By the Committee on Health, Aging, and Long-Term Care; and Senator Jones

## 317-2635-04

1	A bill to be entitled
2	An act relating to health care advance
3	directive and blood-type recordation; creating
4	s. 322.0812, F.S.; providing a fee for persons
5	participating in the health care advance
6	directive and blood-type registry; requiring
7	certain uses for funds generated by the fee;
8	amending s. 322.051, F.S.; providing a fee for
9	persons applying for an identification card who
10	choose to participate in the health care
11	advance directive and blood-type registry;
12	amending s. 322.08, F.S.; providing a fee for
13	persons applying for a driver's license who
14	choose to participate in the health care
15	advance directive and blood-type registry;
16	creating s. 765.3061, F.S.; requiring the
17	Agency for Health Care Administration and the
18	Department of Highway Safety and Motor Vehicles
19	to develop and implement a voluntary program
20	for health care advance directive and
21	blood-type recordation; requiring certain
22	health care employees to confirm a principal's
23	blood type; providing for noting an
24	individual's blood type and health care advance
25	directive relative to life-prolonging
26	procedures on the individual's driver's license
27	or identification card upon request; requiring
28	the Division of Driver Licenses offices to make
29	forms available to the public; requiring forms
30	to be accessible electronically on the
31	Internet; requiring certain forms to contain

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certain information; requiring the department to distribute certain forms for the indication of health care directives and blood type; providing a recordkeeping system; requiring the agency to provide funds for certain supplies; requiring the department to provide funds for the recordkeeping system; creating s. 765.3062, F.S.; establishing a health care advance directive and blood-type registry; requiring the department to collect data and provide collected data to the agency for the registry; requiring the registry to record certain health care advance directive and blood-type information; providing access to the registry by certain persons; providing guidelines for the processing of certain forms; providing criteria for revocation or amendment of registry information by certain individuals; providing for recording certain documents with the registry; providing criteria for certain health care advance directives being submitted; requiring the department and the agency to develop and implement a living will registry; creating s. 765.3063, F.S.; providing means to amend or revoke a health care advance directive or blood type from the registry; providing for the responsibility of the principal to update forms; providing standards for controlling forms and recordings; creating s. 765.3064, F.S.; providing certain health care employees with civil and criminal immunity from acts

1	performed in conjunction with certain
2	information provided by the department;
3	expressing the sovereign immunity of the
4	agency, the department, and their employees
5	from criminal prosecution and civil liability
6	for certain acts or forms; creating s.
7	765.3065, F.S.; requiring the agency, subject
8	to the concurrence of the department, to
9	develop a continuing education program relating
10	to health care advance directives and the
11	health care advance directive and blood-type
12	registry; creating s. 765.3066, F.S.; providing
13	for appointment of an education panel to create
14	an end-of-life public education campaign;
15	providing campaign criteria; providing
16	contractual power for programs aimed at
17	educating certain health care professionals;
18	requiring a study to be conducted by the
19	agency; providing for a report to the
20	Legislature; providing issues for the study to
21	address; amending s. 395.1041, F.S.; requiring
22	a facility licensed under ch. 395, F.S., to
23	withhold or withdraw cardiopulmonary
24	resuscitation when presented with an order not
25	to resuscitate; creating s. 395.10411, F.S.;
26	providing requirements to be carried out by a
27	facility licensed under ch. 395, F.S., when a
28	patient has an advance directive, has an order
29	not to resuscitate, or is a designated organ
30	donor; amending s. 765.1105, F.S.; requiring a
31	health care provider that refuses to carry out

1 a patient's advance directive to transfer the 2 patient within a specified time to a health care provider that will comply with the advance 3 4 directive; creating s. 765.1021, F.S.; 5 encouraging physicians and patients to discuss 6 end-of-life care; specifying when an advance 7 directive must be part of the patient's medical record; amending s. 765.304, F.S.; requiring an 8 9 attending physician who refuses to comply with 10 a person's living will to transfer the person to a physician who will comply; providing an 11 12 effective date. 13 Be It Enacted by the Legislature of the State of Florida: 14 15 Section 1. Section 322.0812, Florida Statutes, is 16 17 created to read: 18 322.0812 Additional fee imposed for persons participating in health care advance directive and blood-type 19 registry.--2.0 21 (1) Persons submitting initial application forms for participation in the health care advance directive and 22 23 blood-type registry created under s. 765.3062 shall be assessed a fee of \$10. 2.4 (2) The fee provided for in subsection (1) shall be 25 26 used by the Agency for Health Care Administration to establish 27 and maintain the health care advance directive and blood-type 2.8 registry. Funds received by the agency from such fees shall be 29 used to: 30

