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By the Committee on Health Regulation; and Senator Altman

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A bill to be entitled

An act relating to medical quality assurance; amending s. 395.0193, F.S.; requiring certain disciplinary actions to be reported to the Division of Medical Quality Assurance of the Department of Health rather than the Division of Health Quality Assurance of the Agency for Health Care Administration; amending s. 395.0197, F.S.; requiring the agency to forward copies of adverse incident reports to the department; amending s. 395.3025, F.S.; authorizing disclosure of certain patient records to the agency and the department; requiring the administrator or records custodian of a facility to certify which records have been provided to the department; requiring the facility to charge a fee for copies of the records provided to the department; amending s. 400.145, F.S.; requiring the administrator or records custodian of a facility to certify which records have been provided to the department; amending s. 400.147, F.S.; authorizing the agency, department, or appropriate regulatory board to receive notification of adverse incidents for purposes of certain disciplinary proceedings; requiring the department to review certain adverse incident reports; requiring the agency to forward adverse incident reports to the department; amending s. 456.001, F.S.; providing a definition; amending s. 456.011, F.S.; providing additional requirements for the constitution of a quorum for meetings of certain committees and boards operating

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under ch. 456, F.S.; amending s. 456.013, F.S.; requiring an application fee for licensure examinations; providing for extension of a temporary license; revising licensure requirements; authorizing the board or department to adopt rules requiring the display of a professional license; amending s. 456.025, F.S.; authorizing the imposition of certain licensure fees; authorizing the imposition of reinspection fees; amending s. 456.036, F.S.; prohibiting the department from renewing the license of licensees owing outstanding fees, costs, or fines; providing for notice; providing for renewal of a license when requirements are met; amending s. 456.037, F.S.; authorizing the board or department to require by rule the display of a business establishment license; amending s. 456.063, F.S.; authorizing the board or department to adopt rules relating to the reporting of sexual misconduct by licensed health care practitioners; amending s. 456.072, F.S.; providing that failure to report disciplinary actions taken against a licensee's license to practice is an additional ground under which the practitioner is subject to discipline by the department or the board having jurisdiction over the practitioner; providing penalties; amending ss. 381.00593, 381.0303, 456.074, 456.41, 468.703, 627.6474, 641.315, 766.1016, 766.1116, 768.13, and 768.28, F.S.; conforming cross-references; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

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Section 1. Subsection (4) of section 395.0193, Florida Statutes, is amended to read:

395.0193 Licensed facilities; peer review; disciplinary powers; agency or partnership with physicians.—

(4) Pursuant to ss. 458.337 and 459.016, any disciplinary actions taken under subsection (3) shall be reported in writing to the Division of Medical Health Quality Assurance of the Department of Health agency within 30 working days after its initial occurrence, regardless of the pendency of appeals to the governing board of the hospital. The notification shall identify the disciplined practitioner, the action taken, and the reason for such action. All final disciplinary actions taken under subsection (3), if different from those which were reported to the division agency within 30 days after the initial occurrence, shall be reported within 10 working days to the Division of Medical Health Quality Assurance of the department agency in writing and shall specify the disciplinary action taken and the specific grounds therefor. The division shall review each report and determine whether it potentially involved conduct by the licensee that is subject to disciplinary action, in which case s. 456.073 shall apply. The reports are not subject to inspection under s. 119.07(1) even if the division's investigation results in a finding of probable cause.

Section 2. Subsection (7) of section 395.0197, Florida Statutes, is amended to read:

395.0197 Internal risk management program.-

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(7) Any of the following adverse incidents, whether occurring in the licensed facility or arising from health care prior to admission in the licensed facility, shall be reported by the facility to the agency within 15 calendar days after its occurrence:

- (a) The death of a patient;
- (b) Brain or spinal damage to a patient;
- (c) The performance of a surgical procedure on the wrong patient;
 - (d) The performance of a wrong-site surgical procedure;
 - (e) The performance of a wrong surgical procedure;
- (f) The performance of a surgical procedure that is medically unnecessary or otherwise unrelated to the patient's diagnosis or medical condition;
- (g) The surgical repair of damage resulting to a patient from a planned surgical procedure, where the damage is not a recognized specific risk, as disclosed to the patient and documented through the informed-consent process; or
- (h) The performance of procedures to remove unplanned foreign objects remaining from a surgical procedure.

