.
- 6 (c) Access to neonatal intensive care units and  
7 obstetrical units or other patient care areas.

8 Section 63. Section 468.352, Florida Statutes, is  
9 amended to read:

10 (Substantial rewording of section. See  
11 s. 468.352, F.S., for present text.)

12 468.352 Definitions.--As used in this part, the term:

13 (1) "Board" means the Board of Respiratory Care.

14 (2) "Certified respiratory therapist" means any person

15 licensed pursuant to this part who is certified by the  
16 National Board for Respiratory Care or its successor; who is  
17 employed to deliver respiratory care services, under the order  
18 of a physician licensed pursuant to chapter 458 or chapter  
19 459, in accordance with protocols established by a hospital or  
20 other health care provider or the board; and who functions in  
21 situations of unsupervised patient contact requiring  
22 individual judgment.

23 (3) "Critical care" means care given to a patient in  
24 any setting involving a life-threatening emergency.

25 (4) "Department" means the Department of Health.

26 (5) "Direct supervision" means practicing under the  
27 direction of a licensed, registered, or certified respiratory  
28 therapist who is physically on the premises and readily  
29 available, as defined by the board.

30 (6) "Physician supervision" means supervision and  
31 control by a physician licensed under chapter 458 or chapter

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1 459 who assumes the legal liability for the services rendered  
2 by the personnel employed in his or her office. Except in the  
3 case of an emergency, physician supervision requires the easy  
4 availability of the physician within the office or the  
5 physical presence of the physician for consultation and  
6 direction of the actions of the persons who deliver  
7 respiratory care services.

8       (7) "Practice of respiratory care" or "respiratory  
9 therapy" means the allied health specialty associated with the  
10 cardiopulmonary system that is practiced under the orders of a  
11 physician licensed under chapter 458 or chapter 459 and in  
12 accordance with protocols, policies, and procedures  
13 established by a hospital or other health care provider or the  
14 board, including the assessment, diagnostic evaluation,  
15 treatment, management, control, rehabilitation, education, and  
16 care of patients in all care settings.

17       (8) "Registered respiratory therapist" means any  
18 person licensed under this part who is registered by the  
19 National Board for Respiratory Care or its successor, and who  
20 is employed to deliver respiratory care services under the  
21 order of a physician licensed under chapter 458 or chapter  
22 459, in accordance with protocols established by a hospital or  
23 other health care provider or the board, and who functions in  
24 situations of unsupervised patient contact requiring  
25 individual judgment.

26       (9) "Respiratory care practitioner" means any person  
27 licensed under this part who is employed to deliver  
28 respiratory care services, under direct supervision, pursuant  
29 to the order of a physician licensed under chapter 458 or  
30 chapter 459.

31       (10) "Respiratory care services" includes:

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- 1           (a) Evaluation and disease management.
- 2           (b) Diagnostic and therapeutic use of respiratory
- 3 equipment, devices, or medical gas.
- 4           (c) Administration of drugs, as duly ordered or
- 5 prescribed by a physician licensed under chapter 458 or
- 6 chapter 459 and in accordance with protocols, policies, and
- 7 procedures established by a hospital or other health care
- 8 provider or the board.
- 9           (d) Initiation, management, and maintenance of
- 10 equipment to assist and support ventilation and respiration.
- 11           (e) Diagnostic procedures, research, and therapeutic
- 12 treatment and procedures, including measurement of ventilatory
- 13 volumes, pressures, and flows; specimen collection and
- 14 analysis of blood for gas transport and acid/base
- 15 determinations; pulmonary-function testing; and other related
- 16 physiological monitoring of cardiopulmonary systems.
- 17           (f) Cardiopulmonary rehabilitation.
- 18           (g) Cardiopulmonary resuscitation, advanced cardiac
- 19 life support, neonatal resuscitation, and pediatric advanced
- 20 life support, or equivalent functions.
- 21           (h) Insertion and maintenance of artificial airways
- 22 and intravascular catheters.
- 23           (i) Performing sleep-disorder studies.
- 24           (j) Education of patients, families, the public, or
- 25 other health care providers, including disease process and
- 26 management programs and smoking prevention and cessation
- 27 programs.
- 28           (k) Initiation and management of hyperbaric oxygen.
- 29           Section 64. Section 468.355, Florida Statutes, is
- 30 amended to read:
- 31           (Substantial rewording of section. See

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1           s. 468.355, F.S., for present text.)  
2           468.355 Licensure requirements.--To be eligible for  
3 licensure by the board, an applicant must be an active  
4 "Certified Respiratory Therapist" or be an active "Registered  
5 Respiratory Therapist" by the National Board for Respiratory  
6 Care, or its successor.

7           Section 65. Section 468.368, Florida Statutes, is  
8 amended to read:

9           (Substantial rewording of section. See  
10 s. 468.368, F.S., for present text.)

11           468.368 Exemptions.--This part may not be construed to  
12 prevent or restrict the practice, service, or activities of:

13           (1) Any person licensed in this state by any other law  
14 from engaging in the profession or occupation for which he or  
15 she is licensed.

16           (2) Any legally qualified person in the state or  
17 another state or territory who is employed by the United  
18 States Government or any agency thereof while such person is  
19 discharging his or her official duties.

20           (3) A friend or family member who is providing  
21 respiratory care services to an ill person and who does not  
22 represent himself or herself to be a respiratory care  
23 practitioner or respiratory therapist.

24           (4) An individual providing respiratory care services  
25 in an emergency who does not represent himself or herself as a  
26 respiratory care practitioner or respiratory therapist.

27           (5) Any individual employed to deliver, assemble, set  
28 up, or test equipment for use in a home, upon the order of a  
29 physician licensed pursuant to chapter 458 or chapter 459.

30 This subsection does not, however, authorize the practice of  
31 respiratory care without a license.

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1           (6) Any individual performing polysomnography under  
2 medical direction as related to the diagnosis and evaluation  
3 of treatment for sleep disorders.

4           (7) Any individual certified or registered as a  
5 pulmonary function technologist who is credentialed by the  
6 National Board for Respiratory Care for performing  
7 cardiopulmonary diagnostic studies.

8           (8) Any student who is enrolled in an accredited  
9 respiratory care program approved by the board, while  
10 performing respiratory care as an integral part of a required  
11 course.

12           (9) The delivery of incidental respiratory care to  
13 noninstitutionalized persons by surrogate family members who  
14 do not represent themselves as registered or certified  
15 respiratory care therapists.

16           (10) Any individual credentialed by the Underseas  
17 Hyperbaric Society in hyperbaric medicine or its equivalent as  
18 determined by the board, while performing related duties. This  
19 subsection does not, however, authorize the practice of  
20 respiratory care without a license.

21           Section 66. Sections 468.356 and 468.357, Florida  
22 Statutes, are repealed, effective January 1, 2004.

23           Section 67. Subsection (1) of section 491.005, Florida  
24 Statutes, is amended to read:

25           491.005 Licensure by examination.--

26           (1) CLINICAL SOCIAL WORK.--Upon verification of  
27 documentation and payment of a fee not to exceed \$200, as set  
28 by board rule, plus the actual per applicant cost to the  
29 department for purchase of the examination from the American  
30 Association of State Social Worker's Boards or a similar  
31 national organization, the department shall issue a license as



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1 a clinical social worker to an applicant who the board  
2 certifies:

3 (a) Has made application therefor and paid the  
4 appropriate fee.

5 (b)1. Has received a doctoral degree in social work  
6 from a graduate school of social work which at the time the  
7 applicant graduated was accredited by an accrediting agency  
8 recognized by the United States Department of Education or has  
9 received a master's degree in social work from a graduate  
10 school of social work which at the time the applicant  
11 graduated:

12 a. Was accredited by the Council on Social Work  
13 Education;

14 b. Was accredited by the Canadian Association of  
15 Schools of Social Work; or

16 c. Has been determined to have been a program  
17 equivalent to programs approved by the Council on Social Work  
18 Education by the Foreign Equivalency Determination Service of  
19 the Council on Social Work Education. An applicant who  
20 graduated from a program at a university or college outside of  
21 the United States or Canada must present documentation of the  
22 equivalency determination from the council in order to  
23 qualify.

24 2. The applicant's graduate program must have  
25 emphasized direct clinical patient or client health care  
26 services, including, but not limited to, coursework in  
27 clinical social work, psychiatric social work, medical social  
28 work, social casework, psychotherapy, or group therapy. The  
29 applicant's graduate program must have included all of the  
30 following coursework:

31 a. A supervised field placement which was part of the

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1 applicant's advanced concentration in direct practice, during  
2 which the applicant provided clinical services directly to  
3 clients.

4           b. Completion of 24 semester hours or 32 quarter hours  
5 in theory of human behavior and practice methods as courses in  
6 clinically oriented services, including a minimum of one  
7 course in psychopathology, and no more than one course in  
8 research, taken in a school of social work accredited or  
9 approved pursuant to subparagraph 1.

10           3. If the course title which appears on the  
11 applicant's transcript does not clearly identify the content  
12 of the coursework, the applicant shall be required to provide  
13 additional documentation, including, but not limited to, a  
14 syllabus or catalog description published for the course.

15           (c) Has had not less than 2 years of clinical social  
16 work experience, which took place subsequent to completion of  
17 a graduate degree in social work at an institution meeting the  
18 accreditation requirements of this section, under the  
19 supervision of a licensed clinical social worker or the  
20 equivalent who is a qualified supervisor as determined by the  
21 board. An individual who intends to practice in Florida to  
22 satisfy clinical experience requirements must register  
23 pursuant to s. 491.0045 prior to commencing practice. If the  
24 applicant's graduate program was not a program which  
25 emphasized direct clinical patient or client health care  
26 services as described in subparagraph (b)2., the supervised  
27 experience requirement must take place after the applicant has  
28 completed a minimum of 15 semester hours or 22 quarter hours  
29 of the coursework required. A doctoral internship may be  
30 applied toward the clinical social work experience  
31 requirement. The experience requirement may be met by work

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1 performed on or off the premises of the supervising clinical  
 2 social worker or the equivalent, provided the off-premises  
 3 work is not the independent private practice rendering of  
 4 clinical social work that does not have a licensed mental  
 5 health professional, as determined by the board, on the  
 6 premises at the same time the intern is providing services.

7 (d) Has passed a theory and practice examination  
 8 approved provided by the board department for this purpose,  
 9 which may be taken only following completion of the clinical  
 10 experience requirement.

11 (e) Has demonstrated, in a manner designated by rule  
 12 of the board, knowledge of the laws and rules governing the  
 13 practice of clinical social work, marriage and family therapy,  
 14 and mental health counseling.

15  
 16 All coursework requirements in this section shall be satisfied  
 17 by successfully completing the required course as a student or  
 18 by teaching the required graduate course as an instructor or  
 19 professor in an accredited institution.

20 Section 68. Section 491.0145, Florida Statutes, is  
 21 amended to read:

22 491.0145 Certified master social worker.--The  
 23 department may not adopt any rules that would allow a person  
 24 who was not licensed as a certified master social worker in  
 25 accordance with this chapter on January 1, 1990, to become  
 26 licensed. The department may certify an applicant for a  
 27 designation as a certified master social worker upon the  
 28 following conditions:

29 (1) The applicant completes an application to be  
 30 provided by the department and pays a nonrefundable fee not to  
 31 exceed \$250 to be established by rule of the department. The

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1 completed application must be received by the department at  
2 least 60 days before the date of the examination in order for  
3 the applicant to qualify to take the scheduled exam.

4 (2) The applicant submits proof satisfactory to the  
5 department that the applicant has received a doctoral degree  
6 in social work, or a master's degree with a major emphasis or  
7 specialty in clinical practice or administration, including,  
8 but not limited to, agency administration and supervision,  
9 program planning and evaluation, staff development, research,  
10 community organization, community services, social planning,  
11 and human service advocacy. Doctoral degrees must have been  
12 received from a graduate school of social work which at the  
13 time the applicant was enrolled and graduated was accredited  
14 by an accrediting agency approved by the United States  
15 Department of Education. Master's degrees must have been  
16 received from a graduate school of social work which at the  
17 time the applicant was enrolled and graduated was accredited  
18 by the Council on Social Work Education or the Canadian  
19 Association of Schools of Social Work or by one that meets  
20 comparable standards.

21 (3) The applicant has had at least 3 years'  
22 experience, as defined by rule, including, but not limited to,  
23 clinical services or administrative activities as defined in  
24 subsection (2), 2 years of which must be at the post-master's  
25 level under the supervision of a person who meets the  
26 education and experience requirements for certification as a  
27 certified master social worker, as defined by rule, or  
28 licensure as a clinical social worker under this chapter. A  
29 doctoral internship may be applied toward the supervision  
30 requirement.

31 (4) Any person who holds a master's degree in social

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1 work from institutions outside the United States may apply to  
 2 the department for certification if the academic training in  
 3 social work has been evaluated as equivalent to a degree from  
 4 a school accredited by the Council on Social Work Education.  
 5 Any such person shall submit a copy of the academic training  
 6 from the Foreign Equivalency Determination Service of the  
 7 Council on Social Work Education.

8 (5) The applicant has passed an examination required  
 9 by the department for this purpose. The nonrefundable fee for  
 10 such examination may not exceed \$250 as set by department  
 11 rule.

12 (6) Nothing in this chapter shall be construed to  
 13 authorize a certified master social worker to provide clinical  
 14 social work services.

15 Section 69. Section 491.0146, Florida Statutes, is  
 16 created to read:

17 491.0146 Savings clause.--All licenses to practice as  
 18 a certified master social worker issued pursuant to this  
 19 chapter and valid on October 1, 2002, shall remain in full  
 20 force and effect.

21 Section 70. Subsection (3) of section 491.0147,  
 22 Florida Statutes, is amended to read:

23 491.0147 Confidentiality and privileged  
 24 communications.--Any communication between any person licensed  
 25 or certified under this chapter and her or his patient or  
 26 client shall be confidential. This secrecy may be waived under  
 27 the following conditions:

28 (3)(a) When there is a clear and immediate probability  
 29 of physical harm to the patient or client, to other  
 30 individuals, or to society and the person licensed or  
 31 certified under this chapter communicates the information only

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1 to the potential victim, appropriate family member, or law  
2 enforcement or other appropriate authorities.

3 (b) There shall be no civil or criminal liability  
4 arising from the disclosure of otherwise confidential  
5 communications by a person licensed or certified under this  
6 chapter when the disclosure is made pursuant to paragraph (a).

7 Section 71. Subsection (1) of section 627.912, Florida  
8 Statutes, is amended to read:

9 627.912 Professional liability claims and actions;  
10 reports by insurers.--

11 (1) Each self-insurer authorized under s. 627.357 and  
12 each insurer or joint underwriting association providing  
13 professional liability insurance to a practitioner of medicine  
14 licensed under chapter 458, to a practitioner of osteopathic  
15 medicine licensed under chapter 459, to a podiatric physician  
16 licensed under chapter 461, to a dentist licensed under  
17 chapter 466, to a hospital licensed under chapter 395, to a  
18 crisis stabilization unit licensed under part IV of chapter  
19 394, to a health maintenance organization certificated under  
20 part I of chapter 641, to clinics included in chapter 390, to  
21 an ambulatory surgical center as defined in s. 395.002, or to  
22 a member of The Florida Bar shall report in duplicate to the  
23 Department of Insurance any claim or action for damages for  
24 personal injuries claimed to have been caused by error,  
25 omission, or negligence in the performance of such insured's  
26 professional services or based on a claimed performance of  
27 professional services without consent, if the claim resulted  
28 in:

- 29 (a) A final judgment in any amount.  
30 (b) A settlement in any amount.

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1 Reports shall be filed with the department and, if the insured  
 2 party is licensed under chapter 458, chapter 459, or chapter  
 3 461, and the final judgment or settlement amount was \$50,000  
 4 or more, if the insured party is licensed under chapter 466  
 5 and the final judgment or settlement amount was \$25,000 or  
 6 more ~~or chapter 466~~, with the Department of Health, no later  
 7 than 30 days following the occurrence of any event listed in  
 8 paragraph (a) or paragraph (b). The Department of Health shall  
 9 review each report and determine whether any of the incidents  
 10 that resulted in the claim potentially involved conduct by the  
 11 licensee that is subject to disciplinary action, in which case  
 12 the provisions of s. 456.073 shall apply. The Department of  
 13 Health, as part of the annual report required by s. 456.026,  
 14 shall publish annual statistics, without identifying  
 15 licensees, on the reports it receives, including final action  
 16 taken on such reports by the Department of Health or the  
 17 appropriate regulatory board.

18 Section 72. Paragraph (a) of subsection (1) of section  
 19 766.101, Florida Statutes, is amended to read:

20 766.101 Medical review committee, immunity from  
 21 liability.--

22 (1) As used in this section:

23 (a) The term "medical review committee" or "committee"  
 24 means:

25 1.a. A committee of a hospital or ambulatory surgical  
 26 center licensed under chapter 395 or a health maintenance  
 27 organization certificated under part I of chapter 641,

28 b. A committee of a physician-hospital organization, a  
 29 provider-sponsored organization, or an integrated delivery  
 30 system,

31 c. A committee of a state or local professional

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1 society of health care providers,

2           d. A committee of a medical staff of a licensed  
3 hospital or nursing home, provided the medical staff operates  
4 pursuant to written bylaws that have been approved by the  
5 governing board of the hospital or nursing home,

6           e. A committee of the Department of Corrections or the  
7 Correctional Medical Authority as created under s. 945.602, or  
8 employees, agents, or consultants of either the department or  
9 the authority or both,

10           f. A committee of a professional service corporation  
11 formed under chapter 621 or a corporation organized under  
12 chapter 607 or chapter 617, which is formed and operated for  
13 the practice of medicine as defined in s. 458.305(3), and  
14 which has at least 25 health care providers who routinely  
15 provide health care services directly to patients,

16           g. A committee of a mental health treatment facility  
17 licensed under chapter 394 or a community mental health center  
18 as defined in s. 394.907, provided the quality assurance  
19 program operates pursuant to the guidelines which have been  
20 approved by the governing board of the agency,

21           h. A committee of a substance abuse treatment and  
22 education prevention program licensed under chapter 397  
23 provided the quality assurance program operates pursuant to  
24 the guidelines which have been approved by the governing board  
25 of the agency,

26           i. A peer review or utilization review committee  
27 organized under chapter 440,

28           j. A committee of the Department of Health, a county  
29 health department, healthy start coalition, or certified rural  
30 health network, when reviewing quality of care, or employees  
31 of these entities when reviewing mortality records, ~~or~~



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1 k. A continuous quality improvement committee of a  
2 pharmacy licensed pursuant to chapter 465,

3 1. A committee established by a university board of  
4 trustees, or

5 m. A committee comprised of faculty, residents,  
6 students, and administrators of an accredited college of  
7 medicine, college of nursing, or other health care discipline.

8  
9 which committee is formed to evaluate and improve the quality  
10 of health care rendered by providers of health service or to  
11 determine that health services rendered were professionally  
12 indicated or were performed in compliance with the applicable  
13 standard of care or that the cost of health care rendered was  
14 considered reasonable by the providers of professional health  
15 services in the area; or

16 2. A committee of an insurer, self-insurer, or joint  
17 underwriting association of medical malpractice insurance, or  
18 other persons conducting review under s. 766.106.

19 Section 73. Paragraph (a) of subsection (4) of section  
20 766.314, Florida Statutes, is amended to read:

21 766.314 Assessment; plan of operation.--

22 (4) The following persons and entities shall pay into  
23 the association an initial assessment in accordance with the  
24 plan of operation:

25 (a) On or before October 1, 1988, each hospital  
26 licensed under chapter 395 shall pay an initial assessment of  
27 \$50 per infant delivered in the hospital during the prior  
28 calendar year, as reported to the Agency for Health Care  
29 Administration; provided, however, that a hospital owned or  
30 operated by the state or a county, special taxing district, or  
31 other political subdivision of the state shall not be required

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1 to pay the initial assessment or any assessment required by  
 2 subsection (5). The term "infant delivered" includes live  
 3 births and not stillbirths, but the term does not include  
 4 infants delivered by employees or agents of the Board of  
 5 Regents, ~~or~~ those born in a teaching hospital as defined in s.  
 6 408.07, or those born in a family practice teaching hospital  
 7 designated pursuant to s. 395.806 which was exempted by the  
 8 association from assessments for fiscal years 1997-1998  
 9 through 2001-2002. The initial assessment and any assessment  
 10 imposed pursuant to subsection (5) may not include any infant  
 11 born to a charity patient (as defined by rule of the Agency  
 12 for Health Care Administration) or born to a patient for whom  
 13 the hospital receives Medicaid reimbursement, if the sum of  
 14 the annual charges for charity patients plus the annual  
 15 Medicaid contractals of the hospital exceeds 10 percent of  
 16 the total annual gross operating revenues of the hospital.  
 17 The hospital is responsible for documenting, to the  
 18 satisfaction of the association, the exclusion of any birth  
 19 from the computation of the assessment. Upon demonstration of  
 20 financial need by a hospital, the association may provide for  
 21 installment payments of assessments.

22 Section 74. Section 456.031, Florida Statutes, is  
 23 amended to read:

24 456.031 Requirement for instruction on domestic  
 25 violence.--

26 (1)(a) The appropriate board shall require each person  
 27 licensed or certified under chapter 458, chapter 459, part I  
 28 of chapter 464, chapter 466, chapter 467, chapter 490, or  
 29 chapter 491 to complete a ~~1-hour~~ continuing education course,  
 30 approved by the board, on domestic violence, as defined in s.  
 31 741.28, as part of initial licensure, biennial relicensure, or

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1 recertification. The course shall consist of a skills-based  
 2 curriculum that includes practice protocols for identifying  
 3 and treating a victim of domestic violence consistent with the  
 4 profession and instructions on practical applications. For  
 5 purposes of this section, the term "skills-based curriculum"  
 6 means a curriculum that details methods of practical  
 7 application to improve responses to domestic violence victims  
 8 through culturally competent methods of routine screening,  
 9 assessment, intervention, and health-records documentation.  
 10 Each licensee must complete 2 hours of continuing education on  
 11 domestic violence every 4 years, as prescribed by board rule.  
 12 Initial applicants for licensure must be allowed 1 year  
 13 following the date of licensure to complete the required  
 14 course information on the number of patients in that  
 15 professional's practice who are likely to be victims of  
 16 domestic violence and the number who are likely to be  
 17 perpetrators of domestic violence, screening procedures for  
 18 determining whether a patient has any history of being either  
 19 a victim or a perpetrator of domestic violence, and  
 20 instruction on how to provide such patients with information  
 21 on, or how to refer such patients to, resources in the local  
 22 community, such as domestic violence centers and other  
 23 advocacy groups, that provide legal aid, shelter, victim  
 24 counseling, batterer counseling, or child protection services.

25 ~~(b) Each such licensee or certificateholder shall~~  
 26 ~~submit confirmation of having completed such course, on a form~~  
 27 ~~provided by the board, when submitting fees for each biennial~~  
 28 ~~renewal.~~

29 ~~(c) The board may approve additional equivalent~~  
 30 ~~courses that may be used to satisfy the requirements of~~  
 31 ~~paragraph (a). Each licensing board that requires a licensee~~

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1 ~~to complete an educational course pursuant to this subsection~~  
2 ~~may include the hour required for completion of the course in~~  
3 ~~the total hours of continuing education required by law for~~  
4 ~~such profession unless the continuing education requirements~~  
5 ~~for such profession consist of fewer than 30 hours biennially.~~

6 ~~(b)(d)~~ Any person holding two or more licenses subject  
7 to the provisions of this subsection shall be permitted to  
8 show proof of having taken one board-approved course on  
9 domestic violence, for purposes of initial licensure,  
10 relicensure, or recertification for additional licenses.

11 ~~(e)~~ Failure to comply with the requirements of this  
12 subsection shall constitute grounds for disciplinary action  
13 under each respective practice act and under s. 456.072(1)(k).  
14 ~~In addition to discipline by the board, the licensee shall be~~  
15 ~~required to complete such course.~~

16 ~~(2)~~ The board shall also require, as a condition of  
17 granting a license under any chapter specified in paragraph  
18 ~~(1)(a), that each applicant for initial licensure under the~~  
19 ~~appropriate chapter complete an educational course acceptable~~  
20 ~~to the board on domestic violence which is substantially~~  
21 ~~equivalent to the course required in subsection (1). An~~  
22 ~~applicant who has not taken such course at the time of~~  
23 ~~licensure shall, upon submission of an affidavit showing good~~  
24 ~~cause, be allowed 6 months to complete such requirement.~~

25 ~~(3)(a)~~ In lieu of completing a course as required in  
26 subsection (1), a licensee or certificateholder may complete a  
27 course in end-of-life care and palliative health care, if the  
28 licensee or certificateholder has completed an approved  
29 domestic violence course in the immediately preceding  
30 biennium.

31 ~~(b)~~ In lieu of completing a course as required by

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1 ~~subsection (1), a person licensed under chapter 466 who has~~  
2 ~~completed an approved domestic violence education course in~~  
3 ~~the immediately preceding 2 years may complete a course~~  
4 ~~approved by the Board of Dentistry.~~

5       ~~(2)(4)~~ Each board may adopt rules to carry out the  
6 provisions of this section.

7       ~~(5)~~ Each board shall report to the President of the  
8 Senate, the Speaker of the House of Representatives, and the  
9 chairs of the appropriate substantive committees of the  
10 Legislature by March 1 of each year as to the implementation  
11 of and compliance with the requirements of this section.

12       Section 75. Paragraph (b) of subsection (4) of section  
13 766.314, Florida Statutes, is amended to read:

14       766.314 Assessments; plan of operation.--

15       (4) The following persons and entities shall pay into  
16 the association an initial assessment in accordance with the  
17 plan of operation:

18       (b)1. On or before October 15, 1988, all physicians  
19 licensed pursuant to chapter 458 or chapter 459 as of October  
20 1, 1988, other than participating physicians, shall be  
21 assessed an initial assessment of \$250, which must be paid no  
22 later than December 1, 1988.

23       2. Any such physician who becomes licensed after  
24 September 30, 1988, and before January 1, 1989, shall pay into  
25 the association an initial assessment of \$250 upon licensure.

26       3. Any such physician who becomes licensed on or after  
27 January 1, 1989, shall pay an initial assessment equal to the  
28 most recent assessment made pursuant to this paragraph,  
29 paragraph (5)(a), or paragraph (7)(b).

30       4. However, if the physician is a physician specified  
31 in this subparagraph, the assessment is not applicable:

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1 a. A resident physician, assistant resident physician,  
2 or intern in an approved postgraduate training program, as  
3 defined by the Board of Medicine or the Board of Osteopathic  
4 Medicine by rule;

5 b. A retired physician who has withdrawn from the  
6 practice of medicine but who maintains an active license as  
7 evidenced by an affidavit filed with the Department of Health.  
8 Prior to reentering the practice of medicine in this state, a  
9 retired physician as herein defined must notify the Board of  
10 Medicine or the Board of Osteopathic Medicine and pay the  
11 appropriate assessments pursuant to this section;

12 c. A physician who holds a limited license pursuant to  
13 s. 458.315 ~~458.317~~ and who is not being compensated for  
14 medical services;

15 d. A physician who is employed full time by the United  
16 States Department of Veterans Affairs and whose practice is  
17 confined to United States Department of Veterans Affairs  
18 hospitals; or

19 e. A physician who is a member of the Armed Forces of  
20 the United States and who meets the requirements of s.  
21 456.024.

22 f. A physician who is employed full time by the State  
23 of Florida and whose practice is confined to state-owned  
24 correctional institutions, a county health department, or  
25 state-owned mental health or developmental services  
26 facilities, or who is employed full time by the Department of  
27 Health.

28 Section 76. Paragraph (a) of subsection (1) of section  
29 817.567, Florida Statutes, is amended to read:

30 817.567 Making false claims of academic degree or  
31 title.--

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1 (1) No person in the state may claim, either orally or  
2 in writing, to possess an academic degree, as defined in s.  
3 1005.02, or the title associated with said degree, unless the  
4 person has, in fact, been awarded said degree from an  
5 institution that is:

6 (a) Accredited by a regional or professional  
7 accrediting agency recognized by the United States Department  
8 of Education or the Council for Higher Education ~~Commission on~~  
9 ~~Recognition of Postsecondary~~ Accreditation;

10 Section 77. Subsection (13) of section 1009.992,  
11 Florida Statutes, is amended to read:

12 1009.992 Definitions.--As used in this act:

13 (13) "Institution" means any college or university  
14 which, by virtue of law or charter, is accredited by and holds  
15 membership in the Council for Higher Education ~~Commission on~~  
16 ~~Recognition of Postsecondary~~ Accreditation; which grants  
17 baccalaureate or associate degrees; which is not a pervasively  
18 sectarian institution; and which does not discriminate in the  
19 admission of students on the basis of race, color, religion,  
20 sex, or creed.

