Florida Senate - 2003

By Senator Saunders

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37-83C-03 A bill to be entitled An act relating to emergency health care providers; amending s. 394.461, F.S.; providing penalties for the failure of receiving facilities to indemnify the state; amending s. 395.1041, F.S.; providing penalties for the failure of hospitals to indemnify the state; amending s. 401.411, F.S.; providing grounds for which a licensed life support service or certified emergency medical technician or paramedic may be subject to discipline; amending s. 456.072, F.S.; providing grounds for which a health care practitioner may be subject to discipline for failure to indemnify the state; amending s. 627.912, F.S.; requiring the Division of Risk Management of the Department of Financial Services to report certain claims to the Office of Insurance Regulation; providing reporting requirements for claims; requiring the Office of Insurance Regulation to analyze the claims; requiring the Office of Insurance Regulation to make recommendations on a comprehensive risk management plan and report to the Legislature; amending s. 766.102, F.S.; redefining terms; amending s. 766.203, F.S.; revising requirements of expert witnesses used for

investigation for emergency services and care claims; amending s. 768.13, F.S.; revising

requirements for extending immunity to civil

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medical negligence claims subject to presuit

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1	liability for persons providing emergency care
2	or treatment; redefining terms; providing a
3	standard of conduct applicable to providers for
4	purposes of extending immunity to civil
5	liability for persons providing medical care or
6	services; providing legislative findings and
7	intent; amending s. 768.28, F.S.; redefining
8	terms for purposes of determining who is an
9	agent to which sovereign immunity is waived, to
10	include specified persons and entities;
11	providing an effective date.
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13	Be It Enacted by the Legislature of the State of Florida:
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15	Section 1. Subsection (5) is added to section 394.461,
16	Florida Statutes, to read:
17	394.461 Designation of receiving and treatment
18	facilitiesThe department is authorized to designate and
19	monitor receiving facilities and treatment facilities and may
20	suspend or withdraw such designation for failure to comply
21	with this part and rules adopted under this part. Unless
22	designated by the department, facilities are not permitted to
23	hold or treat involuntary patients under this part.
24	(5) If the receiving facility fails to indemnify the
25	state after reasonable notice and written demand to indemnify
26	the state in accordance with s. 768.28(9), any state funds
27	payable to that facility shall be withheld until the facility
28	satisfies its obligation to indemnify the state or enters into
29	a repayment agreement. In addition, the department may suspend
30	or withdraw the facility's designation as a receiving facility
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1 for failure to satisfy its obligation for repayment under s. 2 768.28(9). 3 Section 2. Paragraph (g) is added to subsection (5) of section 395.1041, Florida Statutes, to read: 4 5 395.1041 Access to emergency services and care.-б (5) PENALTIES.--(g) If any hospital fails to indemnify the state after 7 8 reasonable notice and written demand to indemnify the state in accordance with s. 768.28(9), any state funds payable to that 9 10 hospital shall be withheld until the facility satisfies its 11 obligation to indemnify the state or enters into a repayment agreement. In addition, the agency shall impose an 12 13 administrative fine, not to exceed \$10,000 per violation of 14 this section. 15 Section 3. Paragraph (m) is added to subsection (1) of section 401.411, Florida Statutes, to read: 16 17 401.411 Disciplinary action; penalties .--(1) The department may deny, suspend, or revoke a 18 19 license, certificate, or permit or may reprimand or fine any 20 licensee, certificateholder, or other person operating under this part for any of the following grounds: 21 22 (m) Failing to perform any statutory or legal obligation placed upon a licensee or certificateholder. For 23 purposes of this section, failing to indemnify the state in 24 25 accordance with s. 768.28(9) after reasonable notice and written demand to indemnify the state or failure to enter a 26 27 repayment agreement constitutes a failure to perform a 28 statutory or legal obligation, and the minimum disciplinary 29 action imposed shall be a suspension of the license or 30 certificate until payment terms are agreed upon, followed by 31