The agency may grant extensions to this reporting requirement for more than 15 days upon justification submitted in writing by the facility administrator to the agency. The agency may require an additional, final report. These reports shall not be available to the public pursuant to s. 119.07(1) or any other law providing access to public records, nor be discoverable or admissible in any civil or administrative action, except in disciplinary proceedings by the agency or the appropriate

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regulatory board, nor shall they be available to the public as part of the record of investigation for and prosecution in disciplinary proceedings made available to the public by the agency or the appropriate regulatory board. However, the agency or the appropriate regulatory board shall make available, upon written request by a health care professional against whom probable cause has been found, any such records which form the basis of the determination of probable cause. The agency may investigate, as it deems appropriate, any such incident and prescribe measures that must or may be taken in response to the incident. The agency shall forward a copy of each incident report received from a facility to the Division of Medical Quality Assurance within the Department of Health review each incident and determine whether it potentially involved conduct by the health care professional who is subject to disciplinary action, in which case the provisions of s. 456.073 shall apply.

Section 3. Paragraph (e) of subsection (4) of section 395.3025, Florida Statutes, is amended to read:

395.3025 Patient and personnel records; copies; examination.—

- (4) Patient records are confidential and must not be disclosed without the consent of the person to whom they pertain, but appropriate disclosure may be made without such consent to:
- (e) The agency upon subpoena issued pursuant to s. 408.15 or the department upon subpoena issued pursuant to s. 456.071, but the records obtained thereby must be used solely for the purpose of the agency, the department, and the appropriate professional board in their its investigation, prosecution, and

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appeal of disciplinary proceedings. The administrator or records custodian in a facility licensed under this chapter shall certify that true and complete copies of the records requested pursuant to a subpoena or a patient release have been provided to the department or otherwise identify those documents that have not been provided. If the department agency requests copies of the records, the facility shall charge a fee pursuant to s. 395.3025 no more than its actual copying costs, including reasonable staff time. The records must be sealed and must not be available to the public pursuant to s. 119.07(1) or any other statute providing access to records, nor may they be available to the public as part of the record of investigation for and prosecution in disciplinary proceedings made available to the public by the agency, the department, or the appropriate regulatory board. However, the department agency must make available, upon written request by a practitioner against whom probable cause has been found, any such records that form the basis of the determination of probable cause.

Section 4. Subsection (3) is added to section 400.145, Florida Statutes, to read:

400.145 Records of care and treatment of resident; copies to be furnished.—

(3) The administrator or records custodian in a facility licensed under this chapter shall certify that true and complete copies of records or documents subpoenaed pursuant to s. 456.057 or s. 456.071 or requested by a patient release have been provided to the Department of Health or otherwise identify those documents that have not been provided.

Section 5. Subsection (7) and paragraph (b) of subsection

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(8) of section 400.147, Florida Statutes, are amended to read:
400.147 Internal risk management and quality assurance
program.—

(7) The facility shall initiate an investigation and shall notify the agency within 1 business day after the risk manager or his or her designee has received a report pursuant to paragraph (1)(d). The notification must be made in writing and be provided electronically, by facsimile device or overnight mail delivery. The notification must include information regarding the identity of the affected resident, the type of adverse incident, the initiation of an investigation by the facility, and whether the events causing or resulting in the adverse incident represent a potential risk to any other resident. The notification is confidential as provided by law and is not discoverable or admissible in any civil or administrative action, except in disciplinary proceedings by the agency, the Department of Health, or the appropriate regulatory board. The agency may investigate, as it deems appropriate, any such incident and prescribe measures that must or may be taken in response to the incident. The Department of Health agency shall review each incident and determine whether it potentially involved conduct by the health care professional who is subject to disciplinary action, in which case the provisions of s. 456.073 shall apply.

(8)

(b) A copy of the adverse incident report submitted The information reported to the agency pursuant to paragraph (a) which relates to health care practitioners as defined in s. 456.001(4) shall be forwarded to the Division of Medical Quality

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Assurance within the Department of Health for review persons licensed under chapter 458, chapter 459, chapter 461, or chapter 466 shall be reviewed by the agency. The agency shall determine whether any of the incidents potentially involved conduct by a health care professional who is subject to disciplinary action, in which case the provisions of s. 456.073 shall apply.

