Bill No. CS for SB 2-C Amendment No. \_\_\_\_ Barcode 853064 CHAMBER ACTION Senate House 1 2 3 4 5 б 7 8 9 10 11 Senator Webster moved the following amendment: 12 Senate Amendment 13 14 On page 63, line 5, through 15 page 85, line 27, delete those lines 16 17 and insert: 18 Section 28. Effective upon this act becoming a law and 19 applying to claims accruing on or after that date, section 20 458.320, Florida Statutes, is amended to read: 21 458.320 Financial responsibility.--22 (1) As a condition of licensing and maintaining an 23 active license, and prior to the issuance or renewal of an active license or reactivation of an inactive license for the 24 25 practice of medicine, an applicant <u>must</u> shall by one of the 26 following methods demonstrate to the satisfaction of the board 27 and the department financial responsibility to pay claims and costs ancillary thereto arising out of the rendering of, or 28 the failure to render, medical care or services: 29 30 (a) Establishing and maintaining an escrow account consisting of cash or assets eligible for deposit in 31 1 7:25 PM 07/10/03 s0002Cc1b-09k8z

1	accordance with s. 625.52 in the per claim amounts specified
2	in paragraph (b). The required escrow amount set forth in this
3	paragraph may not be used for litigation costs or attorney's
4	fees for the defense of any medical malpractice claim.
5	(b) Obtaining and maintaining professional liability
б	coverage in an amount not less than <u>\$200,000</u> \$ <del>100,000</del> per
7	claim, with a minimum annual aggregate of not less than
8	\$600,000 <mark>\$300,000</mark> , from an authorized insurer as defined under
9	s. 624.09, from a surplus lines insurer as defined under s.
10	626.914(2), from a risk retention group as defined under s.
11	627.942, from the Joint Underwriting Association established
12	under s. 627.351(4), or through a plan of self-insurance as
13	provided in s. 627.357. The required coverage amount set forth
14	in this paragraph may not be used for litigation costs or
15	attorney's fees for the defense of any medical malpractice
16	claim.
17	(c) Obtaining and maintaining an unexpired,
17 18	(c) Obtaining and maintaining an unexpired, irrevocable letter of credit, established pursuant to chapter
18	irrevocable letter of credit, established pursuant to chapter
18 19	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than <u>\$200,000</u> per claim,
18 19 20	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than <u>\$200,000</u> per claim, with a minimum aggregate availability of credit of not less
18 19 20 21	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than $\frac{200,000}{100,000}$ per claim, with a minimum aggregate availability of credit of not less than $\frac{600,000}{300,000}$ . The letter of credit must shall be
18 19 20 21 22	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than $$200,000$ ; 100,000 per claim, with a minimum aggregate availability of credit of not less than $$600,000$ ; 300,000. The letter of credit must shall be payable to the physician as beneficiary upon presentment of a
18 19 20 21 22 23	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than $$200,000$ per claim, with a minimum aggregate availability of credit of not less than $$600,000$ ; $300,000$ . The letter of credit must shall be payable to the physician as beneficiary upon presentment of a final judgment indicating liability and awarding damages to be
18 19 20 21 22 23 24	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than $$200,000$ per claim, with a minimum aggregate availability of credit of not less than $$600,000$ ; $300,000$ . The letter of credit <u>must shall</u> be payable to the physician as beneficiary upon presentment of a final judgment indicating liability and awarding damages to be paid by the physician or upon presentment of a settlement
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> </ol>	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than <u>\$200,000</u> \$100,000 per claim, with a minimum aggregate availability of credit of not less than <u>\$600,000</u> \$300,000. The letter of credit <u>must shall</u> be payable to the physician as beneficiary upon presentment of a final judgment indicating liability and awarding damages to be paid by the physician or upon presentment of a settlement agreement signed by all parties to such agreement when such
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> </ol>	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than <u>\$200,000</u> \$100,000 per claim, with a minimum aggregate availability of credit of not less than <u>\$600,000</u> \$300,000. The letter of credit <u>must shall</u> be payable to the physician as beneficiary upon presentment of a final judgment indicating liability and awarding damages to be paid by the physician or upon presentment of a settlement agreement signed by all parties to such agreement when such final judgment or settlement is a result of a claim arising
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> </ol>	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than <u>\$200,000</u> \$100,000 per claim, with a minimum aggregate availability of credit of not less than <u>\$600,000</u> \$300,000. The letter of credit <u>must shall</u> be payable to the physician as beneficiary upon presentment of a final judgment indicating liability and awarding damages to be paid by the physician or upon presentment of a settlement agreement signed by all parties to such agreement when such final judgment or settlement is a result of a claim arising out of the rendering of, or the failure to render, medical
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> <li>28</li> </ol>	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than <u>\$200,000</u> \$100,000 per claim, with a minimum aggregate availability of credit of not less than <u>\$600,000</u> \$300,000. The letter of credit <u>must shall</u> be payable to the physician as beneficiary upon presentment of a final judgment indicating liability and awarding damages to be paid by the physician or upon presentment of a settlement agreement signed by all parties to such agreement when such final judgment or settlement is a result of a claim arising out of the rendering of, or the failure to render, medical care and services. <u>The letter of credit may not be used for</u>
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> <li>28</li> <li>29</li> <li>30</li> </ol>	irrevocable letter of credit, established pursuant to chapter 675, in an amount not less than \$200,000\$100,000 per claim, with a minimum aggregate availability of credit of not less than \$600,000\$300,000. The letter of credit <u>must shall</u> be payable to the physician as beneficiary upon presentment of a final judgment indicating liability and awarding damages to be paid by the physician or upon presentment of a settlement agreement signed by all parties to such agreement when such final judgment or settlement is a result of a claim arising out of the rendering of, or the failure to render, medical care and services. The letter of credit may not be used for <u>litigation costs or attorney's fees for the defense of any</u>

