

1 A bill to be entitled
2 An act relating to the reorganization of the Department of
3 Health; amending s. 20.43, F.S.; revising the mission and
4 responsibilities of the department; providing duties of
5 the State Surgeon General with respect to management of
6 the department; abolishing responsibility to regulate
7 health practitioners effective July 1, 2011; abolishing
8 specified divisions of the department effective July 1,
9 2011, unless reviewed and reenacted by the Legislature;
10 authorizing the department to establish multicounty
11 service areas for county health departments; requiring the
12 department to submit a reorganization plan to the
13 Legislature by a specified date; prohibiting the
14 department from establishing new programs or modifying
15 current programs without legislative approval; requiring
16 the department to seek approval from the Legislative
17 Budget Commission for certain activities; providing that
18 the request for approval is subject to certain notice,
19 review, and objection procedures; amending s. 381.0011,
20 F.S.; revising duties and powers of the department;
21 requiring the department to manage emergency preparedness
22 and disaster response functions; authorizing the
23 department to issue health alerts or advisories under
24 certain conditions; revising rulemaking authority of the
25 department; amending s. 381.006, F.S.; revising the
26 definition of the term "group care facility"; amending s.
27 381.0072, F.S.; revising the definition of the term "food
28 service establishment"; authorizing the department to

29 | advise and consult with other agencies relating to the
30 | provision of food services; revising entities that are
31 | exempt from rules relating to standards for food service
32 | establishment manager certification; amending s. 381.0101,
33 | F.S.; revising the definition of the term "primary
34 | environmental health program"; repealing s. 381.001, F.S.,
35 | relating to legislative intent with respect to the state's
36 | public health system; repealing s. 381.04015, F.S.,
37 | relating to the Women's Health Strategy; repealing s.
38 | 401.243, F.S., relating to the department's injury
39 | prevention program; repealing ss. 411.23, 411.231, and
40 | 411.232, F.S., relating to the Children's Early Investment
41 | Act; amending s. 381.4018, F.S.; providing definitions;
42 | revising the list of governmental stakeholders that the
43 | department is required to work with regarding the state
44 | strategic plan and in assessing the state's physician
45 | workforce; creating the Physician Workforce Advisory
46 | Council; providing for appointments, membership, terms,
47 | and duties of the council; providing that council members
48 | are not entitled to receive compensation or reimbursement
49 | for per diem or travel expenses; providing the duties of
50 | the council; amending s. 392.51, F.S.; revising
51 | legislative intent with respect to the delivery of
52 | tuberculosis control services; amending s. 392.69, F.S.;
53 | requiring the department to develop a plan to provide
54 | tuberculosis services; requiring the department to submit
55 | the plan to the Governor and Legislature; amending ss.
56 | 411.01 and 411.224, F.S.; conforming cross-references;

57 | amending ss. 458.3192 and 459.0082, F.S.; requiring the
58 | department to determine by geographic area and specialty
59 | the number of physicians who plan to relocate outside the
60 | state, practice medicine in this state, and reduce or
61 | modify the scope of their practice; authorizing the
62 | department to include additional information in its report
63 | to the Governor and Legislature; amending s. 499.01, F.S.;
64 | creating an exemption from device manufacturer permits for
65 | certain persons; amending s. 499.01212, F.S.; exempting
66 | specified prescription drugs from pedigree paper
67 | requirements under certain circumstances; amending s.
68 | 499.029, F.S.; renaming the Cancer Drug Donation Program
69 | as the Prescription Drug Donation Program; revising
70 | definitions; expanding the drugs and supplies that may be
71 | donated under the program; expanding the types of
72 | facilities and practitioners that may participate in the
73 | program; conforming provisions to changes in terminology;
74 | amending s. 509.013, F.S.; revising the definitions of the
75 | terms "public lodging establishment" and "public food
76 | establishment"; transferring and reassigning certain
77 | functions and responsibilities, including records,
78 | personnel, property, and unexpended balances of
79 | appropriations and other resources, from the Department of
80 | Health to the Department of Business and Professional
81 | Regulation by a type two transfer; providing for the
82 | continued validity of pending judicial or administrative
83 | actions to which the Department of Health is a party;
84 | providing for the continued validity of lawful orders

85 | issued by the Department of Health; transferring rules
 86 | created by the Department of Health to the Department of
 87 | Business and Professional Regulation; providing for the
 88 | continued validity of permits and certifications issued by
 89 | the Department of Health; providing effective dates.