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probation for the duration of the payment period, and a fine equal to 10 percent of the defaulted payment amount. Section 4. Paragraph (k) of subsection (1) of section 456.072, Florida Statutes, is amended to read: 456.072 Grounds for discipline; penalties; enforcement. --(1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken: (k) Failing to perform any statutory or legal obligation placed upon a licensee. For purposes of this section, failing to repay a student loan issued or guaranteed by the state or the Federal Government in accordance with the terms of the loan or failing to comply with service scholarship obligations shall be considered a failure to perform a statutory or legal obligation, and the minimum disciplinary action imposed shall be a suspension of the license until new payment terms are agreed upon or the scholarship obligation is resumed, followed by probation for the duration of the student loan or remaining scholarship obligation period, and a fine equal to 10 percent of the defaulted loan amount. Fines collected shall be deposited into the Medical Quality Assurance Trust Fund. For purposes of this section, failing to indemnify the state in accordance with s. 768.28(9) after reasonable notice and written demand to indemnify the state or failure to enter a repayment agreement constitutes a failure to perform a statutory or legal obligation, and the minimum disciplinary action imposed

29 shall be a suspension of the license until payment terms are 30 agreed upon, followed by probation for the duration of the

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1 payment period, and a fine equal to 10 percent of the defaulted payment amount. 2 3 Section 5. Subsection (6) is added to section 627.912, 4 Florida Statutes, to read: 5 627.912 Professional liability claims and actions; б reports by insurers. --7 (6) Notwithstanding any other provision of law to the 8 contrary, the Division of Risk Management of the Department of 9 Financial Services must report in duplicate to the Office of 10 Insurance Regulation and the Department of Health any claim or 11 action for damages for personal injuries claimed to have been caused by error, omission, or negligence in the performance of 12 professional services provided by an agent of the Agency for 13 Health Care Administration as provided in s. 768.13(9)(b)2., 14 including practitioners of medicine licensed under chapter 15 458, practitioners of osteopathic medicine licensed under 16 chapter 459, podiatric physicians licensed under chapter 461, 17 and dentists licensed under chapter 466, or based on a claimed 18 19 performance of professional services without consent if the claim resulted in a final judgment in any amount or a 20 21 settlement in any amount. The reports required by this section must contain the information required by subsection (3) and 22 the name, address, and specialty of the agent of the state 23 whose performance or professional services are alleged in the 24 25 claim or action to have caused personal injury. The Office of Insurance Regulation, in conjunction with the Department of 26 27 Financial Services, shall analyze and evaluate the nature, causes, location, cost, and damages involved in such 28 29 professional liability cases and shall provide to the 30 Legislature an annual report of such claims which outlines relevant statistical trends in the data and makes 31

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1 recommendations for the implementation of a comprehensive risk management plan to reduce the number of claims per 2 3 practitioner whose negligence is covered under s. 4 768.13(9)(b)2. 5 Section 6. Subsection (6) of section 766.102, Florida б Statutes, is amended to read: 7 766.102 Medical negligence; standards of recovery.--8 (6)(a) In any action for damages involving a claim of 9 negligence against a physician licensed under chapter 458, 10 osteopathic physician licensed under chapter 459, podiatric 11 physician licensed under chapter 461, or chiropractic physician licensed under chapter 460 providing emergency 12 13 medical services and care in a hospital emergency department, the court shall admit expert medical testimony only from 14 physicians, osteopathic physicians, podiatric physicians, and 15 chiropractic physicians who have had substantial professional 16 experience within the preceding 5 years while assigned to 17 18 provide emergency medical services and care in a hospital 19 emergency department. (b) For the purposes of this subsection: 20 The term "emergency medical services and care" 21 1. means medical screening, examination, and evaluation by a 22 physician, or, to the extent permitted by applicable law, by 23 24 other appropriate personnel under the supervision of a 25 physician, to determine if an emergency medical condition exists and, if it does, the care, treatment, or surgery by a 26 27 physician necessary to relieve or eliminate the emergency 28 medical condition those medical services required for the 29 immediate diagnosis and treatment of medical conditions which, 30 if not immediately diagnosed and treated, could lead to 31 serious physical or mental disability or death.