1	credit <u>must</u> shall be issued by any bank or savings association
2	organized and existing under the laws of this state or any
3	bank or savings association organized under the laws of the
4	United States which that has its principal place of business
5	in this state or has a branch office <u>that</u> which is authorized
б	under the laws of this state or of the United States to
7	receive deposits in this state.
8	(2) Physicians who perform surgery in an ambulatory
9	surgical center licensed under chapter 395 and, as a
10	continuing condition of hospital staff privileges, physicians
11	<u>who have</u> with staff privileges <u>must</u> shall also <del>be required to</del>
12	establish financial responsibility by one of the following
13	methods:
14	(a) Establishing and maintaining an escrow account
15	consisting of cash or assets eligible for deposit in
16	accordance with s. 625.52 in the per claim amounts specified
17	in paragraph (b). The required escrow amount set forth in this
18	paragraph may not be used for litigation costs or attorney's
19	fees for the defense of any medical malpractice claim.
20	(b) Obtaining and maintaining professional liability
21	coverage in an amount not less than <u>\$500,000</u> <del>\$250,000</del> per
22	claim, with a minimum annual aggregate of not less than <u><math>\\$1.5</math></u>
23	<u>million</u> \$750,000 from an authorized insurer as defined under
24	s. 624.09, from a surplus lines insurer as defined under s.
25	626.914(2), from a risk retention group as defined under s.
26	627.942, from the Joint Underwriting Association established
27	under s. 627.351(4), through a plan of self-insurance as
28	
20	provided in s. 627.357, or through a plan of self-insurance
29	
	provided in s. 627.357, or through a plan of self-insurance
29	provided in s. 627.357, or through a plan of self-insurance which meets the conditions specified for satisfying financial

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or attorney's fees for the defense of any medical malpractice 1 claim. 2 3 (c) Obtaining and maintaining an unexpired irrevocable letter of credit, established pursuant to chapter 675, in an 4 5 amount not less than  $\frac{500,000}{250,000}$  per claim, with a minimum aggregate availability of credit of not less than\$1.5 б 7 <u>million</u> $\frac{5750,000}{100}$ . The letter of credit <u>must</u> shall be payable to the physician as beneficiary upon presentment of a final 8 judgment indicating liability and awarding damages to be paid 9 by the physician or upon presentment of a settlement agreement 10 11 signed by all parties to such agreement when such final judgment or settlement is a result of a claim arising out of 12 13 the rendering of, or the failure to render, medical care and services. The letter of credit may not be used for litigation 14 15 costs or attorney's fees for the defense of any medical 16 malpractice claim. The Such letter of credit must shall be nonassignable and nontransferable. The Such letter of credit 17 18 must shall be issued by any bank or savings association 19 organized and existing under the laws of this state or any bank or savings association organized under the laws of the 20 21 United States which that has its principal place of business in this state or has a branch office that which is authorized 22 under the laws of this state or of the United States to 23 24 receive deposits in this state. 25 26 This subsection shall be inclusive of the coverage in 27 subsection (1). (3)(a) The financial responsibility requirements of 28 29 subsections (1) and (2) shall apply to claims for incidents 30 that occur on or after January 1, 1987, or the initial date of 31 | licensure in this state, whichever is later. 4 7:25 PM 07/10/03 s0002Cc1b-09k8z