21 Section 78. Section 1012.46, Florida Statutes, is  
22 amended to read:

23 1012.46 Athletic trainers.--

24 (1) School districts may establish and implement an  
25 athletic injuries prevention and treatment program. Central to  
26 this program should be the employment and availability of  
27 persons trained in the prevention and treatment of physical  
28 injuries which may occur during athletic activities. The  
29 program should reflect opportunities for progressive  
30 advancement and compensation in employment as provided in  
31 subsection (2) and meet certain other minimum standards

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1 developed by the Department of Education. ~~The goal of the~~  
 2 ~~Legislature is to have school districts employ and have~~  
 3 ~~available a full-time teacher athletic trainer in each high~~  
 4 ~~school in the state.~~

5 (2) To the extent practicable, a school district  
 6 program should include the following employment classification  
 7 and advancement scheme:

8 (a) First responder.--To qualify as a first responder,  
 9 a person must possess a professional, temporary, part-time,  
 10 adjunct, or substitute certificate pursuant to s. 1012.56, be  
 11 certified in cardiopulmonary resuscitation, first aid, and  
 12 have 15 semester hours in courses such as care and prevention  
 13 of athletic injuries, anatomy, physiology, nutrition,  
 14 counseling, and other similar courses approved by the  
 15 Commissioner of Education. This person may only administer  
 16 first aid and similar care, and shall not hold himself or  
 17 herself out to the school district or public as an athletic  
 18 trainer pursuant to part XIII of chapter 468.

19 (b) ~~Teacher~~ Athletic trainer.--To qualify as an a  
 20 ~~teacher~~ athletic trainer, a person must be licensed as  
 21 required by part XIII of chapter 468 and may be utilized by  
 22 the school district as ~~possess~~ a professional, temporary,  
 23 part-time, adjunct, or substitute ~~teacher~~ ~~certificate~~ pursuant  
 24 to s. 1012.35, s. 1012.56, or s. 1012.57, ~~and be licensed as~~  
 25 ~~required by part XIII of chapter 468.~~

26 Section 79. Sections 456.033, 456.034, 458.313,  
 27 458.316, 458.3165, and 458.317, Florida Statutes, are  
 28 repealed.

29 Section 80. The Division of Administrative Hearings  
 30 shall designate at least two administrative law judges who  
 31 shall specifically preside over actions involving the



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1 Department of Health or boards within the Department of Health  
2 and a health care practitioner or professional as defined in  
3 section 456.001, Florida Statutes. Each designated  
4 administrative law judge must be a member of The Florida Bar  
5 in good standing and must have experience working in the  
6 health care industry or have attained board certification in  
7 health care law from The Florida Bar.

8 Section 81. Sections 58-61 of this act may be cited as  
9 the "Florida Alzheimer's Training Act."

10 Section 82. Section 400.4785, Florida Statutes, is  
11 amended to read:

12 400.4785 Patients with Alzheimer's disease or other  
13 related disorders; staff training requirements; certain  
14 disclosures.--

15 (1) A home health agency must provide the following  
16 staff training:

17 (a) Upon beginning employment with the agency, each  
18 employee must receive basic written information about  
19 interacting with participants who have Alzheimer's disease or  
20 dementia-related disorders.

21 (b) In addition to the information provided under  
22 paragraph (a), newly hired home health agency personnel who  
23 will be providing direct care to patients must complete 2  
24 hours of training in Alzheimer's disease and dementia-related  
25 disorders within 9 months after beginning employment with the  
26 agency. This training must include, but is not limited to, an  
27 overview of dementia, a demonstration of basic skills in  
28 communicating with persons who have dementia, the management  
29 of problem behaviors, information about promoting the client's  
30 independence in activities of daily living, and instruction in  
31 skills for working with families and caregivers.

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1       (c) For certified nursing assistants, the required 2  
2 hours of training shall be part of the total hours of training  
3 required annually.

4       (d) For a health care practitioner as defined in s.  
5 456.001, continuing education hours taken as required by that  
6 practitioner's licensing board shall be counted toward this  
7 total of 2 hours.

8       (e) For an employee who is a licensed health care  
9 practitioner as defined in s. 456.001, training that is  
10 sanctioned by that practitioner's licensing board shall be  
11 considered to be approved by the Department of Elderly  
12 Affairs.

13       (f) The Department of Elderly Affairs, or its  
14 designee, must approve the required training. The department  
15 must consider for approval training offered in a variety of  
16 formats. The department shall keep a list of current providers  
17 who are approved to provide the 2-hour training. The  
18 department shall adopt rules to establish standards for  
19 employees who are subject to this training and for the  
20 trainers and the training required in this section.

21       (g) Upon completing the training listed in this  
22 section, the employee shall be issued a certificate that  
23 states that the training mandated under this section has been  
24 received. The certificate shall be dated and signed by the  
25 training provider. The certificate is evidence of completion  
26 of this training, and the employee is not required to repeat  
27 this training if the employee changes employment to a  
28 different home health agency.

29       (h) An employee who is hired on or after July 1, 2004,  
30 must complete the required training by July 1, 2005, or by the  
31 deadline specified in this section, whichever is later.

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1           (2) An agency licensed under this part which claims  
 2 that it provides special care for persons who have Alzheimer's  
 3 disease or other related disorders must disclose in its  
 4 advertisements or in a separate document those services that  
 5 distinguish the care as being especially applicable to, or  
 6 suitable for, such persons. The agency must give a copy of all  
 7 such advertisements or a copy of the document to each person  
 8 who requests information about the agency and must maintain a  
 9 copy of all such advertisements and documents in its records.  
 10 The Agency for Health Care Administration shall examine all  
 11 such advertisements and documents in the agency's records as  
 12 part of the license renewal procedure.

13           Section 83. Section 400.5571, Florida Statutes, is  
 14 amended to read:

15           400.5571 Patients with Alzheimer's disease or other  
 16 related disorders; staff training requirements; certain  
 17 disclosures.--

18           (1) An adult day care center licensed under this part  
 19 must provide the following staff training:

20           (a) Upon beginning employment with the facility, each  
 21 employee must receive basic written information about  
 22 interacting with participants who have Alzheimer's disease or  
 23 dementia-related disorders.

24           (b) In addition to the information provided under  
 25 paragraph (a), newly hired adult-day-care-center personnel who  
 26 are expected to, or whose responsibilities require them to,  
 27 have direct contact with participants who have Alzheimer's  
 28 disease or dementia-related disorders must complete initial  
 29 training of at least 1 hour within the first 3 months after  
 30 beginning employment. The training must include an overview of  
 31 dementias and must provide instruction in basic skills for

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1 communicating with persons who have dementia.

2 (c) In addition to the requirements of paragraphs (a)  
 3 and (b), an employee who will be providing direct care to a  
 4 participant who has Alzheimer's disease or dementia-related  
 5 disorders must complete an additional 3 hours of training  
 6 within 9 months after beginning employment. This training must  
 7 include, but is not limited to, the management of problem  
 8 behaviors, information about promoting the participant's  
 9 independence in activities of daily living, and instruction in  
 10 skills for working with families and caregivers.

11 (d) For certified nursing assistants, the required 4  
 12 hours of training shall be part of the total hours of training  
 13 required annually.

14 (e) For a health care practitioner as defined in s.  
 15 456.001, continuing education hours taken as required by that  
 16 practitioner's licensing board shall be counted toward this  
 17 total of 4 hours.

18 (f) For an employee who is a licensed health care  
 19 practitioner as defined in s. 456.001, training that is  
 20 sanctioned by that practitioner's licensing board shall be  
 21 considered to be approved by the Department of Elderly  
 22 Affairs.

23 (g) The Department of Elderly Affairs or its designee  
 24 must approve the 1-hour and 3-hour training provided to  
 25 employees and direct caregivers under this section. The  
 26 department must consider for approval training offered in a  
 27 variety of formats. The department shall keep a list of  
 28 current providers who are approved to provide the 1-hour and  
 29 3-hour training. The department shall adopt rules to establish  
 30 standards for employees who are subject to this training and  
 31 for the trainers and the training required in this section.

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1       (h) Upon completing any training described in this  
2 section, the employee or direct caregiver shall be issued a  
3 certificate that includes the name of the training provider,  
4 the topic covered, and the date and signature of the training  
5 provider. The certificate is evidence of completion of  
6 training in the identified topic, and the employee or direct  
7 caregiver is not required to repeat training in that topic if  
8 the employee or direct caregiver changes employment to a  
9 different adult day care center or to an assisted living  
10 facility, nursing home, home health agency, or hospice. The  
11 direct caregiver must comply with other applicable continuing  
12 education requirements.

13       (i) An employee who is hired on or after July 1, 2003,  
14 must complete the required training by July 1, 2004, or by the  
15 deadline specified in this section, whichever is later.

16       (2) A center licensed under this part which claims  
17 that it provides special care for persons who have Alzheimer's  
18 disease or other related disorders must disclose in its  
19 advertisements or in a separate document those services that  
20 distinguish the care as being especially applicable to, or  
21 suitable for, such persons. The center must give a copy of  
22 all such advertisements or a copy of the document to each  
23 person who requests information about the center and must  
24 maintain a copy of all such advertisements and documents in  
25 its records. The agency shall examine all such advertisements  
26 and documents in the center's records as part of the license  
27 renewal procedure.

28       Section 84. Section 400.6045, Florida Statutes, is  
29 amended to read:

30       400.6045 Patients with Alzheimer's disease or other  
31 related disorders; staff training requirements; certain

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1 disclosures.--

2 (1) A hospice licensed under this part must provide  
3 the following staff training:

4 (a) Upon beginning employment with the agency, each  
5 employee must receive basic written information about  
6 interacting with persons who have Alzheimer's disease or  
7 dementia-related disorders.

8 (b) In addition to the information provided under  
9 paragraph (a), employees who are expected to, or whose  
10 responsibilities require them to, have direct contact with  
11 participants who have Alzheimer's disease or dementia-related  
12 disorders must complete initial training of at least 1 hour  
13 within the first 3 months after beginning employment. The  
14 training must include an overview of dementias and must  
15 provide instruction in basic skills for communicating with  
16 persons who have dementia.

17 (c) In addition to the requirements of paragraphs (a)  
18 and (b), an employee who will be providing direct care to a  
19 participant who has Alzheimer's disease or dementia-related  
20 disorders must complete an additional 3 hours of training  
21 within 9 months after beginning employment. This training must  
22 include, but is not limited to, the management of problem  
23 behaviors, information about promoting the patient's  
24 independence in activities of daily living, and instruction in  
25 skills for working with families and caregivers.

26 (d) For certified nursing assistants, the required 4  
27 hours of training shall be part of the total hours of training  
28 required annually.

29 (e) For a health care practitioner as defined in s.  
30 456.001, continuing education hours taken as required by that  
31 practitioner's licensing board shall be counted toward this

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1 total of 4 hours.

2 (f) For an employee who is a licensed health care  
3 practitioner as defined in s. 456.001, training that is  
4 sanctioned by that practitioner's licensing board shall be  
5 considered to be approved by the Department of Elderly  
6 Affairs.

7 (g) The Department of Elderly Affairs or its designee  
8 must approve the required 1-hour and 3-hour training provided  
9 to employees or direct caregivers under this section. The  
10 department must consider for approval training offered in a  
11 variety of formats. The department shall keep a list of  
12 current providers who are approved to provide the 1-hour and  
13 3-hour training. The department shall adopt rules to establish  
14 standards for employees who are subject to this training and  
15 for the trainers and the training required in this section.

16 (h) Upon completing any training described in this  
17 section, the employee or direct caregiver shall be issued a  
18 certificate that includes the name of the training provider,  
19 the topic covered, and the date and signature of the training  
20 provider. The certificate is evidence of completion of  
21 training in the identified topic, and the employee or direct  
22 caregiver is not required to repeat training in that topic if  
23 the employee or direct caregiver changes employment to a  
24 different hospice or to a home health agency, assisted living  
25 facility, nursing home, or adult day care center.

26 (i) An employee who is hired on or after July 1, 2003,  
27 must complete the required training by July 1, 2004, or by the  
28 deadline specified in this section, whichever is later.

29 (2) A hospice licensed under this part which claims  
30 that it provides special care for persons who have Alzheimer's  
31 disease or other related disorders must disclose in its

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1 advertisements or in a separate document those services that  
 2 distinguish the care as being especially applicable to, or  
 3 suitable for, such persons. The hospice must give a copy of  
 4 all such advertisements or a copy of the document to each  
 5 person who requests information about programs and services  
 6 for persons with Alzheimer's disease or other related  
 7 disorders offered by the hospice and must maintain a copy of  
 8 all such advertisements and documents in its records. The  
 9 agency shall examine all such advertisements and documents in  
 10 the hospice's records as part of the license renewal  
 11 procedure.

12 Section 85. Subsection (1) of section 391.025, Florida  
 13 Statutes, is amended to read:

14 391.025 Applicability and scope.--

15 (1) This act applies to health services provided to  
 16 eligible individuals who are:

17 (a) Enrolled in the Medicaid program;

18 (b) Enrolled in the Florida Kidcare program; ~~and~~

19 (c) Uninsured or underinsured, provided that they meet  
 20 the financial eligibility requirements established in this  
 21 act, and to the extent that resources are appropriated for  
 22 their care; ~~and~~

23 (d) Infants who receive an award of compensation  
 24 pursuant to s. 766.31(1).

25 Section 86. Paragraph (f) is added to subsection (2)  
 26 of section 391.029, Florida Statutes, to read:

27 391.029 Program eligibility.--

28 (2) The following individuals are financially eligible  
 29 for the program:

30 (f) An infant who receives an award of compensation  
 31 pursuant to s. 766.31(1), provided the Florida Birth-Related



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1 Neurological Injury Compensation Association shall reimburse  
 2 the Children's Medical Services Network the state's share of  
 3 funding, which funding shall be used to obtain matching  
 4 federal funds under Title XXI of the Social Security Act.

5  
 6 The department may continue to serve certain children with  
 7 special health care needs who are 21 years of age or older and  
 8 who were receiving services from the program prior to April 1,  
 9 1998. Such children may be served by the department until  
 10 July 1, 2000.

11 Section 87. Section 766.304, Florida Statutes, is  
 12 amended to read:

13 766.304 Administrative law judge to determine  
 14 claims.--The administrative law judge shall hear and determine  
 15 all claims filed pursuant to ss. 766.301-766.316 and shall  
 16 exercise the full power and authority granted to her or him in  
 17 chapter 120, as necessary, to carry out the purposes of such  
 18 sections. The administrative law judge has exclusive  
 19 jurisdiction to determine whether a claim filed under this act  
 20 is compensable. No civil action may be brought until the  
 21 determinations under s. 766.309 have been made by the  
 22 administrative law judge. If the administrative law judge  
 23 determines that the claimant is entitled to compensation from  
 24 the association, no civil action may be brought or continued  
 25 in violation of the exclusiveness of remedy provisions of s.  
 26 766.303. If it is determined that a claim filed under this act  
 27 is not compensable, neither the doctrine of collateral  
 28 estoppel nor res judicata shall prohibit the claimant from  
 29 pursuing any and all civil remedies available under common law  
 30 and statutory law. The findings of fact and conclusions of law  
 31 of the administrative law judge shall not be admissible in any

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1 subsequent proceeding; however, the sworn testimony of any  
 2 person and the exhibits introduced into evidence in the  
 3 administrative case are admissible as impeachment in any  
 4 subsequent civil action only against a party to the  
 5 administrative proceeding, subject to the Rules of Evidence.  
 6 An award action may not be awarded or paid ~~brought~~ under ss.  
 7 766.301-766.316 if the claimant recovers under a settlement or  
 8 a final judgment is entered in a civil action. The division  
 9 may adopt rules to promote the efficient administration of,  
 10 and to minimize the cost associated with, the prosecution of  
 11 claims.

12 Section 88. Section 766.305, Florida Statutes, is  
 13 amended to read:

14 766.305 Filing of claims and responses; medical  
 15 disciplinary review.--

16 (1) All claims filed for compensation under the plan  
 17 shall commence by the claimant filing with the division a  
 18 petition seeking compensation. Such petition shall include  
 19 the following information:

20 (a) The name and address of the legal representative  
 21 and the basis for her or his representation of the injured  
 22 infant.

23 (b) The name and address of the injured infant.

24 (c) The name and address of any physician providing  
 25 obstetrical services who was present at the birth and the name  
 26 and address of the hospital at which the birth occurred.

27 (d) A description of the disability for which the  
 28 claim is made.

29 (e) The time and place the injury occurred.

30 (f) A brief statement of the facts and circumstances  
 31 surrounding the injury and giving rise to the claim.

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1       ~~(g) All available relevant medical records relating to~~  
2 ~~the birth-related neurological injury, and an identification~~  
3 ~~of any unavailable records known to the claimant and the~~  
4 ~~reasons for their unavailability.~~

5       ~~(h) Appropriate assessments, evaluations, and~~  
6 ~~prognoses, and such other records and documents as are~~  
7 ~~reasonably necessary for the determination of the amount of~~  
8 ~~compensation to be paid to, or on behalf of, the injured~~  
9 ~~infant on account of the birth-related neurological injury.~~

10       ~~(i) Documentation of expenses and services incurred to~~  
11 ~~date, which indicates any payment made for such expenses and~~  
12 ~~services, and by whom.~~

13       ~~(j) Documentation of any applicable private or~~  
14 ~~governmental source of services or reimbursement relative to~~  
15 ~~the impairments.~~

16       (2) The claimant shall furnish the division with as  
17 many copies of the petition as required for service upon the  
18 association, any physician and hospital named in the petition,  
19 and the Division of Medical Quality Assurance, along with a  
20 \$15 filing fee payable to the Division of Administrative  
21 Hearings. Upon receipt of the petition, the division shall  
22 immediately serve the association, by service upon the agent  
23 designated to accept service on behalf of the association, by  
24 registered or certified mail, and shall mail copies of the  
25 petition, by registered or certified mail, to any physician,  
26 health care provider, and hospital named in the petition, and  
27 furnish a copy by regular mail to the Division of Medical  
28 Quality Assurance, and the Agency for Health Care  
29 Administration.

30       (3) The claimant shall furnish to the executive  
31 director of the Florida Birth-Related Neurological

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1 Compensation Association one copy of the following information  
 2 which shall be filed with the association within 10 days after  
 3 the filing of the petition as set forth in s. 766.305(1):

4 (a) All available relevant medical records relating to  
 5 the birth-related neurological injury and an identification of  
 6 any unavailable records known to the claimant and the reasons  
 7 for their unavailability.

8 (b) Appropriate assessments, evaluations, and  
 9 prognoses and such other records and documents as are  
 10 reasonably necessary for the determination of the amount of  
 11 compensation to be paid to, or on behalf of, the injured  
 12 infant on account of the birth-related neurological injury.

13 (c) Documentation of expenses and services incurred to  
 14 date, which indicates any payment made for such expenses and  
 15 services and by whom.

16 (d) Documentation of any applicable private or  
 17 governmental source of services or reimbursement relative to  
 18 the impairments.

19  
 20 The information contained in paragraphs (a)-(d) is  
 21 confidential and exempt pursuant to the provisions of s.  
 22 766.315(5)(b).

23 ~~(4)~~(3) The association shall have 45 days from the  
 24 date of service of a complete claim, filed pursuant to  
 25 subsections (1) and (2), in which to file a response to the  
 26 petition and to submit relevant written information relating  
 27 to the issue of whether the injury alleged is a birth-related  
 28 neurological injury.

29 ~~(5)~~(4) Upon receipt of such petition, the Division of  
 30 Medical Quality Assurance shall review the information therein  
 31 and determine whether it involved conduct by a physician

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1 licensed under chapter 458 or an osteopathic physician  
2 licensed under chapter 459 that is subject to disciplinary  
3 action, in which case the provisions of s. 456.073 shall  
4 apply.

5 ~~(6)(5)~~ Upon receipt of such petition, the Agency for  
6 Health Care Administration shall investigate the claim, and if  
7 it determines that the injury resulted from, or was aggravated  
8 by, a breach of duty on the part of a hospital in violation of  
9 chapter 395, it shall take any such action consistent with its  
10 disciplinary authority as may be appropriate.

11 ~~(7)(6)~~ Any claim which the association determines to  
12 be compensable may be accepted for compensation, provided that  
13 the acceptance is approved by the administrative law judge to  
14 whom the claim for compensation is assigned.

15 Section 89. Subsection (4) is added to section  
16 766.309, Florida Statutes, to read:

17 766.309 Determination of claims; presumption; findings  
18 of administrative law judge binding on participants.--

19 (4) If it is in the interest of judicial economy or if  
20 requested to by the claimant, the administrative law judge may  
21 bifurcate the proceeding, addressing compensability and notice  
22 pursuant to s. 766.316 first and addressing any award pursuant  
23 to s. 766.31 in a separate proceeding. The administrative law  
24 judge may issue a final order on compensability and notice  
25 which is subject to appeal under s. 766.311, prior to issuance  
26 of award pursuant to s. 766.31.

27 Section 90. Subsection (1) of section 766.31, Florida  
28 Statutes, is amended to read:

29 766.31 Administrative law judge awards for  
30 birth-related neurological injuries; notice of award.--

31 (1) Upon determining that an infant has sustained a

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1 birth-related neurological injury and that obstetrical  
2 services were delivered by a participating physician at the  
3 birth, the administrative law judge shall make an award  
4 providing compensation for the following items relative to  
5 such injury:

6 (a) Actual expenses for medically necessary and  
7 reasonable medical and hospital, habilitative and training,  
8 family residential or custodial care, professional  
9 residential, and custodial care and service, for medically  
10 necessary drugs, special equipment, and facilities, and for  
11 related travel. However, such expenses shall not include:

12 1. Expenses for items or services that the infant has  
13 received, or is entitled to receive, under the laws of any  
14 state or the Federal Government, including Medicaid, except to  
15 the extent such exclusion may be prohibited by federal law.

16 2. Expenses for items or services that the infant has  
17 received, or is contractually entitled to receive, from any  
18 prepaid health plan, health maintenance organization, or other  
19 private insuring entity.

20 3. Expenses for which the infant has received  
21 reimbursement, or for which the infant is entitled to receive  
22 reimbursement, under the laws of any state or the Federal  
23 Government, including Medicaid, except to the extent such  
24 exclusion may be prohibited by federal law.

25 4. Expenses for which the infant has received  
26 reimbursement, or for which the infant is contractually  
27 entitled to receive reimbursement, pursuant to the provisions  
28 of any health or sickness insurance policy or other private  
29 insurance program.

30  
31 Expenses included under this paragraph shall be limited to

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1 reasonable charges prevailing in the same community for  
 2 similar treatment of injured persons when such treatment is  
 3 paid for by the injured person.

4 (b)1. Periodic payments of an award to the parents or  
 5 legal guardians of the infant found to have sustained a  
 6 birth-related neurological injury, which award shall not  
 7 exceed \$100,000. However, at the discretion of the  
 8 administrative law judge, such award may be made in a lump  
 9 sum.

10 2. A death benefit for the infant in an amount of  
 11 ~~\$10,000~~ ~~Payment for funeral expenses not to exceed \$1,500.~~

12 (c) Reasonable expenses incurred in connection with  
 13 the filing of a claim under ss. 766.301-766.316, including  
 14 reasonable attorney's fees, which shall be subject to the  
 15 approval and award of the administrative law judge. In  
 16 determining an award for attorney's fees, the administrative  
 17 law judge shall consider the following factors:

18 1. The time and labor required, the novelty and  
 19 difficulty of the questions involved, and the skill requisite  
 20 to perform the legal services properly.

21 2. The fee customarily charged in the locality for  
 22 similar legal services.

23 3. The time limitations imposed by the claimant or the  
 24 circumstances.

25 4. The nature and length of the professional  
 26 relationship with the claimant.

27 5. The experience, reputation, and ability of the  
 28 lawyer or lawyers performing services.

29 6. The contingency or certainty of a fee.

30  
 31 If there is an award of benefits under the plan, the claimants

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1 shall not be liable for any attorney's fees incurred in  
 2 connection with the filing of a claim under ss.  
 3 766.301-766.316 other than those fees awarded under this  
 4 section.

5 Section 91. Subsection (4) of section 766.314, Florida  
 6 Statutes, is amended to read:

7 766.314 Assessments; plan of operation.--

8 (4) The following persons and entities shall pay into  
 9 the association an initial assessment in accordance with the  
 10 plan of operation:

11 (a) On or before October 1, 1988, each hospital  
 12 licensed under chapter 395 shall pay an initial assessment of  
 13 \$50 per infant delivered in the hospital during the prior  
 14 calendar year, as reported to the Agency for Health Care  
 15 Administration; provided, however, that a hospital owned or  
 16 operated by the state or a county, special taxing district, or  
 17 other political subdivision of the state shall not be required  
 18 to pay the initial assessment or any assessment required by  
 19 subsection (5). The term "infant delivered" includes live  
 20 births and not stillbirths, but the term does not include  
 21 infants delivered by employees or agents of the board of  
 22 trustees, Regents or those born in a teaching hospital as  
 23 defined in s. 408.07, or those born in a family practice  
 24 teaching hospital as defined in s. 395.806 that have been  
 25 deemed by the association as being exempt from assessments  
 26 since fiscal year 1997 to fiscal year 2001. The initial  
 27 assessment and any assessment imposed pursuant to subsection  
 28 (5) may not include any infant born to a charity patient (as  
 29 defined by rule of the Agency for Health Care Administration)  
 30 or born to a patient for whom the hospital receives Medicaid  
 31 reimbursement, if the sum of the annual charges for charity



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1 patients plus the annual Medicaid contractals of the hospital  
2 exceeds 10 percent of the total annual gross operating  
3 revenues of the hospital. The hospital is responsible for  
4 documenting, to the satisfaction of the association, the  
5 exclusion of any birth from the computation of the assessment.  
6 Upon demonstration of financial need by a hospital, the  
7 association may provide for installment payments of  
8 assessments.

9 (b)1. On or before October 15, 1988, all physicians  
10 licensed pursuant to chapter 458 or chapter 459 as of October  
11 1, 1988, other than participating physicians, shall be  
12 assessed an initial assessment of \$250, which must be paid no  
13 later than December 1, 1988.

14 2. Any such physician who becomes licensed after  
15 September 30, 1988, and before January 1, 1989, shall pay into  
16 the association an initial assessment of \$250 upon licensure.

17 3. Any such physician who becomes licensed on or after  
18 January 1, 1989, shall pay an initial assessment equal to the  
19 most recent assessment made pursuant to this paragraph,  
20 paragraph (5)(a), or paragraph (7)(b).

21 4. However, if the physician is a physician specified  
22 in this subparagraph, the assessment is not applicable:

23 a. A resident physician, assistant resident physician,  
24 or intern in an approved postgraduate training program, as  
25 defined by the Board of Medicine or the Board of Osteopathic  
26 Medicine by rule;

27 b. A retired physician who has withdrawn from the  
28 practice of medicine but who maintains an active license as  
29 evidenced by an affidavit filed with the Department of Health.  
30 Prior to reentering the practice of medicine in this state, a  
31 retired physician as herein defined must notify the Board of

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1 Medicine or the Board of Osteopathic Medicine and pay the  
 2 appropriate assessments pursuant to this section;

3 c. A physician who holds a limited license pursuant to  
 4 s. 458.317 and who is not being compensated for medical  
 5 services;

6 d. A physician who is employed full time by the United  
 7 States Department of Veterans Affairs and whose practice is  
 8 confined to United States Department of Veterans Affairs  
 9 hospitals; or

10 e. A physician who is a member of the Armed Forces of  
 11 the United States and who meets the requirements of s.  
 12 456.024.

13 f. A physician who is employed full time by the State  
 14 of Florida and whose practice is confined to state-owned  
 15 correctional institutions, a county health department, or  
 16 state-owned mental health or developmental services  
 17 facilities, or who is employed full time by the Department of  
 18 Health.