90 |

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

92 |

93 | Section 1. Section 20.43, Florida Statutes, is amended to
 94 | read:

95 | 20.43 Department of Health.—There is created a Department
 96 | of Health.

97 | (1) (a) The ~~purpose of the~~ Department of Health is
 98 | responsible for ~~to promote and protect the health of all~~
 99 | ~~residents and visitors in the state through organized state and~~
 100 | ~~community efforts, including cooperative agreements with~~
 101 | ~~counties. The department shall:~~

102 | 1.(a) Identifying, diagnosing, investigating, and
 103 | conducting surveillance of communicable diseases in the state
 104 | ~~Prevent to the fullest extent possible, the occurrence and~~
 105 | ~~progression of communicable and noncommunicable diseases and~~
 106 | ~~disabilities.~~

107 | 2.(b) Maintaining ~~Maintain~~ a constant surveillance of
 108 | disease occurrence and accumulating ~~accumulate~~ health statistics
 109 | necessary to establish disease trends and to design health
 110 | programs.

111 | 3. Implementing interventions that prevent or limit the
 112 | impact or spread of disease in the state.

113 4.(e) Maintaining and coordinating preparedness for and
114 responses to public health emergencies in the state ~~Conduct~~
115 ~~special studies of the causes of diseases and formulate~~
116 ~~preventive strategies.~~

117 5.(d) Regulating environmental activities that have a
118 direct impact on public health in the state ~~Promote the~~
119 ~~maintenance and improvement of the environment as it affects~~
120 ~~public health.~~

121 6.(e) Administering and providing health and related
122 services for targeted populations in the state ~~Promote the~~
123 ~~maintenance and improvement of health in the residents of the~~
124 ~~state.~~

125 7.(f) Collecting, managing, and analyzing vital statistics
126 data in the state ~~Provide leadership, in cooperation with the~~
127 ~~public and private sectors, in establishing statewide and~~
128 ~~community public health delivery systems.~~

129 ~~(g) Provide health care and early intervention services to~~
130 ~~infants, toddlers, children, adolescents, and high-risk~~
131 ~~perinatal patients who are at risk for disabling conditions or~~
132 ~~have chronic illnesses.~~

133 ~~(h) Provide services to abused and neglected children~~
134 ~~through child protection teams and sexual abuse treatment~~
135 ~~programs.~~

136 ~~(i) Develop working associations with all agencies and~~
137 ~~organizations involved and interested in health and health care~~
138 ~~delivery.~~

139 ~~(j) Analyze trends in the evolution of health systems, and~~
140 ~~identify and promote the use of innovative, cost-effective~~

141 ~~health delivery systems.~~

142 ~~(k) Serve as the statewide repository of all aggregate~~
143 ~~data accumulated by state agencies related to health care;~~
144 ~~analyze that data and issue periodic reports and policy~~
145 ~~statements, as appropriate; require that all aggregated data be~~
146 ~~kept in a manner that promotes easy utilization by the public,~~
147 ~~state agencies, and all other interested parties; provide~~
148 ~~technical assistance as required; and work cooperatively with~~
149 ~~the state's higher education programs to promote further study~~
150 ~~and analysis of health care systems and health care outcomes.~~

151 ~~(l) Include in the department's strategic plan developed~~
152 ~~under s. 186.021 an assessment of current health programs,~~
153 ~~systems, and costs; projections of future problems and~~
154 ~~opportunities; and recommended changes that are needed in the~~
155 ~~health care system to improve the public health.~~

156 8.(m) Regulate ~~Regulating~~ health practitioners, to the
157 extent authorized by the Legislature, as necessary for the
158 preservation of the health, safety, and welfare of the public.
159 This subparagraph expires on July 1, 2011.