1	(a) Obtain equipment and software to expand or improve
2	the database for the registry and the organ donor program
3	established under part V of chapter 765.
4	(b) Employ persons necessary to ensure the proper
5	operation of the equipment used to maintain the registry.
6	(c) Fund health care advance directive education
7	efforts as authorized in ss. 765.3065 and 765.3066.
8	Section 2. Subsection (8) is added to section 322.051,
9	Florida Statutes, to read:
10	322.051 Identification Cards
11	(8) A fee of \$10 shall be assessed for any person
12	choosing to submit an initial application to participate in
13	the health care advance directive and blood-type registry
14	pursuant to s. 320.08049.
15	Section 3. Paragraph (f) is added to subsection (6) of
16	section 322.08, Florida Statutes, to read:
17	322.08 Application for license
18	(6) The application form for a driver's license or
19	duplicate thereof shall include language permitting the
20	following:
21	(f) Assessment of a fee of \$10 for any person choosing
22	to submit an initial application to participate in the health
23	care advance directive and blood-type registry pursuant to s.
24	320.08049.
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26	A statement providing an explanation of the purpose of the
27	trust funds shall also be included.
28	Section 4. Section 765.3061, Florida Statutes, is
29	created to read:
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765.3061 Health care advance directives and blood-type indication as part of driver's license or identification card process.--

(1) The Agency for Health Care Administration and the Department of Highway Safety and Motor Vehicles shall develop and implement a program encouraging and allowing a person, at the person's request, to voluntarily make a health care advance directive, as well as to voluntarily provide his or her blood type, both of which may be noted on the person's driver's license or identification card, upon issuance or renewal of these documents.

(2) The health care advance directive form and blood-type confirmation form, both of which are to be distributed by the department, shall be developed by the agency in consultation with the department. The health care advance directive form shall include the living will specified in s. 765.303, which must be executed in accordance with s. 765.302. The blood-type confirmation form must be signed by a person's physician or an agent of a blood bank or laboratory that has documentation of the person's blood type. The health care advance directive and blood-type confirmation forms may require additional information and may include additional material as deemed necessary by the agency and the department. An individual completing a health care advance directive form or blood-type confirmation form shall have included on his or her driver's license or identification card a notation on the front of the card clearly indicating the individual's intent concerning life-prolonging procedures and the individual's blood type. A notation on an individual's driver's license or identification card that the individual has a health care advance directive or that provides the individual's blood type

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1	is sufficient to satisfy all requirements concerning
	life-prolonging procedures and necessary blood-type
3	information for health care providers.

- (3)(a) All forms relating to the execution, amendment, or revocation of a health care advance directive or blood-type confirmation for the purpose of participating in the registry shall be made available to the public at all offices of the Division of Driver Licenses, as well as electronically on the Internet.
- (b) The forms relating to the execution of a health care advance directive or confirmation of blood type, for purposes of participating in the registry, shall:
- 1. Require an express declaration that the principal has read the form and understands its contents.
- 2. Require an express waiver of any privacy rights granted under state or federal law.
- 3. Require an express waiver of liability for health care providers who rely upon the information contained on the principal's driver's license, identification card, or the registry.
- 4. Require an acknowledgment from the principal that it is the responsibility of the principal to submit an amendment form or revocation form to the Division of Driver Licenses if it is the principal's desire to change or remove any document recorded in the registry.
- 5. Require acknowledgment from the principal that a reasonable delay will occur in the recording of a newly executed form in the registry by the agency and department, regardless of whether it is a health care advance directive or blood-type confirmation form, or any amendment or revocation thereof, and that health care providers will rely on the

1	information in the registry available at the time such
2	information is obtained by a health care provider.
3	(4) The agency shall provide the necessary supplies
4	and forms through funds appropriated from general revenue, any
5	authorized fees, or contributions from interested, voluntary,
6	nonprofit organizations. The department shall provide the
7	necessary recordkeeping system through funds appropriated from
8	general revenue.
9	Section 5. Section 765.3062, Florida Statutes, is
10	created to read:
11	765.3062 Health care advance directive and blood-type
12	registry; use of forms and delivery of documents
13	(1) There is established a health care advance
14	directive and blood-type registry. This registry shall be an
15	expansion of the organ and tissue donor registry that is
16	created, administered, and maintained in accordance with part
17	V of this chapter.
18	(2) The forms to be recorded in the registry shall be
19	collected by the Department of Highway Safety and Motor
20	Vehicles and provided to the Agency for Health Care
21	Administration in a manner similar to the forms and
22	information collected for anatomical gifts as provided in part
23	V of this chapter. The registry shall record, through
24	electronic means, health care advance directive and blood-type
25	documents submitted through the driver's license
26	identification program or obtained from other sources. The
27	registry shall be maintained in a manner that will allow,
28	through electronic and telephonic methods, immediate access to
29	health care advance directive and blood-type documents 24
30	hours a day, 7 days a week. Hospitals and other parties
31	identified by rule of the agency shall be allowed access,