19 (c) On or before December 1 of each year, beginning  
 20 January 1, 2003 ~~1988~~, each physician licensed pursuant to  
 21 chapter 458 or chapter 459 who wishes to participate in the  
 22 Florida Birth-Related Neurological Injury Compensation Plan  
 23 and who otherwise qualifies as a participating physician under  
 24 ss. 766.301-766.316 shall pay an initial assessment of \$5,000.  
 25 A physician shall be a participating physician for the entire  
 26 calendar year if such assessment is paid on or before January  
 27 31. However, if the physician is either a resident physician,  
 28 assistant resident physician, or intern in an approved  
 29 postgraduate training program, as defined by the Board of  
 30 Medicine or the Board of Osteopathic Medicine by rule, and is  
 31 supervised in accordance with program requirements established

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1 by the Accreditation Council for Graduate Medical Education or  
2 the American Osteopathic Association by a physician who is  
3 participating in the plan, such resident physician, assistant  
4 resident physician, or intern is deemed to be a participating  
5 physician without the payment of the assessment.  
6 Participating physicians also include any employee of the  
7 board of trustees ~~Regents~~ who has paid the assessment required  
8 by this paragraph and paragraph (5)(a), and any certified  
9 nurse midwife supervised by such employee. Participating  
10 physicians include any certified nurse midwife who has paid 50  
11 percent of the physician assessment required by this paragraph  
12 and paragraph (5)(a) and who is supervised by a participating  
13 physician who has paid the assessment required by this  
14 paragraph and paragraph (5)(a). Supervision for nurse midwives  
15 shall require that the supervising physician will be easily  
16 available and have a prearranged plan of treatment for  
17 specified patient problems which the supervised certified  
18 nurse midwife may carry out in the absence of any complicating  
19 features. Any physician who elects to participate in such  
20 plan on or after January 1, 1989, who was not a participating  
21 physician at the time of such election to participate and who  
22 otherwise qualifies as a participating physician under ss.  
23 766.301-766.316 shall pay an additional initial assessment  
24 equal to the most recent assessment made pursuant to this  
25 paragraph, paragraph (5)(a), or paragraph (7)(b).

26 (d) Any hospital located in any county with a gross  
27 population in excess of 1.1 million as of January 1, 2003, as  
28 determined by the Agency for Health Care Administration,  
29 pursuant to the Health Care Responsibility Act, may elect to  
30 pay the fee for the participating physician and the certified  
31 nurse midwife if the hospital first determines that the

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1 primary motivating purpose for making such payment is to  
2 ensure coverage for the hospital's patients under the  
3 provisions of ss. 766.301-766.316, provided no hospital may  
4 restrict any participating physician or nurse midwife,  
5 directly or indirectly, from being on the staff of hospitals  
6 other than the staff of the hospital making such payment. Each  
7 hospital shall file with the association an affidavit setting  
8 forth specifically the reasons why such hospital elected to  
9 make such payment on behalf of each participating physician  
10 and certified nurse midwife. The payments authorized pursuant  
11 to this paragraph shall be in addition to the assessment set  
12 forth in paragraph (5)(a).

13           Section 92. James and Esther King Center for Universal  
14 Research to Eradicate Disease.--

15           (1) The Legislature finds that an estimated 128  
16 million Americans suffer from acute, chronic, and degenerative  
17 diseases and that biomedical research is the key to finding  
18 cures for these diseases that negatively affect all  
19 Floridians. The Legislature further finds that, while there is  
20 much research being conducted throughout this state and  
21 throughout the world, there is a lack of coordination of  
22 efforts among researchers. The Legislature, therefore, finds  
23 that there is a significant need for a coordinated effort if  
24 the goal of curing disease is to be achieved. Moreover, the  
25 Legislature finds that the biomedical technology sector meets  
26 the criteria of a high-impact sector, pursuant to section  
27 288.108, Florida Statutes, having a high importance to this  
28 state's economy with a significant potential for growth and  
29 contribution to our universities and quality of life.

30           (2) It is the intent of the Legislature that Florida  
31 strive to become the nation's leader in biomedical research

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1 and commit itself to being the state to find cures for the  
2 most deadly and widespread diseases. It is further the intent  
3 of the Legislature that there be a coordinated effort among  
4 the state's public and private universities and the biomedical  
5 industry to discover such cures. Moreover, it is the intent of  
6 the Legislature to expand the state economy by attracting  
7 biomedical researchers and research companies to this state.

8 (3) There is established the James and Esther King  
9 Center for Universal Research to Eradicate Disease, which  
10 shall be known as the "CURED."

11 (a) The purpose of the center is to coordinate,  
12 improve, expand, and monitor all biomedical research programs  
13 within the state, facilitate funding opportunities, and foster  
14 improved technology transfer of research findings into  
15 clinical trials and widespread public use.

16 (b) The goal of the center is to find cures for  
17 diseases such as cancer, heart disease, lung disease,  
18 diabetes, and neurological disorders, including Alzheimer's  
19 disease, epilepsy, and Parkinson's disease.

20 (c) The center shall hold an annual biomedical  
21 technology summit in Florida to which biomedical researchers,  
22 biomedical technology companies, business incubators,  
23 pharmaceutical manufacturers, and others around the nation and  
24 world are invited to share biomedical research findings in  
25 order to expedite the discovery of cures. Summit attendees  
26 will be required to cover the costs of such attendance or  
27 obtain sponsorship for such attendance.

28 (d) The center shall encourage clinical trials in this  
29 state on research that holds promise of curing a disease or  
30 condition. The center shall facilitate partnerships between  
31 researchers, treating physicians, and community hospitals for

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1 the purpose of sharing new techniques and new research  
2 findings, as well as coordinating voluntary donations to  
3 ensure an adequate supply of adult stem cells or cord blood.

4 (e) The center shall also encourage the discovery and  
5 production in Florida of vaccines that prevent disease.

6 (f) The center shall monitor the supply and demand  
7 needs of researchers relating to stem cell research and other  
8 types of human tissue research. If the center determines that  
9 there is a need for increased donation of human tissue, it  
10 shall notify hospitals licensed pursuant to chapter 395,  
11 Florida Statutes, that have entered into partnership  
12 agreements with research institutes conducting stem cell  
13 research located in the same geographic region as the  
14 researchers demanding the stem cells or other tissues. Such  
15 hospitals shall then implement programs that encourage  
16 voluntary donations of cord blood or other needed adult  
17 tissue.

18 (g) The center shall be funded through private, state,  
19 and federal sources.

20 (h) The center shall serve as a registry of all known  
21 biomedical grant opportunities and may assist any public or  
22 private biomedical research program in this state in preparing  
23 grant requests.

24 (i) The center shall maintain a website with links to  
25 peer-reviewed biomedical research. The website shall also  
26 contain a list of all known biomedical research being  
27 conducted in Florida and shall facilitate communication among  
28 researchers and other interested parties.

29 (j) The center shall submit an annual report to the  
30 Governor, the President of the Senate, and the Speaker of the  
31 House of Representatives no later than January 15 which

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1 contains recommendations for legislative change necessary to  
2 foster a positive climate for biomedical research in this  
3 state.

4 (k) The duties of the center may be outsourced by the  
5 Department of Health to a private entity or state university.

6 (4) There is established within the center an advisory  
7 council which shall meet at least annually.

8 (a) The council shall consist of the members of the  
9 board of directors of the Florida Research Consortium and at  
10 least one representative from:

11 1. The Emerging Technology Commission.

12 2. Enterprise Florida, Inc.

13 3. BioFlorida.

14 4. The Florida Biomedical Research Advisory Council.

15 5. The Florida Medical Foundation.

16 6. Pharmaceutical Research and Manufacturers of  
17 America.

18 (b) Members of the council shall serve without  
19 compensation and each organization represented shall cover all  
20 expenses of its representative.

21 Section 93. Paragraphs (a) and (b) of subsection (1),  
22 subsection (2), and paragraph (f) of subsection (10) of  
23 section 215.5602, Florida Statutes, are amended to read:

24 215.5602 Florida Biomedical Research Program.--

25 (1) There is established within the Department of  
26 Health the Florida Biomedical Research Program funded by the  
27 proceeds of the Lawton Chiles Endowment Fund pursuant to s.  
28 215.5601. The purpose of the Florida Biomedical Research  
29 Program is to provide an annual and perpetual source of  
30 funding in order to support research initiatives that address  
31 the health care problems of Floridians in the areas of

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1 tobacco-related cancer, cardiovascular disease, stroke, and  
 2 pulmonary disease. The long-term goals of the program are to:

3 (a) Improve the health of Floridians by researching  
 4 better prevention, diagnoses, ~~and~~ treatments, and cures for  
 5 cancer, cardiovascular disease, stroke, and pulmonary disease.

6 (b) Expand the foundation of biomedical knowledge  
 7 relating to the prevention, diagnosis, ~~and~~ treatment, and cure  
 8 of diseases related to tobacco use, including cancer,  
 9 cardiovascular disease, stroke, and pulmonary disease.

10 (2) Funds appropriated for the Florida Biomedical  
 11 Research Program shall be used exclusively for the award of  
 12 grants and fellowships as established in this section; for  
 13 research relating to the prevention, diagnosis, ~~and~~ treatment,  
 14 and cure of diseases related to tobacco use, including cancer,  
 15 cardiovascular disease, stroke, and pulmonary disease; and for  
 16 expenses incurred in the administration of this section.  
 17 Priority shall be granted to research designed to prevent or  
 18 cure disease.

19 (10) The council shall submit an annual progress  
 20 report on the state of biomedical research in this state to  
 21 the Governor, the Secretary of Health, the President of the  
 22 Senate, and the Speaker of the House of Representatives by  
 23 February 1. The report must include:

24 (f) Progress in the prevention, diagnosis, ~~and~~  
 25 treatment, and cure of diseases related to tobacco use,  
 26 including cancer, cardiovascular disease, stroke, and  
 27 pulmonary disease.

28 Section 94. Florida Cancer Research Cooperative.--

29 (1) Effective July 1, 2003, the Florida Cancer  
 30 Research Cooperative is established for the purpose of making  
 31 the State of Florida a world class center for cancer research.



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1           (2)(a) A not-for-profit corporation, acting as an  
2 instrumentality of the Florida Dialogue on Cancer, shall be  
3 organized for the purpose of governing the affairs of the  
4 cooperative.

5           (b) The Florida Cancer Research Cooperative, Inc., may  
6 create not-for-profit corporate subsidiaries to fulfill its  
7 mission. The not-for-profit corporation and its subsidiaries  
8 are authorized to receive, hold, invest, and administer  
9 property and any moneys acquired from private, local, state,  
10 and federal sources, as well as technical and professional  
11 income generated or derived from the mission-related  
12 activities of the cooperative.

13           (c) The affairs of the not-for-profit corporation  
14 shall be managed by a board of directors which shall consist  
15 of:

16           1. The Secretary of the Department of Health or his or  
17 her designee;

18           2. The Chief Executive Officer of the H. Lee Moffitt  
19 Cancer Center or his or her designee;

20           3. The President of the University of Florida Shands  
21 Cancer Center or his or her designee;

22           4. The Chief Executive Officer of the University of  
23 Miami Sylvester Comprehensive Cancer Center or his or her  
24 designee;

25           5. The Chief Executive Officer of the Mayo Clinic,  
26 Jacksonville or his or her designee;

27           6. The Chief Executive Officer of the American Cancer  
28 Society, Florida Division or his or her designee;

29           7. The President of the American Cancer Society,  
30 Florida Division Board of Directors or his or her designee;

31           8. The President of the Florida Society of Clinical

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1 Oncology or his or her designee;

2 9. The Chief Executive Officer of Enterprise Florida,  
3 Inc., or his or her designee;

4 10. Three representatives from large Florida hospitals  
5 or institutions, not delineated in subparagraphs 1. through  
6 6., that treat a large volume of cancer patients. One shall be  
7 appointed by the Governor, one shall be appointed by the  
8 Speaker of the House of Representatives, and one shall be  
9 appointed by the President of the Senate;

10 11. Three representatives from community-based,  
11 statewide organizations serving populations that experience  
12 cancer disparities, one of whom shall be appointed by the  
13 Governor, one of whom shall be appointed by the Speaker of the  
14 House of Representatives, and one of whom shall be appointed  
15 by the President of the Senate;

16 12. One member of the Florida House of  
17 Representatives, to be appointed by the Speaker of the House  
18 of Representatives;

19 13. One member of the Florida Senate, to be appointed  
20 by the President of the Senate;

21 14. Three university presidents, one of whom shall be  
22 appointed by the Governor, one of whom shall be appointed by  
23 the Speaker of the House of Representatives, and one of whom  
24 shall be appointed by the President of the Senate; and

25 15. Five representatives from other statewide public  
26 health organizations whose missions include public education  
27 and the eradication of cancer, three of whom shall be  
28 appointed by the Governor, one of whom shall be appointed by  
29 the Speaker of the House of Representatives, and one of whom  
30 shall be appointed by the President of the Senate.

31 (d) Appointments made by the Speaker of the House of

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1 Representatives and the President of the Senate pursuant to  
2 paragraph (c) shall be for 2-year terms, concurrent with the  
3 bienniums in which they serve as presiding officers.

4 (e) Appointments made by the Governor pursuant to  
5 paragraph (c) shall be for 2-year terms, although the Governor  
6 may reappoint directors.

7 (f) Members of the board of directors of the  
8 not-for-profit corporation or any subsidiaries shall serve  
9 without compensation.

10 (3) The cooperative shall issue an annual report to  
11 the Governor, the Speaker of the House of Representatives, and  
12 the President of the Senate, by December 15 of each year, with  
13 policy and funding recommendations regarding cancer research  
14 capacity in Florida and related issues.

15 Section 95. Florida Cancer Research Cooperative;  
16 mission and duties.--

17 (1) The cooperative shall develop and centralize the  
18 processes and shared services for expanding cancer research in  
19 Florida through:

20 (a) Support through bioinformatics, in order to create  
21 a cancer informatics infrastructure that enhances information  
22 and resource exchange and integration through researchers  
23 working in diverse disciplines to facilitate the full spectrum  
24 of cancer investigations;

25 (b) Technical coordination, business development, and  
26 support of intellectual property;

27 (c) Development of a statewide cancer clinical trials  
28 network as contemplated in section 1; and

29 (d) Other multidisciplinary research support  
30 activities.

31 (2) The cooperative shall work in concert with the

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1 Center for Universal Research to Eradicate Disease created in  
2 section 1 to ensure that the goals of the center are advanced.

3 Section 96. Section 484.0512, Florida Statutes, is  
4 amended to read:

5 484.0512 Thirty-day trial period; purchaser's right to  
6 cancel; notice; refund; cancellation fee; criminal penalty  
7 procedures.--

8 (1) A person selling a hearing aid in this state must  
9 provide the buyer with written notice of a 30-day trial period  
10 and money-back guarantee. The guarantee must permit the  
11 purchaser to cancel the purchase for a valid reason as defined  
12 by rule of the board within 30 days after receiving the  
13 hearing aid, by returning the hearing aid or mailing written  
14 notice of cancellation to the seller. If the hearing aid must  
15 be repaired, remade, or adjusted during the 30-day trial  
16 period, the running of the 30-day trial period is suspended 1  
17 day for each 24-hour period that the hearing aid is not in the  
18 purchaser's possession. A repaired, remade, or adjusted  
19 hearing aid must be claimed by the purchaser within 3 working  
20 days after notification of availability. The running of the  
21 30-day trial period resumes on the day the purchaser reclaims  
22 the repaired, remade, or adjusted hearing aid or on the fourth  
23 day after notification of availability.

24 (2) The board, in consultation with the Board of  
25 Speech-Language Pathology and Audiology, shall prescribe by  
26 rule the terms and conditions to be contained in the  
27 money-back guarantee and any exceptions thereto. Such rule  
28 shall provide, at a minimum, that the charges for earmolds and  
29 service provided to fit the hearing aid may be retained by the  
30 licensee. The rules shall also set forth any reasonable  
31 charges to be held by the licensee as a cancellation fee. Such

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1 rule shall be effective on or before December 1, 1994. Should  
2 the board fail to adopt such rule, a licensee may not charge a  
3 cancellation fee which exceeds 5 percent of the total charge  
4 for a hearing aid alone. The terms and conditions of the  
5 guarantee, including the total amount available for refund,  
6 shall be provided in writing to the purchaser prior to the  
7 signing of the contract.

8 (3) Within 30 days after the return or attempted  
9 return of the hearing aid, the seller shall refund all moneys  
10 that must be refunded to a purchaser pursuant to this section.  
11 A violation of this subsection is a misdemeanor of the first  
12 degree, punishable as provided in s. 775.082 or s. 775.083.

13 (4) For purposes of this section, the term "seller" or  
14 "person selling a hearing aid" includes:

15 (a) Any natural person licensed under this part or any  
16 other natural person who signs a sales receipt required by s.  
17 484.051(2) or s. 468.1245(2) or who otherwise fits, delivers,  
18 or dispenses a hearing aid.

19 (b) Any business organization, whether a sole  
20 proprietorship, partnership, corporation, professional  
21 association, joint venture, business trust, or other legal  
22 entity, which dispenses a hearing aid or enters into an  
23 agreement to dispense a hearing aid.

24 (c) Any person who controls, manages, or operates an  
25 establishment or business that dispenses a hearing aid or  
26 enters into an agreement to dispense a hearing aid.

27 Section 97. Effective upon this act becoming a law,  
28 subsection (1) of section 456.073, Florida Statutes, is  
29 amended to read:

30 456.073 Disciplinary proceedings.--Disciplinary  
31 proceedings for each board shall be within the jurisdiction of

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1 the department.

2           (1) The department, for the boards under its  
3 jurisdiction, shall cause to be investigated any complaint  
4 that is filed before it if the complaint is in writing, signed  
5 by the complainant, and legally sufficient. A complaint filed  
6 by a state prisoner against a health care practitioner  
7 employed by or otherwise providing health care services within  
8 a facility of the Department of Corrections is not legally  
9 sufficient unless there is a showing that the prisoner  
10 complainant has exhausted all available administrative  
11 remedies within the state correctional system before filing  
12 the complaint. However, if the department determines after a  
13 preliminary inquiry of a state prisoner's complaint, that the  
14 practitioner may present a serious threat to the health and  
15 safety of any individual who is not a state prisoner, the  
16 department may determine legal sufficiency and proceed with  
17 discipline. The Department of Health shall be notified within  
18 15 days whenever the Department of Corrections disciplines or  
19 allows a health care practitioner to resign for an offense  
20 related to the practice of his or her profession. A complaint  
21 is legally sufficient if it contains ultimate facts that show  
22 that a violation of this chapter, of any of the practice acts  
23 relating to the professions regulated by the department, or of  
24 any rule adopted by the department or a regulatory board in  
25 the department has occurred. In order to determine legal  
26 sufficiency, the department may require supporting information  
27 or documentation. The department may investigate, and the  
28 department or the appropriate board may take appropriate final  
29 action on, a complaint even though the original complainant  
30 withdraws it or otherwise indicates a desire not to cause the  
31 complaint to be investigated or prosecuted to completion. The

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1 department may investigate an anonymous complaint if the  
2 complaint is in writing and is legally sufficient, if the  
3 alleged violation of law or rules is substantial, and if the  
4 department has reason to believe, after preliminary inquiry,  
5 that the violations alleged in the complaint are true. The  
6 department may investigate a complaint made by a confidential  
7 informant if the complaint is legally sufficient, if the  
8 alleged violation of law or rule is substantial, and if the  
9 department has reason to believe, after preliminary inquiry,  
10 that the allegations of the complainant are true. The  
11 department may initiate an investigation if it has reasonable  
12 cause to believe that a licensee or a group of licensees has  
13 violated a Florida statute, a rule of the department, or a  
14 rule of a board. Except as provided in ss. 458.331(9),  
15 459.015(9), 460.413(5), and 461.013(6), when an investigation  
16 of any subject is undertaken, the department shall promptly  
17 furnish to the subject or the subject's attorney a copy of the  
18 complaint or document that resulted in the initiation of the  
19 investigation. The subject may submit a written response to  
20 the information contained in such complaint or document within  
21 20 days after service to the subject of the complaint or  
22 document. The subject's written response shall be considered  
23 by the probable cause panel. The right to respond does not  
24 prohibit the issuance of a summary emergency order if  
25 necessary to protect the public. However, if the secretary, or  
26 the secretary's designee, and the chair of the respective  
27 board or the chair of its probable cause panel agree in  
28 writing that such notification would be detrimental to the  
29 investigation, the department may withhold notification. The  
30 department may conduct an investigation without notification  
31 to any subject if the act under investigation is a criminal

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1 offense.

2           Section 98. (1) The Division of Medical Quality  
3 Assurance of the Department of Health shall conduct a study of  
4 clinical and academic training requirements of certified  
5 optometric practitioners, licensed pursuant to chapter 463,  
6 Florida Statutes, to determine the extent to which prescribing  
7 authority may be expanded. The study group shall be composed  
8 of the following members:

9           (a) One pharmacologist representing the University of  
10 Florida;

11           (b) One pharmacologist representing Nova Southeastern  
12 University;

13           (c) One pharmacologist representing Florida  
14 Agricultural and Mechanical University;

15           (d) One ophthalmologist representing Mayo Clinic  
16 Jacksonville;

17           (e) One ophthalmologist representing Bascom Palmer Eye  
18 Institute;

19           (f) One board-certified internist appointed by the  
20 University of South Florida;

21           (g) One optometrist representing the Florida Board of  
22 Optometry;

23           (h) One certified optometric practitioner representing  
24 the Florida Optometric Association; and

25           (i) One certified optometric practitioner appointed by  
26 the Nova Southeastern University College of Optometry.

27           (2) The study group shall be chaired by the Secretary  
28 of Health or his or her designee. The study shall be completed  
29 and a final report presented to the Governor, the President of  
30 the Senate, and the Speaker of the House of Representatives by  
31 January 15, 2004. If applicable, a minority report shall be



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1 completed and presented to the Governor, the President of the  
2 Senate, and the Speaker of the House of Representatives by  
3 January 31, 2004.

4 (3) This section shall take effect upon becoming a  
5 law.

6 Section 99. Present subsection (4) of section  
7 465.0265, Florida Statutes, is redesignated as subsection (5),  
8 and a new subsection (4) is added to that section, to read:

9 465.0265 Centralized prescription filling.--

10 (4) Pharmacies accessing the same prescription records  
11 in a centralized database or pharmacy computers linked in any  
12 other manner may refill or dispense prescriptions at the  
13 request of another pharmacy so linked if the pharmacies have  
14 the same owner or have a written contract specifying the  
15 services to be provided by each pharmacy, the responsibilities  
16 of each pharmacy, and the manner in which the pharmacies will  
17 comply with federal and state laws and rules. Prescriptions  
18 refilled or dispensed using such a system shall not be  
19 considered prescription transfers or copies if the computer  
20 system registers a complete and full audit trail of all  
21 activities and includes the identification of the pharmacies  
22 and pharmacists accessing the centralized database and if the  
23 system restricts access to the computerized prescription  
24 records to pharmacies or other authorized personnel.

25 Section 100. Subsection (2) of section 466.006,  
26 Florida Statutes, is amended to read:

27 466.006 Examination of dentists.--

28 (2) An applicant shall be entitled to take the  
29 examinations required in this section to practice dentistry in  
30 this state if the applicant:

31 (a) Is 18 years of age or older.

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1           (b)1. Is a graduate of a dental school accredited by  
 2 the Commission on Accreditation of the American Dental  
 3 Association or its successor agency, if any, or any other  
 4 nationally recognized accrediting agency; or-

5           2. Is a dental student in the final year of a program  
 6 at such an accredited school who has completed all the  
 7 coursework necessary to prepare the student to perform the  
 8 clinical and diagnostic procedures required to pass the  
 9 examinations. With respect to a dental student in the final  
 10 year of a program at a dental school, a passing score on the  
 11 examinations is valid for 180 days after the date the  
 12 examinations were completed. A dental school student who takes  
 13 the licensure examinations during the student's final year of  
 14 an approved dental school must have graduated before being  
 15 certified for licensure pursuant to s. 466.011.

16           (c) Has successfully completed the National Board of  
 17 Dental Examiners dental examination within 10 years of the  
 18 date of application.

19           Section 101. Section 466.0065, Florida Statutes, is  
 20 created to read:

21           466.0065 Regional licensure examinations.--

22           (1) It is the intent of the Legislature that schools  
 23 of dentistry be allowed to offer regional licensure  
 24 examinations to dental students who are in the final year of a  
 25 program at an approved dental school for the sole purpose of  
 26 facilitating the student's licensing in other jurisdictions.  
 27 This section does not allow a person to be licensed as a  
 28 dentist in this state without taking the examinations as set  
 29 forth in s. 466.006, nor does this section mean that regional  
 30 examinations administered under this section may be  
 31 substituted for complying with testing requirements under s.

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1 466.006.

2       (2) Each school of dentistry in this state which is  
3 accredited by the Commission on Accreditation of the American  
4 Dental Association or its successor agency may, upon written  
5 approval by the Board of Dentistry, offer regional licensure  
6 examinations only to dental students in the final year of a  
7 program at an approved dental school, if the board has  
8 approved the hosting school's written plan to comply with the  
9 following conditions:

10       (a) The examining body must be a member of the  
11 American Association of Dental Examiners.

12       (b) The student must have successfully completed parts  
13 I and II of the National Board of Dental Examiners examination  
14 within 2 years before taking the regional examination.

15       (c) The student must possess medical malpractice  
16 insurance in amounts that the board determines to be  
17 sufficient to cover any reasonably foreseeable incident of harm  
18 to a patient during the clinical portion of the regional  
19 examination.

20       (d) At least one of the examination monitors must be a  
21 dentist licensed in this state who has completed all necessary  
22 standardization exercises required by the regional examination  
23 body.

24       (e) Adequate arrangements must be made, when  
25 necessary, for patients who require followup care as a result  
26 of procedures performed during the clinical portion of the  
27 regional examination.

28       (f) The board chair or the chair's designee must be  
29 allowed to observe testing while it is in progress.

30       (g) Each student, upon applying to take the regional  
31 examination, must receive written disclosure in at least

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1 12-point boldface type which states: "This examination does  
2 not meet the licensure requirements of chapter 466, Florida  
3 Statutes, for licensure in the State of Florida. Persons  
4 wishing to practice dentistry in Florida must pass the Florida  
5 licensure examinations. For more information on Florida's  
6 licensure examination procedures, please contact the Florida  
7 Board of Dentistry."

8       (h) The student must be enrolled as a dental student  
9 in the student's final year of a program at an approved dental  
10 school that is accredited by the Commission on Accreditation  
11 of the American Dental Association or its successor agency.

12       (i) The student must have completed all the coursework  
13 necessary to prepare the student to perform all clinical and  
14 diagnostic procedures required to pass the regional  
15 examination.

16       (j) The student's academic record must not include any  
17 evidence suggesting that the student poses an unreasonable  
18 risk to any live patients who are required for the clinical  
19 portion of the regional examination. In order to protect the  
20 health and safety of the public, the board may request  
21 additional information and documents pertaining to the  
22 candidate's mental and physical health in order to fully  
23 assess the candidate's fitness to engage in exercises  
24 involving a live patient.

25       (3) A student who takes the examination pursuant to  
26 this section, a dental school that submits a plan pursuant to  
27 this section, or a regional examination body that a dental  
28 school proposes to host under this section does not have  
29 standing to assert that a state agency has taken action for  
30 which a hearing may be sought under ss. 120.569 and 120.57.

31       Section 102. This act may be cited as the "Nick

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1 Oelrich Gift of Life Act."

2 Section 103. Subsections (1), (2), and (6) of section  
3 765.512, Florida Statutes, are amended to read:

4 765.512 Persons who may make an anatomical gift.--

5 (1) Any person who may make a will may give all or  
6 part of his or her body for any purpose specified in s.  
7 765.510, the gift to take effect upon death. An anatomical  
8 gift made by an adult donor and not revoked by the donor as  
9 provided in s. 765.516 is irrevocable ~~and does not require the~~  
10 ~~consent or concurrence of any person~~ after the donor's death.

11 A family member, guardian, representative ad litem, or health  
12 care surrogate of an adult donor who has made an anatomical  
13 gift pursuant to subsection (2) may not modify, deny or  
14 prevent a donor's wish or intent to make an anatomical gift  
15 from being made after the donor's death.