1	(b) Meeting the financial responsibility requirements
2	of this section or the criteria for any exemption from such
3	requirements <u>must</u> <del>shall</del> be established at the time of issuance
4	or renewal of a license <del>on or after January 1, 1987</del> .
5	(b)(c) Any person may, at any time, submit to the
6	department a request for an advisory opinion regarding such
7	person's qualifications for exemption.
8	(4)(a) Each insurer, self-insurer, risk retention
9	group, or Joint Underwriting Association <u>must</u> <del>shall</del> promptly
10	notify the department of cancellation or nonrenewal of
11	insurance required by this section. Unless the physician
12	demonstrates that he or she is otherwise in compliance with
13	the requirements of this section, the department shall suspend
14	the license of the physician pursuant to ss. 120.569 and
15	120.57 and notify all health care facilities licensed under
16	chapter 395 of such action. Any suspension under this
17	subsection <u>remains</u> <del>shall remain</del> in effect until the physician
18	demonstrates compliance with the requirements of this section.
19	If any judgments or settlements are pending at the time of
20	suspension, those judgments or settlements must be paid in
21	accordance with this section unless otherwise mutually agreed
22	to in writing by the parties. This paragraph does not abrogate
23	a judgment debtor's obligation to satisfy the entire amount of
24	any judgment, except that a license suspended under paragraph
25	(5)(g) shall not be reinstated until the physician
26	demonstrates compliance with the requirements of that
27	provision.
28	(b) If financial responsibility requirements are met
29	by maintaining an escrow account or letter of credit as
30	provided in this section, upon the entry of an adverse final
31	judgment arising from a medical malpractice arbitration award,
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1	from a claim of medical malpractice either in contract or
2	tort, or from noncompliance with the terms of a settlement
3	agreement arising from a claim of medical malpractice either
4	in contract or tort, the licensee shall pay the entire amount
5	of the judgment together with all accrued interest, or the
б	amount maintained in the escrow account or provided in the
7	letter of credit as required by this section, whichever is
8	less, within 60 days after the date such judgment became final
9	and subject to execution, unless otherwise mutually agreed to
10	in writing by the parties. If timely payment is not made by
11	the physician, the department shall suspend the license of the
12	physician pursuant to procedures set forth in subsection (8)
13	subparagraphs $(5)(g)3., 4., and 5$ . Nothing in this paragraph
14	shall abrogate a judgment debtor's obligation to satisfy the
15	entire amount of any judgment.
16	(5) The requirements of subsections $(1)$ , $(2)$ , and $(3)$
17	do shall not apply to:
17 18	<u>do</u> <del>shall</del> not apply to: (a) Any person licensed under this chapter who
18	(a) Any person licensed under this chapter who
18 19	(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or
18 19 20	(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its
18 19 20 21	(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this
18 19 20 21 22	(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its
18 19 20 21 22 23	(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its subdivisions is a person who is eligible for coverage under
18 19 20 21 22 23 24	(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its subdivisions is a person who is eligible for coverage under any self-insurance or insurance program authorized by the
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> </ol>	(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its subdivisions is a person who is eligible for coverage under any self-insurance or insurance program authorized by the provisions of s. 768.28(15).
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> </ol>	<ul> <li>(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its subdivisions is a person who is eligible for coverage under any self-insurance or insurance program authorized by the provisions of s. 768.28(15).</li> <li>(b) Any person whose license has become inactive under</li> </ul>
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> </ol>	<ul> <li>(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its subdivisions is a person who is eligible for coverage under any self-insurance or insurance program authorized by the provisions of s. 768.28(15).</li> <li>(b) Any person whose license has become inactive under this chapter and who is not practicing medicine in this state.</li> </ul>
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> <li>28</li> </ol>	<ul> <li>(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its subdivisions is a person who is eligible for coverage under any self-insurance or insurance program authorized by the provisions of s. 768.28(15).</li> <li>(b) Any person whose license has become inactive under this chapter and who is not practicing medicine in this state. Any person applying for reactivation of a license must show</li> </ul>
<ol> <li>18</li> <li>19</li> <li>20</li> <li>21</li> <li>22</li> <li>23</li> <li>24</li> <li>25</li> <li>26</li> <li>27</li> <li>28</li> <li>29</li> </ol>	<ul> <li>(a) Any person licensed under this chapter who practices medicine exclusively as an officer, employee, or agent of the Federal Government or of the state or its agencies or its subdivisions. For the purposes of this subsection, an agent of the state, its agencies, or its subdivisions is a person who is eligible for coverage under any self-insurance or insurance program authorized by the provisions of s. 768.28(15).</li> <li>(b) Any person whose license has become inactive under this chapter and who is not practicing medicine in this state. Any person applying for reactivation of a license must show either that such license maintained tail insurance coverage</li> </ul>

1	in this state, whichever is later, and incidents that occurred
2	before the date on which the license became inactive; or such
3	licensee must submit an affidavit stating that such licensee
4	has no unsatisfied medical malpractice judgments or
5	settlements at the time of application for reactivation.
6	(c) Any person holding a limited license pursuant to
7	s. 458.317 and practicing under the scope of such limited
8	license.
9	(d) Any person licensed or certified under this
10	chapter who practices only in conjunction with his or her
11	teaching duties at an accredited medical school or in its main
12	teaching hospitals. Such person may engage in the practice of
13	medicine to the extent that such practice is incidental to and
14	a necessary part of duties in connection with the teaching
15	position in the medical school.
16	(e) Any person holding an active license under this
17	chapter who is not practicing medicine in this state. If such
18	person initiates or resumes any practice of medicine in this
19	state, he or she must notify the department of such activity
20	and fulfill the financial responsibility requirements of this
21	section before resuming the practice of medicine in this
22	state.
23	(f) Any person holding an active license under this
24	chapter who meets all of the following criteria:
25	1. The licensee has held an active license to practice
26	in this state or another state or some combination thereof for
27	more than 15 years.
28	2. The licensee has either retired from the practice
29	of medicine or maintains a part-time practice of no more than
30	1,000 patient contact hours per year.
31	3. The licensee has had no more than two claims for $7$
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1 medical malpractice resulting in an indemnity exceeding 2 \$25,000 within the previous 5-year period.

4. The licensee has not been convicted of, or pled
guilty or nolo contendere to, any criminal violation specified
in this chapter or the medical practice act of any other
state.

