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2 An act relating to the physician workforce;
3 creating s. 381.4018, F.S.; providing
4 legislative intent; requiring that the
5 Department of Health serve as a coordinating
6 and planning body to assess the state's future
7 workforce needs for physicians; requiring the
8 department to develop strategies for addressing
9 the current and projected workforce needs;
10 specifying additional functions of the
11 department; requiring each allopathic and
12 osteopathic physician in the state to complete
13 a survey concerning the physician's practice as
14 a condition of license renewal; specifying the
15 information to be furnished to the department
16 in the physician survey; providing for a
17 nondisciplinary citation to be issued to a
18 physician or osteopathic physician who fails to
19 complete the required survey; requiring the
20 department to provide notice of the applicable
21 penalty; providing rulemaking authority;
22 requiring the department to annually analyze
23 and evaluate the results of the survey;
24 requiring the department to report its findings
25 to the Governor and the Legislature; providing
26 legislative intent concerning resources for
27 implementation of the act; providing an
28 effective date.

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30 Be It Enacted by the Legislature of the State of Florida:
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1 Section 1. Section 381.4018, Florida Statutes, is
2 created to read:

3 381.4018 Physician workforce assessment and
4 development.--

5 (1) LEGISLATIVE INTENT.--The Legislature recognizes
6 that physician workforce planning is an essential component of
7 ensuring that there is an adequate and appropriate supply of
8 well-trained physicians to meet this state's future health
9 care service needs as the general population and elderly
10 population of the state increase. The Legislature finds that
11 items to consider relative to assessing the physician
12 workforce may include physician practice status; specialty
13 mix; geographic distribution; demographic information,
14 including, but not limited to, age, gender, race, and cultural
15 considerations; and needs of current or projected medically
16 underserved areas in the state. Long-term strategic planning
17 is essential as the period from the time a medical student
18 enters medical school to completion of graduate medical
19 education may range from 7 to 10 years or longer. The
20 Legislature recognizes that strategies to provide for a
21 well-trained supply of physicians must include ensuring the
22 availability and capacity of quality graduate medical schools
23 in this state, as well as using new or existing state and
24 federal programs providing incentives for physicians to
25 practice in needed specialties and in underserved areas in a
26 manner that addresses projected needs for physician manpower.

27 (2) PURPOSE.--The Department of Health shall serve as
28 a coordinating and strategic planning body to actively assess
29 the state's current and future physician workforce needs and
30 work with multiple stakeholders to develop strategies and

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1 alternatives to address current and projected physician
2 workforce needs.

3 (3) GENERAL FUNCTIONS.--The department shall maximize
4 the use of existing programs under the jurisdiction of the
5 department and other state agencies and coordinate
6 governmental and nongovernmental stakeholders and resources in
7 order to develop a state strategic plan and assess the
8 implementation of such strategic plan. In developing the state
9 strategic plan, the department shall:

10 (a) Monitor, evaluate, and report on the supply and
11 distribution of physicians licensed under chapter 458 or
12 chapter 459. The department shall maintain a database to serve
13 as a statewide source of data concerning the physician
14 workforce.

15 (b) Develop a model and quantify, on an ongoing basis,
16 the adequacy of the state's current and future physician
17 workforce as reliable data becomes available. Such model must
18 take into account demographics, physician practice status,
19 place of education and training, generational changes,
20 population growth, economic indicators, and issues concerning
21 the "pipeline" into medical education.

22 (c) Develop and recommend strategies to determine
23 whether the number of qualified medical school applicants who
24 might become competent, practicing physicians in this state
25 will be sufficient to meet the capacity of the state's medical
26 schools. If appropriate, the department shall, working with
27 representatives of appropriate governmental and
28 nongovernmental entities, develop strategies and
29 recommendations and identify best-practice programs that
30 introduce health care as a profession and strengthen skills
31 needed for medical school admission for elementary, middle,

1 and high school students, and improve premedical education at
2 the precollege and college level in order to increase this
3 state's potential pool of medical students.

4 (d) Develop strategies to ensure that the number of
5 graduates from the state's public and private allopathic and
6 osteopathic medical schools are adequate to meet physician
7 workforce needs, based on the analysis of the physician
8 workforce data, so as to provide a high-quality medical
9 education to students in a manner that recognizes the
10 uniqueness of each new and existing medical school in this
11 state.

12 (e) Pursue strategies and policies to create, expand,
13 and maintain graduate medical education positions in the state
14 based on the analysis of the physician workforce data. Such
15 strategies and policies must take into account the effect of
16 federal funding limitations on the expansion and creation of
17 positions in graduate medical education. The department shall
18 develop options to address such federal funding limitations.
19 The department shall consider options to provide direct state
20 funding for graduate medical education positions in a manner
21 that addresses requirements and needs relative to
22 accreditation of graduate medical education programs. The
23 department shall consider funding residency positions as a
24 means of addressing needed physician specialty areas, rural
25 areas having a shortage of physicians, and areas of ongoing
26 critical need, and as a means of addressing the state's
27 physician workforce needs based on an ongoing analysis of
28 physician workforce data.

29 (f) Develop strategies to maximize federal and state
30 programs that provide for the use of incentives to attract
31 physicians to this state or retain physicians within the

1 state. Such strategies should explore and maximize
2 federal-state partnerships that provide incentives for
3 physicians to practice in federally designated shortage areas.
4 Strategies shall also consider the use of state programs, such
5 as the Florida Health Service Corps established pursuant to s.
6 381.0302 and the Medical Education Reimbursement and Loan
7 Repayment Program pursuant to s. 1009.65, which provide for
8 education loan repayment or loan forgiveness and provide
9 monetary incentives for physicians to relocate to underserved
10 areas of the state.