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1	2. "Substantial professional experience" shall be
2	determined by the custom and practice of the manner in which
3	emergency medical coverage is provided in hospital emergency
4	departments in the same or similar localities where the
5	alleged negligence occurred.
6	Section 7. Subsections (2) and (3) of section 766.203,
7	Florida Statutes, are amended to read:
8	766.203 Presuit investigation of medical negligence
9	claims and defenses by prospective parties
10	(2) Prior to issuing notification of intent to
11	initiate medical malpractice litigation pursuant to s.
12	766.106, the claimant shall conduct an investigation to
13	ascertain that there are reasonable grounds to believe that:
14	(a) Any named defendant in the litigation was
15	negligent in the care or treatment of the claimant; and
16	(b) Such negligence resulted in injury to the
17	claimant.
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19	Corroboration of reasonable grounds to initiate medical
20	negligence litigation shall be provided by the claimant's
21	submission of a verified written medical expert opinion from a
22	medical expert as defined in s. 766.202(5), and, with respect
23	to claims involving emergency services and care as defined in
24	s. 766.102, from an expert who has qualifications required
25	under s. 766.102, at the time the notice of intent to initiate
26	litigation is mailed, which statement shall corroborate
27	reasonable grounds to support the claim of medical negligence.
28	(3) Prior to issuing its response to the claimant's
29	notice of intent to initiate litigation, during the time
30	period for response authorized pursuant to s. 766.106, the
31	defendant or the defendant's insurer or self-insurer shall
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1 conduct an investigation to ascertain whether there are 2 reasonable grounds to believe that: 3 (a) The defendant was negligent in the care or treatment of the claimant; and 4 5 (b) Such negligence resulted in injury to the б claimant. 7 Corroboration of lack of reasonable grounds for medical 8 9 negligence litigation shall be provided with any response 10 rejecting the claim by the defendant's submission of a 11 verified written medical expert opinion from a medical expert as defined in s. 766.202(5), and, with respect to claims 12 involving emergency services and care as defined in s. 13 14 766.102, from an expert who has qualifications required under 15 s. 766.102, at the time the response rejecting the claim is mailed, which statement shall corroborate reasonable grounds 16 17 for lack of negligent injury sufficient to support the response denying negligent injury. 18 19 Section 8. Subsection (2) of section 768.13, Florida 20 Statutes, is amended to read: 768.13 Good Samaritan Act; immunity from civil 21 22 liability.--(2)(a) Any person, including those licensed to 23 24 practice medicine, who gratuitously and in good faith renders 25 emergency care or treatment either in direct response to emergency situations related to and arising out of a public 26 health emergency declared pursuant to s. 381.00315, a state of 27 28 emergency which has been declared pursuant to s. 252.36 or at 29 the scene of an emergency outside of a hospital, doctor's office, or other place having proper medical equipment, 30 31 without objection of the injured victim or victims thereof,