1	through coded means, to the information stored in the
2	registry.
3	(3) If a health care advance directive is made through
4	the program established under s. 765.3061, the completed
5	health care advance directive shall be delivered to the
6	department and processed in the manner specified in subsection
7	(4). Delivery of the health care advance directive is not
8	necessary for the validity of the health care advance
9	directive. If a person amends or revokes a health care advance
10	directive in accordance with s. 765.3063, the records of the
11	department shall be updated to reflect such status of the
12	health care advance directive.
13	(4) If a health care advance directive is made by an
14	individual, other than through the program established by the
15	agency and the department, the document may be recorded in the
16	registry administered by the agency and noted on an
17	individual's driver's license, if the individual follows the
18	procedure and the health care advance directive meets the
19	criteria set forth in this chapter and in any rules of the
20	department and the agency.
21	(5) The agency and the department shall develop and
22	implement a living will registry as an expansion and
23	improvement of the organ donor database maintained by the
24	agency.
25	Section 6. Section 765.3063, Florida Statutes, is
26	created to read:
27	765.3063 Amendment to or revocation of a health care
28	advance directive or removal of blood type from the registry;
29	responsibility of the participant; last documents submitted
30	and recorded are controlling documents
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1	(1) A person may amend or revoke a health care advance
2	directive by the execution and delivery of the appropriate
3	form, signed and properly executed, to the Department of
4	Highway Safety and Motor Vehicles to be transmitted to the
5	Agency for Health Care Administration for recording in or
6	removal from the registry.
7	(2) If a person participates in the health care
8	advance directive and blood-type registry, it is the
9	responsibility of the principal to complete and submit the
10	appropriate forms needed to amend or revoke the health care
11	advance directive or blood-type information. If a person
12	chooses to participate in the registry, the most recently
13	submitted forms recorded in the registry shall be considered
14	the controlling documents of the participant in any dispute or
15	decision by a health care provider.
16	(3) A person may remove the record of his or her blood
17	type from the registry by signing a form provided by the
18	department, as developed in conjunction with the agency, that
19	is signed in the presence of an employee of the department.
20	(4) Nothing in this section shall affect a principal's
21	right to amend or revoke a health care advance directive or
22	designation of a surrogate as authorized under s. 765.104 if
23	the principal is not participating in the agency's health care
24	advance directive and blood-type registry.
25	Section 7. Section 765.3064, Florida Statutes, is
26	created to read:
27	765.3064 Immunity from liability
28	(1) Notwithstanding the express waiver of liability
29	signed by the person who chooses to participate in the health
30	care advance directive and blood-type registry, a health care

31 <u>facility or a health care provider, or any other person acting</u>

1	under the direction of a health care facility or health care
2	provider, carrying out a health care decision made in
3	accordance with a properly recorded health care advance
4	directive or blood-type confirmation transmitted by the
5	Department of Highway Safety and Motor Vehicles, is not
6	subject to criminal prosecution or civil liability and will
7	not be deemed to have engaged in unprofessional conduct.
8	(2) The Agency for Health Care Administration and the
9	Department of Highway Safety and Motor Vehicles and any
10	employees acting within the scope of their employment are
11	immune from criminal prosecution and civil liability for any
12	acts or forms recorded in compliance with the provisions of
13	this chapter.
14	Section 8. Section 765.3065, Florida Statutes, is
15	created to read:
16	765.3065 Education program relating to health care
17	advance directives and blood-type registries The Agency for
18	Health Care Administration, subject to the concurrence of the
19	Department of Highway Safety and Motor Vehicles, shall develop
20	a continuing education program to educate and inform health
21	care professionals, including emergency medical personnel, law
22	enforcement agencies and officers, state and local government
23	employees, and the public regarding the laws of this state
24	relating to the health care advance directives and the health
25	care advance directive and blood-type registry as described in
26	this chapter.
27	Section 9. Section 765.3066, Florida Statutes, is
28	created to read:
29	765.3066 Health care advance directives education
30	panel The Legislature recognizes that every competent adult
31	has the fundamental right of self-determination regarding