16 (2) If the decedent has executed an agreement  
17 concerning an anatomical gift, ~~by including~~ signing an organ  
18 and tissue donor card, ~~by~~ expressing his or her wish to donate  
19 in a living will or advance directive, or ~~by~~ signifying his or  
20 her intent to donate on his or her driver's license or in some  
21 other written form has indicated his or her wish to make an  
22 anatomical gift, and in the absence of actual notice of  
23 contrary indications by the decedent, the document is evidence  
24 of legally sufficient informed consent to donate an anatomical  
25 gift and is legally binding. Any surrogate designated by the  
26 decedent pursuant to part II of this chapter may give all or  
27 any part of the decedent's body for any purpose specified in  
28 s. 765.510.

29 (6) A gift of all or part of a body authorizes:

30 (a) Any examination necessary to assure medical  
31 acceptability of the gift for the purposes intended.

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1           (b) The decedent's medical provider, family, or a  
 2 third party to furnish medical records requested concerning  
 3 the decedent's medical and social history.

4           Section 104. Section 765.516, Florida Statutes, is  
 5 amended to read:

6           765.516 Amendment of the terms of or the revocation of  
 7 the gift.--

8           (1) A donor may amend the terms of or revoke an  
 9 anatomical gift by:

10           (a) The execution and delivery to the donee of a  
 11 signed statement.

12           (b) An oral statement that is+

13           ~~1. Made to the donor's spouse; or~~

14           ~~2. made in the presence of two persons, one of whom~~  
 15 must not be a family member, and communicated to the donor's  
 16 family or attorney or to the donee.

17           (c) A statement during a terminal illness or injury  
 18 addressed to an attending physician, who must communicate the  
 19 revocation of the gift to the procurement organization that is  
 20 certified by the state.

21           (d) A signed document found on or about the donor's  
 22 person ~~or in the donor's effects.~~

23           (2) Any gift made by a will may also be amended or  
 24 revoked in the manner provided for amendment or revocation of  
 25 wills or as provided in subsection (1).

26           Section 105. Subsection (1) of section 765.401,  
 27 Florida Statutes, is amended to read:

28           765.401 The proxy.--

29           (1) If an incapacitated or developmentally disabled  
 30 patient has not executed an advance directive, or designated a  
 31 surrogate to execute an advance directive, or the designated

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1 or alternate surrogate is no longer available to make health  
2 care decisions, health care decisions may be made for the  
3 patient by any of the following individuals, in the following  
4 order of priority, if no individual in a prior class is  
5 reasonably available, willing, or competent to act:

6 (a) The judicially appointed guardian of the patient  
7 or the guardian advocate of the person having a developmental  
8 disability as defined in s. 393.063, who has been authorized  
9 to consent to medical treatment, if such guardian has  
10 previously been appointed; however, this paragraph shall not  
11 be construed to require such appointment before a treatment  
12 decision can be made under this subsection;

13 (b) The patient's spouse;

14 (c) An adult child of the patient, or if the patient  
15 has more than one adult child, a majority of the adult  
16 children who are reasonably available for consultation;

17 (d) A parent of the patient;

18 (e) The adult sibling of the patient or, if the  
19 patient has more than one sibling, a majority of the adult  
20 siblings who are reasonably available for consultation;

21 (f) An adult relative of the patient who has exhibited  
22 special care and concern for the patient and who has  
23 maintained regular contact with the patient and who is  
24 familiar with the patient's activities, health, and religious  
25 or moral beliefs; ~~or~~

26 (g) A close friend of the patient; or-

27 (h) A clinical social worker licensed pursuant to  
28 chapter 491, or a graduate of a court-approved guardianship  
29 program. Such a proxy must be selected by the provider's  
30 bioethics committee and must not be employed by the provider.  
31 If the provider does not have a bioethics committee, then such

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1 a proxy may be chosen through an arrangement with the  
 2 bioethics committee of another provider. The proxy must be  
 3 notified that upon request the provider shall make available a  
 4 second physician, not involved in the patient's care, to  
 5 assist the proxy in evaluating treatment. Decisions to  
 6 withhold or withdraw life-prolonging procedures must be  
 7 reviewed by the facility's bioethics committee. Documentation  
 8 of efforts to locate proxies from prior classes must be  
 9 recorded in the patient record.

10 Section 106. Subsection (22) is added to section  
 11 641.19, Florida Statutes, to read:

12 641.19 Definitions.--As used in this part, the term:

13 (22) "Specialty" does not include services performed  
 14 by a chiropractic physician licensed under chapter 460.

15 Section 107. Subsection (5) is added to section  
 16 401.272, Florida Statutes, to read:

17 401.272 Emergency medical services community health  
 18 care.--

19 (5) Notwithstanding any other provision of law to the  
 20 contrary, a pilot program is authorized in Orange County where  
 21 paramedics may provide basic life support and advanced life  
 22 support as defined in s. 401.23(1) and (7):

23 (a) In a hospital emergency department. Such services  
 24 provided by paramedics employed by the hospital must be under  
 25 the direction of the emergency department nursing director or  
 26 manager. If the services provided by paramedics employed by  
 27 the physician group is pursuant to a contract between a  
 28 hospital and a physician group to provide emergency services,  
 29 such paramedics shall be employees of the physician group and  
 30 services provided by the paramedics must be under the  
 31 supervision of a physician.



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1           (b) As part of a private corporate emergency  
2 management and response program. Such services must be  
3 provided under the supervision of a physician.

4           Section 108. The Department of Health, in consultation  
5 with the Miami-Dade Community College Physician Assistant  
6 Program, the University of Florida Physician Assistant  
7 Program, the Nova Southeastern University Physician Assistant  
8 Program, Florida Academy of Physician Assistants, and the  
9 Barry University Physician Assistant Program, shall conduct a  
10 study to establish the most advantageous methods to utilize  
11 the medical skills of foreign-trained physicians to practice  
12 as physician assistants in this state. Such joint study shall  
13 indicate:

14           (1) The existing pathways or methods for a  
15 foreign-trained physician to receive a license to practice as  
16 a physician assistant in Florida;

17           (2) National standards, national examinations, and  
18 credentialing requirements for a foreign-trained physician to  
19 be licensed to practice as a physician assistant in other  
20 states in the United States;

21           (3) Training, education requirements, remedial  
22 courses, and supervisory needs of a foreign-trained physician  
23 desiring to become eligible to practice as a physician  
24 assistant;

25           (4) The scope of practice of a foreign-trained  
26 physician assistant; and

27           (5) Any other areas of study that the department and  
28 educational institutions deem appropriate to further the  
29 intent of this section.

30  
31 Such study shall be presented to the Governor, the President

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1 of the Senate and the Speaker of the House of Representatives  
2 no later than January 1, 2004.

3 Section 109. Section 1012.46, Florida Statutes, is  
4 amended to read:

5 1012.46 Athletic trainers.--

6 (1) School districts may establish and implement an  
7 athletic injuries prevention and treatment program. Central to  
8 this program should be the employment and availability of  
9 persons trained in the prevention and treatment of physical  
10 injuries which may occur during athletic activities. The  
11 program should reflect opportunities for progressive  
12 advancement and compensation in employment as provided in  
13 subsection (2) and meet certain other minimum standards  
14 developed by the Department of Education. ~~The goal of the~~  
15 ~~legislature is to have school districts employ and have~~  
16 ~~available a full-time teacher athletic trainer in each high~~  
17 ~~school in the state.~~

18 (2) To the extent practicable, a school district  
19 program should include the following employment classification  
20 and advancement scheme:

21 (a) First responder.--To qualify as a first responder,  
22 a person must possess a professional, temporary, part-time,  
23 adjunct, or substitute certificate pursuant to s. 1012.56, be  
24 certified in cardiopulmonary resuscitation, first aid, and  
25 have 15 semester hours in courses such as care and prevention  
26 of athletic injuries, anatomy, physiology, nutrition,  
27 counseling, and other similar courses approved by the  
28 Commissioner of Education. This person may only administer  
29 first aid and similar care and may not hold himself or herself  
30 out to a school district or the public as an athletic trainer  
31 licensed under part XIII of chapter 468.

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1           (b) ~~Teacher~~ Athletic trainer.--To qualify as an a  
 2 ~~teacher~~ athletic trainer, a person must be licensed under part  
 3 XVIII of chapter 468 and may be utilized by a school district  
 4 as possess a professional, temporary, part-time, adjunct, or  
 5 substitute teacher certificate pursuant to s. 1012.35, s.  
 6 1012.56 or s. 1012.57, ~~and be licensed as required by part~~  
 7 ~~XVIII of chapter 468.~~

8           Section 110. Subsection (5) of section 17.41, Florida  
 9 Statutes, is amended to read:

10           17.41 Department of Banking and Finance Tobacco  
 11 Settlement Clearing Trust Fund.--

12           (5) The department shall disburse funds, by  
 13 nonoperating transfer, from the Tobacco Settlement Clearing  
 14 Trust Fund to the tobacco settlement trust funds of the  
 15 various agencies or the Biomedical Research Trust Fund in the  
 16 Department of Health, as appropriate, in amounts equal to the  
 17 annual appropriations made from those agencies' trust funds in  
 18 the General Appropriations Act.

19           Section 111. Paragraphs (f) and (j) of subsection (3)  
 20 of section 20.43, Florida Statutes, are amended, and paragraph  
 21 (k) is added to that section, to read:

22           20.43 Department of Health.--There is created a  
 23 Department of Health.

24           (3) The following divisions of the Department of  
 25 Health are established:

26           (f) Division of Emergency Medical Operations Services  
 27 ~~and Community Health Resources.~~

28           (j) Division of Health Access Awareness and Tobacco.

29           (k) Division of Disability Determinations.

30           Section 112. Paragraph (a) of subsection (2) and  
 31 subsection (3) of section 154.01, Florida Statutes, are

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1 amended to read:

2 154.01 County health department delivery system.--

3 (2) A functional system of county health department  
4 services shall be established which shall include the  
5 following three levels of service and be funded as follows:

6 (a) "Environmental health services" are those services  
7 which are organized and operated to protect the health of the  
8 general public by monitoring and regulating activities in the  
9 environment which may contribute to the occurrence or  
10 transmission of disease. Environmental health services shall  
11 be supported by available federal, state, and local funds and  
12 shall include those services mandated on a state or federal  
13 level. Examples of environmental health services include, but  
14 are not limited to, food hygiene, investigations of elevated  
15 blood lead levels, safe drinking water supply, sewage and  
16 solid waste disposal, swimming pools, group care facilities,  
17 migrant labor camps, toxic material control, radiological  
18 health, occupational health, and entomology.

19 (3) The Department of Health shall enter into  
20 contracts with the several counties for the purposes of this  
21 part. All contracts shall be negotiated and approved by the  
22 appropriate local governing bodies and the appropriate  
23 district administrators on behalf of the department. In  
24 accordance with federal guidelines, the state may utilize  
25 federal funds for county health department services. A  
26 standard contract format shall be developed and used by the  
27 department in contract negotiations. The contract shall  
28 include the three levels of county health department services  
29 outlined in subsection (2) above and shall contain a section  
30 which stipulates, for the contract year:

31 (a) All revenue sources, including federal, state, and

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1 local general revenue, fees, and other cash contributions,  
2 which shall be used by the county health department for county  
3 health department services;

4 (b) The types of services to be provided in each level  
5 of service. Each participating county may expend funds for  
6 federally mandated certification or recertification fees  
7 related to investigations of elevated blood lead levels as  
8 provided under paragraph (2)(a);

9 (c) The estimated number of clients, where applicable,  
10 who will be served, by type of service;

11 (d) The estimated number of services, where  
12 applicable, that will be provided, by type of service;

13 (e) The estimated number of staff positions (full-time  
14 equivalent positions) who will work in each type of service  
15 area; and

16 (f) The estimated expenditures for each type of  
17 service and for each level of service.

18

19 The contract shall also provide for financial and service  
20 reporting for each type of service according to standard  
21 service and reporting procedures established by the  
22 department.

23 Section 113. Section 216.342, Florida Statutes, is  
24 created to read:

25 216.342 Disbursement of the United States Trust  
26 Fund.--The United States Trust Fund may be expended by the  
27 Department of Health in accordance with the budget and plans  
28 agreed upon by the Social Security Administration and the  
29 Department of Health for the operation of the Division of  
30 Disability Determinations. The limitations on appropriations  
31 provided in s. 216.262 (1) do not apply to the United States

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1 Trust Fund.

2 Section 114. Subsection (12) of section 381.0011,  
3 Florida Statutes, is amended to read:

4 381.0011 Duties and powers of the Department of  
5 Health.--It is the duty of the Department of Health to:

6 (12) Maintain ~~Cooperate with other departments, local~~  
7 ~~officials, and private organizations in developing and~~  
8 ~~implementing~~ a statewide injury prevention and control  
9 program.

10 Section 115. Paragraph (d) of subsection (3) of  
11 section 381.004, Florida Statutes, is amended to read:

12 381.004 HIV testing.--

13 (3) HUMAN IMMUNODEFICIENCY VIRUS TESTING; INFORMED  
14 CONSENT; RESULTS; COUNSELING; CONFIDENTIALITY.--

15 (d) No test result shall be determined as positive,  
16 and no positive test result shall be revealed to any person,  
17 without corroborating or confirmatory tests being conducted  
18 except in the following situations:

19 1. Preliminary test results may be released to  
20 licensed physicians or the medical or nonmedical personnel  
21 subject to the significant exposure for purposes of  
22 subparagraphs (h)10., 11., and 12.

23 2. Preliminary test results may be released to health  
24 care providers and to the person tested when decisions about  
25 medical care or treatment of, or recommendation to, the person  
26 tested and, in the case of an intrapartum or postpartum woman,  
27 when care, treatment, or recommendations regarding her  
28 newborn, cannot await the results of confirmatory testing.

29 Positive preliminary HIV test results shall not be  
30 characterized to the patient as a diagnosis of HIV infection.

31 Justification for the use of preliminary test results must be

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1 documented in the medical record by the health care provider  
 2 who ordered the test. ~~This subparagraph does not authorize the~~  
 3 ~~release of preliminary test results for the purpose of routine~~  
 4 ~~identification of HIV-infected individuals or when HIV testing~~  
 5 ~~is incidental to the preliminary diagnosis or care of a~~  
 6 ~~patient. Corroborating or confirmatory testing must be~~  
 7 ~~conducted as followup to a positive preliminary test.~~

8 3. A positive rapid test result is preliminary and may  
 9 be released in accordance with the manufacturer's  
 10 instructions, as approved by the United States Food and Drug  
 11 Administration. A positive rapid test result shall be subject  
 12 to confirmatory testing for purposes of diagnosis and  
 13 reporting of HIV infection.

14  
 15 Results shall be communicated to the patient according to  
 16 statute regardless of the outcome. Except as provided in this  
 17 section, test results are confidential and exempt from the  
 18 provisions of s. 119.07(1).

19 Section 116. Paragraph (k) of subsection (2) and  
 20 paragraph (j) of subsection (4) of section 381.0065, Florida  
 21 Statutes, are amended to read:

22 381.0065 Onsite sewage treatment and disposal systems;  
 23 regulation.--

24 (2) DEFINITIONS.--As used in ss. 381.0065-381.0067,  
 25 the term:

26 (k) "Permanent nontidal surface water body" means a  
 27 perennial stream, a perennial river, an intermittent stream, a  
 28 perennial lake, a submerged marsh or swamp, a submerged wooded  
 29 marsh or swamp, a spring, or a seep, as identified on the most  
 30 recent quadrangle map, 7.5 minute series (topographic),  
 31 produced by the United States Geological Survey, or products

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1 derived from that series. "Permanent nontidal surface water  
2 body" shall also mean an artificial surface water body that  
3 does not have an impermeable bottom and side and that is  
4 designed to hold, or does hold, visible standing water for at  
5 least 180 days of the year. However, a nontidal surface water  
6 body that is drained, either naturally or artificially, where  
7 the intent or the result is that such drainage be temporary,  
8 shall be considered a permanent nontidal surface water body. A  
9 nontidal surface water body that is drained of all visible  
10 surface water, where the lawful intent or the result of such  
11 drainage is that such drainage will be permanent, shall not be  
12 considered a permanent nontidal surface water body. The  
13 boundary of a permanent nontidal surface water body shall be  
14 the mean annual flood line.

15 (4) PERMITS; INSTALLATION; AND CONDITIONS.--A person  
16 may not construct, repair, modify, abandon, or operate an  
17 onsite sewage treatment and disposal system without first  
18 obtaining a permit approved by the department. The department  
19 may issue permits to carry out this section, but shall not  
20 make the issuance of such permits contingent upon prior  
21 approval by the Department of Environmental Protection. A  
22 construction permit is valid for 18 months from the issuance  
23 date and may be extended by the department for one 90-day  
24 period under rules adopted by the department. A repair permit  
25 is valid for 90 days from the date of issuance. An operating  
26 permit must be obtained prior to the use of any aerobic  
27 treatment unit or if the establishment generates commercial  
28 waste. Buildings or establishments that use an aerobic  
29 treatment unit or generate commercial waste shall be inspected  
30 by the department at least annually to assure compliance with  
31 the terms of the operating permit. The operating permit for a



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1 commercial wastewater system is valid for 1 year from the date  
2 of issuance and must be renewed annually. The operating permit  
3 for an aerobic treatment unit is valid for 2 years from the  
4 date of issuance and must be renewed every 2 years. If all  
5 information pertaining to the siting, location, and  
6 installation conditions or repair of an onsite sewage  
7 treatment and disposal system remains the same, a construction  
8 or repair permit for the onsite sewage treatment and disposal  
9 system may be transferred to another person, if the transferee  
10 files, within 60 days after the transfer of ownership, an  
11 amended application providing all corrected information and  
12 proof of ownership of the property. There is no fee  
13 associated with the processing of this supplemental  
14 information. A person may not contract to construct, modify,  
15 alter, repair, service, abandon, or maintain any portion of an  
16 onsite sewage treatment and disposal system without being  
17 registered under part III of chapter 489. A property owner  
18 who personally performs construction, maintenance, or repairs  
19 to a system serving his or her own owner-occupied  
20 single-family residence is exempt from registration  
21 requirements for performing such construction, maintenance, or  
22 repairs on that residence, but is subject to all permitting  
23 requirements. A municipality or political subdivision of the  
24 state may not issue a building or plumbing permit for any  
25 building that requires the use of an onsite sewage treatment  
26 and disposal system unless the owner or builder has received a  
27 construction permit for such system from the department. A  
28 building or structure may not be occupied and a municipality,  
29 political subdivision, or any state or federal agency may not  
30 authorize occupancy until the department approves the final  
31 installation of the onsite sewage treatment and disposal

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1 system. A municipality or political subdivision of the state  
2 may not approve any change in occupancy or tenancy of a  
3 building that uses an onsite sewage treatment and disposal  
4 system until the department has reviewed the use of the system  
5 with the proposed change, approved the change, and amended the  
6 operating permit.

7 (j) An onsite sewage treatment and disposal system for  
8 a single-family residence that is designed by a professional  
9 engineer registered in the state and certified by such  
10 engineer as complying with performance criteria adopted by the  
11 department must be approved by the department subject to the  
12 following:

13 1. The performance criteria applicable to  
14 engineer-designed systems must be limited to those necessary  
15 to ensure that such systems do not adversely affect the public  
16 health or significantly degrade the groundwater or surface  
17 water. Such performance criteria shall include consideration  
18 of the quality of system effluent, the proposed total sewage  
19 flow per acre, wastewater treatment capabilities of the  
20 natural or replaced soil, water quality classification of the  
21 potential surface-water-receiving body, and the structural and  
22 maintenance viability of the system for the treatment of  
23 domestic wastewater. However, performance criteria shall  
24 address only the performance of a system and not a system's  
25 design.

26 2. The technical review and advisory panel shall  
27 assist the department in the development of performance  
28 criteria applicable to engineer-designed systems. ~~Workshops~~  
29 ~~on the development of the rules delineating such criteria~~  
30 ~~shall commence not later than September 1, 1996, and the~~  
31 ~~department shall advertise such rules for public hearing no~~

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1 ~~later than October 1, 1997.~~

2           3. A person electing to utilize an engineer-designed  
3 system shall, upon completion of the system design, submit  
4 such design, certified by a registered professional engineer,  
5 to the county health department. The county health department  
6 may utilize an outside consultant to review the  
7 engineer-designed system, with the actual cost of such review  
8 to be borne by the applicant. Within 5 working days after  
9 receiving an engineer-designed system permit application, the  
10 county health department shall request additional information  
11 if the application is not complete. Within 15 working days  
12 after receiving a complete application for an  
13 engineer-designed system, the county health department either  
14 shall issue the permit or, if it determines that the system  
15 does not comply with the performance criteria, shall notify  
16 the applicant of that determination and refer the application  
17 to the department for a determination as to whether the system  
18 should be approved, disapproved, or approved with  
19 modification. The department engineer's determination shall  
20 prevail over the action of the county health department. The  
21 applicant shall be notified in writing of the department's  
22 determination and of the applicant's rights to pursue a  
23 variance or seek review under the provisions of chapter 120.

24           4. The owner of an engineer-designed performance-based  
25 system must maintain a current maintenance service agreement  
26 with a maintenance entity permitted by the department. The  
27 maintenance entity shall obtain a biennial system operating  
28 permit from the department for each system under service  
29 contract. The department shall inspect the system at least  
30 annually, or on such periodic basis as the fee collected  
31 permits, and may collect system-effluent samples if

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1 appropriate to determine compliance with the performance  
2 criteria. The fee for the biennial operating permit shall be  
3 collected beginning with the second year of system operation.  
4 The maintenance entity shall inspect each system at least  
5 twice each year and shall report quarterly to the department  
6 on the number of systems inspected and serviced.

7           5. If an engineer-designed system fails to properly  
8 function or fails to meet performance standards, the system  
9 shall be re-engineered, if necessary, to bring the system into  
10 compliance with the provisions of this section.

11           Section 117. Paragraph (k) of subsection (2) of  
12 section 381.0066, Florida Statutes, as amended by section 16  
13 of chapter 2002-402, Laws of Florida, is amended to read:

14           381.0066 Onsite sewage treatment and disposal systems;  
15 fees.--

16           (2) The minimum fees in the following fee schedule  
17 apply until changed by rule by the department within the  
18 following limits:

19           (k) Research: An additional \$5 fee shall be added to  
20 each new system construction permit issued ~~during fiscal years~~  
21 ~~1996-2003~~ to be used for onsite sewage treatment and disposal  
22 system research, demonstration, and training projects. Five  
23 dollars from any repair permit fee collected under this  
24 section shall be used for funding the hands-on training  
25 centers described in s. 381.0065(3)(j).

26  
27 The funds collected pursuant to this subsection must be  
28 deposited in a trust fund administered by the department, to  
29 be used for the purposes stated in this section and ss.  
30 381.0065 and 381.00655.

31           Section 118. Paragraph (a) of subsection (2) of

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1 section 381.0072, Florida Statutes, is amended to read:

2           381.0072 Food service protection.--It shall be the  
3 duty of the Department of Health to adopt and enforce  
4 sanitation rules consistent with law to ensure the protection  
5 of the public from food-borne illness. These rules shall  
6 provide the standards and requirements for the storage,  
7 preparation, serving, or display of food in food service  
8 establishments as defined in this section and which are not  
9 permitted or licensed under chapter 500 or chapter 509.

10           (2) DUTIES.--

11           (a) The department shall adopt rules, including  
12 definitions of terms which are consistent with law prescribing  
13 minimum sanitation standards and manager certification  
14 requirements as prescribed in s. 509.039, and which shall be  
15 enforced in food service establishments as defined in this  
16 section. The sanitation standards must address the  
17 construction, operation, and maintenance of the establishment;  
18 lighting, ventilation, laundry rooms, lockers, use and storage  
19 of toxic materials and cleaning compounds, and first-aid  
20 supplies; plan review; design, construction, installation,  
21 location, maintenance, sanitation, and storage of food  
22 equipment and utensils; employee training, health, hygiene,  
23 and work practices; food supplies, preparation, storage,  
24 transportation, and service, including access to the areas  
25 where food is stored or prepared; and sanitary facilities and  
26 controls, including water supply and sewage disposal; plumbing  
27 and toilet facilities; garbage and refuse collection, storage,  
28 and disposal; and vermin control. Public and private schools  
29 if the food service is operated by school employees, hospitals  
30 licensed under chapter 395, nursing homes licensed under part  
31 II of chapter 400, child care facilities as defined in s.

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1 402.301, ~~and~~ residential facilities colocated with a nursing  
2 home or hospital if all food is prepared in a central kitchen  
3 that complies with nursing or hospital regulations, and bars  
4 and lounges shall be exempt from the rules developed for  
5 manager certification. The department shall administer a  
6 comprehensive inspection, monitoring, and sampling program to  
7 ensure such standards are maintained. With respect to food  
8 service establishments permitted or licensed under chapter 500  
9 or chapter 509, the department shall assist the Division of  
10 Hotels and Restaurants of the Department of Business and  
11 Professional Regulation and the Department of Agriculture and  
12 Consumer Services with rulemaking by providing technical  
13 information.

14 Section 119. Section 381.104, Florida Statutes, is  
15 created to read:

16 381.104 Employee health and wellness program.--

17 (1) Each state agency may allocate, from existing  
18 resources, the necessary funding and facilities for the  
19 development and maintenance of an employee health and wellness  
20 program and may seek additional funding from other sources to  
21 support the program for the benefit of the agency's employees.

22 (2) Each state agency may dedicate resources to  
23 develop and coordinate an employee health and wellness program  
24 or arrange to cooperate with other agencies in their  
25 geographic proximity for program coordination, including  
26 providers of state employee benefits.

27 (3) Each state agency may establish an employee health  
28 and wellness coordinator and an advisory committee to guide  
29 the development of an operational plan, including the  
30 collection of data, to plan events and activities, and to  
31 oversee program evaluation and the allocation of funds.

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1       (4) Each state agency may conduct and dedicate  
2 resources toward an employee needs assessment to ascertain the  
3 health and wellness-related needs of its employees.

4       (5) Each state agency may establish policies that  
5 allow employees no longer than 30 minutes of work time three  
6 times each week, as individual workloads allow, which may be  
7 used for the purpose of engaging in wellness activities,  
8 including physical activity, stress-reduction programs,  
9 tobacco cessation, personal training, nutrition counseling, or  
10 weight reduction and control.

11       (6) Each state agency participating in the program  
12 must use an employee health and wellness activity agreement  
13 form, which must be completed and signed by the employee,  
14 signed by the employee's immediate supervisor, and kept in the  
15 employee's personnel file prior to participating in any  
16 activity. This form shall be developed by the Department of  
17 Health. It is the responsibility of the employee to complete  
18 the form, including the time of the workday the wellness  
19 activity will be observed and on which days of the week,  
20 obtain the signature of his or her supervisor, and submit the  
21 form to the personnel office. The employee must submit a  
22 revised employee health and wellness activity agreement form  
23 prior to any change in the employee's activities.

24       (7) Each state agency may designate up to 1 hour each  
25 month for the purpose of providing wellness training for its  
26 employees.

27       (8) Each state agency may use the e-mail and other  
28 communication systems to promote the agency's employee health  
29 and wellness activities.

30       (9) Each state agency may, and is encouraged to:

31       (a) Enter into an agreement or contract with other

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1 state agencies, including a state-supported college or  
2 university, or with a local or federal department,  
3 institution, commission, agency, or private enterprise to  
4 present, collaborate, or participate jointly in health or  
5 fitness education or activity programs.

6 (b) Implement as a part of the employee health and  
7 wellness program, health education activities that focus on  
8 skill development and lifestyle behavior change, along with  
9 information dissemination and awareness building, preferably  
10 tailored to an employee's interests and needs.

11 (c) Review and offer recommendations on environmental  
12 and social support policies that pertain to improving the  
13 health of employees.

14 (d) Link the employee health and wellness program to  
15 programs such as the employee assistance program and other  
16 related programs to help employees balance work and family.

17 (e) Offer free, low-cost, or employee fee-based  
18 employee wellness programs.

19 (10) Each agency that develops and implements an  
20 employee health and wellness program shall include and  
21 document an evaluation and improvement process to help enhance  
22 the program's efficiency and effectiveness over time.