7 5. The licensee has not been subject within the last 10 years of practice to license revocation or suspension for 8 any period of time; probation for a period of 3 years or 9 longer; or a fine of \$500 or more for a violation of this 10 11 chapter or the medical practice act of another jurisdiction. The regulatory agency's acceptance of a physician's 12 13 relinquishment of a license, stipulation, consent order, or 14 other settlement, offered in response to or in anticipation of 15 the filing of administrative charges against the physician's 16 license, constitutes shall be construed as action against the physician's license for the purposes of this paragraph. 17

18 6. The licensee has submitted a form supplying
19 necessary information as required by the department and an
20 affidavit affirming compliance with the provisions of this
21 paragraph.

7. The licensee <u>must shall</u> submit biennially to the department certification stating compliance with the provisions of this paragraph. The licensee <u>must shall</u>, upon request, demonstrate to the department information verifying compliance with this paragraph.

27

A licensee who meets the requirements of this paragraph <u>must</u>
shall be required either to post notice in the form of a sign
prominently displayed in the reception area and clearly
noticeable by all patients or provide a written statement to
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1 any person to whom medical services are being provided. The Such sign or statement <u>must read as follows</u> shall state that: 2 3 <u>"</u>Under Florida law, physicians are generally required to carry medical malpractice insurance or otherwise demonstrate 4 5 financial responsibility to cover potential claims for medical malpractice. However, certain part-time physicians who meet б 7 state requirements are exempt from the financial responsibility law. YOUR DOCTOR MEETS THESE REQUIREMENTS AND 8 HAS DECIDED NOT TO CARRY MEDICAL MALPRACTICE INSURANCE. This 9 notice is provided pursuant to Florida law." 10 11 (g) Any person holding an active license under this 12 chapter who agrees to meet all of the following criteria: 13 1. Upon the entry of an adverse final judgment arising from a medical malpractice arbitration award, from a claim of 14 15 medical malpractice either in contract or tort, or from 16 noncompliance with the terms of a settlement agreement arising from a claim of medical malpractice either in contract or 17 18 tort, the licensee shall pay the judgment creditor the lesser 19 of the entire amount of the judgment with all accrued interest 20 or either \$100,000, if the physician is licensed pursuant to this chapter but does not maintain hospital staff privileges, 21 or \$250,000, if the physician is licensed pursuant to this 22 23 chapter and maintains hospital staff privileges, within 60 days after the date such judgment became final and subject to 24 25 execution, unless otherwise mutually agreed to in writing by 26 the parties. Such adverse final judgment shall include any 27 cross-claim, counterclaim, or claim for indemnity or 28 contribution arising from the claim of medical malpractice. Upon notification of the existence of an unsatisfied judgment 29 or payment pursuant to this subparagraph, the department shall 30 31 | notify the licensee by certified mail that he or she shall be 9 7:25 PM 07/10/03 s0002Cc1b-09k8z

SENATE AMENDMENT

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1	minimum, probation of the license with the restriction that
2	the licensee must make payments to the judgment creditor on a
3	schedule determined by the board to be reasonable and within
4	the financial capability of the physician. Notwithstanding any
5	other disciplinary penalty imposed, the disciplinary penalty
6	may include suspension of the license for a period not to
7	exceed 5 years. In the event that an agreement to satisfy a
8	judgment has been met, the board shall remove any restriction
9	on the license.
10	5. The licensee has completed a form supplying
11	necessary information as required by the department.
12	
13	A licensee who meets the requirements of this paragraph shall
14	be required either to post notice in the form of a sign
15	prominently displayed in the reception area and clearly
16	noticeable by all patients or to provide a written statement
17	to any person to whom medical services are being provided.
18	Such sign or statement shall state: "Under Florida law,
19	physicians are generally required to carry medical malpractice
20	insurance or otherwise demonstrate financial responsibility to
21	cover potential claims for medical malpractice. YOUR DOCTOR
22	HAS DECIDED NOT TO CARRY MEDICAL MALPRACTICE INSURANCE. This
23	is permitted under Florida law subject to certain conditions.
24	Florida law imposes penalties against noninsured physicians
25	who fail to satisfy adverse judgments arising from claims of
26	medical malpractice. This notice is provided pursuant to
27	<del>Florida law."</del>
28	(6) Any deceptive, untrue, or fraudulent
29	representation by the licensee with respect to any provision
30	of this section shall result in permanent disqualification
31	from any exemption to mandated financial responsibility as
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provided in this section and shall constitute grounds for 1 1 2 disciplinary action under s. 458.331. 3 (7) Any licensee who relies on any exemption from the financial responsibility requirement shall notify the 4 5 department, in writing, of any change of circumstance regarding his or her qualifications for such exemption and б shall demonstrate that he or she is in compliance with the 7 requirements of this section. 8 9 (8) Notwithstanding any other provision of this section, the department shall suspend the license of any 10 11 physician against whom has been entered a final judgment, arbitration award, or other order or who has entered into a 12 13 settlement agreement to pay damages arising out of a claim for medical malpractice, if all appellate remedies have been 14 exhausted and payment up to the amounts required by this 15 16 section has not been made within 30 days after the entering of such judgment, award, or order or agreement, until proof of 17 payment is received by the department or a payment schedule 18 19 has been agreed upon by the physician and the claimant and 20 presented to the department. This subsection does not apply to a physician who has met the financial responsibility 21 2.2 requirements in paragraphs (1)(b) and (2)(b). 23 (9) (8) The board shall adopt rules to implement the 24 provisions of this section. 25 Section 29. Effective upon this act becoming a law and 26 applying to claims accruing on or after that date, section 27 459.0085, Florida Statutes, is amended to read: 28 459.0085 Financial responsibility.--29 (1) As a condition of licensing and maintaining an active license, and prior to the issuance or renewal of an 30 31 active license or reactivation of an inactive license for the 7:25 PM 07/10/03 s0002Cc1b-09k8z