Section 6. Subsections (1) through (7) of section 456.001, Florida Statutes, are renumbered as subsections (2) through (8), respectively, and a new subsection (1) is added to that section to read:

456.001 Definitions.—As used in this chapter, the term:

(1) "Application" means the documents required by the department to initiate the licensing process, including, but not limited to, the initial document filing and responses to requests from the department for additional data and information.

Section 7. Subsection (3) of section 456.011, Florida Statutes, is amended to read:

456.011 Boards; organization; meetings; compensation and travel expenses.—

(3) The board shall meet at least once annually and may meet as often as is necessary. Meetings shall be conducted through teleconferencing or other technological means, unless disciplinary hearings involving standard of care, sexual misconduct, fraud, impairment, or felony convictions; licensure denial hearings; or controversial rule hearings are being conducted; or unless otherwise approved in advance of the meeting by the director of the Division of Medical Quality Assurance. The chairperson or a quorum of the board shall have

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the authority to call meetings, except as provided in this subsection above relating to in-person meetings. A quorum shall be necessary for the conduct of official business by the board or any committee thereof. Unless otherwise provided by law, 51 percent or more of the appointed members of the board or any committee, when applicable, who have taken the oath of office pursuant to s. 5, Art. II of the State Constitution or s. 114.05 shall constitute a quorum. The membership of committees of the board, except as otherwise authorized pursuant to this chapter or the applicable practice act, shall be composed of currently appointed members of the board. The vote of a majority of the members of the quorum shall be necessary for any official action by the board or committee. Three consecutive unexcused absences or absences constituting 50 percent or more of the board's meetings within any 12-month period shall cause the board membership of the member in question to become void, and the position shall be considered vacant. The board, or the department when there is no board, shall, by rule, define unexcused absences.

Section 8. Subsections (3) through (12) of section 456.013, Florida Statutes, are renumbered as subsections (4) through (13), respectively, subsection (1) is amended, present subsection (2) is renumbered as subsection (3) and amended, and a new subsection (2) is added to that section, to read:

456.013 Department; general licensing provisions.-

(1) (a) Any person desiring to be licensed in a profession within the jurisdiction of the department shall apply to the department in writing to take the licensure examination. The application shall be made on a form prepared and furnished by

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the department. The application form must be available on the World Wide Web and the department may accept electronically submitted applications beginning July 1, 2001. A nonrefundable application fee established by the board, or the department when there is no board, shall be submitted with the application in an amount established by rule by the board, or the department when there is no board, to comply with s. 456.025. The application shall require the social security number of the applicant, except as provided in paragraph (b). The form shall be supplemented as needed to reflect any material change in any circumstance or condition stated in the application which takes place between the initial filing of the application and the final grant or denial of the license and which might affect the decision of the department. If an application is submitted electronically, the department may require supplemental materials, including an original signature of the applicant and verification of credentials, to be submitted in a nonelectronic format. An incomplete application shall expire 1 year after initial filing. In order to further the economic development goals of the state, and notwithstanding any law to the contrary, the department may enter into an agreement with the county tax collector for the purpose of appointing the county tax collector as the department's agent to accept applications for licenses and applications for renewals of licenses. The agreement must specify the time within which the tax collector must forward any applications and accompanying application fees to the department.

(b) If an applicant has not been issued a social security number by the Federal Government at the time of application

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because the applicant is not a citizen or resident of this country, the department may process the application using a unique personal identification number. If such an applicant is otherwise eligible for licensure, the board, or the department when there is no board, may issue to the applicant a temporary license, as established by rule of the board, or the department when there is no board to the applicant, which shall expire 90 30 days after issuance unless a social security number is obtained and submitted in writing to the department. Upon receipt of the applicant's social security number, the department shall issue a new license, which shall expire at the end of the current biennium.

- (c) The license shall be issued in the legal name of the applicant as reflected on the applicant's birth certificate or United States passport. A request to change or issue a license under any other name must be supported by either a certified copy of a marriage license, a certified copy of an order of a United States federal or state court, or the applicant's original naturalization certificate.
- (2) The board, or the department when there is no board, may adopt a rule allowing an applicant for licensure to complete the coursework requirements for licensure by successfully completing the required coursework as a student or by teaching the required coursework as an instructor or professor in an accredited institution.
- (3)(2) Before the issuance of any license, the department shall charge an initial license fee as determined by the applicable board or, if there is no board, by rule of the department. Upon receipt of the appropriate license fee, the

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department shall issue a license to any person certified by the appropriate board, or its designee, as having met the licensure requirements imposed by law or rule. The license shall consist of a wallet-size identification card and a wall card measuring 6 1/2 inches by 5 inches. The licensee shall surrender to the department the wallet-size identification card and the wall card if the licensee's license is issued in error or is revoked. The board, or the department when there is no board, may by rule require the display of a license.