23 (11) The Department of Health shall provide model  
24 program guidelines for the employee health and wellness  
25 program and shall provide ongoing technical assistance to  
26 other state agencies to assist in developing the agency's  
27 employee health and wellness program.

28 Section 120. Section 381.86, Florida Statutes, is  
29 created to read:

30 381.86 Review Council for Human Subjects.--

31 (1) The Review Council for Human Subjects is created



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1 within the Department of Health to comply with federal  
 2 requirements under 45 C.F.R. part 46 and 21 C.F.R. parts 50  
 3 and 56 for an institutional review board to review all  
 4 biomedical and behavioral research on human subjects which is  
 5 funded by the department or supported by the department in any  
 6 manner, including the permitting of access to department data  
 7 or department resources.

8 (2) Consistent with federal requirements the Secretary  
 9 of Health shall determine and appoint the membership on the  
 10 council and designate the chair.

11 (3) The council may serve as an institutional review  
 12 board for other agencies at the discretion of the secretary.

13 (4) Each council member is entitled to reimbursement  
 14 for per diem and travel expenses as provided in s. 112.061  
 15 while carrying out the official business of the council.

16 (5) The department shall charge for costs incurred by  
 17 the council for research oversight according to a fee  
 18 schedule, except that fees shall be waived for any student who  
 19 is a candidate for a degree at a university located in this  
 20 state. The fee schedule shall provide for fees for initial  
 21 review, amendments, and continuing review. The department  
 22 shall adopt rules necessary to comply with federal  
 23 requirements and this section. Such rules shall also prescribe  
 24 procedures for requesting council review.

25 (6) Fees collected pursuant to this section shall be  
 26 deposited into the Administrative Trust Fund and used solely  
 27 for the purpose of administering the program authorized by  
 28 this section.

29 Section 121. Paragraphs (b) and (c) of subsection (3)  
 30 of section 381.89, Florida Statutes, are amended to read:

31 381.89 Regulation of tanning facilities.--

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1           (3)  
 2           (b) The department shall establish procedures for the  
 3 issuance and annual renewal of licenses and shall establish  
 4 annual license and renewal fees and late payment fees in an  
 5 amount necessary to cover the expenses of administering this  
 6 section. Annual license and renewal fees may not ~~shall be not~~  
 7 ~~less than \$125 nor~~ more than \$250 per tanning device and a  
 8 maximum total fee per individual tanning facility may be set  
 9 by rule. ~~Effective October 1, 1991, the fee amount shall be~~  
 10 ~~the minimum fee proscribed in this paragraph and such fee~~  
 11 ~~amount shall remain in effect until the effective date of a~~  
 12 ~~fee schedule adopted by the department.~~

13           (c) The department may adopt a system under which  
 14 licenses expire on staggered dates and the annual renewal fees  
 15 are prorated quarterly ~~monthly~~ to reflect the actual number of  
 16 months the license is valid.

17           Section 122. Subsection (3) and paragraph (a) of  
 18 subsection (7) of section 381.90, Florida Statutes, are  
 19 amended to read:

20           381.90 Health Information Systems Council; legislative  
 21 intent; creation, appointment, duties.--

22           (3) The council shall be composed of the following  
 23 members or their senior executive-level designees:

- 24           (a) The Secretary of ~~the Department of~~ Health;
- 25           (b) The Executive Director ~~secretary~~ of the Department  
 26 of Veterans' Affairs ~~Business and Professional Regulation~~;

27           (c) The Secretary of ~~the Department of~~ Children and  
 28 Family Services;

29           (d) The Secretary of Health Care Administration;

30           (e) The Secretary of ~~the Department of~~ Corrections;

31           (f) The Attorney General;

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1 (g) The Executive Director of the Correctional Medical  
2 Authority;

3 (h) Two members representing county health  
4 departments, one from a small county and one from a large  
5 county, appointed by the Governor;

6 (i) A representative from the Florida Association of  
7 Counties;

8 (j) The Chief Financial Officer ~~State Treasurer and~~  
9 ~~Insurance Commissioner~~;

10 (k) A representative from the Florida Healthy Kids  
11 Corporation;

12 (l) A representative from a school of public health  
13 chosen by the Commissioner of Education ~~Board of Regents~~;

14 (m) The Commissioner of Education;

15 (n) The Secretary of ~~the Department of Elderly~~  
16 Affairs; and

17 (o) The Secretary of ~~the Department of Juvenile~~  
18 Justice.

19

20 Representatives of the Federal Government may serve without  
21 voting rights.

22 (7) The council's duties and responsibilities include,  
23 but are not limited to, the following:

24 (a) By ~~June~~ March 1 of each year, to develop and  
25 approve a strategic plan pursuant to the requirements set  
26 forth in s. 186.022~~(9)~~. Copies of the plan shall be  
27 transmitted electronically or in writing to the Executive  
28 Office of the Governor, the Speaker of the House of  
29 Representatives, and the President of the Senate.

30 Section 123. Subsections (1) and (2), paragraphs (f)  
31 and (g) of subsection (3), and subsection (5) of section

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1 383.14, Florida Statutes, are amended to read:

2           383.14 Screening for metabolic disorders, other  
3 hereditary and congenital disorders, and environmental risk  
4 factors.--

5           (1) SCREENING REQUIREMENTS.--To help ensure access to  
6 the maternal and child health care system, the Department of  
7 Health shall promote the screening of all newborns ~~infants~~  
8 born in Florida for phenylketonuria and other metabolic,  
9 hereditary, and congenital disorders known to result in  
10 significant impairment of health or intellect, as screening  
11 programs accepted by current medical practice become available  
12 and practical in the judgment of the department. The  
13 department shall also promote the identification and screening  
14 of all newborns ~~infants~~ born in this state and their families  
15 for environmental risk factors such as low income, poor  
16 education, maternal and family stress, emotional instability,  
17 substance abuse, and other high-risk conditions associated  
18 with increased risk of infant mortality and morbidity to  
19 provide early intervention, remediation, and prevention  
20 services, including, but not limited to, parent support and  
21 training programs, home visitation, and case management.  
22 Identification, perinatal screening, and intervention efforts  
23 shall begin prior to and immediately following the birth of  
24 the child by the attending health care provider. Such efforts  
25 shall be conducted in hospitals, perinatal centers, county  
26 health departments, school health programs that provide  
27 prenatal care, and birthing centers, and reported to the  
28 Office of Vital Statistics.

29           (a) Prenatal screening.--The department shall develop  
30 a multilevel screening process that includes a risk assessment  
31 instrument to identify women at risk for a preterm birth or

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1 other high-risk condition. The primary health care provider  
2 shall complete the risk assessment instrument and report the  
3 results to the Office of Vital Statistics so that the woman  
4 may immediately be notified and referred to appropriate  
5 health, education, and social services.

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

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1 Tests and screenings must be performed by the State Public  
2 Health Laboratory, in coordination with Children's Medical  
3 Services, at such times and in such manner as is prescribed by  
4 the department after consultation with the Genetics and  
5 Newborn Infant Screening Advisory Council and the State  
6 Coordinating Council for School Readiness Programs.

7 (2) RULES.--After consultation with the Genetics and  
8 Newborn Infant Screening Advisory Council, the department  
9 shall adopt and enforce rules requiring that every newborn  
10 infant born in this state shall, prior to becoming 2 weeks of  
11 age, be subjected to a test for phenylketonuria and, at the  
12 appropriate age, be tested for such other metabolic diseases  
13 and hereditary or congenital disorders as the department may  
14 deem necessary from time to time. After consultation with the  
15 State Coordinating Council for School Readiness Programs, the  
16 department shall also adopt and enforce rules requiring every  
17 newborn infant born in this state to be screened for  
18 environmental risk factors that place children and their  
19 families at risk for increased morbidity, mortality, and other  
20 negative outcomes. The department shall adopt such additional  
21 rules as are found necessary for the administration of this  
22 section, including rules providing definitions of terms, rules  
23 relating to the methods used and time or times for testing as  
24 accepted medical practice indicates, rules relating to  
25 charging and collecting fees for screenings authorized by this  
26 section, and rules requiring mandatory reporting of the  
27 results of tests and screenings for these conditions to the  
28 department.

29 (3) DEPARTMENT OF HEALTH; POWERS AND DUTIES.--The  
30 department shall administer and provide certain services to  
31 implement the provisions of this section and shall:

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1 (f) Promote the availability of genetic studies and  
2 counseling in order that the parents, siblings, and affected  
3 newborns ~~infants~~ may benefit from available knowledge of the  
4 condition.

5 (g) Have the authority to charge and collect fees for  
6 screenings authorized in this section, as follows:

7 1. A fee of \$20 will be charged for each live birth,  
8 as recorded by the Office of Vital Statistics, occurring in a  
9 hospital licensed under part I of chapter 395 or a birth  
10 center licensed under s. 383.305, up to 3,000 live births per  
11 licensed hospital per year or over 60 births per birth center  
12 per year. The department shall calculate the annual  
13 assessment for each hospital and birth center, and this  
14 assessment must be paid in equal amounts quarterly. Quarterly,  
15 the department shall generate and mail to each hospital and  
16 birth center a statement of the amount due.

17 2. As part of the department's legislative budget  
18 request prepared pursuant to chapter 216, the department shall  
19 submit a certification by the department's inspector general,  
20 or the director of auditing within the inspector general's  
21 office, of the annual costs of the uniform testing and  
22 reporting procedures of the newborn ~~infant~~ screening program.  
23 In certifying the annual costs, the department's inspector  
24 general or the director of auditing within the inspector  
25 general's office shall calculate the direct costs of the  
26 uniform testing and reporting procedures, including applicable  
27 administrative costs. Administrative costs shall be limited to  
28 those department costs which are reasonably and directly  
29 associated with the administration of the uniform testing and  
30 reporting procedures of the newborn ~~infant~~ screening program.  
31

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1 All provisions of this subsection must be coordinated with the  
2 provisions and plans established under this chapter, chapter  
3 411, and Pub. L. No. 99-457.

4 (5) ADVISORY COUNCIL.--There is established a Genetics  
5 and Newborn ~~Infant~~ Screening Advisory Council made up of 12  
6 members appointed by the Secretary of Health. The council  
7 shall be composed of two consumer members, three practicing  
8 pediatricians, at least one of whom must be a pediatric  
9 hematologist, one representative from each of the four medical  
10 schools in the state, the Secretary of Health or his or her  
11 designee, one representative from the Department of Health  
12 representing Children's Medical Services, and one  
13 representative from the Developmental Disabilities Program  
14 Office of the Department of Children and Family Services. All  
15 appointments shall be for a term of 4 years. The chairperson  
16 of the council shall be elected from the membership of the  
17 council and shall serve for a period of 2 years. The council  
18 shall meet at least semiannually or upon the call of the  
19 chairperson. The council may establish ad hoc or temporary  
20 technical advisory groups to assist the council with specific  
21 topics which come before the council. Council members shall  
22 serve without pay. Pursuant to the provisions of s. 112.061,  
23 the council members are entitled to be reimbursed for per diem  
24 and travel expenses. It is the purpose of the council to  
25 advise the department about:

26 (a) Conditions for which testing should be included  
27 under the screening program and the genetics program;

28 (b) Procedures for collection and transmission of  
29 specimens and recording of results; and

30 (c) Methods whereby screening programs and genetics  
31 services for children now provided or proposed to be offered



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1 in the state may be more effectively evaluated, coordinated,  
2 and consolidated.

3 Section 124. Section 384.25, Florida Statutes, is  
4 amended to read:

5 384.25 Reporting required.--

6 (1) Each person who makes a diagnosis of or treats a  
7 person with a sexually transmissible disease and each  
8 laboratory that performs a test for a sexually transmissible  
9 disease which concludes with a positive result shall report  
10 such facts as may be required by the department by rule,  
11 within a time period as specified by rule of the department,  
12 but in no case to exceed 2 weeks.

13 ~~(a)(2)~~ The department shall adopt rules specifying the  
14 information required in and a minimum time period for  
15 reporting a sexually transmissible disease. In adopting such  
16 rules, the department shall consider the need for information,  
17 protections for the privacy and confidentiality of the  
18 patient, and the practical ability of persons and laboratories  
19 to report in a reasonable fashion. To ensure the  
20 confidentiality of persons infected with the human  
21 immunodeficiency virus (HIV), reporting of HIV infection and  
22 acquired immune deficiency syndrome (AIDS) must be conducted  
23 using a system ~~the HIV/AIDS Reporting System (HARS)~~ developed  
24 by the Centers for Disease Control and Prevention of the  
25 United States Public Health Service or an equivalent system.

26 ~~(b)(3)~~ The department shall require reporting of  
27 ~~physician diagnosed~~ cases of AIDS and HIV infection consistent  
28 with based upon diagnostic criteria for surveillance-case  
29 definition for HIV/AIDS reporting from the Centers for Disease  
30 Control and Prevention.

31 ~~(c)(4)~~ The department shall ~~may~~ require physician and

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1 laboratory reporting of HIV infection. ~~However, only reports~~  
2 ~~of HIV infection identified on or after the effective date of~~  
3 ~~the rule developed by the department pursuant to this~~  
4 ~~subsection shall be accepted.~~ The Reporting may not affect or  
5 relate to anonymous HIV testing programs conducted pursuant to  
6 s. 381.004(4) ~~or to university-based medical research~~  
7 ~~protocols as determined by the department.~~

8       ~~(2)(5)~~ After notification of the test subject ~~under~~  
9 ~~subsection (4)~~, the department may, with the consent of the  
10 test subject, notify school superintendents of students and  
11 school personnel whose HIV tests are positive.

12       (3) The department shall adopt rules requiring each  
13 physician and laboratory to report any newborn or infant up to  
14 18 months of age who has been exposed to HIV. The rules may  
15 include the method and time period for reporting, information  
16 to be included in the report, requirements for enforcement,  
17 and followup activities by the department.

18       ~~(4)(6)~~ The department shall by February 1 of each year  
19 submit to the Legislature an annual report relating to all  
20 information obtained pursuant to this section.

21       ~~(5)(7)~~ Each person who violates the provisions of this  
22 section or the rules adopted hereunder may be fined by the  
23 department up to \$500 for each offense. The department shall  
24 report each violation of this section to the regulatory agency  
25 responsible for licensing each health care professional and  
26 each laboratory to which these provisions apply.

27       Section 125. Subsection (1) of section 385.204,  
28 Florida Statutes, is amended to read:

29       385.204 Insulin; purchase, distribution; penalty for  
30 fraudulent application for and obtaining of insulin.--

31       (1) The Department of Health, to the extent funds are

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1 available, shall purchase and distribute insulin through its  
 2 agents or other appropriate agent of the state or Federal  
 3 Government in any county or municipality in the state to any  
 4 bona fide resident of this state suffering from diabetes ~~or a~~  
 5 ~~kindred disease~~ requiring insulin in its treatment who makes  
 6 application for insulin and furnishes proof of his or her  
 7 financial inability to purchase in accordance with the rules  
 8 adopted ~~promulgated~~ by the department concerning the  
 9 distribution of insulin.

10 Section 126. Subsection (2) of section 391.021,  
 11 Florida Statutes, is amended to read:

12 391.021 Definitions.--When used in this act, unless  
 13 the context clearly indicates otherwise:

14 (2) "Children with special health care needs" means  
 15 those children under the age of 21 years who have, or are at  
 16 increased risk for, chronic physical, developmental,  
 17 behavioral, or emotional conditions and who also require  
 18 health care and related services of a type or amount beyond  
 19 that which is generally required by children whose serious or  
 20 ~~chronic physical or developmental conditions require extensive~~  
 21 ~~preventive and maintenance care beyond that required by~~  
 22 ~~typically healthy children. Health care utilization by these~~  
 23 ~~children exceeds the statistically expected usage of the~~  
 24 ~~normal child adjusted for chronological age. These children~~  
 25 ~~often need complex care requiring multiple providers,~~  
 26 ~~rehabilitation services, and specialized equipment in a number~~  
 27 ~~of different settings.~~

28 Section 127. Section 391.025, Florida Statutes, is  
 29 amended to read:

30 391.025 Applicability and scope.--

31 ~~(1) This act applies to health services provided to~~

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1 ~~eligible individuals who are:~~

2       ~~(a) Enrolled in the Medicaid program;~~

3       ~~(b) Enrolled in the Florida Kidcare program; and~~

4       ~~(c) Uninsured or underinsured, provided that they meet~~

5 ~~the financial eligibility requirements established in this~~

6 ~~act, and to the extent that resources are appropriated for~~

7 ~~their care.~~

8       ~~(1)(2)~~ The Children's Medical Services program

9 consists of the following components:

10       (a) The newborn infant metabolic screening program

11 established in s. 383.14.

12       (b) The regional perinatal intensive care centers

13 program established in ss. 383.15-383.21.

14       (c) A federal or state program authorized by the

15 Legislature.

16       (d) The developmental evaluation and intervention

17 program, including the infants and toddlers early intervention

18 program.

19       (e) The Children's Medical Services network.

20       ~~(2)(3)~~ The Children's Medical Services program shall

21 not be deemed an insurer and is not subject to the licensing

22 requirements of the Florida Insurance Code or the rules of the

23 Department of Insurance, when providing services to children

24 who receive Medicaid benefits, other Medicaid-eligible

25 children with special health care needs, and children

26 participating in the Florida Kidcare program.

27       Section 128. Subsection (2) of section 391.029,

28 Florida Statutes, is amended to read:

29       391.029 Program eligibility.--

30       (2) The following individuals are financially eligible

31 to receive services through for the program:

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1 (a) A high-risk pregnant female who is eligible for  
2 Medicaid.

3 (b) Children ~~A child~~ with special health care needs  
4 from birth to age 21 years who are ~~is~~ eligible for Medicaid.

5 (c) Children ~~A child~~ with special health care needs  
6 from birth to age 19 years who are ~~is~~ eligible for a program  
7 under Title XXI of the Social Security Act.

8 (3) Subject to the availability of funds, the  
9 following individuals may receive services through the  
10 program:

11 (a)(d) Children ~~A child~~ with special health care needs  
12 from birth to age 21 years whose family income is above  
13 financial eligibility requirements under Title XXI of the  
14 Social Security Act and whose projected annual cost of care  
15 adjusts the family income to Medicaid financial criteria. In  
16 cases where the family income is adjusted based on a projected  
17 annual cost of care, the family shall participate financially  
18 in the cost of care based on criteria established by the  
19 department.

20 (b)(e) Children ~~A child~~ with special health care needs  
21 from birth to 21 years of age, as provided defined in Title V  
22 of the Social Security Act ~~relating to children with special~~  
23 ~~health care needs.~~

24  
25 ~~The department may continue to serve certain children with~~  
26 ~~special health care needs who are 21 years of age or older and~~  
27 ~~who were receiving services from the program prior to April 1,~~  
28 ~~1998. Such children may be served by the department until~~  
29 ~~July 1, 2000.~~

30 Section 129. Subsection (4) is added to section  
31 391.035, Florida Statutes, to read:

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1           391.035 Provider qualifications.--  
2           (4) Notwithstanding any other provision of law, the  
3 department may contract with health care providers licensed in  
4 another state to provide health services to participants in  
5 the Children's Medical Services program when necessary due to  
6 an emergency, the availability of specialty services, or a  
7 greater convenience to the participant for receiving timely  
8 and effective health care services. The department may adopt  
9 rules to administer this subsection.

10           Section 130. Subsection (4) is added to section  
11 391.055, Florida Statutes, to read:

12           391.055 Service delivery systems.--  
13           (4) If a newborn has a presumptively abnormal  
14 screening result for metabolic or other hereditary and  
15 congenital disorders which is identified through the newborn  
16 screening program pursuant to s. 383.14, the newborn shall be  
17 referred to the Children's Medical Services network for  
18 confirmatory testing, medical management, or medical referral.

19           Section 131. Section 391.309, Florida Statutes, is  
20 created to read:

21           391.309 Florida Infants and Toddlers Early  
22 Intervention Program.--The Department of Health may implement  
23 and administer Part C of the federal Individuals with  
24 Disabilities Education Act (IDEA), which shall be known as the  
25 Florida Infants and Toddlers Early Intervention Program.

26           (1) The department, jointly with the Department of  
27 Education, shall annually prepare a grant application to the  
28 United States Department of Education for funding early  
29 intervention services for infants and toddlers with  
30 disabilities, ages birth through 36 months, and their families  
31 pursuant to Part C of the federal Individuals with

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1 Disabilities Education Act.

2       (2) The department shall ensure that no early  
3 intervention provider participating in the program provides  
4 both core and required services without a waiver from the  
5 Deputy Secretary for Children's Medical Services or his or her  
6 designee, as expressed in the contract between the department  
7 and the provider. For purposes of this section, "core"  
8 services are limited to child find and referral services,  
9 family support planning, service coordination, and  
10 multidisciplinary evaluation.

11           Section 132. Section 394.9151, Florida Statutes, is  
12 amended to read:

13           394.9151 Contract authority.--The Department of  
14 Children and Family Services may contract with a private  
15 entity or state agency for use of and operation of facilities  
16 to comply with the requirements of this act. The department of  
17 ~~Children and Family Services~~ may also contract with the  
18 Correctional Privatization Commission as defined in chapter  
19 957 to issue a request for proposals and monitor contract  
20 compliance for these services. The department may enter into  
21 an agreement or may contract with the Correctional Medical  
22 Authority, as defined in chapter 945, to conduct surveys of  
23 medical services and to provide medical quality assurance and  
24 improvement assistance at secure confinement and treatment  
25 facilities for persons confined under this chapter.

26           Section 133. Subsection (2) of section 395.404,  
27 Florida Statutes, is amended to read:

28           395.404 Review of trauma registry data;  
29 confidentiality and limited release.--

30           (2) Notwithstanding the provisions of s. 381.74, each  
31 trauma center and acute care hospital shall submit severe

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1 disability and head-injury registry data to the department as  
 2 provided by rule. Each trauma center and acute care hospital  
 3 shall continue to provide initial notification of any person  
 4 who has a moderate-to-severe brain or spinal cord injury  
 5 ~~persons who have severe disabilities and head injuries to the~~  
 6 brain and spinal cord injury central registry of the  
 7 Department of Health within timeframes provided in s. 381.74  
 8 ~~chapter 413~~. Such initial notification shall be made in the  
 9 manner prescribed by the Department of Health for the purpose  
 10 of providing timely ~~vocational~~ rehabilitation and transitional  
 11 services to an individual who sustains traumatic  
 12 moderate-to-severe brain or spinal cord injury to enable such  
 13 individual to return to his or her community ~~services to the~~  
 14 ~~severely disabled or head-injured person.~~

15 Section 134. Subsection (2) of section 401.113,  
 16 Florida Statutes, is amended to read:

17 401.113 Department; powers and duties.--

18 (2)(a) The department shall annually dispense funds  
 19 contained in the Emergency Medical Services Trust Fund as  
 20 follows:

21 1.(a) Forty-five percent of such moneys must be  
 22 divided among the counties according to the proportion of the  
 23 combined amount deposited in the trust fund from the county.  
 24 These funds may not be used to match grant funds as identified  
 25 in subparagraph 2 ~~paragraph (b)~~. An individual board of county  
 26 commissioners may distribute these funds to emergency medical  
 27 service organizations within the county, as it deems  
 28 appropriate.

29 2.(b) Forty percent of such moneys must be used by the  
 30 department for making matching grants to local agencies,  
 31 municipalities, and emergency medical services organizations



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1 for the purpose of conducting research, increasing existing  
2 levels of emergency medical services, evaluation, community  
3 education, injury prevention programs, and training in  
4 cardiopulmonary resuscitation and other lifesaving and first  
5 aid techniques.

6 ~~a.1.~~ At least 90 percent of these moneys must be made  
7 available on a cash matching basis. A grant made under this  
8 subparagraph must be contingent upon the recipient providing a  
9 cash sum equal to 25 percent of the total department-approved  
10 grant amount.

11 ~~b.2.~~ No more than 10 percent of these moneys must be  
12 made available to rural emergency medical services, and  
13 notwithstanding the restrictions specified in subsection (1),  
14 these moneys may be used for improvement, expansion, or  
15 continuation of services provided. A grant made under this  
16 subparagraph must be contingent upon the recipient providing a  
17 cash sum equal to no more than 10 percent of the total  
18 department-approved grant amount.

19  
20 The department shall develop procedures and standards for  
21 grant disbursement under this paragraph based on the need for  
22 emergency medical services, the requirements of the population  
23 to be served, and the objectives of the state emergency  
24 medical services plan.

25 ~~3.(c)~~ Fifteen percent of such moneys must be used by  
26 the department for capital equipment outlay, personnel,  
27 community education, evaluation, and other costs associated  
28 with the administration of this chapter. Any moneys not  
29 annually used for this purpose must be used for making  
30 additional rural grant funds available.

31 ~~(b) Notwithstanding any other law to the contrary, any~~

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1 interest generated from grant funds may be expended by the  
2 grantee on the budget items approved by the department.  
3 Grantees receiving funds, which require a match, may not  
4 expend interest funds until all match requirements have been  
5 satisfied. Such grantees shall return to the department any  
6 interest and grant funds not expended at the conclusion of the  
7 grant period. All such returned funds shall be used by the  
8 department for additional matching grant awards.

9           Section 135. Section 401.211, Florida Statutes, is  
10 amended to read:

11           401.211 Legislative intent.--The Legislature  
12 recognizes that the systematic provision of emergency medical  
13 services saves lives and reduces disability associated with  
14 illness and injury. In addition, that system of care must be  
15 equally capable of assessing, treating, and transporting  
16 children, adults, and frail elderly persons. Further, it is  
17 the intent of the Legislature to encourage the development and  
18 maintenance of emergency medical services because such  
19 services are essential to the health and well-being of all  
20 citizens of the state. The Legislature also recognizes that  
21 the establishment of a statewide comprehensive injury  
22 prevention program supports state and community health systems  
23 by further enhancing the total delivery system of emergency  
24 medical services and reduces injuries for all persons. The  
25 purpose of this part is to protect and enhance the public  
26 health, welfare, and safety through the establishment of an  
27 emergency medical services state plan, an advisory council, a  
28 comprehensive statewide injury prevention and control program,  
29 minimum standards for emergency medical services personnel,  
30 vehicles, services and medical direction, and the  
31 establishment of a statewide inspection program created to

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1 monitor the quality of patient care delivered by each licensed  
2 service and appropriately certified personnel.

3 Section 136. Section 401.243, Florida Statutes, is  
4 created to read:

5 401.243 Injury prevention and control.--The injury  
6 prevention and control program is responsible for the  
7 statewide coordination and expansion of injury prevention and  
8 control activities. The duties of the department may include,  
9 but not be limited to, data collection, surveillance,  
10 education, and the promotion of interventions. The department  
11 may:

12 (1) Assist county health departments and community and  
13 other state agencies by serving as a focal point for injury  
14 prevention expertise and guidance.

15 (2) Seek, receive, and expend any funds received  
16 through appropriations, grants, donations, or contributions  
17 from public or private sources for program purposes.

18 (3) Adopt rules related to the activities of the  
19 program, including, but not limited to, those needed for  
20 implementation of injury prevention and control activities,  
21 data collection, surveillance, education, promotion of  
22 interventions, and for assistance to other entities.

23 (4) Develop, and revise as necessary, a comprehensive  
24 state plan for injury prevention and control.

25 Section 137. Subsections (3), (4), (5), and (13) of  
26 section 401.27, Florida Statutes, are amended, and subsection  
27 (14) is added to that section, to read:

28 401.27 Personnel; standards and certification.--

29 (3) Any person who desires to be certified or  
30 recertified as an emergency medical technician or paramedic  
31 must apply to the department under oath on forms provided by

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1 the department which shall contain such information as the  
2 department reasonably requires, which may include affirmative  
3 evidence of ability to comply with applicable laws and rules.  
4 The department may accept electronically submitted  
5 applications. If an application is submitted electronically,  
6 the department may require supplemental materials, including  
7 an original signature of the applicant and documentation  
8 verifying eligibility for certification to be submitted in a  
9 nonelectronic format. The department shall determine whether  
10 the applicant meets the requirements specified in this section  
11 and in rules of the department and shall issue a certificate  
12 to any person who meets such requirements.