160 (b) By November 1, 2010, the department shall submit a
161 proposal to the President of the Senate, the Speaker of the
162 House of Representatives, and the appropriate substantive
163 legislative committees for a new department structure based upon
164 the responsibilities delegated under paragraph (a). The proposal
165 shall include reductions in the number of departmental bureaus
166 and divisions and limits on the number of executive positions in
167 a manner that enables the department to fulfill the
168 responsibilities delegated under paragraph (a). The department

169 shall identify existing functions and activities that are
 170 inconsistent with the responsibilities delegated under paragraph
 171 (a) and shall provide a job description for each bureau chief
 172 and division director position proposed for retention.

173 (2)(a) The head of the Department of Health is the State
 174 Surgeon General and State Health Officer. The State Surgeon
 175 General must be a physician licensed under chapter 458 or
 176 chapter 459 who has advanced training or extensive experience in
 177 public health administration. The State Surgeon General is
 178 appointed by the Governor subject to confirmation by the Senate.
 179 The State Surgeon General serves at the pleasure of the
 180 Governor. The State Surgeon General shall manage the department
 181 as it carries out the responsibilities delegated under paragraph

182 ~~(1) (a) serve as the leading voice on wellness and disease~~
 183 ~~prevention efforts, including the promotion of healthful~~
 184 ~~lifestyles, immunization practices, health literacy, and the~~
 185 ~~assessment and promotion of the physician and health care~~
 186 ~~workforce in order to meet the health care needs of the state.~~
 187 ~~The State Surgeon General shall focus on advocating healthy~~
 188 ~~lifestyles, developing public health policy, and building~~
 189 ~~collaborative partnerships with schools, businesses, health care~~
 190 ~~practitioners, community-based organizations, and public and~~
 191 ~~private institutions in order to promote health literacy and~~
 192 ~~optimum quality of life for all Floridians.~~

193 ~~(b) The Officer of Women's Health Strategy is established~~
 194 ~~within the Department of Health and shall report directly to the~~
 195 ~~State Surgeon General.~~

196 (3) The following divisions of the Department of Health

197 are established:

198 (a) Division of Administration. This paragraph expires
 199 July 1, 2011, unless reviewed and reenacted by the Legislature
 200 before that date.

201 (b) Division of Environmental Health. This paragraph
 202 expires July 1, 2011, unless reviewed and reenacted by the
 203 Legislature before that date.

204 (c) Division of Disease Control. This paragraph expires
 205 July 1, 2011, unless reviewed and reenacted by the Legislature
 206 before that date.

207 (d) Division of Family Health Services. This paragraph
 208 expires July 1, 2011, unless reviewed and reenacted by the
 209 Legislature before that date.

210 (e) Division of Children's Medical Services Network. This
 211 paragraph expires July 1, 2011, unless reviewed and reenacted by
 212 the Legislature before that date.

213 (f) Division of Emergency Medical Operations. This
 214 paragraph expires July 1, 2011, unless reviewed and reenacted by
 215 the Legislature before that date.

216 (g) Division of Medical Quality Assurance, which is
 217 responsible for the following boards and professions established
 218 within the division:

- 219 1. The Board of Acupuncture, created under chapter 457.
- 220 2. The Board of Medicine, created under chapter 458.
- 221 3. The Board of Osteopathic Medicine, created under
 222 chapter 459.
- 223 4. The Board of Chiropractic Medicine, created under
 224 chapter 460.