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1	shall not be held liable for any civil damages as a result of
2	such care or treatment or as a result of any act or failure to
3	act in providing or arranging further medical treatment unless
4	such care, treatment, or failure to act is proven to amount to
5	conduct demonstrating a reckless disregard for the life or
6	health of the victim where the person acts as an ordinary
7	reasonably prudent person would have acted under the same or
8	similar circumstances.
9	(b) Except as provided in paragraph (d), any licensed
10	or certified health care practitioner in a hospital who
11	provides medical care or treatment in a hospital to a patient
12	or person with whom the practitioner has no preexisting
13	provider-patient relationship, when such care or treatment is
14	necessitated by a sudden or unexpected situation or by an
15	occurrence that demands immediate medical attention, shall not
16	be held liable for any civil damages as a result of any act or
17	omission relative to that care or treatment, unless the care
18	or treatment is proven to amount to conduct demonstrating a
19	reckless disregard for the life or health of the victim.
20	(c) As used in this section, the term "reckless
21	disregard" means conduct that was so reckless and lacking in
22	care that it demonstrated a conscious disregard for the life
23	or safety of the person.
24	(d)1. In accordance with s. 768.28(9), an emergency
25	medical services provider, physician, hospital, or other
26	person or entity acting pursuant to obligations imposed by s.
27	395.1041 or s. 401.45, shall not be held liable for civil
28	damages as a result of such medical care or treatment, unless
29	it is proven that the emergency medical services provider,
30	physician, hospital, person, or entity acted in bad faith or
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1 with malicious purpose or in a manner exhibiting wanton and 2 willful disregard of human rights, safety, or property. 3 (b)1. Any hospital licensed under chapter 395, any employee of such hospital working in a clinical area within 4 5 the facility and providing patient care, and any person 6 licensed to practice medicine who in good faith renders 7 medical care or treatment necessitated by a sudden, unexpected situation or occurrence resulting in a serious medical 8 condition demanding immediate medical attention, for which the 9 10 patient enters the hospital through its emergency room or 11 trauma center, or necessitated by a public health emergency declared pursuant to s. 381.00315 shall not be held liable for 12 any civil damages as a result of such medical care or 13 treatment unless such damages result from providing, or 14 failing to provide, medical care or treatment under 15 16 circumstances demonstrating a reckless disregard for the 17 consequences so as to affect the life or health of another. 2. The immunity provided by this paragraph does not 18 19 apply to damages as a result of any act or omission of 20 providing medical care or treatment: 21 a. Which occurs after the patient is stabilized and is 22 capable of receiving medical treatment as a nonemergency 23 patient, unless surgery is required as a result of the 24 emergency within a reasonable time after the patient is stabilized, in which case the immunity provided by this 25 26 paragraph applies to any act or omission of providing medical 27 care or treatment which occurs prior to the stabilization of 28 the patient following the surgery; or 29 b. Unrelated to the original medical emergency. 30 3. For purposes of this paragraph, "reckless 31 disregard as it applies to a given health care provider

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1 rendering emergency medical services shall be such conduct 2 which a health care provider knew or should have known, at the 3 time such services were rendered, would be likely to result in injury so as to affect the life or health of another, taking 4 5 into account the following to the extent they may be present; 6 a. The extent or serious nature of the circumstances 7 prevailing. 8 b. The lack of time or ability to obtain appropriate 9 consultation. 10 c. The lack of a prior patient-physician relationship. 11 d. The inability to obtain an appropriate medical 12 history of the patient. 13 e. The time constraints imposed by coexisting 14 emergencies. 2.4. Every emergency care facility granted immunity 15 under this paragraph shall accept and treat all emergency care 16 17 patients within the operational capacity of such facility without regard to ability to pay, including patients 18 19 transferred from another emergency care facility or other 20 health care provider pursuant to Pub. L. No. 99-272, s. 9121. 21 The failure of an emergency care facility to comply with this subparagraph constitutes grounds for the department to 22 initiate disciplinary action against the facility pursuant to 23 24 chapter 395. 25 (c) Any person who is licensed to practice medicine, while acting as a staff member or with professional clinical 26 27 privileges at a nonprofit medical facility, other than a 28 hospital licensed under chapter 395, or while performing 29 health screening services, shall not be held liable for any civil damages as a result of care or treatment provided 30 31 gratuitously in such capacity as a result of any act or 11

1 failure to act in such capacity in providing or arranging further medical treatment, if such person acts as a reasonably 2 3 prudent person licensed to practice medicine would have acted under the same or similar circumstances. 4 5 Section 9. Legislative findings and intent.--The б Legislature finds and declares it to be of vital importance 7 that emergency services and care be provided by hospitals, 8 physicians, and emergency medical services providers to every person in need of such care. The Legislature finds that 9 10 emergency services and care providers are critical elements in 11 responding to disaster and emergency situations that might affect our local communities, state, and country. The 12 Legislature recognizes the importance of maintaining a viable 13 system of providing for the emergency medical needs of the 14 state's residents and visitors. The Legislature and the 15 Federal Government have required such providers of emergency 16 17 medical services and care to provide emergency services and care to all persons who present to hospitals seeking such 18 19 care. The Legislature finds that the Legislature has further mandated that prehospital emergency medical treatment or 20 21 transport may not be denied by emergency medical services 22 providers to persons who have or are likely to have an emergency medical condition. Such governmental requirements 23 24 have imposed a unilateral obligation for emergency services and care providers to provide services to all persons seeking 25 26 emergency care without ensuring payment or other consideration 27 for provision of such care. The Legislature also recognizes that emergency services and care providers provide a 28 29 significant amount of uncompensated emergency medical care in 30 furtherance of such governmental interest. The Legislature 31 finds that a significant proportion of the residents of this