13 (4) An applicant for certification or recertification  
14 as an emergency medical technician or paramedic must:

15 (a) Have completed an appropriate training course as  
16 follows:

17 1. For an emergency medical technician, an emergency  
18 medical technician training course equivalent to the most  
19 recent emergency medical technician basic training course of  
20 the United States Department of Transportation as approved by  
21 the department;

22 2. For a paramedic, a paramedic training program  
23 equivalent to the most recent paramedic course of the United  
24 States Department of Transportation as approved by the  
25 department;

26 (b) Certify ~~under oath~~ that he or she is not addicted  
27 to alcohol or any controlled substance;

28 (c) Certify ~~under oath~~ that he or she is free from any  
29 physical or mental defect or disease that might impair the  
30 applicant's ability to perform his or her duties;

31 (d) Within 1 year after course completion have passed

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1 an examination developed or required by the department;

2 (e)1. For an emergency medical technician, hold either  
3 a current American Heart Association cardiopulmonary  
4 resuscitation course card or an American Red Cross  
5 cardiopulmonary resuscitation course card or its equivalent as  
6 defined by department rule;

7 2. For a paramedic, hold a certificate of successful  
8 course completion in advanced cardiac life support from the  
9 American Heart Association or its equivalent as defined by  
10 department rule;

11 (f) Submit the certification fee and the nonrefundable  
12 examination fee prescribed in s. 401.34, which examination fee  
13 will be required for each examination administered to an  
14 applicant; and

15 (g) Submit a completed application to the department,  
16 which application documents compliance with paragraphs (a),  
17 (b), (c), (e), (f), (g), and, if applicable, (d). The  
18 application must be submitted so as to be received by the  
19 department at least 30 calendar days before the next regularly  
20 scheduled examination for which the applicant desires to be  
21 scheduled.

22 (5) The certification examination must be offered  
23 monthly. The department shall issue an examination admission  
24 notice to the applicant advising him or her of the time and  
25 place of the examination for which he or she is scheduled.  
26 ~~Individuals achieving a passing score on the certification~~  
27 ~~examination may be issued a temporary certificate with their~~  
28 ~~examination grade report. The department must issue an~~  
29 ~~original certification within 45 days after the examination.~~  
30 Examination questions and answers are not subject to discovery  
31 but may be introduced into evidence and considered only in

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1 camera in any administrative proceeding under chapter 120. If  
2 an administrative hearing is held, the department shall  
3 provide challenged examination questions and answers to the  
4 administrative law judge. The department shall establish by  
5 rule the procedure by which an applicant, and the applicant's  
6 attorney, may review examination questions and answers in  
7 accordance with s. 119.07(3)(a).

8           (13) ~~The department shall adopt a standard state~~  
9 ~~insignia for emergency medical technicians and paramedics. The~~  
10 ~~department shall establish by rule the requirements to display~~  
11 ~~the state emergency medical technician and paramedic insignia.~~  
12 ~~The rules may not require a person to wear the standard~~  
13 ~~insignia but must require that~~ If a person wears any insignia  
14 that identifies the person as a certified emergency medical  
15 technician or paramedic in this state, the insignia must be  
16 ~~the standard state insignia adopted under this section. The~~  
17 ~~insignia must~~ denote the individual's level of certification  
18 at which he or she is functioning.

19           (14)(a) An applicant for initial certification under  
20 this section must submit information and a set of fingerprints  
21 to the Department of Health on a form and under procedures  
22 specified by the department, along with payment in an amount  
23 equal to the costs incurred by the Department of Health for a  
24 a statewide criminal history check and a national criminal  
25 history check of the applicant.

26           (b) An applicant for renewed certification who has not  
27 previously submitted a set of fingerprints to the Department  
28 of Health must submit information required to perform a  
29 statewide criminal background check and a set of fingerprints  
30 to the department for a national criminal history check as a  
31 condition of the initial renewal of his or her certificate

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1 after July 1, 2003. The applicant must submit the fingerprints  
2 on a form and under procedures specified by the department for  
3 a national criminal history check, along with payment in an  
4 amount equal to the costs incurred by the department. For  
5 subsequent renewals, the department shall, by rule, adopt an  
6 application form that includes a sworn oath or affirmation  
7 attesting to the existence of any criminal convictions,  
8 regardless of plea or adjudication, which have occurred since  
9 the previous certification. If there has been a criminal  
10 conviction, the provisions of this subsection shall apply. The  
11 department shall notify current certificateholders of their  
12 requirement to undergo a criminal history background screening  
13 sufficiently in advance of the 2004 biennial expiration for  
14 the certificateholder to provide the required information  
15 prior to submission of the renewal certification application.  
16 Eligibility for renewal shall not be denied by the department  
17 for the first renewal application subsequent to enactment of  
18 this subsection for delays created in obtaining the criminal  
19 history from the Department of Law Enforcement, the Federal  
20 Bureau of Investigation, or the Division of State Fire Marshal  
21 if the applicant has submitted the required criminal  
22 background screening information or affidavit and fees with  
23 the renewal certification application. A certificate that  
24 expires on December 1, 2004, may be renewed subject to  
25 withdrawal of certification pending the department's  
26 determination of whether the certificateholder will be granted  
27 an exemption as provided in paragraph (h). The  
28 certificateholder must make timely application for renewal and  
29 request the exemption from denial prior to the expiration of  
30 the certificate.

31 (c) Pursuant to the requirements of s. 120.60,

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1 applications for certification must be processed within 90  
2 days after receipt of a completed application. Applications  
3 for certification are not complete until the criminal history  
4 and certified copies of all court documents for those  
5 applications with prior criminal convictions, pursuant to this  
6 section, have been received by the department.

7       (d) The department shall submit the fingerprints and  
8 information required for a statewide criminal history check to  
9 the Department of Law Enforcement, and the Department of Law  
10 Enforcement shall forward the fingerprints to the Federal  
11 Bureau of Investigation for a national criminal history check  
12 of the applicant.

13       (e) If an applicant has undergone a criminal history  
14 check as a condition of employment or certification as a  
15 firefighter under s. 633.34, the Division of State Fire  
16 Marshal of the Department of Financial Services shall provide  
17 the criminal history information regarding the applicant  
18 seeking certification or renewal of certification under this  
19 section to the department. Any applicant for initial  
20 certification or renewal of certification who has already  
21 submitted a set of fingerprints and information to the  
22 Division of State Fire Marshal of the Department of Financial  
23 Services for the criminal history check required for  
24 employment and certification of firefighters under s. 633.34  
25 within 2 years prior to application under this section is not  
26 required to provide to the department a subsequent set of  
27 fingerprints or other duplicate information required for a  
28 criminal history check if the applicant submits an affidavit  
29 in a form prescribed by the department attesting that he or  
30 she has been a state resident for the previous 2 years.

31       (f) Notwithstanding the grounds for certification



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1 denial outlined in s. 401.411, an applicant must not have been  
 2 found guilty of, regardless of plea or adjudication, any  
 3 offense prohibited under any of the following provisions of  
 4 the Florida Statutes or under any similar statute of another  
 5 jurisdiction:

6       1. Section 415.111, relating to abuse, neglect, or  
 7 exploitation of a vulnerable adult.

8       2. Section 782.04, relating to murder.

9       3. Section 782.07, relating to manslaughter,  
 10 aggravated manslaughter of an elderly person or disabled  
 11 adult, or aggravated manslaughter of a child.

12       4. Section 782.071, relating to vehicular homicide.

13       5. Section 782.09, relating to killing of an unborn  
 14 child by injury to the mother.

15       6. Section 784.011, relating to assault, if the victim  
 16 of the offense was a minor.

17       7. Section 784.021, relating to aggravated assault.

18       8. Section 784.03, relating to battery, if the victim  
 19 of the offense was a minor.

20       9. Section 784.045, relating to aggravated battery.

21       10. Section 784.01, relating to kidnapping.

22       11. Section 787.02, relating to false imprisonment.

23       12. Section 794.011, relating to sexual battery.

24       13. Former s. 794.041, relating to prohibited acts of  
 25 persons in familial or custodial authority.

26       14. Chapter 796, relating to prostitution.

27       15. Section 798.02, relating to lewd and lascivious  
 28 behavior.

29       16. Chapter 800, relating to lewdness and indecent  
 30 exposure.

31       17. Section 806.01, relating to arson.

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- 1           18. Chapter 812, relating to theft, robbery, and  
2 related crimes, only if the offense was a felony.
- 3           19. Section 817.563, relating to fraudulent sale of  
4 controlled substances, only if the offense was a felony.
- 5           20. Section 825.102, relating to abuse, aggravated  
6 abuse, or neglect of an elderly person or disabled adult.
- 7           21. Section 825.1025, relating to lewd or lascivious  
8 offenses committed upon or in the presence of an elderly  
9 person or disabled adult.
- 10           22. Section 825.103, relating to exploitation of an  
11 elderly person or disabled adult, if the offense was a felony.
- 12           23. Section 826.04, relating to incest.
- 13           24. Section 827.03, relating to child abuse,  
14 aggravated child abuse, or neglect of a child.
- 15           25. Section 827.04, relating to contributing to the  
16 delinquency or dependency of a child.
- 17           26. Former s. 827.05, relating to negligent treatment  
18 of children.
- 19           27. Section 827.071, relating to sexual performance by  
20 a child.
- 21           28. Chapter 847, relating to obscene literature.
- 22           29. Chapter 893, relating to drug abuse prevention and  
23 control, only if the offense was a felony or if any other  
24 person involved in the offense was a minor.
- 25           30. An act that constitutes domestic violence, as  
26 defined in s. 741.28.
- 27           (g) The department may grant to any applicant who  
28 would otherwise be denied certification or recertification  
29 under this subsection an exemption from that denial for:
- 30           1. Felonies committed more than 3 years prior to the  
31 date of disqualification;

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1           2. Misdemeanors prohibited under any of the Florida  
2 Statutes cited in this subsection or under similar statutes of  
3 other jurisdictions;

4           3. Offenses that were felonies when committed but that  
5 are now misdemeanors;

6           4. Findings of delinquency; or

7           5. Commissions of acts of domestic violence as defined  
8 in s. 741.28.

9           (h) For the department to grant an exemption to any  
10 applicant under this section, the applicant must demonstrate  
11 by clear and convincing evidence that the applicant should not  
12 be disqualified from certification or renewed certification.  
13 Applicants seeking an exemption have the burden of setting  
14 forth sufficient evidence of rehabilitation, including, but  
15 not limited to, the circumstances surrounding the criminal  
16 incident for which an exemption is sought, the time period  
17 that has elapsed since the incident, the nature of the harm  
18 caused to the victim, and the history of the applicant since  
19 the incident, or any other evidence or circumstances  
20 indicating that the applicant will not present a danger if the  
21 certification or renewed certification is granted. To make the  
22 necessary demonstration, the applicant must request an  
23 exemption and submit the required information supporting that  
24 request at the time of application in order for the department  
25 to make a determination in accordance with this section.

26           (i) Denial of certification or renewed certification  
27 under paragraph (f) may not be removed from, nor may an  
28 exemption be granted to, any applicant who is found guilty of,  
29 regardless of plea or adjudication, any felony covered by  
30 paragraph (f) solely by reason of any pardon, executive  
31 clemency, or restoration of civil rights.

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1           (k) If an applicant has undergone a criminal history  
2 check as a condition of employment or licensing under any  
3 Florida Statute within 2 years prior to application under this  
4 section, the applicant may submit a copy of the official  
5 Florida criminal history record or national criminal history  
6 record produced under that requirement in lieu of the  
7 fingerprint card required in paragraphs (a) and (b). The  
8 department shall determine if the submission meets its  
9 requirements, and, if not, the applicant shall be required to  
10 comply with the provisions of this section. The department may  
11 share criminal history background information with local,  
12 state, and federal agencies for purposes of licensing or  
13 employment background checks.

14           Section 138. Subsection (6) is added to section  
15 401.2701, Florida Statutes, to read:

16           401.2701 Emergency medical services training  
17 programs.--

18           (6) Training programs approved by the department  
19 shall, at initiation of an emergency medical technician or  
20 paramedic course, advise students of the certification and  
21 regulatory requirements of this chapter, including, but not  
22 limited to, the criminal history background screening  
23 requirement for initial and renewal certification under s.  
24 401.27. The department shall prescribe by rule the required  
25 content of this component of the course.

26           Section 139. Subsection (2) of section 401.2715,  
27 Florida Statutes, is amended to read:

28           401.2715 Recertification training of emergency medical  
29 technicians and paramedics.--

30           (2) Any individual, institution, school, corporation,  
31 or governmental entity may conduct emergency medical

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1 technician or paramedic recertification training upon  
2 application to the department and payment of a nonrefundable  
3 fee to be deposited into the Emergency Medical Services Trust  
4 Fund. Institutions conducting department-approved educational  
5 programs as provided in this chapter and licensed ambulance  
6 services are exempt from the application process and payment  
7 of fees. The department shall adopt rules for the application  
8 and payment of a fee not to exceed the actual cost of  
9 administering this approval process. Upon application, the  
10 department shall recognize any entity in this state which has  
11 approval from the Continuing Education Coordinating Board for  
12 Emergency Medical Services for courses in cardiopulmonary  
13 resuscitation or advanced cardiac life support for  
14 equivalency.

15 Section 140. Subsection (4) of section 404.056,  
16 Florida Statutes, is amended to read:

17 404.056 Environmental radiation standards and  
18 projects; certification of persons performing measurement or  
19 mitigation services; mandatory testing; notification on real  
20 estate documents; rules.--

21 (4) MANDATORY TESTING.--All public and private school  
22 buildings or school sites housing students in kindergarten  
23 through grade 12; all state-owned, state-operated,  
24 state-regulated, or state-licensed 24-hour care facilities;  
25 and all state-licensed day care centers for children or minors  
26 which are located in counties designated within the Department  
27 of Community Affairs' Florida Radon Protection Map Categories  
28 as "Intermediate" or "Elevated Radon Potential" shall be  
29 measured to determine the level of indoor radon, using  
30 measurement procedures established by the department. Initial  
31 measurements ~~Testing~~ shall be performed ~~completed within the~~

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1 ~~first year of construction~~ in 20 percent of the habitable  
2 first floor spaces within any of the regulated buildings.  
3 Initial measurements shall be completed and reported to the  
4 department within 1 ~~by July 1 of the~~ year after the date the  
5 building is opened for occupancy or within 1 year after  
6 license approval for an entity residing in an existing  
7 building. Followup testing must be completed in 5 percent of  
8 the habitable first floor spaces within any of the regulated  
9 buildings after the building has been occupied for 5 years,  
10 and results must be reported to the department by the first  
11 day ~~July 1~~ of the 6th ~~5th~~ year of occupancy. After radon  
12 measurements have been made twice, regulated buildings need  
13 not undergo further testing unless significant structural  
14 changes occur. No funds collected pursuant to s. 553.721 shall  
15 be used to carry out the provisions of this subsection.

16 Section 141. Subsection (5) of section 409.814,  
17 Florida Statutes, is amended to read:

18 409.814 Eligibility.--A child whose family income is  
19 equal to or below 200 percent of the federal poverty level is  
20 eligible for the Florida Kidcare program as provided in this  
21 section. In determining the eligibility of such a child, an  
22 assets test is not required. An applicant under 19 years of  
23 age who, based on a complete application, appears to be  
24 eligible for the Medicaid component of the Florida Kidcare  
25 program is presumed eligible for coverage under Medicaid,  
26 subject to federal rules. A child who has been deemed  
27 presumptively eligible for Medicaid shall not be enrolled in a  
28 managed care plan until the child's full eligibility  
29 determination for Medicaid has been completed. The Florida  
30 Healthy Kids Corporation may, subject to compliance with  
31 applicable requirements of the Agency for Health Care

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1 Administration and the Department of Children and Family  
2 Services, be designated as an entity to conduct presumptive  
3 eligibility determinations. An applicant under 19 years of age  
4 who, based on a complete application, appears to be eligible  
5 for the Medikids, Florida Healthy Kids, or Children's Medical  
6 Services network program component, who is screened as  
7 ineligible for Medicaid and prior to the monthly verification  
8 of the applicant's enrollment in Medicaid or of eligibility  
9 for coverage under the state employee health benefit plan, may  
10 be enrolled in and begin receiving coverage from the  
11 appropriate program component on the first day of the month  
12 following the receipt of a completed application. For  
13 enrollment in the Children's Medical Services network, a  
14 complete application includes the medical or behavioral health  
15 screening. If, after verification, an individual is determined  
16 to be ineligible for coverage, he or she must be disenrolled  
17 from the respective Title XXI-funded Kidcare program  
18 component.

19 (5) A child whose family income is above 200 percent  
20 of the federal poverty level or a child who is excluded under  
21 the provisions of subsection (4) may participate in the  
22 Florida Healthy Kids program or the Medikids program, Kidcare  
23 ~~program, excluding the Medicaid program, but is subject to the~~  
24 following provisions:

25 (a) The family is not eligible for premium assistance  
26 payments and must pay the full cost of the premium, including  
27 any administrative costs.

28 (b) The agency is authorized to place limits on  
29 enrollment in Medikids by these children in order to avoid  
30 adverse selection. The number of children participating in  
31 Medikids whose family income exceeds 200 percent of the

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1 federal poverty level must not exceed 10 percent of total  
2 enrollees in the Medikids program.

3 (c) The board of directors of the Florida Healthy Kids  
4 Corporation is authorized to place limits on enrollment of  
5 these children in order to avoid adverse selection. In  
6 addition, the board is authorized to offer a reduced benefit  
7 package to these children in order to limit program costs for  
8 such families. The number of children participating in the  
9 Florida Healthy Kids program whose family income exceeds 200  
10 percent of the federal poverty level must not exceed 10  
11 percent of total enrollees in the Florida Healthy Kids  
12 program.

13 (d) Children described in this subsection are not  
14 counted in the annual enrollment ceiling for the Florida  
15 Kidcare program.

16 Section 142. Section 409.91188, Florida Statutes, is  
17 amended to read:

18 409.91188 Specialty prepaid health plans for Medicaid  
19 recipients with HIV or AIDS.--

20 (1) The Agency for Health Care Administration shall  
21 issue a request for proposal or intent to implement a ~~is~~  
22 ~~authorized to~~ contract with specialty prepaid health plans  
23 authorized pursuant to subsection (2) of this section and to  
24 pay them on a prepaid ~~capitated~~ basis to provide Medicaid  
25 benefits to Medicaid-eligible recipients who have human  
26 immunodeficiency syndrome (HIV) or acquired immunodeficiency  
27 syndrome (AIDS). The agency shall apply for or amend existing  
28 applications for ~~and is authorized to implement~~ federal  
29 waivers or other necessary federal authorization to implement  
30 the prepaid health plans authorized by this section. The  
31 agency shall procure the specialty prepaid health plans



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1 through a competitive procurement. In awarding a contract to a  
2 managed care plan, the agency shall take into account price,  
3 quality, accessibility, linkages to community-based  
4 organizations, and the comprehensiveness of the benefit  
5 package offered by the plan. The agency may bid the HIV/AIDS  
6 specialty plans on a ~~county, regional, or statewide~~ basis.  
7 ~~Qualified plans must be licensed under chapter 641.~~ The agency  
8 shall monitor and evaluate the implementation of this waiver  
9 program if it is approved by the Federal Government and shall  
10 report on its status to the President of the Senate and the  
11 Speaker of the House of Representatives by February 1, 2001.

12 To improve coordination of medical care delivery and to  
13 increase cost efficiency for the Medicaid program in treating  
14 HIV disease, the Agency for Health Care Administration shall  
15 seek all necessary federal waivers to allow participation in  
16 the Medipass HIV disease management program for Medicare  
17 beneficiaries who test positive for HIV infection and who also  
18 qualify for Medicaid benefits such as prescription medications  
19 not covered by Medicare.

20 (2) The agency may contract with any public or private  
21 entity authorized by this section on a prepaid or fixed-sum  
22 basis for the provision of health care services to recipients.  
23 An entity may provide prepaid services to recipients, either  
24 directly or through arrangements with other entities. Each  
25 entity shall:

26 (a) Be organized primarily for the purpose of  
27 providing health care or other services of the type regularly  
28 offered to Medicaid recipients in compliance with federal  
29 laws.

30 (b) Ensure that services meet the standards set by the  
31 agency for quality, appropriateness, and timeliness.

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1       (c) Make provisions satisfactory to the agency for  
2 insolvency protection and ensure that neither enrolled  
3 Medicaid recipients nor the agency is liable for the debts of  
4 the entity.

5       (d) Provide to the agency a financial plan that  
6 ensures fiscal soundness and that may include provisions  
7 pursuant to which the entity and the agency share in the risk  
8 of providing health care services. The contractual arrangement  
9 between an entity and the agency shall provide for risk  
10 sharing. The agency may bear the cost of providing certain  
11 services when those costs exceed established risk limits or  
12 arrangements whereby certain services are specifically  
13 excluded under the terms of the contract between an entity and  
14 the agency.

15       (e) Provide, through contract or otherwise, for  
16 periodic review of its medical facilities and services, as  
17 required by the agency.

18       (f) Furnish evidence satisfactory to the agency of  
19 adequate liability insurance coverage or an adequate plan of  
20 self-insurance to respond to claims for injuries arising out  
21 of the furnishing of health care.

22       (g) Provides organizational, operational, financial,  
23 and other information required by the agency.

24       Section 143. Paragraph (d) of subsection (1) of  
25 section 455.227, Florida Statutes, is amended to read:

26       455.227 Grounds for discipline; penalties;  
27 enforcement.--

28       (1) The following acts shall constitute grounds for  
29 which the disciplinary actions specified in subsection (2) may  
30 be taken:

31       (d) Using a Class III or a Class IV laser device or

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1 product, as defined by federal regulations, without having  
2 complied with the rules adopted pursuant to s. 404.24(2)  
3 ~~501.122(2)~~ governing the registration of such devices.

4 Section 144. Subsection (7) of section 456.025,  
5 Florida Statutes, is amended to read:

6 456.025 Fees; receipts; disposition.--

7 (7) Each board, or the department if there is no  
8 board, shall establish, by rule, a fee not to exceed \$250 for  
9 anyone seeking approval to provide continuing education  
10 courses or programs and shall establish by rule a biennial  
11 renewal fee not to exceed \$250 for the renewal of providership  
12 of such courses. The fees collected from continuing education  
13 providers shall be used for the purposes of reviewing course  
14 provider applications, monitoring the integrity of the courses  
15 provided, and covering legal expenses incurred as a result of  
16 not granting or renewing a providership, ~~and developing and~~  
17 ~~maintaining an electronic continuing education tracking~~  
18 ~~system. The department shall implement an electronic~~  
19 ~~continuing education tracking system for each new biennial~~  
20 ~~renewal cycle for which electronic renewals are implemented~~  
21 ~~after the effective date of this act and shall integrate such~~  
22 ~~system into the licensure and renewal system. All approved~~  
23 ~~continuing education providers shall provide information on~~  
24 ~~course attendance to the department necessary to implement the~~  
25 ~~electronic tracking system. The department shall, by rule,~~  
26 ~~specify the form and procedures by which the information is to~~  
27 ~~be submitted.~~

28 Section 145. Section 456.055, Florida Statutes, is  
29 amended to read:

30 456.055 Chiropractic and podiatric health care; denial  
31 of payment; limitation.--

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1           (1) A chiropractic physician licensed under chapter  
2 460 or a podiatric physician licensed under chapter 461 shall  
3 not be denied payment for treatment rendered solely on the  
4 basis that the chiropractic physician or podiatric physician  
5 is not a member of a particular preferred provider  
6 organization or exclusive provider organization which is  
7 composed only of physicians licensed under the same chapter.

8           (2) A claim for payment of a service performed by a  
9 health care provider licensed in this state, identified on the  
10 claim by a Physicians' Current Procedural Terminology (CPT)  
11 code, and submitted under a health insurance policy or health  
12 care services plan or submitted to a preferred provider  
13 organization, exclusive provider organization, or health  
14 maintenance organization in which the health care provider  
15 participates, shall be paid in the same amount to all health  
16 care providers submitting a claim for payment of a service  
17 identified by the same CPT code, regardless of the chapter  
18 under which the health care provider is licensed.

19           (3) The provisions of this section may not be waived,  
20 voided, or nullified by contract.

21           (4) The provisions of this section as amended by this  
22 act shall apply only to health insurance policies, health care  
23 services plans or other contracts entered into or renewed  
24 after the effective date of this act.

25           Section 146. Paragraph (d) of subsection (1) of  
26 section 460.406, Florida Statutes, is amended to read:

27           460.406 Licensure by examination.--

28           (1) Any person desiring to be licensed as a  
29 chiropractic physician shall apply to the department to take  
30 the licensure examination. There shall be an application fee  
31 set by the board not to exceed \$100 which shall be

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1 nonrefundable. There shall also be an examination fee not to  
2 exceed \$500 plus the actual per applicant cost to the  
3 department for purchase of portions of the examination from  
4 the National Board of Chiropractic Examiners or a similar  
5 national organization, which may be refundable if the  
6 applicant is found ineligible to take the examination. The  
7 department shall examine each applicant who the board  
8 certifies has:

9 (d)1. For an applicant who has matriculated in a  
10 chiropractic college prior to July 2, 1990, completed at least  
11 2 years of residence college work, consisting of a minimum of  
12 one-half the work acceptable for a bachelor's degree granted  
13 on the basis of a 4-year period of study, in a college or  
14 university accredited by an accrediting agency recognized and  
15 approved by the United States Department of Education.  
16 However, prior to being certified by the board to sit for the  
17 examination, each applicant who has matriculated in a  
18 chiropractic college after July 1, 1990, shall have been  
19 granted a bachelor's degree, based upon 4 academic years of  
20 study, by a college or university accredited by a regional  
21 accrediting agency which is recognized and approved by the  
22 Council for Higher Education Accreditation or the United  
23 States Department of Education ~~a member of the Commission on~~  
24 ~~Recognition of Postsecondary Accreditation.~~

25 2. Effective July 1, 2000, completed, prior to  
26 matriculation in a chiropractic college, at least 3 years of  
27 residence college work, consisting of a minimum of 90 semester  
28 hours leading to a bachelor's degree in a liberal arts college  
29 or university accredited by an accrediting agency recognized  
30 and approved by the United States Department of Education.  
31 However, prior to being certified by the board to sit for the

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1 examination, each applicant who has matriculated in a  
 2 chiropractic college after July 1, 2000, shall have been  
 3 granted a bachelor's degree from an institution holding  
 4 accreditation for that degree from a regional accrediting  
 5 agency which is recognized by the United States Department of  
 6 Education. The applicant's chiropractic degree must consist  
 7 of credits earned in the chiropractic program and may not  
 8 include academic credit for courses from the bachelor's  
 9 degree.

10 Section 147. Paragraph (b) of subsection (1) of  
 11 section 463.006, Florida Statutes, is amended to read:

12 463.006 Licensure and certification by examination.--

13 (1) Any person desiring to be a licensed practitioner  
 14 pursuant to this chapter shall apply to the department to take  
 15 the licensure and certification examinations. The department  
 16 shall examine each applicant who the board determines has:

17 (b) Submitted proof satisfactory to the department  
 18 that she or he:

- 19 1. Is at least 18 years of age.
- 20 2. Has graduated from an accredited school or college  
 21 of optometry approved by rule of the board.
- 22 3. Is of good moral character.
- 23 4. Has successfully completed at least 110 hours of  
 24 transcript-quality coursework and clinical training in general  
 25 and ocular pharmacology as determined by the board, at an  
 26 institution that:

27 a. Has facilities for both didactic and clinical  
 28 instructions in pharmacology; and

29 b. Is accredited by a regional or professional  
 30 accrediting organization that is recognized and approved by  
 31 the Council for Higher Education Accreditation Commission on

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1 ~~Recognition of Postsecondary Accreditation~~ or the United  
2 States Department of Education.

3 5. Has completed at least 1 year of supervised  
4 experience in differential diagnosis of eye disease or  
5 disorders as part of the optometric training or in a clinical  
6 setting as part of the optometric experience.

7 Section 148. Subsection (8) of section 467.009,  
8 Florida Statutes, is amended to read:

9 467.009 Midwifery programs; education and training  
10 requirements.--

11 (8) Nonpublic educational institutions that conduct  
12 approved midwifery programs shall be accredited by an  
13 accrediting agency recognized and approved by the Council for  
14 Higher Education Accreditation or the United States Department  
15 of Education ~~a member of the Commission on Recognition of~~  
16 ~~Postsecondary Accreditation~~ and shall be licensed by the  
17 Commission for Independent Education ~~State Board of Nonpublic~~  
18 ~~Career Education.~~

19 Section 149. Paragraph (g) of subsection (3) of  
20 section 468.302, Florida Statutes, is amended to read:

21 468.302 Use of radiation; identification of certified  
22 persons; limitations; exceptions.--

23 (3)

24 (g)1. A person holding a certificate as a nuclear  
25 medicine technologist may only:

26 a. Conduct in vivo and in vitro measurements of  
27 radioactivity and administer radiopharmaceuticals to human  
28 beings for diagnostic and therapeutic purposes.