1	decisions pertaining to his or her health. This includes the
2	right to choose or refuse medical treatment. A panel of three
3	members appointed by the secretary of the Department of
4	Elderly Affairs, the secretary of the Agency for Health Care
5	Administration, and the secretary of the Department of Health
6	shall jointly create a campaign on end-of-life care for
7	purposes of educating the public. This campaign shall include
8	culturally sensitive programs to improve understanding of
9	end-of-life issues. Existing community resources, when
10	available, shall be used to support the program, and
11	volunteers and health care professionals may assist in the
12	program to the maximum extent possible. The program aimed at
13	educating health care professionals may be implemented by
14	contract with one or more medical schools located in the
	state.
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15 16	Section 10. <u>Effective upon this act becoming a law,</u>
16	Section 10. <u>Effective upon this act becoming a law</u> ,
16 17	Section 10. <u>Effective upon this act becoming a law,</u> the Agency for Health Care Administration shall conduct a
16 17 18	Section 10. <u>Effective upon this act becoming a law,</u> the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive
16 17 18	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and
16 17 18 19	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives
16 17 18 19 20	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives and the President of the Senate by January 1, 2005. The study
16 17 18 19 20 21	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives and the President of the Senate by January 1, 2005. The study shall, at a minimum, examine and make recommendations
116 117 118 119 220 221 222 223	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives and the President of the Senate by January 1, 2005. The study shall, at a minimum, examine and make recommendations concerning the following:
116 117 118 119 220 221 222 223	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives and the President of the Senate by January 1, 2005. The study shall, at a minimum, examine and make recommendations concerning the following:  (1) The nonrecurring capital outlay and recurring
16 17 18 19 20 21 22 23 24 25	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives and the President of the Senate by January 1, 2005. The study shall, at a minimum, examine and make recommendations concerning the following:  (1) The nonrecurring capital outlay and recurring operational funding necessary to establish and maintain the
16 17 18 19 20 21 22 23 24 25	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives and the President of the Senate by January 1, 2005. The study shall, at a minimum, examine and make recommendations concerning the following:  (1) The nonrecurring capital outlay and recurring operational funding necessary to establish and maintain the health care advance directive and blood-type registry.
16 17 118 119 220 221 222 223 224 225 226 227	Section 10. Effective upon this act becoming a law, the Agency for Health Care Administration shall conduct a study on how to implement the health care advance directive and blood-type registry and report its findings and recommendations to the Speaker of the House of Representatives and the President of the Senate by January 1, 2005. The study shall, at a minimum, examine and make recommendations concerning the following:  (1) The nonrecurring capital outlay and recurring operational funding necessary to establish and maintain the health care advance directive and blood-type registry.  (2) The efficiency and cost-effectiveness of databases

1	(3) The reasonable timeframes necessary to record
2	forms and other information in the registry and make such
3	information available to health care facilities and
4	appropriate professionals.
5	(4) The types of disclosures and disclaimers necessary
6	to be included in the forms used for the health care advance
7	directive and blood-type registry.
8	(5) The projected number of persons who may
9	participate in the health care advance directive and
10	blood-type registry and the sufficiency of the fees assessed
11	to fund the registry and health care advance directive
12	education efforts.
13	(6) The most effective and cost-efficient means to
14	implement the educational requirements in sections 765.3065
15	and 765.3066, Florida Statutes.
16	Section 11. Paragraph (1) of subsection (3) of section
17	395.1041, Florida Statutes, is amended to read:
18	395.1041 Access to emergency services and care
19	(3) EMERGENCY SERVICES; DISCRIMINATION; LIABILITY OF
20	FACILITY OR HEALTH CARE PERSONNEL
21	(1) Hospital personnel $\underline{\text{must}}$ $\underline{\text{may}}$ withhold or withdraw
22	cardiopulmonary resuscitation if presented with an order not
23	to resuscitate executed pursuant to s. 401.45. Facility staff
24	and facilities shall not be subject to criminal prosecution or
25	civil liability, nor be considered to have engaged in
26	negligent or unprofessional conduct, for withholding or
27	withdrawing cardiopulmonary resuscitation pursuant to such an
28	order. The absence of an order not to resuscitate executed

29 pursuant to s. 401.45 does not preclude a physician from
30 withholding or withdrawing cardiopulmonary resuscitation as

31 otherwise permitted by law.