- 225 | 5. The Board of Podiatric Medicine, created under chapter
 226 | 461.
- 227 | 6. Naturopathy, as provided under chapter 462.
- 228 | 7. The Board of Optometry, created under chapter 463.
- 229 | 8. The Board of Nursing, created under part I of chapter
 230 | 464.
- 231 | 9. Nursing assistants, as provided under part II of
 232 | chapter 464.
- 233 | 10. The Board of Pharmacy, created under chapter 465.
- 234 | 11. The Board of Dentistry, created under chapter 466.
- 235 | 12. Midwifery, as provided under chapter 467.
- 236 | 13. The Board of Speech-Language Pathology and Audiology,
 237 | created under part I of chapter 468.
- 238 | 14. The Board of Nursing Home Administrators, created
 239 | under part II of chapter 468.
- 240 | 15. The Board of Occupational Therapy, created under part
 241 | III of chapter 468.
- 242 | 16. Respiratory therapy, as provided under part V of
 243 | chapter 468.
- 244 | 17. Dietetics and nutrition practice, as provided under
 245 | part X of chapter 468.
- 246 | 18. The Board of Athletic Training, created under part
 247 | XIII of chapter 468.
- 248 | 19. The Board of Orthotists and Prosthetists, created
 249 | under part XIV of chapter 468.
- 250 | 20. Electrolysis, as provided under chapter 478.
- 251 | 21. The Board of Massage Therapy, created under chapter
 252 | 480.

253 22. The Board of Clinical Laboratory Personnel, created
254 under part III of chapter 483.

255 23. Medical physicists, as provided under part IV of
256 chapter 483.

257 24. The Board of Opticianry, created under part I of
258 chapter 484.

259 25. The Board of Hearing Aid Specialists, created under
260 part II of chapter 484.

261 26. The Board of Physical Therapy Practice, created under
262 chapter 486.

263 27. The Board of Psychology, created under chapter 490.

264 28. School psychologists, as provided under chapter 490.

265 29. The Board of Clinical Social Work, Marriage and Family
266 Therapy, and Mental Health Counseling, created under chapter
267 491.

268

269 This paragraph expires July 1, 2011.

270 (h) Division of Children's Medical Services Prevention and
271 Intervention. This paragraph expires July 1, 2011, unless
272 reviewed and reenacted by the Legislature before that date.

273 (i) Division of Information Technology. This paragraph
274 expires July 1, 2011, unless reviewed and reenacted by the
275 Legislature before that date.

276 (j) Division of Health Access and Tobacco. This paragraph
277 expires July 1, 2011, unless reviewed and reenacted by the
278 Legislature before that date.

279 (k) Division of Disability Determinations. This paragraph
280 expires July 1, 2011, unless reviewed and reenacted by the

281 Legislature before that date.

282 (4) (a) The members of each board within the department
 283 shall be appointed by the Governor, subject to confirmation by
 284 the Senate. Consumer members on the board shall be appointed
 285 pursuant to paragraph (b). Members shall be appointed for 4-year
 286 terms, and such terms shall expire on October 31. However, a
 287 term of less than 4 years may be used to ensure that:

288 1. No more than two members' terms expire during the same
 289 calendar year for boards consisting of seven or eight members.

290 2. No more than 3 members' terms expire during the same
 291 calendar year for boards consisting of 9 to 12 members.

292 3. No more than 5 members' terms expire during the same
 293 calendar year for boards consisting of 13 or more members.

294
 295 A member whose term has expired shall continue to serve on the
 296 board until such time as a replacement is appointed. A vacancy
 297 on the board shall be filled for the unexpired portion of the
 298 term in the same manner as the original appointment. No member
 299 may serve for more than the remaining portion of a previous
 300 member's unexpired term, plus two consecutive 4-year terms of
 301 the member's own appointment thereafter.

302 (b) Each board with five or more members shall have at
 303 least two consumer members who are not, and have never been,
 304 members or practitioners of the profession regulated by such
 305 board or of any closely related profession. Each board with
 306 fewer than five members shall have at least one consumer member
 307 who is not, and has never been, a member or practitioner of the
 308 profession regulated by such board or of any closely related

309 profession.

310 (c) Notwithstanding any other provision of law, the
 311 department is authorized to establish uniform application forms
 312 and certificates of licensure for use by the boards within the
 313 department. Nothing in this paragraph authorizes the department
 314 to vary any substantive requirements, duties, or eligibilities
 315 for licensure or certification as provided by law.