1	practice of osteopathic medicine, an applicant <u>must</u> shall by
2	one of the following methods demonstrate to the satisfaction
3	of the board and the department financial responsibility to
4	pay claims and costs ancillary thereto arising out of the
5	rendering of, or the failure to render, medical care or
б	services:
7	(a) Establishing and maintaining an escrow account
8	consisting of cash or assets eligible for deposit in
9	accordance with s. 625.52 in the per-claim amounts specified
10	in paragraph (b).
11	(b) Obtaining and maintaining professional liability
12	coverage for the current year and for each of the prior years
13	that the applicant or licensee has been in the active practice
14	of medicine, up to a maximum of 4 prior years, in an amount
15	not less than <u>\$200,000</u> \$100,000 per claim, with a minimum
16	annual aggregate of not less than <u>\$600,000</u> \$300,000, from an
17	authorized insurer as defined under s. 624.09, from a surplus
18	lines insurer as defined under s. 626.914(2), from a risk
19	retention group as defined under s. 627.942, from the Joint
20	Underwriting Association established under s. 627.351(4), or
21	through a plan of self-insurance as provided in s. 627.357.
22	The required coverage amount set forth in this paragraph may
23	not be used for litigation costs or attorney's fees for the
24	defense of any medical malpractice claim.
25	(c) Obtaining and maintaining an unexpired,
26	irrevocable letter of credit, established pursuant to chapter
27	675, for the current year and for each of the prior years that
28	the applicant or licensee has been in the active practice of
29	medicine, up to a maximum of 4 prior years, in an amount not
30	less than <u>\$200,000</u> <del>\$100,000</del> per claim, with a minimum
31	aggregate availability of credit of not less than <u>\$600,000</u> 13
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1	$\beta$ 300,000. The letter of credit <u>must</u> shall be payable to the
2	osteopathic physician as beneficiary upon presentment of a
3	final judgment indicating liability and awarding damages to be
4	paid by the osteopathic physician or upon presentment of a
5	settlement agreement signed by all parties to such agreement
б	when such final judgment or settlement is a result of a claim
7	arising out of the rendering of, or the failure to render,
8	medical care and services. Such letter of credit <u>must</u> shall be
9	nonassignable and nontransferable. Such letter of credit <u>must</u>
10	shall be issued by any bank or savings association organized
11	and existing under the laws of this state or any bank or
12	savings association organized under the laws of the United
13	States which that has its principal place of business in this
14	state or has a branch office <u>that</u> <del>which</del> is authorized under
15	the laws of this state or of the United States to receive
16	deposits in this state.
17	(2) Osteopathic physicians who perform surgery in an
18	ambulatory surgical center licensed under chapter 395 and, as
19	a continuing condition of hospital staff privileges,
19 20	a continuing condition of hospital staff privileges, osteopathic physicians <u>who have</u> with staff privileges <u>must</u>
20	osteopathic physicians <u>who have</u> with staff privileges <u>must</u>
20 21	osteopathic physicians <u>who have</u> <del>with</del> staff privileges <u>must</u> <del>shall</del> also <del>be required to</del> establish financial responsibility
20 21 22	osteopathic physicians <u>who have</u> <del>with</del> staff privileges <u>must</u> <del>shall</del> also <del>be required to</del> establish financial responsibility by one of the following methods:
20 21 22 23	osteopathic physicians <u>who have</u> <del>with</del> staff privileges <u>must</u> <del>shall</del> also <del>be required to</del> establish financial responsibility by one of the following methods: (a) Establishing and maintaining an escrow account
20 21 22 23 24	osteopathic physicians <u>who have</u> <del>with</del> staff privileges <u>must</u> <del>shall</del> also <del>be required to</del> establish financial responsibility by one of the following methods: (a) Establishing and maintaining an escrow account consisting of cash or assets eligible for deposit in
20 21 22 23 24 25	osteopathic physicians <u>who have</u> <del>with</del> staff privileges <u>must</u> <del>shall</del> also <del>be required to</del> establish financial responsibility by one of the following methods: (a) Establishing and maintaining an escrow account consisting of cash or assets eligible for deposit in accordance with s. 625.52 in the per-claim amounts specified
20 21 22 23 24 25 26	osteopathic physicians <u>who have</u> <del>with</del> staff privileges <u>must</u> <del>shall</del> also <del>be required to</del> establish financial responsibility by one of the following methods: (a) Establishing and maintaining an escrow account consisting of cash or assets eligible for deposit in accordance with s. 625.52 in the per-claim amounts specified in paragraph (b).
20 21 22 23 24 25 26 27	<pre>osteopathic physicians who have with staff privileges must shall also be required to establish financial responsibility by one of the following methods: (a) Establishing and maintaining an escrow account consisting of cash or assets eligible for deposit in accordance with s. 625.52 in the per-claim amounts specified in paragraph (b). (b) Obtaining and maintaining professional liability</pre>
20 21 22 23 24 25 26 27 28	<pre>osteopathic physicians who have with staff privileges must shall also be required to establish financial responsibility by one of the following methods: (a) Establishing and maintaining an escrow account consisting of cash or assets eligible for deposit in accordance with s. 625.52 in the per-claim amounts specified in paragraph (b). (b) Obtaining and maintaining professional liability coverage <u>for the current year and for each of the prior years</u></pre>
20 21 22 23 24 25 26 27 28 29 30	<pre>osteopathic physicians who have with staff privileges must shall also be required to establish financial responsibility by one of the following methods:</pre>