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state who are uninsured or are Medicaid or Medicare recipients 1 are unable to access needed health care because health care 2 3 providers fear the increased risk of medical malpractice liability. The Legislature finds that such patients, in order 4 5 to obtain medical care, are frequently forced to seek care б through providers of emergency medical services and care. The 7 Legislature finds that providers of emergency medical services 8 and care in this state have reported significant problems with 9 both the availability and affordability of professional 10 liability coverage. The Legislature finds that medical 11 malpractice liability insurance premiums have increased dramatically, and a number of insurers have ceased providing 12 medical malpractice coverage for emergency medical services 13 and care in this state. This results in a functional 14 unavailability of malpractice coverage for some providers of 15 emergency medical services and care. The Legislature further 16 17 finds that certain specialist physicians have resigned from serving on hospital staffs or have otherwise declined to 18 19 provide on-call coverage to hospital emergency departments due to increased medical malpractice liability exposure created by 20 treating such emergency department patients. It is the intent 21 of the Legislature that hospitals, emergency medical services 22 providers, and physicians be able to ensure that patients who 23 24 might need emergency medical services treatment or 25 transportation or who present to hospitals for emergency medical services and care have access to such needed services. 26 27 Section 10. Paragraph (b) of subsection (9) of section 768.28, Florida Statutes, is amended to read: 28 29 768.28 Waiver of sovereign immunity in tort actions; 30 recovery limits; limitation on attorney fees; statute of 31

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1 limitations; exclusions; indemnification; risk management 2 programs.--3 (9) (b) As used in this subsection, the term: 4 5 "Employee" includes any volunteer firefighter. 1. б 2. "Officer, employee, or agent" includes, but is not 7 limited to: -8 a. Any health care provider when providing services 9 pursuant to s. 766.1115, any member of the Florida Health 10 Services Corps, as defined in s. 381.0302, who provides 11 uncompensated care to medically indigent persons referred by the Department of Health, and any public defender or her or 12 his employee or agent, including, among others, an assistant 13 public defender and an investigator. 14 b. Any emergency health care provider acting pursuant 15 to obligations imposed by ss. 395.1041 and 401.45, except for 16 17 persons or entities that are otherwise covered under this 18 section. Emergency health care providers are considered agents 19 of the Agency for Health Care Administration and shall indemnify the state for any judgments, settlement costs, or 20 21 other liabilities incurred, up to the liability limits set forth in this chapter. In addition, such agents shall pay all 22 costs for investigation and litigation, including defense 23 24 attorney's fees and expenses, in defense of such claims 25 incurred by the state. c. Any emergency health care provider who is licensed 26 27 by the state and who fails to indemnify the state after 28 reasonable notice and written demand to indemnify the state is 29 subject to an emergency suspension order of the regulating 30 authority having jurisdiction over the licensee. 31