316 (5) The department shall ~~plan and~~ administer authorized
 317 ~~its~~ public health programs through its county health departments
 318 and may, for administrative purposes and efficient service
 319 delivery, establish multicounty ~~up to 15~~ service areas ~~to carry~~
 320 ~~out such duties as may be prescribed by the State Surgeon~~
 321 ~~General. The boundaries of the service areas shall be the same~~
 322 ~~as, or combinations of, the service districts of the Department~~
 323 ~~of Children and Family Services established in s. 20.19 and, to~~
 324 ~~the extent practicable, shall take into consideration the~~
 325 ~~boundaries of the jobs and education regional boards.~~

326 (6) The State Surgeon General may ~~and division directors~~
 327 ~~are authorized to~~ appoint ad hoc advisory committees as
 328 necessary to address issues relating to the responsibilities
 329 delegated to the department under paragraph (1) (a). The issue or
 330 problem that the ad hoc committee shall address, and the
 331 timeframe within which the committee is to complete its work,
 332 shall be specified at the time the committee is appointed. Ad
 333 hoc advisory committees shall include representatives of groups
 334 or entities affected by the issue or problem that the committee
 335 is asked to examine. Members of ad hoc advisory committees shall
 336 receive no compensation, but may, within existing departmental

337 resources, receive reimbursement for travel expenses as provided
 338 in s. 112.061.

339 ~~(7) To protect and improve the public health, the~~
 340 ~~department may use state or federal funds to:~~

341 ~~(a) Provide incentives, including, but not limited to, the~~
 342 ~~promotional items listed in paragraph (b), food and including~~
 343 ~~food coupons, and payment for travel expenses, for encouraging~~
 344 ~~healthy lifestyle and disease prevention behaviors and patient~~
 345 ~~compliance with medical treatment, such as tuberculosis therapy~~
 346 ~~and smoking cessation programs. Such incentives shall be~~
 347 ~~intended to cause individuals to take action to improve their~~
 348 ~~health. Any incentive for food, food coupons, or travel expenses~~
 349 ~~may not exceed the limitations in s. 112.061.~~

350 ~~(b) Plan and conduct health education campaigns for the~~
 351 ~~purpose of protecting or improving public health. The department~~
 352 ~~may purchase promotional items, such as, but not limited to, t-~~
 353 ~~shirts, hats, sports items such as water bottles and sweat~~
 354 ~~bands, calendars, nutritional charts, baby bibs, growth charts,~~
 355 ~~and other items printed with health promotion messages, and~~
 356 ~~advertising, such as space on billboards or in publications or~~
 357 ~~radio or television time, for health information and promotional~~
 358 ~~messages that recognize that the following behaviors, among~~
 359 ~~others, are detrimental to public health: unprotected sexual~~
 360 ~~intercourse, other than with one's spouse; cigarette and cigar~~
 361 ~~smoking, use of smokeless tobacco products, and exposure to~~
 362 ~~environmental tobacco smoke; alcohol consumption or other~~
 363 ~~substance abuse during pregnancy; alcohol abuse or other~~
 364 ~~substance abuse; lack of exercise and poor diet and nutrition~~

365 ~~habits; and failure to recognize and address a genetic tendency~~
366 ~~to suffer from sickle cell anemia, diabetes, high blood~~
367 ~~pressure, cardiovascular disease, or cancer. For purposes of~~
368 ~~activities under this paragraph, the Department of Health may~~
369 ~~establish requirements for local matching funds or in-kind~~
370 ~~contributions to create and distribute advertisements, in either~~
371 ~~print or electronic format, which are concerned with each of the~~
372 ~~targeted behaviors, establish an independent evaluation and~~
373 ~~feedback system for the public health communication campaign,~~
374 ~~and monitor and evaluate the efforts to determine which of the~~
375 ~~techniques and methodologies are most effective.~~

376 ~~(c) Plan and conduct promotional campaigns to recruit~~
377 ~~health professionals to be employed by the department or to~~
378 ~~recruit participants in departmental programs for health~~
379 ~~practitioners, such as scholarship, loan repayment, or volunteer~~
380 ~~programs. To this effect the department may purchase promotional~~
381 ~~items and advertising.~~

382 ~~(8) The department may hold copyrights, trademarks, and~~
383 ~~service marks and enforce its rights with respect thereto,~~
384 ~~except such authority does not extend to any public records~~
385 ~~relating to the department's responsibilities for health care~~
386 ~~practitioners regulated under part II of chapter 455.~~

387 ~~(7)-(9)~~ There is established within the Department of
388 Health the Office of Minority Health.