Section 9. Subsection (12) is added to section 456.025, Florida Statutes, to read:

456.025 Fees; receipts; disposition.-

(12) Each board, or the department if there is no board, may charge a fee as determined by rule for the reinspection of a business establishment prior to its licensure.

Section 10. Subsections (14) and (15) of section 456.036, Florida Statutes, are renumbered as subsections (15) and (16), respectively, and a new subsection (14) is added to that section to read:

456.036 Licenses; active and inactive status; delinquency.-

(14) The department may not renew the license of a licensee, as defined in s. 456.001, who owes outstanding fees, costs, or fines to the department. The department shall notify each licensee who has failed to pay outstanding fees, costs, or fines at the licensee's last known address of record with the department when issuing the license renewal notice required by s. 456.038. The department shall renew the license of any licensee when the outstanding fees, costs, or fines are paid if all other requirements for renewal are met.

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Section 11. Subsections (4) and (5) of section 456.037, Florida Statutes, are renumbered as subsections (5) and (6), respectively, and a new subsection (4) is added to that section to read:

456.037 Business establishments; requirements for active status licenses; delinquency; discipline; applicability.—

- (4) The board, or the department if there is no board, may by rule require the display of a business establishment license.
- Section 12. Subsection (3) of section 456.063, Florida Statutes, is amended to read:
- 456.063 Sexual misconduct; disqualification for license, certificate, or registration.—
- (3) Licensed health care practitioners shall report allegations of sexual misconduct to the department, regardless of the practice setting in which the alleged sexual misconduct occurred. Each board, or the department if there is no board, may adopt rules pursuant to ss. 120.536(1) and 120.54 to implement this subsection.
- Section 13. Paragraph (ii) is added to subsection (1) of section 456.072, Florida Statutes, to read:
 - 456.072 Grounds for discipline; penalties; enforcement.
- (1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may be taken:
- (ii) Failing to report to the board, or the department if there is no board, in writing, within 30 days after an action as provided in subsection (2) has been taken against a licensee's license to practice any profession in this state or another state, territory, or jurisdiction.

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(2) When the board, or the department when there is no board, finds any person guilty of the grounds set forth in subsection (1) or of any grounds set forth in the applicable practice act, including conduct constituting a substantial violation of subsection (1) or a violation of the applicable practice act which occurred prior to obtaining a license, it may enter an order imposing one or more of the following penalties:

- (a) Refusal to certify, or to certify with restrictions, an application for a license.
 - (b) Suspension or permanent revocation of a license.
- (c) Restriction of practice or license, including, but not limited to, restricting the licensee from practicing in certain settings, restricting the licensee to work only under designated conditions or in certain settings, restricting the licensee from performing or providing designated clinical and administrative services, restricting the licensee from practicing more than a designated number of hours, or any other restriction found to be necessary for the protection of the public health, safety, and welfare.
- (d) Imposition of an administrative fine not to exceed \$10,000 for each count or separate offense. If the violation is for fraud or making a false or fraudulent representation, the board, or the department if there is no board, must impose a fine of \$10,000 per count or offense.
 - (e) Issuance of a reprimand or letter of concern.
- (f) Placement of the licensee on probation for a period of time and subject to such conditions as the board, or the department when there is no board, may specify. Those conditions may include, but are not limited to, requiring the licensee to

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undergo treatment, attend continuing education courses, submit to be reexamined, work under the supervision of another licensee, or satisfy any terms which are reasonably tailored to the violations found.

- (q) Corrective action.
- (h) Imposition of an administrative fine in accordance with s. 381.0261 for violations regarding patient rights.
- (i) Refund of fees billed and collected from the patient or a third party on behalf of the patient.
- (j) Requirement that the practitioner undergo remedial education.