Section 12. Section 395.10411, Florida Statutes, is 2 created to read: 3 395.10411 Duty of a facility to carry out the advance 4 directive of a patient .--5 (1) When a person who has a terminal condition or an 6 end-stage condition or is in a persistent vegetative state and 7 who has an advance directive is a patient in a facility licensed under this chapter which is providing health care 8 services to the person, the facility must carry out the 9 advance directive or must transfer the patient pursuant to s. 10 765.1105 to a facility that will carry out the advance 11 12 directive. The cost of transferring a patient for the purpose 13 of carrying out an advance directive shall be paid by the facility from which the patient is transferred, and neither 14 the patient nor the receiving facility is responsible for any 15 part of such cost. A facility that fails to carry out a 16 patient's advance directive will not receive payment of any 18 state funds for life-prolonging treatment provided to the patient. 19 (2) When a person who has a terminal condition or an 2.0 21 end-stage condition or is in a persistent vegetative state and 2.2 who has an order not to resuscitate is a patient in a facility 23 licensed under this chapter which is providing health care services to the person, the facility must carry out the order 2.4 not to resuscitate. A facility that fails to carry out a 2.5 patient's order not to resuscitate will not receive payment of 26 2.7 any state funds for life-prolonging treatment provided to the 2.8 patient. (3) When there is a plan to discuss termination of 29 life support for a person who has a living will and is an 30 organ donor, the health care facility must notify the 31

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federally designated organ procurement organization. This subsection does not supersede s. 382.009.

Section 13. Section 765.1105, Florida Statutes, is amended to read:

765.1105 Transfer of a patient.--

- (1) A health care provider or facility that refuses to comply with a patient's advance directive, or the treatment decision of his or her surrogate, <u>must shall make reasonable</u> efforts to transfer the patient to another health care provider or facility that will comply with the directive or treatment decision. This chapter does not require a health care provider or facility to commit any act which is contrary to the provider's or facility's moral or ethical beliefs, if the patient:
  - (a) Is not in an emergency condition; and
- (b) Has received written information upon admission informing the patient of the policies of the health care provider or facility regarding such moral or ethical beliefs.
- (2) A health care provider or facility that is unwilling to carry out the wishes of the patient or the treatment decision of his or her surrogate because of moral or ethical beliefs must, within 48 hours after a determination by the attending physician that the patient's condition is such that the advance directive applies, 7 days either:
- (a) Transfer the patient to another health care provider or facility. The health care provider or facility shall pay the costs for transporting the patient to another health care provider or facility; or
- (b) If the patient has not been transferred, carry out the wishes of the patient or the patient's surrogate, unless the provisions of s. 765.105 apply.

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Section 14. Section 765.1021, Florida Statutes, is created to read:

765.1021 Advance directive as part of a patient's medical record. --To encourage individuals to complete an advance directive and to inform individuals about options for care available to them at the end of life, the Legislature encourages primary physicians and patients to discuss advance directives and end-of-life care in a physician's office setting on a nonemergency basis. If a patient completes an advance directive and gives a copy of it to a physician, the patient's advance directive must become part of the patient's medical record.

Section 15. Subsection (1) of section 765.304, Florida Statutes, is amended to read:

765.304 Procedure for living will.--

(1) If a person has made a living will expressing his or her desires concerning life-prolonging procedures, but has not designated a surrogate to execute his or her wishes concerning life-prolonging procedures or designated a surrogate under part II, the attending physician must may proceed as directed by the principal in the living will or must transfer him or her to a physician who will comply with the living will. In the event of a dispute or disagreement concerning the attending physician's decision to withhold or withdraw life-prolonging procedures, the attending physician shall not withhold or withdraw life-prolonging procedures pending review under s. 765.105. If a review of a disputed decision is not sought within 7 days following the attending physician's decision to withhold or withdraw life-prolonging procedures, the attending physician must may proceed in accordance with the principal's instructions.

1	Section 16. Except as otherwise expressly provided in
2	this act, and except for this section, which shall take effect
3	upon becoming a law, this act shall take effect September 1,
4	2005.
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6	STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
7	COMMITTEE SUBSTITUTE FOR Senate Bill 2902
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9	The committee substitute differs from SB 2902 in the following ways
10	Except as otherwise provided in the bill, the bill will take effect September 1, 2005. Thus, the Agency for Health Care
11	Administration will conduct a study of ways to implement the registry before the registry is created.
12	Hospitals, ambulatory surgical centers and mobile surgical
13	facilities are required to honor an advance directive or order not to resuscitate or to transfer a patient to a facility where the advance directive or order will be carried out.
14	A health care provider that refuses to carry out an advance
15 16	directive based on moral or ethical beliefs must, within 48 hours, transfer the patient to a facility where the directive or order will be carried out.
17	Primary physicians are encouraged to discuss advance
18	directives with patients on a nonemergency basis and to make an advance directive a part of a patient's medical record.
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