389 (8) (a) Beginning in fiscal year 2010-2011, the department
390 shall initiate or commence new programs, including any new
391 federally funded or grant-supported initiative, or make changes
392 in current programs only when the Legislature expressly

393 authorizes the department to do so.

394 (b) Beginning in fiscal year 2010-2011, prior to applying
 395 for any continuation of federal or private grants, the
 396 department shall request the express approval of the Legislative
 397 Budget Commission. The request for approval shall provide
 398 detailed information about the purpose of the grant, the prior
 399 use of the grant, the reason for continuation, the intended use
 400 of the continuation funds, and the number of full-time permanent
 401 or temporary employees that participate in administering the
 402 program funded by the grant. This paragraph is subject to the
 403 notice, review, and objection procedures set forth in s.
 404 216.177.

405 Section 2. Section 381.0011, Florida Statutes, is amended
 406 to read:

407 381.0011 Duties and powers of the Department of Health.—It
 408 is the duty of the Department of Health to:

409 (1) Assess the public health status and needs of the state
 410 pursuant to the responsibilities delegated to the department
 411 under s. 20.43 ~~through statewide data collection and other~~
 412 ~~appropriate means, with special attention to future needs that~~
 413 ~~may result from population growth, technological advancements,~~
 414 ~~new societal priorities, or other changes.~~

415 (2) Manage and coordinate emergency preparedness and
 416 disaster response functions to: investigate and control the
 417 spread of disease; coordinate the availability and staffing of
 418 special needs shelters; support patient evacuation; ensure the
 419 safety of food and drugs; provide critical incident stress
 420 debriefing; and provide surveillance and control of

421 radiological, chemical, biological, and other environmental
 422 hazards ~~Formulate general policies affecting the public health~~
 423 ~~of the state.~~

424 (3) Include in the department's strategic plan developed
 425 under s. 186.021 a summary of all aspects of the public health
 426 related to the responsibilities delegated to the department
 427 under s. 20.43(1) mission and health status objectives to direct
 428 ~~the use of public health resources with an emphasis on~~
 429 ~~prevention.~~

430 (4) Administer and enforce laws and rules relating to
 431 sanitation, control of communicable diseases, and illnesses and
 432 hazards to health among humans and from animals to humans, ~~and~~
 433 ~~the general health of the people of the state.~~

434 (5) Cooperate with and accept assistance from federal,
 435 state, and local officials for the prevention and suppression of
 436 communicable and other diseases, illnesses, injuries, and
 437 hazards to human health and cooperate with the Federal
 438 Government in enforcing public health laws and regulations.

439 (6) Declare, enforce, modify, and abolish quarantine of
 440 persons, animals, and premises as the circumstances indicate for
 441 controlling communicable diseases or providing protection from
 442 unsafe conditions that pose a threat to public health, except as
 443 provided in ss. 384.28 and 392.545-392.60.

444 (a) The department shall adopt rules to specify the
 445 conditions and procedures for imposing and releasing a
 446 quarantine. The rules must include provisions related to:

- 447 1. The closure of premises.
- 448 2. The movement of persons or animals exposed to or

449 | infected with a communicable disease.

450 | 3. The tests or treatment, including vaccination, for
451 | communicable disease required prior to employment or admission
452 | to the premises or to comply with a quarantine.

453 | 4. Testing or destruction of animals with or suspected of
454 | having a disease transmissible to humans.

455 | 5. Access by the department to quarantined premises.

456 | 6. The disinfection of quarantined animals, persons, or
457 | premises.