In determining what action is appropriate, the board, or department when there is no board, must first consider what sanctions are necessary to protect the public or to compensate the patient. Only after those sanctions have been imposed may the disciplining authority consider and include in the order requirements designed to rehabilitate the practitioner. All costs associated with compliance with orders issued under this

Section 14. Paragraph (a) of subsection (4) of section 381.00593, Florida Statutes, is amended to read:

subsection are the obligation of the practitioner.

381.00593 Public school volunteer health care practitioner program.—

(4) (a) Notwithstanding any provision of chapter 458, chapter 459, chapter 460, chapter 461, chapter 463, part I of chapter 464, chapter 465, chapter 466, chapter 467, parts I and X of chapter 468, or chapter 486 to the contrary, any health care practitioner who participates in the program established in

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this section and thereby agrees to provide his or her services, without compensation, in a public school for at least 80 hours a year for each school year during the biennial licensure period, or, if the health care practitioner is retired, for at least 400 hours a year for each school year during the licensure period, upon providing sufficient proof from the applicable school district that the health care practitioner has completed such hours at the time of license renewal under procedures specified by the Department of Health, shall be eligible for the following:

- 1. Waiver of the biennial license renewal fee for an active license; and
- 2. Fulfillment of a maximum of 25 percent of the continuing education hours required for license renewal under s. $456.013(10)\frac{(9)}{.}$

The school district may establish a schedule for health care practitioners who participate in the program.

Section 15. Subsection (1) of section 381.0303, Florida Statutes, is amended to read:

381.0303 Special needs shelters.-

(1) PURPOSE.—The purpose of this section is to provide for the operation and closure of special needs shelters and to designate the Department of Health, through its county health departments, as the lead agency for coordination of the recruitment of health care practitioners, as defined in s. $456.001\underline{(5)}\underline{(4)}$, to staff special needs shelters in times of emergency or disaster and to provide resources to the department to carry out this responsibility. However, nothing in this

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section prohibits a county health department from entering into an agreement with a local emergency management agency to assume the lead responsibility for recruiting health care practitioners.

Section 16. Subsection (3) of section 456.074, Florida Statutes, is amended to read:

456.074 Certain health care practitioners; immediate suspension of license.—

(3) The department may issue an emergency order suspending or restricting the license of any health care practitioner as defined in s. 456.001(5)(4) who tests positive for any drug on any government or private sector preemployment or employer-ordered confirmed drug test, as defined in s. 112.0455, when the practitioner does not have a lawful prescription and legitimate medical reason for using such drug. The practitioner shall be given 48 hours from the time of notification to the practitioner of the confirmed test result to produce a lawful prescription for the drug before an emergency order is issued.

Section 17. Paragraph (b) of subsection (2) of section 456.41, Florida Statutes, is amended to read:

456.41 Complementary or alternative health care treatments.—

- (2) DEFINITIONS.—As used in this section, the term:
- (b) "Health care practitioner" means any health care practitioner as defined in s. $456.001(5)\frac{(4)}{}$.

Section 18. Subsection (2) of section 468.703, Florida Statutes, is amended to read:

468.703 Board of Athletic Training.-

(2) Five members of the board must be licensed athletic

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trainers. One member of the board must be a physician licensed under chapter 458 or chapter 459. One member of the board must be a physician licensed under chapter 460. Two members of the board shall be consumer members, each of whom must be a resident of this state who has never worked as an athletic trainer, who has no financial interest in the practice of athletic training, and who has never been a licensed health care practitioner as defined in s. 456.001(5)(4).

Section 19. Section 627.6474, Florida Statutes, is amended to read:

627.6474 Provider contracts.—A health insurer shall not require a contracted health care practitioner as defined in s. 456.001(5)(4) to accept the terms of other health care practitioner contracts with the insurer or any other insurer, or health maintenance organization, under common management and control with the insurer, including Medicare and Medicaid practitioner contracts and those authorized by s. 627.6471, s. 627.6472, or s. 641.315, except for a practitioner in a group practice as defined in s. 456.053 who must accept the terms of a contract negotiated for the practitioner by the group, as a condition of continuation or renewal of the contract. Any contract provision that violates this section is void. A violation of this section is not subject to the criminal penalty specified in s. 624.15.

Section 20. Subsection (10) of section 641.315, Florida Statutes, is amended to read:

641.315 Provider contracts.-

(10) A health maintenance organization shall not require a contracted health care practitioner as defined in s.