11 (g) Coordinate and enhance activities relative to
12 physician workforce needs, undergraduate medical education,
13 and graduate medical education provided by the Division of
14 Medical Quality Assurance, the Community Hospital Education
15 Program and the Graduate Medical Education Committee
16 established pursuant to s. 381.0403, area health education
17 center networks established pursuant to s. 381.0402, and other
18 offices and programs within the Department of Health as
19 designated by the secretary.

20 (h) Work in conjunction with and act as a coordinating
21 body for governmental and nongovernmental stakeholders to
22 address matters relating to the state's physician workforce
23 assessment and development for the purpose of ensuring an
24 adequate supply of well-trained physicians to meet the state's
25 future needs. Such governmental stakeholders shall include,
26 but need not be limited to, the Secretary of Health or his or
27 her designee, the Commissioner of Education or his or her
28 designee, the Secretary of Health Care Administration or his
29 or her designee, and the Chancellor of the State University
30 System or his or her designee from the Board of Governors of
31 the State University System, and, at the discretion of the

1 department, other representatives of state and local agencies
2 that are involved in assessing, educating, or training the
3 state's current or future physicians. Other stakeholders shall
4 include, but need not be limited to, organizations
5 representing the state's public and private allopathic and
6 osteopathic medical schools; organizations representing
7 hospitals and other institutions providing health care,
8 particularly those that have an interest in providing
9 accredited medical education and graduate medical education to
10 medical students and medical residents; organizations
11 representing allopathic and osteopathic practicing physicians;
12 and, at the discretion of the department, representatives of
13 other organizations or entities involved in assessing,
14 educating, or training the state's current or future
15 physicians.

16 (i) Serve as a liaison with other states and federal
17 agencies and programs in order to enhance resources available
18 to the state's physician workforce and medical education
19 continuum.

20 (j) Act as a clearinghouse for collecting and
21 disseminating information concerning the physician workforce
22 and medical education continuum in this state.

23 Section 2. (1) Each person who applies for licensure
24 renewal as a physician under chapter 458 or chapter 459,
25 Florida Statutes, must, in conjunction with the renewal of
26 such license under procedures adopted by the Department of
27 Health and in addition to any other information that may be
28 required from the applicant, furnish the following to the
29 Department of Health in a physician survey:

30 (a) Licensee information, including, but not limited
31 to:

1 1. Frequency and geographic location of practice
2 within the state.
3 2. Practice setting.
4 3. Percentage of time spent in direct-patient care.
5 4. Anticipated change to license or practice status.
6 5. Areas of specialty or certification.
7 (b) Availability and trends relating to critically
8 needed services, including, but not limited to:
9 1. Obstetric care and services, including incidents of
10 deliveries.
11 2. Radiological services, particularly performance of
12 mammograms and breast-imaging services.
13 3. Physician services for hospital emergency
14 departments and trauma centers, including on-call hours.
15 4. Other critically-needed specialty areas, as
16 determined by the department.
17 (2) Such information furnished must include a
18 statement submitted by the physician that the information
19 provided is true and accurate to the best of his or her
20 knowledge and the submission does not contain any knowingly
21 false information.
22 (3)(a) The Department of Health shall issue a
23 nondisciplinary citation to any physician licensed under
24 chapter 458 or chapter 459, Florida Statutes, who fails to
25 complete the survey within 90 days after the renewal of his or
26 her license to practice as a physician.
27 (b) The citation must notify a physician who fails to
28 complete the survey required by this section that his or her
29 license will not be renewed for any subsequent license renewal
30 unless the physician completes the survey.
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1 (c) In conjunction with issuing the license-renewal
2 notice required by s. 456.038, Florida Statutes, the
3 Department of Health shall notify each physician licensed
4 under 458 or chapter 459, Florida Statutes, who has failed to
5 complete the survey at the licensee's last known address of
6 record with the Department of Health of the requirement that
7 the physician survey be completed prior to the subsequent
8 license renewal. At any subsequent license renewal, the
9 Department of Health may not renew the license of any
10 physician licensed under chapter 458 or chapter 459, Florida
11 Statutes, until the survey required under this section is
12 completed by the licensee.

13 (4) The Department of Health shall adopt rules
14 pursuant to ss. 120.536(1) and 120.54, Florida Statutes,
15 necessary to implement this section.

16 Section 3. (1) Each year, the Department of Health
17 shall analyze the results of the physician survey required by
18 section 2 of this act and determine by geographic area and
19 specialty the number of physicians who:

20 (a) Perform deliveries of children in Florida.

21 (b) Read mammograms and perform breast-imaging-guided
22 procedures in Florida.

23 (c) Perform emergency care on a on-call basis for a
24 hospital emergency department.

25 (d) Plan to reduce or increase emergency on-call hours
26 in a hospital emergency department.

27 (e) Plan to relocate their allopathic or osteopathic
28 practice outside the state.

29 (2) The Department of Health must report its findings
30 to the Governor, the President of Senate, and the Speaker of
31 the House of Representatives by November 1 each year.

1 Section 4. It is the intent of the Legislature that
2 the Department of Health implement the provisions of this act
3 within existing resources.

4 Section 5. This act shall take effect upon becoming a
5 law.

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