Bill No. CS for SB 2-C Amendment No. \_\_\_\_ Barcode 853064 annual aggregate of not less than \$1.5 million \$750,000 from 1 | 2 an authorized insurer as defined under s. 624.09, from a 3 surplus lines insurer as defined under s. 626.914(2), from a risk retention group as defined under s. 627.942, from the 4 5 Joint Underwriting Association established under s. 627.351(4), through a plan of self-insurance as provided in s. б 7 627.357, or through a plan of self-insurance that which meets the conditions specified for satisfying financial 8 responsibility in s. 766.110. 9 10 (c) Obtaining and maintaining an unexpired, 11 irrevocable letter of credit, established pursuant to chapter 675, for the current year and for each of the prior years that 12 the applicant or licensee has been in the active practice of 13 medicine, up to a maximum of 4 prior years, in an amount not 14 less than  $\frac{500,000}{250,000}$  per claim, with a minimum 15 aggregate availability of credit of not less than \$1.5 million 16 17  $\frac{5750,000}{5750,000}$ . The letter of credit <u>must</u> shall be payable to the osteopathic physician as beneficiary upon presentment of a 18 19 final judgment indicating liability and awarding damages to be paid by the osteopathic physician or upon presentment of a 20 settlement agreement signed by all parties to such agreement 21 when such final judgment or settlement is a result of a claim 22 23 arising out of the rendering of, or the failure to render, 24 medical care and services. The Such letter of credit <u>must</u> 25 shall be nonassignable and nontransferable. The Such letter of 26 credit <u>must</u> shall be issued by any bank or savings association 27 organized and existing under the laws of this state or any bank or savings association organized under the laws of the 28 United States which that has its principal place of business 29

30 in this state or has a branch office <u>that</u> which is authorized
31 under the laws of this state or of the United States to

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SENATE AMENDMENT

Bill No. CS for SB 2-C Amendment No. \_\_\_\_ Barcode 853064 receive deposits in this state. 1 | 2 3 This subsection shall be inclusive of the coverage in subsection (1). 4 5 (3)(a) The financial responsibility requirements of subsections (1) and (2) shall apply to claims for incidents б 7 that occur on or after January 1, 1987, or the initial date of 8 licensure in this state, whichever is later. (b) Meeting the financial responsibility requirements 9 of this section or the criteria for any exemption from such 10 11 requirements <u>must</u> shall be established at the time of issuance 12 or renewal of a license on or after January 1, 1987. 13 (b) (c) Any person may, at any time, submit to the 14 department a request for an advisory opinion regarding such 15 person's qualifications for exemption. 16 (4)(a) Each insurer, self-insurer, risk retention 17 group, or joint underwriting association <u>must</u> shall promptly 18 notify the department of cancellation or nonrenewal of 19 insurance required by this section. Unless the osteopathic 20 physician demonstrates that he or she is otherwise in 21 compliance with the requirements of this section, the department shall suspend the license of the osteopathic 22 23 physician pursuant to ss. 120.569 and 120.57 and notify all 24 health care facilities licensed under chapter 395, part IV of 25 chapter 394, or part I of chapter 641 of such action. Any 26 suspension under this subsection remains shall remain in 27 effect until the osteopathic physician demonstrates compliance with the requirements of this section. If any judgments or 28 settlements are pending at the time of suspension, those 29 judgments or settlements must be paid in accordance with this 30 31 section unless otherwise mutually agreed to in writing by the 16 7:25 PM 07/10/03 s0002Cc1b-09k8z

1	parties. This paragraph does not abrogate a judgment debtor's
2	obligation to satisfy the entire amount of any judgment except
3	that a license suspended under paragraph (5)(g) shall not be
4	reinstated until the osteopathic physician demonstrates
5	compliance with the requirements of that provision.
6	(b) If financial responsibility requirements are met
7	by maintaining an escrow account or letter of credit as
8	provided in this section, upon the entry of an adverse final
9	judgment arising from a medical malpractice arbitration award,
10	from a claim of medical malpractice either in contract or
11	tort, or from noncompliance with the terms of a settlement
12	agreement arising from a claim of medical malpractice either
13	in contract or tort, the licensee shall pay the entire amount
14	of the judgment together with all accrued interest or the
15	amount maintained in the escrow account or provided in the
16	letter of credit as required by this section, whichever is
17	less, within 60 days after the date such judgment became final
18	and subject to execution, unless otherwise mutually agreed to
19	in writing by the parties. If timely payment is not made by
20	the osteopathic physician, the department shall suspend the
21	license of the osteopathic physician pursuant to procedures
22	set forth in subsection (9) subparagraphs $(5)(g)3., 4., and 5$ .
23	Nothing in this paragraph shall abrogate a judgment debtor's
24	obligation to satisfy the entire amount of any judgment.
25	(5) The requirements of subsections (1), (2), and (3)
26	do shall not apply to:
27	(a) Any person licensed under this chapter who
28	practices medicine exclusively as an officer, employee, or
29	agent of the Federal Government or of the state or its
30	agencies or its subdivisions. For the purposes of this
31	subsection, an agent of the state, its agencies, or its 17
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subdivisions is a person who is eligible for coverage under
 any self-insurance or insurance program authorized by the
 provisions of s. 768.28(15).