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456.001(5)(4) to accept the terms of other health care practitioner contracts with the health maintenance organization or any insurer, or other health maintenance organization, under common management and control with the health maintenance organization, including Medicare and Medicaid practitioner contracts and those authorized by s. 627.6471, s. 627.6472, or s. 641.315, except for a practitioner in a group practice as defined in s. 456.053 who must accept the terms of a contract negotiated for the practitioner by the group, as a condition of continuation or renewal of the contract. Any contract provision that violates this section is void. A violation of this section is not subject to the criminal penalty specified in s. 624.15.

Section 21. Paragraph (a) of subsection (1) and subsection (4) of section 766.1016, Florida Statutes, are amended to read: 766.1016 Patient safety data privilege.—

- (1) As used in this section, the term:
- (a) "Patient safety data" means reports made to patient safety organizations, including all health care data, interviews, memoranda, analyses, root cause analyses, products of quality assurance or quality improvement processes, corrective action plans, or information collected or created by a health care facility licensed under chapter 395, or a health care practitioner as defined in s. $456.001\underline{(5)}\underline{(4)}$, as a result of an occurrence related to the provision of health care services which exacerbates an existing medical condition or could result in injury, illness, or death.
- (4) The exchange of patient safety data among health care facilities licensed under chapter 395, or health care practitioners as defined in s. $456.001(5)\frac{(4)}{(4)}$, or patient safety

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organizations which does not identify any patient shall not constitute a waiver of any privilege established in this section.

Section 22. Paragraph (b) of subsection (2) of section 766.1116, Florida Statutes, is amended to read:

766.1116 Health care practitioner; waiver of license renewal fees and continuing education requirements.—

- (2) Notwithstanding any provision of chapter 458, chapter 459, chapter 460, chapter 461, part I of chapter 464, chapter 466, or chapter 467 to the contrary, any health care practitioner who participates as a health care provider under s. 766.1115 and thereby agrees with a governmental contractor to provide his or her services without compensation and as an agent of the governmental contractor to low-income recipients in accordance with s. 766.1115 for at least 80 hours a year for each year during the biennial licensure period, or, if the health care practitioner is retired, for at least 400 hours a year for each year during the licensure period, upon providing sufficient proof from the applicable governmental contractor that the health care practitioner has completed the hours at the time of license renewal under procedures specified by the Department of Health, shall be eligible for:
- (b) Fulfillment of a maximum of 25 percent of the continuing education hours required for license renewal under s. $456.013(10)\frac{(9)}{}$.

Section 23. Paragraph (c) of subsection (2) of section 768.13, Florida Statutes, is amended to read:

768.13 Good Samaritan Act; immunity from civil liability.—
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(c) 1. Any health care practitioner as defined in s. 456.001(5)(4) who is in a hospital attending to a patient of his or her practice or for business or personal reasons unrelated to direct patient care, and who voluntarily responds to provide care or treatment to a patient with whom at that time the practitioner does not have a then-existing health care patient-practitioner relationship, and when such care or treatment is necessitated by a sudden or unexpected situation or by an occurrence that demands immediate medical attention, shall not be held liable for any civil damages as a result of any act or omission relative to that care or treatment, unless that care or treatment is proven to amount to conduct that is willful and wanton and would likely result in injury so as to affect the life or health of another.

- 2. The immunity provided by this paragraph does not apply to damages as a result of any act or omission of providing medical care or treatment unrelated to the original situation that demanded immediate medical attention.
- 3. For purposes of this paragraph, the Legislature's intent is to encourage health care practitioners to provide necessary emergency care to all persons without fear of litigation as described in this paragraph.

Section 24. Paragraph (a) of subsection (12) of section 768.28, Florida Statutes, is amended to read:

768.28 Waiver of sovereign immunity in tort actions; recovery limits; limitation on attorney fees; statute of limitations; exclusions; indemnification; risk management programs.—

(12) (a) A health care practitioner, as defined in s.

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456.001(5)(4), who has contractually agreed to act as an agent of a state university board of trustees to provide medical services to a student athlete for participation in or as a result of intercollegiate athletics, to include team practices, training, and competitions, shall be considered an agent of the respective state university board of trustees, for the purposes of this section, while acting within the scope of and pursuant to guidelines established in that contract. The contracts shall provide for the indemnification of the state by the agent for any liabilities incurred up to the limits set out in this chapter.

Section 25. This act shall take effect July 1, 2009.