29 b. Administer X radiation from a combination nuclear  
30 medicine-computed tomography device if that radiation is  
31 administered as an integral part of a nuclear medicine

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1 procedure that uses an automated computed tomography protocol  
 2 for the purposes of attenuation correction and anatomical  
 3 localization and the person has received device-specific  
 4 training on the combination device.

5         2. However, The authority of a nuclear medicine  
 6 technologist under this paragraph excludes:

7             a. Radioimmunoassay and other clinical laboratory  
 8 testing regulated pursuant to chapter 483.

9             b. Creating or modifying automated computed tomography  
 10 protocols.

11             c. Any other operation of a computed tomography  
 12 device, especially for the purposes of stand-alone diagnostic  
 13 imaging, which is regulated pursuant to the general  
 14 radiographic scope in this part.

15             Section 150. Subsection (2) of section 468.509,  
 16 Florida Statutes, is amended to read:

17             468.509 Dietitian/nutritionist; requirements for  
 18 licensure.--

19             (2) The agency shall examine any applicant who the  
 20 board certifies has completed the application form and  
 21 remitted the application and examination fees specified in s.  
 22 468.508 and who:

23             (a)1. Possesses a baccalaureate or postbaccalaureate  
 24 degree with a major course of study in human nutrition, food  
 25 and nutrition, dietetics, or food management, or an equivalent  
 26 major course of study, from a school or program accredited, at  
 27 the time of the applicant's graduation, by the appropriate  
 28 accrediting agency recognized by the Council for Higher  
 29 Education Accreditation or Commission on Recognition of  
 30 Postsecondary Accreditation and the United States Department  
 31 of Education; and



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1           2. Has completed a preprofessional experience  
2 component of not less than 900 hours or has education or  
3 experience determined to be equivalent by the board; or

4           (b)1. Has an academic degree, from a foreign country,  
5 that has been validated by an accrediting agency approved by  
6 the United States Department of Education as equivalent to the  
7 baccalaureate or postbaccalaureate degree conferred by a  
8 regionally accredited college or university in the United  
9 States;

10           2. Has completed a major course of study in human  
11 nutrition, food and nutrition, dietetics, or food management;  
12 and

13           3. Has completed a preprofessional experience  
14 component of not less than 900 hours or has education or  
15 experience determined to be equivalent by the board.

16           Section 151. Paragraph (a) of subsection (1) of  
17 section 468.707, Florida Statutes, is amended to read:

18           468.707 Licensure by examination; requirements.--

19           (1) Any person desiring to be licensed as an athletic  
20 trainer shall apply to the department on a form approved by  
21 the department.

22           (a) The department shall license each applicant who:

23           1. Has completed the application form and remitted the  
24 required fees.

25           2. Is at least 21 years of age.

26           3. Has obtained a baccalaureate degree from a college  
27 or university accredited by an accrediting agency recognized  
28 and approved by the United States Department of Education or  
29 the Council for Higher Education Accreditation or Commission  
30 ~~on Recognition of Postsecondary Accreditation~~ approved by the  
31 board.

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1           4. Has completed coursework from a college or  
2 university accredited by an accrediting agency recognized and  
3 approved by the United States Department of Education or the  
4 Council for Higher Education Accreditation ~~Commission on~~  
5 ~~Recognition of Postsecondary Accreditation~~, or approved by the  
6 board, in each of the following areas, as provided by rule:  
7 health, human anatomy, kinesiology/biomechanics, human  
8 physiology, physiology of exercise, basic athletic training,  
9 and advanced athletic training.

10           5. Has current certification in standard first aid and  
11 cardiovascular pulmonary resuscitation from the American Red  
12 Cross or an equivalent certification as determined by the  
13 board.

14           6. Has, within 2 of the preceding 5 years, attained a  
15 minimum of 800 hours of athletic training experience under the  
16 direct supervision of a licensed athletic trainer or an  
17 athletic trainer certified by the National Athletic Trainers'  
18 Association or a comparable national athletic standards  
19 organization.

20           7. Has passed an examination administered or approved  
21 by the board.

22           Section 152. Section 486.031, Florida Statutes, is  
23 amended to read:

24           486.031 Physical therapist; licensing  
25 requirements.--To be eligible for licensing as a physical  
26 therapist, an applicant must:

- 27           (1) Be at least 18 years old;  
28           (2) Be of good moral character; and  
29           (3)(a) Have been graduated from a school of physical  
30 therapy which has been approved for the educational  
31 preparation of physical therapists by the appropriate

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1 accrediting agency recognized by the Council for Higher  
2 Education Accreditation Commission on Recognition of  
3 ~~Postsecondary Accreditation~~ or the United States Department of  
4 Education at the time of her or his graduation and have  
5 passed, to the satisfaction of the board, the American  
6 Registry Examination prior to 1971 or a national examination  
7 approved by the board to determine her or his fitness for  
8 practice as a physical therapist as hereinafter provided;

9 (b) Have received a diploma from a program in physical  
10 therapy in a foreign country and have educational credentials  
11 deemed equivalent to those required for the educational  
12 preparation of physical therapists in this country, as  
13 recognized by the appropriate agency as identified by the  
14 board, and have passed to the satisfaction of the board an  
15 examination to determine her or his fitness for practice as a  
16 physical therapist as hereinafter provided; or

17 (c) Be entitled to licensure without examination as  
18 provided in s. 486.081.

19 Section 153. Section 486.102, Florida Statutes, is  
20 amended to read:

21 486.102 Physical therapist assistant; licensing  
22 requirements.--To be eligible for licensing by the board as a  
23 physical therapist assistant, an applicant must:

24 (1) Be at least 18 years old;

25 (2) Be of good moral character; and

26 (3)(a) Have been graduated from a school giving a  
27 course of not less than 2 years for physical therapist  
28 assistants, which has been approved for the educational  
29 preparation of physical therapist assistants by the  
30 appropriate accrediting agency recognized by the Council for  
31 Higher Education Accreditation Commission on Recognition of

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1 ~~Postsecondary Accreditation~~ or the United States Department of  
2 Education at the time of her or his graduation and have passed  
3 to the satisfaction of the board an examination to determine  
4 her or his fitness for practice as a physical therapist  
5 assistant as hereinafter provided;

6 (b) Have been graduated from a school giving a course  
7 for physical therapist assistants in a foreign country and  
8 have educational credentials deemed equivalent to those  
9 required for the educational preparation of physical therapist  
10 assistants in this country, as recognized by the appropriate  
11 agency as identified by the board, and passed to the  
12 satisfaction of the board an examination to determine her or  
13 his fitness for practice as a physical therapist assistant as  
14 hereinafter provided; or

15 (c) Be entitled to licensure without examination as  
16 provided in s. 486.107.

17 Section 154. Paragraph (a) of subsection (5) of  
18 section 489.553, Florida Statutes, is amended to read:

19 489.553 Administration of part; registration  
20 qualifications; examination.--

21 (5) To be eligible for registration by the department  
22 as a master septic tank contractor, the applicant must:

23 (a) Have been a registered septic tank contractor in  
24 Florida for at least 3 years or a plumbing contractor  
25 certified under part I of this chapter who has provided septic  
26 tank contracting services for at least 3 years. The 3 years  
27 must immediately precede the date of application and may not  
28 be interrupted by any probation, suspension, or revocation  
29 imposed by the licensing agency.

30 Section 155. Section 489.554, Florida Statutes, is  
31 amended to read:

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1 489.554 Registration renewal.--

2 (1) The department shall prescribe by rule the method  
3 for approval of continuing education courses, and for renewal  
4 of annual registration, for inactive status for late filing of  
5 a renewal application, for allowing a contractor to hold his  
6 or her registration in inactive status for a specified period,  
7 and for reactivating a license.

8 (2) At a minimum, annual renewal shall include  
9 continuing education requirements of not less than 6 classroom  
10 hours annually for septic tank contractors and not less than  
11 12 classroom hours annually for master septic tank  
12 contractors. The 12 classroom hours of continuing education  
13 required for master septic tank contractors may include the 6  
14 classroom hours required for septic tank contractors, but at a  
15 minimum must include 6 classroom hours of approved master  
16 septic tank contractor coursework.

17 (3) A certificate of registration shall become  
18 inactive if a renewal application is not filed in a timely  
19 manner. A certificate that has become inactive may be  
20 reactivated under this section by application to the  
21 department. A licensed contractor may apply to the department  
22 for voluntary inactive status at any time during the period of  
23 registration.

24 (4) A master septic tank contractor may elect to  
25 revert to registered septic tank contractor status at any time  
26 during the period of registration. The department shall  
27 prescribe by rule the method for a master septic tank  
28 contractor whose registration has reverted to registered  
29 septic tank contractor status to apply for master septic tank  
30 contractor status.

31 (5) The department shall deny an application for

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1 renewal if there is any outstanding administrative penalty  
 2 against the applicant which is final agency action and all  
 3 judicial reviews are exhausted.

4 Section 156. Paragraph (b) of subsection (2) of  
 5 section 490.005, Florida Statutes, is amended to read:

6 490.005 Licensure by examination.--

7 (2) Any person desiring to be licensed as a school  
 8 psychologist shall apply to the department to take the  
 9 licensure examination. The department shall license each  
 10 applicant who the department certifies has:

11 (b) Submitted satisfactory proof to the department  
 12 that the applicant:

13 1. Has received a doctorate, specialist, or equivalent  
 14 degree from a program primarily psychological in nature and  
 15 has completed 60 semester hours or 90 quarter hours of  
 16 graduate study, in areas related to school psychology as  
 17 defined by rule of the department, from a college or  
 18 university which at the time the applicant was enrolled and  
 19 graduated was accredited by an accrediting agency recognized  
 20 and approved by the Council for Higher Education Accreditation  
 21 or the United States Department of Education Commission on  
 22 Recognition of Postsecondary Accreditation or an institution  
 23 which is publicly recognized as a member in good standing with  
 24 the Association of Universities and Colleges of Canada.

25 2. Has had a minimum of 3 years of experience in  
 26 school psychology, 2 years of which must be supervised by an  
 27 individual who is a licensed school psychologist or who has  
 28 otherwise qualified as a school psychologist supervisor, by  
 29 education and experience, as set forth by rule of the  
 30 department. A doctoral internship may be applied toward the  
 31 supervision requirement.

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1           3. Has passed an examination provided by the  
2 department.

3           Section 157. Paragraph (b) of subsection (3) and  
4 paragraph (b) of subsection (4) of section 491.005, Florida  
5 Statutes, are amended to read:

6           491.005 Licensure by examination.--

7           (3) MARRIAGE AND FAMILY THERAPY.--Upon verification of  
8 documentation and payment of a fee not to exceed \$200, as set  
9 by board rule, plus the actual cost to the department for the  
10 purchase of the examination from the Association of Marital  
11 and Family Therapy Regulatory Board, or similar national  
12 organization, the department shall issue a license as a  
13 marriage and family therapist to an applicant who the board  
14 certifies:

15           (b)1. Has a minimum of a master's degree with major  
16 emphasis in marriage and family therapy, or a closely related  
17 field, and has completed all of the following requirements:

18           a. Thirty-six semester hours or 48 quarter hours of  
19 graduate coursework, which must include a minimum of 3  
20 semester hours or 4 quarter hours of graduate-level course  
21 credits in each of the following nine areas: dynamics of  
22 marriage and family systems; marriage therapy and counseling  
23 theory and techniques; family therapy and counseling theory  
24 and techniques; individual human development theories  
25 throughout the life cycle; personality theory or general  
26 counseling theory and techniques; psychopathology; human  
27 sexuality theory and counseling techniques; psychosocial  
28 theory; and substance abuse theory and counseling techniques.  
29 Courses in research, evaluation, appraisal, assessment, or  
30 testing theories and procedures; thesis or dissertation work;  
31 or practicums, internships, or fieldwork may not be applied

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1 toward this requirement.

2           b. A minimum of one graduate-level course of 3  
3 semester hours or 4 quarter hours in legal, ethical, and  
4 professional standards issues in the practice of marriage and  
5 family therapy or a course determined by the board to be  
6 equivalent.

7           c. A minimum of one graduate-level course of 3  
8 semester hours or 4 quarter hours in diagnosis, appraisal,  
9 assessment, and testing for individual or interpersonal  
10 disorder or dysfunction; and a minimum of one 3-semester-hour  
11 or 4-quarter-hour graduate-level course in behavioral research  
12 which focuses on the interpretation and application of  
13 research data as it applies to clinical practice. Credit for  
14 thesis or dissertation work, practicums, internships, or  
15 fieldwork may not be applied toward this requirement.

16           d. A minimum of one supervised clinical practicum,  
17 internship, or field experience in a marriage and family  
18 counseling setting, during which the student provided 180  
19 direct client contact hours of marriage and family therapy  
20 services under the supervision of an individual who met the  
21 requirements for supervision under paragraph (c). This  
22 requirement may be met by a supervised practice experience  
23 which took place outside the academic arena, but which is  
24 certified as equivalent to a graduate-level practicum or  
25 internship program which required a minimum of 180 direct  
26 client contact hours of marriage and family therapy services  
27 currently offered within an academic program of a college or  
28 university accredited by an accrediting agency approved by the  
29 United States Department of Education, or an institution which  
30 is publicly recognized as a member in good standing with the  
31 Association of Universities and Colleges of Canada or a



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1 training institution accredited by the Commission on  
2 Accreditation for Marriage and Family Therapy Education  
3 recognized by the United States Department of Education.  
4 Certification shall be required from an official of such  
5 college, university, or training institution.

6         2. If the course title which appears on the  
7 applicant's transcript does not clearly identify the content  
8 of the coursework, the applicant shall be required to provide  
9 additional documentation, including, but not limited to, a  
10 syllabus or catalog description published for the course.

11  
12 The required master's degree must have been received in an  
13 institution of higher education which at the time the  
14 applicant graduated was: fully accredited by a regional  
15 accrediting body recognized by the Council for Higher  
16 Education Accreditation or the United States Department of  
17 Education Commission on Recognition of Postsecondary  
18 ~~Accreditation~~; publicly recognized as a member in good  
19 standing with the Association of Universities and Colleges of  
20 Canada; or an institution of higher education located outside  
21 the United States and Canada, which at the time the applicant  
22 was enrolled and at the time the applicant graduated  
23 maintained a standard of training substantially equivalent to  
24 the standards of training of those institutions in the United  
25 States which are accredited by a regional accrediting body  
26 recognized by the Council for Higher Education Accreditation  
27 or the United States Department of Education Commission on  
28 ~~Recognition of Postsecondary Accreditation~~. Such foreign  
29 education and training must have been received in an  
30 institution or program of higher education officially  
31 recognized by the government of the country in which it is

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1 | located as an institution or program to train students to  
2 | practice as professional marriage and family therapists or  
3 | psychotherapists. The burden of establishing that the  
4 | requirements of this provision have been met shall be upon the  
5 | applicant, and the board shall require documentation, such as,  
6 | but not limited to, an evaluation by a foreign equivalency  
7 | determination service, as evidence that the applicant's  
8 | graduate degree program and education were equivalent to an  
9 | accredited program in this country. An applicant with a  
10 | master's degree from a program which did not emphasize  
11 | marriage and family therapy may complete the coursework  
12 | requirement in a training institution fully accredited by the  
13 | Commission on Accreditation for Marriage and Family Therapy  
14 | Education recognized by the United States Department of  
15 | Education.

16 |         (4) MENTAL HEALTH COUNSELING.--Upon verification of  
17 | documentation and payment of a fee not to exceed \$200, as set  
18 | by board rule, plus the actual per applicant cost to the  
19 | department for purchase of the examination from the  
20 | Professional Examination Service for the National Academy of  
21 | Certified Clinical Mental Health Counselors or a similar  
22 | national organization, the department shall issue a license as  
23 | a mental health counselor to an applicant who the board  
24 | certifies:

25 |         (b)1. Has a minimum of an earned master's degree from  
26 | a mental health counseling program accredited by the Council  
27 | for the Accreditation of Counseling and Related Educational  
28 | Programs that consists of at least 60 semester hours or 80  
29 | quarter hours of clinical and didactic instruction, including  
30 | a course in human sexuality and a course in substance abuse.

31 | If the master's degree is earned from a program related to the

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1 practice of mental health counseling that is not accredited by  
2 the Council for the Accreditation of Counseling and Related  
3 Educational Programs, then the coursework and practicum,  
4 internship, or fieldwork must consist of at least 60 semester  
5 hours or 80 quarter hours and meet the following requirements:

6 a. Thirty-three semester hours or 44 quarter hours of  
7 graduate coursework, which must include a minimum of 3  
8 semester hours or 4 quarter hours of graduate-level coursework  
9 in each of the following 11 content areas: counseling theories  
10 and practice; human growth and development; diagnosis and  
11 treatment of psychopathology; human sexuality; group theories  
12 and practice; individual evaluation and assessment; career and  
13 lifestyle assessment; research and program evaluation; social  
14 and cultural foundations; counseling in community settings;  
15 and substance abuse. Courses in research, thesis or  
16 dissertation work, practicums, internships, or fieldwork may  
17 not be applied toward this requirement.

18 b. A minimum of 3 semester hours or 4 quarter hours of  
19 graduate-level coursework in legal, ethical, and professional  
20 standards issues in the practice of mental health counseling,  
21 which includes goals, objectives, and practices of  
22 professional counseling organizations, codes of ethics, legal  
23 considerations, standards of preparation, certifications and  
24 licensing, and the role identity and professional obligations  
25 of mental health counselors. Courses in research, thesis or  
26 dissertation work, practicums, internships, or fieldwork may  
27 not be applied toward this requirement.

28 c. The equivalent, as determined by the board, of at  
29 least 1,000 hours of university-sponsored supervised clinical  
30 practicum, internship, or field experience as required in the  
31 accrediting standards of the Council for Accreditation of

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1 Counseling and Related Educational Programs for mental health  
2 counseling programs. This experience may not be used to  
3 satisfy the post-master's clinical experience requirement.  
4         2. If the course title which appears on the  
5 applicant's transcript does not clearly identify the content  
6 of the coursework, the applicant shall be required to provide  
7 additional documentation, including, but not limited to, a  
8 syllabus or catalog description published for the course.  
9  
10 Education and training in mental health counseling must have  
11 been received in an institution of higher education which at  
12 the time the applicant graduated was: fully accredited by a  
13 regional accrediting body recognized by the Council for Higher  
14 Education Accreditation or the United States Department of  
15 Education Commission on Recognition of Postsecondary  
16 Accreditation; publicly recognized as a member in good  
17 standing with the Association of Universities and Colleges of  
18 Canada; or an institution of higher education located outside  
19 the United States and Canada, which at the time the applicant  
20 was enrolled and at the time the applicant graduated  
21 maintained a standard of training substantially equivalent to  
22 the standards of training of those institutions in the United  
23 States which are accredited by a regional accrediting body  
24 recognized by the Council for Higher Education Accreditation  
25 or the United States Department of Education Commission on  
26 Recognition of Postsecondary Accreditation. Such foreign  
27 education and training must have been received in an  
28 institution or program of higher education officially  
29 recognized by the government of the country in which it is  
30 located as an institution or program to train students to  
31 practice as mental health counselors. The burden of

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1 establishing that the requirements of this provision have been  
2 met shall be upon the applicant, and the board shall require  
3 documentation, such as, but not limited to, an evaluation by a  
4 foreign equivalency determination service, as evidence that  
5 the applicant's graduate degree program and education were  
6 equivalent to an accredited program in this country.

7 Section 158. Subsection (6) of section 499.003,  
8 Florida Statutes, is amended to read:

9 499.003 Definitions of terms used in ss.  
10 499.001-499.081.--As used in ss. 499.001-499.081, the term:

11 (6) "Compressed medical gas" means any liquefied or  
12 vaporized gas that is classified as a prescription drug or  
13 medical device, whether it is alone or in combination with  
14 other gases.

15 Section 159. Subsection (2) of section 499.007,  
16 Florida Statutes, is amended to read:

17 499.007 Misbranded drug or device.--A drug or device  
18 is misbranded:

19 (2) Unless, if in package form, it bears a label  
20 containing:

21 (a) The name and place of business of the manufacturer  
22 or distributor; ~~in addition, for a medicinal drug, as defined~~  
23 ~~in s. 499.003, the label must contain the name and place of~~  
24 ~~business of the manufacturer~~ of the finished dosage form of  
25 the drug. For the purpose of this paragraph, the finished  
26 dosage form of a medicinal drug is that form of the drug which  
27 is, or is intended to be, dispensed or administered to the  
28 patient and requires no further manufacturing or processing  
29 other than packaging, reconstitution, and labeling; and

30 (b) An accurate statement of the quantity of the  
31 contents in terms of weight, measure, or numerical count;

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1 however, under this section, reasonable variations are  
2 permitted, and the department shall establish by rule  
3 exemptions for small packages.

4  
5 A drug dispensed by filling or refilling a written or oral  
6 prescription of a practitioner licensed by law to prescribe  
7 such drug is exempt from the requirements of this section,  
8 except subsections (1), (8), (10), and (11) and the packaging  
9 requirements of subsections (6) and (7), if the drug bears a  
10 label that contains the name and address of the dispenser or  
11 seller, the prescription number and the date the prescription  
12 was written or filled, the name of the prescriber and the name  
13 of the patient, and the directions for use and cautionary  
14 statements. This exemption does not apply to any drug  
15 dispensed in the course of the conduct of a business of  
16 dispensing drugs pursuant to diagnosis by mail or to any drug  
17 dispensed in violation of subsection (12). The department  
18 may, by rule, exempt drugs subject to ss. 499.062-499.064 from  
19 subsection (12) if compliance with that subsection is not  
20 necessary to protect the public health, safety, and welfare.

21 Section 160. Paragraph (e) of subsection (1) of  
22 section 499.01, Florida Statutes, is amended to read:

23 499.01 Permits; applications; renewal; general  
24 requirements.--

25 (1) Any person that is required under ss.  
26 499.001-499.081 to have a permit must apply to the department  
27 on forms furnished by the department.

28 (e) The department may not issue a permit for a  
29 prescription drug manufacturer, prescription drug wholesaler,  
30 or retail pharmacy wholesaler ~~may not be issued~~ to the address  
31 of a health care entity, except as provided in this paragraph.

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1 The department may issue a prescription drug manufacturer  
 2 permit to an applicant at the same address as a licensed  
 3 nuclear pharmacy that is a health care entity for the purpose  
 4 of manufacturing prescription drugs used in positron emission  
 5 tomography or other radiopharmaceuticals, as listed in a rule  
 6 adopted by the department pursuant to this paragraph. The  
 7 purpose of this exemption is to assure availability of  
 8 state-of-the-art pharmaceuticals that would pose a significant  
 9 danger to the public health if manufactured at a separate  
 10 establishment address other than the nuclear pharmacy from  
 11 which the prescription drugs are dispensed.

12 Section 161. Paragraph (b) of subsection (6) of  
 13 section 499.0121, Florida Statutes, is amended to read:

14 499.0121 Storage and handling of prescription drugs;  
 15 recordkeeping.--The department shall adopt rules to implement  
 16 this section as necessary to protect the public health,  
 17 safety, and welfare. Such rules shall include, but not be  
 18 limited to, requirements for the storage and handling of  
 19 prescription drugs and for the establishment and maintenance  
 20 of prescription drug distribution records.

21 (6) RECORDKEEPING.--The department shall adopt rules  
 22 that require keeping such records of prescription drugs as are  
 23 necessary for the protection of the public health.

24 (b) Inventories and records must be made available for  
 25 inspection and photocopying by authorized federal, state, or  
 26 local officials for a period of 2 years following disposition  
 27 of the drugs or 3 years after the date the inventory or record  
 28 was created, whichever is longer.

29  
 30 For the purposes of this subsection, the term "authorized  
 31 distributors of record" means those distributors with whom a

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1 manufacturer has established an ongoing relationship to  
2 distribute the manufacturer's products.

3 Section 162. Section 501.122, Florida Statutes, is  
4 transferred and renumbered as section 404.24, Florida  
5 Statutes.

6 Section 163. Section 784.081, Florida Statutes, is  
7 amended to read:

8 784.081 Assault or battery on specified officials or  
9 employees; reclassification of offenses.--Whenever a person is  
10 charged with committing an assault or aggravated assault or a  
11 battery or aggravated battery upon any elected official or  
12 employee of: a school district; a private school; the Florida  
13 School for the Deaf and the Blind; a university developmental  
14 research school; a state university or any other entity of the  
15 state system of public education, as defined in s. 1000.04; an  
16 employee or protective investigator of the Department of  
17 Children and Family Services; ~~or~~ an employee of a lead  
18 community-based provider and its direct service contract  
19 providers; or an employee of the Department of Health and its  
20 direct service contract providers, when the person committing  
21 the offense knows or has reason to know the identity or  
22 position or employment of the victim, the offense for which  
23 the person is charged shall be reclassified as follows:

24 (1) In the case of aggravated battery, from a felony  
25 of the second degree to a felony of the first degree.

26 (2) In the case of aggravated assault, from a felony  
27 of the third degree to a felony of the second degree.

28 (3) In the case of battery, from a misdemeanor of the  
29 first degree to a felony of the third degree.

30 (4) In the case of assault, from a misdemeanor of the  
31 second degree to a misdemeanor of the first degree.



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1           Section 164. Section 945.6038, Florida Statutes, is  
2 created to read:

3           945.6038 Additional services.--The authority may enter  
4 into an agreement or may contract with the Department of  
5 Children and Family Services, subject to the availability of  
6 funds, to conduct surveys of medical services and to provide  
7 medical quality assurance and improvement assistance at secure  
8 confinement and treatment facilities for persons confined  
9 under part V of chapter 394. The authority may enter into  
10 similar agreements with other state agencies, subject to the  
11 availability of funds. The authority may not enter any such  
12 agreement if to do so would impair the authority's ability to  
13 fulfill its obligations under this chapter.

14           Section 165. Paragraph (t) is added to subsection (3)  
15 of section 408.036, Florida Statutes, to read:

16           408.036 Projects subject to review.--

17           (3) EXEMPTIONS.--Upon request, the following projects  
18 are subject to exemption from the provisions of subsection  
19 (1):

20           (t)1. For the provision of adult open-heart services  
21 in a hospital located within the boundaries of Palm Beach,  
22 Polk, Martin, St. Lucie, and Indian River Counties if the  
23 following conditions are met: The exemption must be based upon  
24 objective criteria and address and solve the twin problems of  
25 geographic and temporal access. A hospital shall be exempt  
26 from the certificate-of-need review for the establishment of  
27 an open-heart-surgery program when the application for  
28 exemption submitted under this paragraph complies with the  
29 following criteria:

30           a. The applicant must certify that it will meet and  
31 continuously maintain the minimum licensure requirements

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1 adopted by the agency governing adult open-heart programs,  
2 including the most current guidelines of the American College  
3 of Cardiology and American Heart Association Guidelines for  
4 Adult Open Heart Programs.

5 b. The applicant must certify that it will maintain  
6 sufficient appropriate equipment and health personnel to  
7 ensure quality and safety.

8 c. The applicant must certify that it will maintain  
9 appropriate times of operation and protocols to ensure  
10 availability and appropriate referrals in the event of  
11 emergencies.

12 d. The applicant can demonstrate that it is referring  
13 300 or more patients per year from the hospital, including the  
14 emergency room, for cardiac services at a hospital with  
15 cardiac services, or that the average wait for transfer for 50  
16 percent or more of the cardiac patients exceeds 4 hours.

17 e. The applicant is a general acute care hospital that  
18 is in operation for 3 years or more.

19 f. The applicant is performing more than 300  
20 diagnostic cardiac catheterization procedures per year,  
21 combined inpatient and outpatient.

22 g. The applicant's payor mix at a minimum reflects the  
23 community average for Medicaid, charity care, and self-pay  
24 patients or the applicant must certify that it will provide a  
25 minimum of 5 percent of Medicaid, charity care, and self-pay  
26 to open-heart-surgery patients.

