

SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: Health Care Committee

BILL: SB 1400

INTRODUCER: Senator Smith

SUBJECT: Psychotherapist-patient Privilege

DATE: February 3, 2006

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Munroe	Wilson	HE	Favorable
2.	_____	_____	JU	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

I. Summary:

The bill revises the definition of “psychotherapist” to include, for purposes of the psychotherapist-patient privilege, an advanced registered nurse practitioner, whose primary scope of practice is the diagnosis or treatment of mental or emotional conditions, including chemical abuse. The privilege would extend only to actions by the advanced registered nurse practitioner that are performed in accordance with the Nurse Practice Act.

This bill amends section 90.503, Florida Statutes.

II. Present Situation:

Evidence

Chapter 90, F.S., specifies the “Florida Evidence Code.” Section 90.501, F.S., provides that except as otherwise provided by this chapter, any other statute, or the Constitution of the United States or of the State of Florida, no person in a legal proceeding has a privilege to: refuse to be a witness; refuse to disclose any matter; refuse to produce any object or writing; or prevent another from being a witness, from disclosing any matter, or from producing any object or writing. Section 90.507, F.S., provides that a person who has a privilege against disclosure of a confidential matter or communication waives the privilege if the person, or the person’s predecessor while holder of the privilege, voluntarily discloses or makes the communication when he or she does not have a reasonable expectation of privacy, or consents to disclosure of any significant part of the matter or communication. If such disclosure itself is a privileged communication, then s. 90.507, F.S., does not apply.

The Florida Evidence Code recognizes the lawyer-client privilege, the psychotherapist-patient privilege, the sexual assault counselor-victim privilege, the domestic violence advocate-victim privilege, the husband-wife privilege, the clergy privilege, the accountant-client privilege, the journalist's privilege, and the trade secret privilege.¹ The psychotherapist-patient privilege provides that:

- A patient has a privilege to refuse to disclose, and to prevent any other person from disclosing, confidential communications or records made for the purpose of diagnosis or treatment of the patient's mental or emotional condition, including alcoholism and other drug addiction, between the patient and the psychotherapist, or persons who are participating in the diagnosis or treatment under the direction of the psychotherapist.²

This privilege includes any diagnosis made, and advice given, by the psychotherapist in the course of that relationship.³ The term "psychotherapist," as used under the privilege, includes:

- Any person authorized to practice medicine in any state or nation, or reasonably believed by the patient so to be, who is engaged in the diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction;
- A person licensed or certified as a psychologist, clinical social worker, marriage and family therapist, or mental health counselor under Florida law, who is engaged primarily in the diagnosis or treatment of a mental or emotional condition, including alcoholism or other drug addiction; and
- Treatment personnel of Florida-licensed hospitals, mental health facilities, and substance abuse treatment centers, who are engaged primarily in the diagnosis or treatment of a mental condition, including alcoholism or other drug addiction.

The psychotherapist-patient privilege may be asserted by the patient or the patient's attorney on behalf of the patient, by a guardian or conservator of the patient, or by the personal representative of the estate of a deceased patient.⁴ It may also be asserted by the psychotherapist, but only on behalf of the patient, and such assertion of the privilege by the psychotherapist raises a rebuttable presumption that it is made on the patient's behalf.⁵

Advanced Registered Nurse Practitioners

Advanced registered nurse practitioners perform all duties of a registered nurse and advanced level nursing in accordance with established protocols, including managing selected medical problems, monitoring and altering drug therapies, initiating appropriate therapies for certain conditions, performing physical examinations, ordering and evaluating diagnostic tests, ordering physical and occupational therapy, and initiating and monitoring therapies for certain uncomplicated acute illnesses.

¹ See ss. 90.5015, 90.502, 90.503, 90.5035, 90.5036, 90.504, 90.505, 90.5055, and 90.506, F.S.

² See s. 90.503(2), F.S.

³ See s. 90.503(2), F.S.

⁴ See s. 90.503(3), F.S.

⁵ Id.

Part I of chapter 464, F.S.,⁶ requires the Board of Nursing to adopt rules authorizing advanced registered nurse practitioners to perform acts of medical diagnosis and treatment, prescription, and operation, which are identified and approved by a joint committee. Advanced registered nurse practitioners may perform medical acts under the general supervision of a medical physician, osteopathic physician, or dentist within the framework of standing protocols, which identify the medical acts to be performed, and the conditions for their performance. The Board of Nursing and the Board of Medicine have filed identical administrative rules setting forth standards for the protocols⁷, which establish obligations on medical physicians, osteopathic physicians, and dentists who enter into protocol relationships with advanced registered nurse practitioners. The Board of Osteopathic Medicine and the Board of Dentistry, which have regulatory jurisdiction over osteopathic physicians and dentists, respectively, are not required to adopt administrative rules regarding the standards for advanced registered nurse practitioner protocols. Although advanced registered nurse practitioners may prescribe medications in accordance with a protocol, they cannot prescribe controlled substances.

III. Effect of Proposed Changes:

The bill amends s. 90.503, F.S., to revise the definition of “psychotherapist” to include, for purposes of the psychotherapist-patient privilege, a Florida-licensed advanced registered nurse practitioner whose primary scope of practice is the diagnosis or treatment of mental or emotional conditions, including chemical abuse. The privilege would extend only to actions by the advanced registered nurse practitioner that are performed in accordance with the Nurse Practice Act.

The bill would take effect July 1, 2006.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Art. VII, s. 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Art. I, s. 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on the trust fund restrictions under the requirements of Art. III, Subsection 19(f) of the Florida Constitution.

⁶ Also commonly called the Nurse Practice Act.

⁷ See Rules 64B-4.010 and 64B-35.002, Florida Administrative Code.

V. Economic Impact and Fiscal Note:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

None.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

VIII. Summary of Amendments:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.