(b) Any person whose license has become inactive under 4 5 this chapter and who is not practicing medicine in this state. Any person applying for reactivation of a license must show б 7 either that such licensee maintained tail insurance coverage that which provided liability coverage for incidents that 8 9 occurred on or after January 1, 1987, or the initial date of licensure in this state, whichever is later, and incidents 10 11 that occurred before the date on which the license became inactive; or such licensee must submit an affidavit stating 12 13 that such licensee has no unsatisfied medical malpractice 14 judgments or settlements at the time of application for 15 reactivation.

16 (c) Any person holding a limited license pursuant to 17 s. 459.0075 and practicing under the scope of such limited 18 license.

(d) Any person licensed or certified under this chapter who practices only in conjunction with his or her teaching duties at a college of osteopathic medicine. Such person may engage in the practice of osteopathic medicine to the extent that such practice is incidental to and a necessary part of duties in connection with the teaching position in the college of osteopathic medicine.

(e) Any person holding an active license under this
chapter who is not practicing osteopathic medicine in this
state. If such person initiates or resumes any practice of
osteopathic medicine in this state, he or she must notify the
department of such activity and fulfill the financial
responsibility requirements of this section before resuming

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1 | the practice of osteopathic medicine in this state.

2 (f) Any person holding an active license under this3 chapter who meets all of the following criteria:

4 1. The licensee has held an active license to practice
5 in this state or another state or some combination thereof for
6 more than 15 years.

7 2. The licensee has either retired from the practice
8 of osteopathic medicine or maintains a part-time practice of
9 osteopathic medicine of no more than 1,000 patient contact
10 hours per year.

The licensee has had no more than two claims for
 medical malpractice resulting in an indemnity exceeding
 \$25,000 within the previous 5-year period.

14 4. The licensee has not been convicted of, or pled
15 guilty or nolo contendere to, any criminal violation specified
16 in this chapter or the practice act of any other state.

5. The licensee has not been subject within the last 17 10 years of practice to license revocation or suspension for 18 19 any period of time, probation for a period of 3 years or longer, or a fine of \$500 or more for a violation of this 20 21 chapter or the medical practice act of another jurisdiction. The regulatory agency's acceptance of an osteopathic 22 23 physician's relinquishment of a license, stipulation, consent order, or other settlement, offered in response to or in 24 25 anticipation of the filing of administrative charges against 26 the osteopathic physician's license, constitutes shall be 27 construed as action against the physician's license for the purposes of this paragraph. 28

6. The licensee has submitted a form supplying
necessary information as required by the department and an
affidavit affirming compliance with the provisions of this
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Bill No. CS for SB 2-C Amendment No. Barcode 853064 paragraph. 1 | 7. The licensee must shall submit biennially to the 2 3 department a certification stating compliance with the provisions of this paragraph. The licensee <u>must</u> shall, upon 4 5 request, demonstrate to the department information verifying compliance with this paragraph. б 7 8 A licensee who meets the requirements of this paragraph must shall be required either to post notice in the form of a sign 9 prominently displayed in the reception area and clearly 10 11 noticeable by all patients or to provide a written statement to any person to whom medical services are being provided. The 12 13 Such sign or statement must read as follows shall state that: 14 "Under Florida law, osteopathic physicians are generally 15 required to carry medical malpractice insurance or otherwise 16 demonstrate financial responsibility to cover potential claims for medical malpractice. However, certain part-time 17 18 osteopathic physicians who meet state requirements are exempt 19 from the financial responsibility law. YOUR OSTEOPATHIC 20 PHYSICIAN MEETS THESE REQUIREMENTS AND HAS DECIDED NOT TO CARRY MEDICAL MALPRACTICE INSURANCE. This notice is provided 21 22 pursuant to Florida law." 23 (g) Any person holding an active license under this 24 chapter who agrees to meet all of the following criteria. 25 1. Upon the entry of an adverse final judgment arising 26 from a medical malpractice arbitration award, from a claim of 27 medical malpractice either in contract or tort, or from 28 noncompliance with the terms of a settlement agreement arising from a claim of medical malpractice either in contract or 29 tort, the licensee shall pay the judgment creditor the lesser 30 31 | of the entire amount of the judgment with all accrued interest 20 7:25 PM 07/10/03 s0002Cc1b-09k8z