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1	d. The Department of Health shall issue an emergency
2	order suspending the license of any licensee under its
3	jurisdiction or that of a regulatory board within the
4	Department of Health who, after 30 days following receipt of a
5	notice from the Division of Risk Management of the Department
6	of Financial Services that a licensee has failed to satisfy
7	his or her obligation to indemnify the state or enter into a
8	repayment agreement with the state for costs under this
9	section, has not complied. The terms of such agreement must
10	provide assurance of repayment of the obligation that is
11	satisfactory to the state. For licensees within the Division
12	of Medical Quality Assurance of the Department of Health,
13	failure to comply with this subsection constitutes grounds for
14	disciplinary action under each respective practice act and
15	under s. 456.072(1)(k). For licensees and certificateholders
16	under part III of chapter 401, failure to comply with this
17	subsection constitutes grounds for disciplinary action under
18	<u>s. 401.411(1)(m).</u>
19	e. If the emergency health care provider is licensed
20	under chapter 395 and has failed to indemnify the state after
21	reasonable notice and written demand to indemnify the state,
22	any state funds payable to the licensed facility shall be
23	withheld until the facility satisfies its obligation to
24	indemnify the state or enters into a repayment agreement. The
25	terms of such an agreement must provide assurance of repayment
26	of the obligation which is satisfactory to the state. In
27	addition, the Agency for Health Care Administration shall
28	impose an administrative fine, not to exceed \$10,000 per
29	violation of this section.
30	f. This section does not apply to any emergency health
31	care provider that has failed after reasonable notice and
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1 written demand to indemnify the state or to enter into a repayment agreement as provided in this section. 2 3 g. As used in this subsection, the term: "Emergency health care providers" includes all 4 (I) 5 persons and entities providing services pursuant to б obligations imposed by ss. 395.1041 and 401.45, except those 7 persons or entities that are otherwise covered under this 8 section. The term includes: 9 (A) An emergency medical services provider licensed 10 under chapter 401 and persons operating as employees or agents 11 of such an emergency medical services provider. (B) A hospital licensed under chapter 395 and persons 12 operating as employees or agents of such a hospital. 13 (C) A physician licensed under chapter 458, chapter 14 459, chapter 460, or chapter 461. 15 A physician assistant licensed under chapter 458 16 (D) 17 or chapter 459. An emergency medical technician or paramedic 18 (E) 19 certified under chapter 401. (F) A registered nurse, nurse midwife, licensed 20 21 practical nurse, or advanced registered nurse practitioner licensed or registered under part I of chapter 464. 22 (G) A midwife licensed under chapter 467. 23 24 (H) A health care professional association and its 25 employees or agents or a corporate medical group and its 26 employees or agents. 27 (I) Any student or medical resident who is enrolled in an accredited program or licensed program that prepares the 28 29 student for licensure or certification in any one of the 30 professions listed in sub-sub-subparagraphs (C)-(G), the 31 program that prepares the student for licensure or

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1 certification, and the entity responsible for training of the student or medical resident. 2 3 (J) Any receiving facility designated under chapter 394 and persons operating as employees or agents of the 4 5 receiving facility when providing emergency treatment to a б person presented for evaluation in accordance with chapter 7 394. 8 (K) Any other person or entity that is providing services pursuant to obligations imposed by s. 401.45 or s. 9 10 395.1041. 11 (II) "Emergency medical services" means ambulance assessment, treatment, or transport services provided pursuant 12 to obligations imposed by s. 401.45 or s. 395.1041; all 13 screening, examination, and evaluation by a physician, 14 hospital, or other person or entity acting pursuant to 15 obligations imposed by s. 395.1041; and the care, treatment, 16 17 surgery, or other medical services provided, whether as an outpatient or inpatient, to relieve or eliminate the emergency 18 19 medical condition, including all medical services to eliminate the likelihood that the emergency medical condition will 20 deteriorate or recur without further medical attention within 21 22 a reasonable period of time. Section 11. This act shall take effect upon becoming a 23 24 law, and applies to any cause of action accruing on or after that date. 25 26 27 28 29 30 31 17

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2	SENATE SUMMARY
3	Amends provisions relating to health care providers. Provides penalties for the failure of receiving
4	facilities to indemnify the state. Provides penalties for the failure of hospitals to indemnify the state. Provides
5	grounds for which a licensed life support service or certified emergency medical technician or paramedic may
6	be subject to discipline. Provides grounds for which a health care practitioner may be subject to discipline for
7	failure to indemnify the state. Requires the Division of Risk Management of the Department of Financial Services
8	to report certain claims to the Office of Insurance Regulation. Provides reporting requirements for claims.
9	Requires the Office of Insurance Regulation to analyze the claims. Requires the Office of Insurance Regulation
10	to make recommendations on a comprehensive risk management plan and report to the Legislature. Revises
11	requirements of expert witnesses used for medical negligence claims subject to presuit investigation for
12	emergency services and care claims. Revises requirements for extending immunity to civil liability for persons
13	providing emergency care or treatment. Provides a
14	standard of conduct applicable to providers for purposes of extending immunity to civil liability for persons providing medical care or services. Provides legislative
15	findings and intent. Redefines terms for purposes of determining who is an agent to which sovereign immunity
16	is waived, to include specified persons and entities.
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