27 h. If the applicant fails to meet the established  
28 criteria for open-heart programs or fails to reach 300  
29 surgeries per year by the end of its third year of operation,  
30 it must show cause why its exemption should not be revoked.

31 2. By December 31, 2004, and annually thereafter, the

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1 Agency for Health Care Administration shall submit a report to  
2 the Legislature providing information concerning the number of  
3 requests for exemption received under this paragraph and the  
4 number of exemptions granted or denied.

5 Section 166. Section 381.85, subsection (9) of section  
6 381.0098, paragraph (f) of subsection (2) of section 385.103,  
7 section 385.205, section 385.209, and subsection (7) of  
8 section 445.033, Florida Statutes, are repealed.

9 Section 167. Section 57 of chapter 98-288, Laws of  
10 Florida, is repealed.

11 Section 168. Except as otherwise expressly provided in  
12 this act, this act shall take effect July 1, 2003, and this  
13 section and sections 38-54 of this act shall take effect upon  
14 becoming a law.

15  
16

17 ===== T I T L E A M E N D M E N T =====

18 And the title is amended as follows:

19 Delete everything before the enacting clause

20

21 and insert:

22 A bill to be entitled  
23 An act relating to health care; amending s.  
24 20.43, F.S.; establishing the Office of  
25 Minority Health within the Department of  
26 Health; amending ss. 381.7353, 381.7355, F.S.;  
27 providing duties of the Department of Health  
28 with respect to oral health care programs;  
29 amending s. 393.064, F.S.; providing for the  
30 Department of Health rather than the Department  
31 of Children and Family Services to manage the

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1 Raymond C. Philips Research and Education Unit;  
2 amending s. 394.4615, F.S.; revising the  
3 standard under which a patient's access to his  
4 or her own clinical records may be restricted;  
5 amending s. 395.3025, F.S.; authorizing the  
6 release of patient records to a health care  
7 practitioner, the Department of Health, or a  
8 researcher or facility personnel under certain  
9 circumstances; revising a restriction on the  
10 use of patient information for certain  
11 purposes; amending s. 395.7015, F.S.;  
12 conforming cross-references; amending s.  
13 400.141, F.S.; providing for the release of  
14 certain nursing home resident records to the  
15 Department of Health pursuant to subpoena;  
16 amending s. 400.145, F.S., and creating s.  
17 400.455, F.S.; requiring certification of  
18 certain records by the nursing home  
19 administrator or records custodian; amending s.  
20 400.211, F.S.; reducing required inservice  
21 training hours for nursing assistants; amending  
22 s. 395.3025, F.S.; authorizing the release of  
23 patient records to a health care practitioner,  
24 the Department of Health, or a researcher or  
25 facility personnel under certain circumstances;  
26 revising a restriction on the use of patient  
27 information for certain purposes; amending s.  
28 400.141, F.S.; providing for the release of  
29 certain nursing home resident records to the  
30 Department of Health pursuant to subpoena;  
31 amending s. 400.145, F.S., and creating s.

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1 400.455, F.S.; requiring certification of  
2 certain records by the nursing home  
3 administrator or records custodian; amending s.  
4 456.017, F.S.; authorizing the Department of  
5 Health to post examination scores  
6 electronically in lieu of mailing; amending s.  
7 456.0375, F.S.; revising the definition of  
8 "clinic" for purposes of a registration  
9 requirement; providing an exemption from  
10 registration for certain entities; providing  
11 for retroactive application; providing a  
12 distinction between supervision of  
13 administrative services and supervision of  
14 health care delivery services; providing an  
15 exemption from registration for clinical  
16 facilities where training is provided by  
17 certain medical schools; amending s. 456.039,  
18 F.S.; deleting a cross-reference; amending s.  
19 456.041, F.S.; revising certain requirements  
20 concerning information on paid claims which is  
21 included in the practitioner profile; amending  
22 s. 456.049, F.S.; specifying the amount of  
23 final professional liability claims to be  
24 reported for physicians and dentists; amending  
25 s. 456.057, F.S.; specifying certain  
26 circumstances under which a patient release for  
27 the furnishing of records is not required;  
28 authorizing the department to obtain records  
29 pursuant to subpoena; requiring the  
30 certification of certain records; amending s.  
31 456.063, F.S.; providing professional

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1 regulatory boards, or the Department of Health  
2 if there is no board, rulemaking authority for  
3 reporting allegations of sexual misconduct;  
4 amending s. 456.072, F.S.; clarifying grounds  
5 for discipline for performing or attempting to  
6 perform health care services on the wrong  
7 patient or that are otherwise wrong or  
8 unnecessary or leaving a foreign body in the  
9 patient; providing for discipline for being  
10 terminated from an impaired practitioner  
11 program for failing to comply with the terms of  
12 a treatment contract; providing for additional  
13 costs to be assessed as part of any penalty or  
14 other form of discipline; requiring clear and  
15 convincing evidence to revoke or suspend a  
16 license and the greater weight of the evidence  
17 for other forms of discipline; conforming a  
18 cross-reference; amending s. 456.073, F.S.;  
19 extending the time within which the subject of  
20 an investigation may submit a written response  
21 to the information in the complaint or other  
22 documentation; requiring the Department of  
23 Health to give 45 days' notice to the Division  
24 of Administrative Hearings when a hearing is  
25 needed; amending s. 456.077, F.S.; providing  
26 that citations for first offenses do not  
27 constitute discipline; deleting the required  
28 period for issuing a citation; amending s.  
29 456.078, F.S.; requiring designation of certain  
30 violations as appropriate for mediation;  
31 excluding certain violations from mediation;

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1 requiring successful mediation to include a  
2 statement of whether or not the resolution  
3 constitutes discipline; requiring payment for  
4 the administrative costs of mediation;  
5 prohibiting mediation more than once involving  
6 a breach of the standard of care for health  
7 care professionals; providing rulemaking  
8 authority; amending s. 458.303, F.S.;  
9 conforming cross-references; amending s.  
10 458.311, F.S.; consolidating and revising  
11 provisions relating to requirements for  
12 licensure of physicians; amending s. 458.3124,  
13 F.S.; conforming a cross-reference; amending s.  
14 458.315, F.S.; consolidating and revising  
15 provisions relating to requirements for limited  
16 licensure of physicians; amending s. 458.319,  
17 F.S.; deleting a cross-reference; amending s.  
18 458.320, F.S.; conforming a cross-reference;  
19 providing requirements for issuance of a  
20 physician's license for clinical research  
21 purposes; amending s. 458.331, F.S.; increasing  
22 the threshold amount of claims against a  
23 physician which represent repeated malpractice;  
24 revising a reporting requirement, to conform;  
25 reducing the time period for a physician to  
26 respond to information contained in a complaint  
27 or other documentation; amending ss. 458.345  
28 and 458.347, F.S.; conforming cross-references;  
29 amending s. 459.008, F.S.; deleting a  
30 cross-reference; amending s. 459.015, F.S.;  
31 revising requirements for the department with

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1           respect to investigating a claim against an  
2           osteopathic physician; amending s. 460.413,  
3           F.S.; revising the period for a chiropractic  
4           physician to respond to a complaint; amending  
5           s. 461.013, F.S.; revising requirements for  
6           determining a case of repeated malpractice and  
7           for requiring an investigation by the  
8           department; providing a short title; requiring  
9           the Agency for Workforce Innovation to  
10          establish a pilot program for delivery of  
11          certified geriatric specialty nursing  
12          education; specifying eligibility requirements  
13          for certified nursing assistants to obtain  
14          certified geriatric specialty nursing  
15          education; specifying requirements for the  
16          education of certified nursing assistants to  
17          prepare for certification as a certified  
18          geriatric specialist; creating a Certified  
19          Geriatric Specialty Nursing Initiative Steering  
20          Committee; providing for the composition of and  
21          manner of appointment to the Certified  
22          Geriatric Specialty Nursing Initiative Steering  
23          Committee; providing responsibilities of the  
24          steering committee; providing for reimbursement  
25          for per diem and travel expenses; requiring the  
26          Agency for Workforce Innovation to conduct or  
27          contract for an evaluation of the pilot program  
28          for delivery of certified geriatric specialty  
29          nursing education; requiring the evaluation to  
30          include recommendations regarding the expansion  
31          of the delivery of certified geriatric



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1 specialty nursing education in nursing homes;  
2 requiring the Agency for Workforce Innovation  
3 to report to the Governor and Legislature  
4 regarding the status and evaluation of the  
5 pilot program; creating s. 464.0125, F.S.;  
6 providing definitions; providing requirements  
7 for persons to become certified geriatric  
8 specialists; specifying fees; providing for  
9 articulation of geriatric specialty nursing  
10 coursework and practical nursing coursework;  
11 providing practice standards and grounds for  
12 which certified geriatric specialists may be  
13 subject to discipline by the Board of Nursing;  
14 creating restrictions on the use of  
15 professional nursing titles; prohibiting the  
16 use of certain professional titles; providing  
17 penalties; authorizing approved nursing  
18 programs to provide education for the  
19 preparation of certified geriatric specialists  
20 without further board approval; authorizing  
21 certified geriatric specialists to supervise  
22 the activities of others in nursing home  
23 facilities according to rules by the Board of  
24 Nursing; revising terminology relating to  
25 nursing to conform to the certification of  
26 geriatric specialists; amending s. 381.00315,  
27 F.S.; revising requirements for the  
28 reactivation of the licenses of specified  
29 health care practitioners in the event of  
30 public health emergency to include certified  
31 geriatric specialists; amending s. 400.021,

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1 F.S.; including services provided by a  
2 certified geriatric specialist within the  
3 definition of nursing service; amending s.  
4 400.211, F.S.; revising requirements for  
5 persons employed as nursing assistants to  
6 conform to the certification of certified  
7 geriatric specialists; amending s. 400.23,  
8 F.S.; specifying that certified geriatric  
9 specialists shall be considered licensed  
10 nursing staff; authorizing licensed practical  
11 nurses to supervise the activities of certified  
12 geriatric specialists in nursing home  
13 facilities according to rules adopted by the  
14 Board of Nursing; amending s. 409.908, F.S.;  
15 revising the methodology for reimbursement of  
16 Medicaid program providers to include services  
17 of certified geriatric specialists; amending s.  
18 458.303, F.S.; revising exceptions to the  
19 practice of medicine to include services  
20 delegated to a certified geriatric specialist  
21 under specified circumstances; amending s.  
22 1009.65, F.S.; revising eligibility for the  
23 Medical Education Reimbursement and Loan  
24 Repayment Program to include certified  
25 geriatric specialists; amending s. 1009.66,  
26 F.S.; revising eligibility requirements for the  
27 Nursing Student Loan Forgiveness Program to  
28 include certified geriatric specialists;  
29 providing an appropriation; amending s.  
30 464.201, F.S.; defining terms; amending s.  
31 464.202, F.S.; authorizing the Board of Nursing

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1 to adopt rules regarding the practice and  
2 supervision of certified nursing assistants;  
3 amending s. 464.0205, F.S.; conforming a  
4 cross-reference; amending s. 464.203, F.S.;  
5 revising requirements for the screening of  
6 certified nursing assistants; revising hours  
7 required for inservice training; providing for  
8 certification renewal fees; amending s.  
9 464.204, F.S.; revising standards under which  
10 disciplinary sanctions may be imposed; amending  
11 s. 466.004, F.S.; requiring the Council on  
12 Dental Hygiene to meet at least twice a year;  
13 providing for consideration by the Board of  
14 Dentistry of rule and policy recommendations of  
15 the council; creating s. 466.055, F.S.;  
16 providing for the appointment of an executive  
17 director; providing for duties, and board  
18 oversight; requiring director to oversee staff;  
19 requiring the department to contract for a  
20 dental intake officer and providing  
21 qualifications; requiring certain  
22 responsibilities of the officer; requiring the  
23 board to establish certain performance  
24 parameters for departmental handling of  
25 disciplinary cases, and consequences; requiring  
26 testing services to report to the board if  
27 requested; requiring a board spending plan and  
28 its content; requiring board spending authority  
29 over discretionary budget items; requiring a  
30 department report of certain information;  
31 providing for a board response; amending s.

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1 467.013, F.S.; providing for the department to  
2 adopt rules governing applications for inactive  
3 status for midwives; amending s. 467.0135,  
4 F.S.; revising the schedule of fees; amending  
5 s. 467.017, F.S.; requiring that the emergency  
6 care plan be available to the department;  
7 amending s. 468.352, F.S.; revising and  
8 providing definitions applicable to the  
9 regulation of respiratory therapy; amending s.  
10 468.355, F.S.; revising provisions relating to  
11 respiratory therapy licensure and testing  
12 requirements; amending s. 468.368, F.S.;  
13 revising exemptions from respiratory therapy  
14 licensure requirements; repealing s. 468.356,  
15 F.S., relating to the approval of educational  
16 programs; repealing s. 468.357, F.S., relating  
17 to licensure by examination; amending s.  
18 491.005, F.S.; revising certain licensing  
19 requirements for clinical social workers;  
20 amending s. 491.0145, F.S.; prohibiting the  
21 Department of Health from adopting certain  
22 rules governing licensure; creating s.  
23 491.0146, F.S.; providing for effect of certain  
24 licenses; amending s. 491.0147, F.S.; providing  
25 an exemption from liability for disclosure of  
26 confidential information under certain  
27 circumstances; amending s. 627.912, F.S.;  
28 revising requirements for liability reports by  
29 insurers; amending s. 766.101, F.S.; providing  
30 immunity from liability for a medical review  
31 committee established by a university board of

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1 trustees and a committee of a college of  
2 medicine, college of nursing, or other health  
3 care discipline; amending s. 766.314, F.S.;  
4 excluding infants born in certain family  
5 practice teaching hospitals from assessments  
6 used to fund the Florida Birth-Related  
7 Neurological Injury Compensation Plan; amending  
8 s. 456.031, F.S.; revising requirements for  
9 licensed health care practitioners to take  
10 continuing education relating to domestic  
11 violence; amending s. 766.314, F.S.; correcting  
12 a cross-reference; amending s. 817.567, F.S.;  
13 revising an accrediting agency for institutions  
14 awarding academic degrees and titles; amending  
15 s. 1009.992, F.S.; revising the definition of  
16 the term "institution" to update a reference to  
17 an accrediting agency; amending s. 1012.46,  
18 F.S.; revising provisions relating to athletic  
19 trainers in school districts; removing a  
20 legislative goal; revising requirements for  
21 athletic trainers used by school districts;  
22 repealing ss. 456.033, 456.034, 458.313,  
23 458.316, 458.3165, and 458.317, F.S., relating  
24 to instruction on HIV and AIDS, licensure by  
25 endorsement, public health certificates, and  
26 limited licenses; requiring the Division of  
27 Administrative Hearings to designate  
28 administrative law judges with specified  
29 qualifications for hearings involving certain  
30 licensed health care practitioners; specifying  
31 qualifications; amending ss. 400.4785,

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1 400.5571, 400.6045, F.S.; prescribing training  
2 standards for employees of home health  
3 agencies, adult day care centers, and hospices,  
4 respectively, that provide care for persons who  
5 have Alzheimer's disease or related disorders;  
6 prescribing duties of the Department of Elderly  
7 Affairs; providing for compliance with  
8 guidelines within a certain time period;  
9 providing for approval of Alzheimer's training  
10 and trainers; providing for application of  
11 training to meet specified requirements;  
12 providing authority to adopt rules; providing  
13 legislative findings and intent; amending s.  
14 391.025, F.S.; including certain infants as  
15 eligible individuals for certain health  
16 services; amending s. 391.029, F.S.; providing  
17 for financial eligibility under the Children's  
18 Medical Services program for certain infants;  
19 providing certain reimbursement and funding  
20 requirements; amending s. 766.304, F.S.;  
21 limiting certain awards under certain  
22 circumstances; amending s. 766.305, F.S.;  
23 deleting certain information required in a  
24 petition; revising certain copying  
25 requirements; specifying information required  
26 to be provided by a claimant; specifying  
27 confidentiality of certain information;  
28 amending s. 766.309, F.S.; providing for  
29 bifurcating certain proceedings under certain  
30 circumstances; providing procedures; providing  
31 authority to an administrative law judge for

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1 certain actions; amending s. 766.31, F.S.,  
2 relating to administrative law judge awards for  
3 birth-related neurological injuries; excluding  
4 expenses for items or services received under  
5 Medicaid; revising the amount of the death  
6 benefit; limiting claimants' liability, in  
7 specified circumstances, to expenses awarded  
8 under this section; amending s. 766.314, F.S.;  
9 redefining the term "infant delivered" to  
10 exclude those delivered by employees or agents  
11 of the board of trustees or in certain  
12 hospitals; revising qualifications for  
13 physician participation in the Florida  
14 Birth-related Neurological Injury Compensation  
15 Plan; providing for certain hospitals to pay  
16 the fee for participation in the plan on behalf  
17 of a participating physician or certified nurse  
18 midwife; providing restrictions on such a  
19 hospital; requiring the hospital to file  
20 certain information; creating the James and  
21 Esther King Center for Universal Research to  
22 Eradicate Disease; providing intent and duties;  
23 creating an advisory council; amending s.  
24 215.5602, F.S.; expanding the long-term goals  
25 and funding of the Florida Biomedical Research  
26 Program to include the cure of specified  
27 diseases; creating the Florida Cancer Research  
28 Cooperative; providing for a board of  
29 directors; providing the cooperative's mission  
30 and duties; amending s. 484.0512, F.S.;

31 providing a criminal penalty for failure of a

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1 seller to refund within a specified time moneys  
2 required to be refunded to a purchaser for the  
3 return or attempted return of a hearing aid;  
4 providing a definition; amending s. 456.073,  
5 F.S.; providing that a state prisoner must  
6 exhaust all available administrative remedies  
7 before filing a complaint with the Department  
8 of Health against a health care practitioner  
9 who is providing health care services within  
10 the Department of Corrections, unless the  
11 practitioner poses a serious threat to the  
12 health or safety of a person who is not a state  
13 prisoner; requiring the Department of Health to  
14 be notified if a health care practitioner is  
15 disciplined or allowed to resign for a  
16 practice-related offense; requiring the  
17 Division of Medical Quality Assurance of the  
18 Department of Health to conduct a study of  
19 clinical and academic training requirements of  
20 certified optometric practitioners; providing  
21 for appointment of members; requiring a report  
22 to be submitted to the Governor and  
23 Legislature; amending s. 465.0265, F.S. ;  
24 providing requirements for the filing of  
25 prescriptions by pharmacies that are under  
26 common ownership or that have a contractual  
27 relationship with one another; specifying  
28 requirements for exceptions to prescription  
29 transfers between certain pharmacies; amending  
30 s. 466.006, F.S.; allowing certain dental  
31 students to take the examinations required to



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1 practice dentistry in this state under  
2 specified conditions; providing a prerequisite  
3 to licensure of such students; creating s.  
4 466.0065, F.S.; allowing certain dental  
5 students to take regional licensure  
6 examinations under specified conditions;  
7 restricting the applicability of examination  
8 results to licensing in other jurisdictions;  
9 requiring approval by the Board of Dentistry  
10 and providing prerequisites to such approval;  
11 creating the "Nick Oelrich Gift of Life Act";  
12 amending s. 765.512, F.S., relating to  
13 anatomical gifts; prohibiting modification of a  
14 donor's intent; providing that a donor document  
15 is legally binding; authorizing specified  
16 persons to furnish a donor's medical records  
17 upon request; amending s. 765.516, F.S.;  
18 revising procedures by which the terms of an  
19 anatomical gift may be amended or the gift may  
20 be revoked; amending s. 765.401, F.S.;  
21 providing additional persons who may be given a  
22 proxy for the making of health care decisions;  
23 requiring review by the facility's bioethics  
24 committee of decisions to withhold or withdraw  
25 life-prolonging procedures; requiring  
26 documentation of efforts to locate certain  
27 proxies; amending s. 641.19, F.S.; providing  
28 that the term "speciality" does not include the  
29 services of a licensed chiropractic physician  
30 for purposes of the regulation of managed care;  
31 amending s. 401.272, Florida Statutes;

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1 providing for certain paramedics to provide  
2 basic and advanced life support; providing  
3 supervision requirements; requiring the  
4 Department of Health, in consultation with  
5 specified educational institutions, to conduct  
6 a study with respect to using skills of  
7 foreign-trained physicians and to report the  
8 results; amending s. 1012.46, F.S.; revising  
9 criteria of athletic trainers working in school  
10 districts; amending s. 17.41, F.S.; providing  
11 for funds from the tobacco settlement to be  
12 transferred to the Biomedical Trust Fund within  
13 the Department of Health Services and Community  
14 Health Resources and the Division of Health  
15 Awareness and Tobacco; amending s. 20.43, F.S.;  
16 establishing the Division of Disability  
17 Determinations within the Department of Health  
18 and renaming the Division of Emergency Medical  
19 Services and Community Health Resources and the  
20 Division of Health Awareness and Tobacco;  
21 amending s. 154.01, F.S.; providing for  
22 environmental health services to include  
23 investigations of elevated blood lead levels;  
24 authorizing the expenditure of funds for such  
25 investigations; creating s. 216.342, F.S.;  
26 authorizing the expenditure of funds in the  
27 United States Trust Fund for the operation of  
28 the Division of Disability Determinations;  
29 amending s. 381.0011, F.S.; revising duties of  
30 the department with respect to injury  
31 prevention and control; amending s. 381.004,

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1 F.S.; revising requirements for the release of  
2 HIV test results; amending s. 381.0065, F.S.,  
3 relating to onsite sewage treatment and  
4 disposal systems; clarifying a definition;  
5 deleting obsolete provisions; amending s.  
6 381.0066, F.S.; deleting a limitation on the  
7 period for imposing a fee on new sewage system  
8 construction; amending s. 381.0072, F.S.;  
9 clarifying provisions governing the authority  
10 of the department to adopt and enforce  
11 sanitation rules; creating s. 381.104, F.S.;  
12 authorizing state agencies to establish  
13 employee health and wellness programs;  
14 providing requirements for the programs;  
15 requiring the use of an employee health and  
16 wellness activity agreement form; requiring an  
17 evaluation and improvement process for the  
18 program; requiring the department to provide  
19 model program guidelines; creating s. 381.86,  
20 F.S.; creating the Review Council for Human  
21 Subjects within the Department of Health;  
22 providing duties and membership; providing for  
23 reimbursement for per diem and travel expenses;  
24 requiring the department to charge for costs  
25 incurred by the council for research oversight;  
26 providing an exception; requiring the  
27 department to adopt rules; amending s. 381.89,  
28 F.S.; revising the fees imposed for the  
29 licensure of tanning facilities; amending s.  
30 381.90, F.S.; revising the membership of the  
31 Health Information Systems Council; revising

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1 the date for submitting an annual plan;  
2 amending s. 383.14, F.S.; clarifying provisions  
3 with respect to the screening of newborns;  
4 amending s. 384.25, F.S.; revising requirements  
5 for the reporting of sexually transmissible  
6 disease; requiring the department to adopt  
7 rules; amending s. 385.204, F.S.; revising  
8 requirements for the purchase and distribution  
9 of insulin by the department; amending s.  
10 391.021, F.S.; redefining the term "children  
11 with special health care needs" for purposes of  
12 the Children's Medical Services Act; amending  
13 s. 391.025, F.S.; revising applicability and  
14 scope of the act; amending s. 391.029, F.S.;  
15 revising requirements for program eligibility;  
16 amending s. 391.035, F.S.; authorizing the  
17 department to contract for services provided  
18 under the act; amending s. 391.055, F.S.;  
19 requiring the referral of a newborn having a  
20 certain abnormal screening result; creating s.  
21 391.309, F.S.; establishing the Florida Infants  
22 and Toddlers Early Intervention Program;  
23 providing requirements for the department under  
24 the program; requiring certain federal waivers;  
25 amending s. 394.9151, F.S.; authorizing the  
26 Department of Children and Family Services to  
27 contract with the Correctional Medical  
28 Authority for medical quality assurance  
29 assistance at certain facilities; amending s.  
30 395.404, F.S.; revising requirements for  
31 reports to the department concerning brain or

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1 spinal cord injuries; amending s. 401.113,  
2 F.S.; providing for the use of funds generated  
3 from interest on certain grant moneys; amending  
4 s. 401.211, F.S.; providing legislative intent  
5 with respect to a statewide comprehensive  
6 injury prevention program; creating s. 401.243,  
7 F.S.; providing duties of the department in  
8 operating the program; amending s. 401.27,  
9 F.S.; authorizing electronically submitted  
10 applications for certification or  
11 recertification as an emergency medical  
12 technician or a paramedic; revising  
13 requirements for an insignia identifying such  
14 person; requiring the screening of applicants  
15 through the Department of Law Enforcement;  
16 amending s. 401.2701, F.S., relating to  
17 emergency medical services training programs;  
18 requiring that students be notified of certain  
19 regulatory and screening requirements;  
20 requiring the department to adopt rules;  
21 amending s. 401.2715, F.S.; providing for  
22 approval of continuing education courses;  
23 amending s. 404.056, F.S.; revising  
24 requirements for mandatory testing of certain  
25 buildings and facilities for radon; amending s.  
26 409.814, F.S.; revising eligibility for certain  
27 children to participate in the Healthy Kids  
28 program and the Medikids program; amending s.  
29 409.91188, F.S.; authorizing the agency to  
30 contract with private or public entities for  
31 health care services; amending s. 455.227,

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1 F.S.; conforming a cross-reference; amending s.  
2 456.025, F.S.; revising requirements for  
3 tracking continuing education; amending s.  
4 456.055, F.S.; providing requirements for  
5 claims for services for chiropractic and  
6 podiatric health care; providing for the  
7 applicability of the requirements for claims  
8 for services for chiropractic and podiatric  
9 health care; amending ss. 460.406, 463.006, and  
10 467.009, F.S., relating to licensure;  
11 conforming provisions to changes made with  
12 respect to an accrediting agency; amending s.  
13 468.302, F.S.; authorizing a nuclear medicine  
14 technologist to administer certain X radiation;  
15 amending ss. 468.509, 468.707, 486.031, and  
16 486.102, F.S., relating to licensure;  
17 conforming provisions to changes made with  
18 respect to an accrediting agency; amending ss.  
19 489.553 and 489.554, F.S.; revising  
20 certification requirements for septic tank  
21 contractors; authorizing an inactive  
22 registration; amending ss. 490.005 and 491.005,  
23 F.S., relating to licensure; conforming  
24 provisions to changes made with respect to an  
25 accrediting agency; amending s. 499.003, F.S.;  
26 redefining the term "compressed medical gas"  
27 for purposes of the Florida Drug and Cosmetic  
28 Act; amending s. 499.007, F.S.; revising  
29 requirements for labeling medicinal drugs;  
30 amending s. 499.01, F.S.; authorizing the  
31 department to issue a prescription drug

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1 manufacturer permit to a nuclear pharmacy that  
2 is a health care entity; amending s. 499.0121,  
3 F.S.; providing requirements for retaining  
4 inventories and records; transferring and  
5 renumbering s. 501.122, F.S., relating to the  
6 control of nonionizing radiations; amending s.  
7 784.081, F.S.; providing for the  
8 reclassification of the offense of assault or  
9 battery if committed on an employee of the  
10 Department of Health or upon a direct services  
11 provider of the department; creating s.  
12 945.6038, F.S.; authorizing the Correctional  
13 Medical Authority to contract with the  
14 Department of Children and Family Services to  
15 provide assistance in medical quality assurance  
16 at certain facilities; amending s. 408.036,  
17 F.S.; providing an exemption from  
18 certificate-of-need requirements for certain  
19 open-heart-surgery programs; providing criteria  
20 for qualifying for the exemption; requiring the  
21 Agency for Health Care Administration to report  
22 to the Legislature; repealing s. 381.85, s.  
23 381.0098(9), s. 385.103(2)(f), ss. 385.205 and  
24 385.209, and s. 445.033(7), F.S.; relating to  
25 biomedical and social research, obsolete  
26 provisions concerning biomedical waste,  
27 rulemaking authority of the department,  
28 programs in kidney disease control,  
29 dissemination of information on cholesterol  
30 health risks, and an exemption for certain  
31 evaluations conducted by Workforce Florida,

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1           Inc.; repealing s. 57 of chapter 98-288, Laws  
2           of Florida; abrogating the repeal of the  
3           Florida Kidcare Act; providing effective dates.

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