1	or either \$100,000, if the osteopathic physician is licensed
2	pursuant to this chapter but does not maintain hospital staff
3	privileges, or \$250,000, if the osteopathic physician is
4	licensed pursuant to this chapter and maintains hospital staff
5	privileges, within 60 days after the date such judgment became
б	final and subject to execution, unless otherwise mutually
7	agreed to in writing by the parties. Such adverse final
8	judgment shall include any cross-claim, counterclaim, or claim
9	for indemnity or contribution arising from the claim of
10	medical malpractice. Upon notification of the existence of an
11	unsatisfied judgment or payment pursuant to this subparagraph,
12	the department shall notify the licensee by certified mail
13	that he or she shall be subject to disciplinary action unless,
14	within 30 days from the date of mailing, the licensee either:
15	a. Shows proof that the unsatisfied judgment has been
16	paid in the amount specified in this subparagraph; or
17	b. Furnishes the department with a copy of a timely
18	filed notice of appeal and either:
19	(I) A copy of a supersedeas bond properly posted in
20	the amount required by law; or
21	(II) An order from a court of competent jurisdiction
22	staying execution on the final judgment, pending disposition
23	of the appeal.
24	2. The Department of Health shall issue an emergency
25	order suspending the license of any licensee who, after 30
26	days following receipt of a notice from the Department of
27	Health, has failed to: satisfy a medical malpractice claim
28	against him or her; furnish the Department of Health a copy of
29	a timely filed notice of appeal; furnish the Department of
30	Health a copy of a supersedeas bond properly posted in the
31	amount required by law; or furnish the Department of Health an 21
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1	order from a court of competent jurisdiction staying execution
2	on the final judgment pending disposition of the appeal.
3	3. Upon the next meeting of the probable cause panel
4	of the board following 30 days after the date of mailing the
5	notice of disciplinary action to the licensee, the panel shall
б	make a determination of whether probable cause exists to take
7	disciplinary action against the licensee pursuant to
8	subparagraph 1.
9	4. If the board determines that the factual
10	requirements of subparagraph 1. are met, it shall take
11	disciplinary action as it deems appropriate against the
12	licensee. Such disciplinary action shall include, at a
13	minimum, probation of the license with the restriction that
14	the licensee must make payments to the judgment creditor on a
15	schedule determined by the board to be reasonable and within
16	the financial capability of the osteopathic physician.
17	Notwithstanding any other disciplinary penalty imposed, the
18	disciplinary penalty may include suspension of the license for
19	a period not to exceed 5 years. In the event that an
20	agreement to satisfy a judgment has been met, the board shall
21	remove any restriction on the license.
22	5. The licensee has completed a form supplying
23	necessary information as required by the department.
24	
25	A licensee who meets the requirements of this paragraph shall
26	<del>be required either to post notice in the form of a sign</del>
27	prominently displayed in the reception area and clearly
28	noticeable by all patients or to provide a written statement
29	to any person to whom medical services are being provided.
30	Such sign or statement shall state: "Under Florida law,
31	osteopathic physicians are generally required to carry medical 22
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malpractice insurance or otherwise demonstrate financial 1 1 2 responsibility to cover potential claims for medical 3 malpractice. YOUR OSTEOPATHIC PHYSICIAN HAS DECIDED NOT TO CARRY MEDICAL MALPRACTICE INSURANCE. This is permitted under 4 5 Florida law subject to certain conditions. Florida law imposes strict penalties against noninsured osteopathic б 7 physicians who fail to satisfy adverse judgments arising from 8 claims of medical malpractice. This notice is provided pursuant to Florida law." 9 10 (6) Any deceptive, untrue, or fraudulent 11 representation by the licensee with respect to any provision of this section shall result in permanent disqualification 12 13 from any exemption to mandated financial responsibility as provided in this section and shall constitute grounds for 14 15 disciplinary action under s. 459.015. 16 (7) Any licensee who relies on any exemption from the financial responsibility requirement shall notify the 17 18 department in writing of any change of circumstance regarding 19 his or her qualifications for such exemption and shall 20 demonstrate that he or she is in compliance with the 21 requirements of this section. 22 (8) If a physician is either a resident physician, 23 assistant resident physician, or intern in an approved 24 postgraduate training program, as defined by the board's 25 rules, and is supervised by a physician who is participating 26 in the Florida Birth-Related Neurological Injury Compensation 27 Plan, such resident physician, assistant resident physician, 28 or intern is deemed to be a participating physician without the payment of the assessment set forth in s. 766.314(4). 29 (9) Notwithstanding any other provision of this 30 31 | section, the department shall suspend the license of any 23

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1	osteopathic physician against whom has been entered a final
2	judqment, arbitration award, or other order or who has entered
3	into a settlement agreement to pay damages arising out of a
4	claim for medical malpractice, if all appellate remedies have
5	been exhausted and payment up to the amounts required by this
6	section has not been made within 30 days after the entering of
7	such judgment, award, or order or agreement, until proof of
8	payment is received by the department or a payment schedule
9	has been agreed upon by the osteopathic physician and the
10	claimant and presented to the department. This subsection does
11	not apply to an osteopathic physician who has met the
12	financial responsibility requirements in paragraphs (1)(b) and
13	(2)(b).
14	(10)(9) The board shall adopt rules to implement the
15	provisions of this section.
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