458 | 7. Methods of quarantine.

459 | (b) Any health regulation that restricts travel or trade
460 | within the state may not be adopted or enforced in this state
461 | except by authority of the department.

462 | (7) Identify, diagnose, investigate, and conduct
463 | surveillance of communicable diseases in the state and promote
464 | and implement interventions that prevent or limit the impact and
465 | spread of disease in the state ~~Provide for a thorough~~
466 | ~~investigation and study of the incidence, causes, modes of~~
467 | ~~propagation and transmission, and means of prevention, control,~~
468 | ~~and cure of diseases, illnesses, and hazards to human health.~~

469 | (8) Issue, as necessary and in its discretion, health
470 | alerts or advisories ~~Provide for the dissemination of~~
471 | ~~information to the public relative to the prevention, control,~~
472 | ~~and cure of diseases, illnesses, and hazards to human health.~~
473 | ~~The department shall conduct a workshop before issuing any~~
474 | ~~health alert or advisory~~ relating to food-borne illness or
475 | communicable disease in public lodging or food service
476 | establishments in order to inform persons, trade associations,

477 and businesses of the risk to public health and to seek the
 478 input of affected persons, trade associations, and businesses on
 479 the best methods of informing and protecting the public. The
 480 department shall conduct a workshop before issuing any such
 481 alert or advisory, except in an emergency, in which case the
 482 workshop must be held within 14 days after the issuance of the
 483 emergency alert or advisory.

484 (9) Act as registrar of vital statistics.

485 ~~(10) Cooperate with and assist federal health officials in~~
 486 ~~enforcing public health laws and regulations.~~

487 ~~(11) Cooperate with other departments, local officials,~~
 488 ~~and private boards and organizations for the improvement and~~
 489 ~~preservation of the public health.~~

490 ~~(12) Maintain a statewide injury-prevention program.~~

491 (10)~~(13)~~ Adopt rules pursuant to ss. 120.536(1) and 120.54
 492 to implement the provisions of law conferring duties upon it.
 493 This subsection does not authorize the department to require a
 494 permit or license or to inspect a building or facility, unless
 495 such requirement is specifically provided by law.

496 ~~(11)~~~~(14)~~ Perform any other duties expressly assigned to
 497 the department ~~prescribed~~ by law.

498 Section 3. Subsection (16) of section 381.006, Florida
 499 Statutes, is amended to read:

500 381.006 Environmental health.—The department shall conduct
 501 an environmental health program as part of fulfilling the
 502 state's public health mission. The purpose of this program is to
 503 detect and prevent disease caused by natural and manmade factors
 504 in the environment. The environmental health program shall

505 include, but not be limited to:

506 (16) A group-care-facilities function. As used in this

507 subsection, the term, ~~where a~~ "group care facility" means any

508 public or private school, assisted living facility, adult

509 family-care home, adult day care center, short-term residential

510 treatment center, residential treatment facility, home for

511 special services, transitional living facility, crisis

512 stabilization unit, hospice, prescribed pediatric extended care

513 center, intermediate care facility for persons with

514 developmental disabilities, or boarding school housing, ~~building~~

515 ~~or buildings, section of a building, or distinct part of a~~

516 ~~building or other place, whether operated for profit or not,~~

517 ~~which undertakes, through its ownership or management, to~~

518 ~~provide one or more personal services, care, protection, and~~

519 ~~supervision to persons who require such services and who are not~~

520 ~~related to the owner or administrator.~~ The department may adopt

521 rules necessary to protect the health and safety of residents,

522 staff, and patrons of group care facilities. Rules related to

523 public and private schools shall be developed by, ~~such as child~~

524 ~~care facilities, family day care homes, assisted living~~

525 ~~facilities, adult day care centers, adult family care homes,~~

526 ~~hospices, residential treatment facilities, crisis stabilization~~

527 ~~units, pediatric extended care centers, intermediate care~~

528 ~~facilities for the developmentally disabled, group care homes,~~

529 ~~and, jointly with the Department of Education~~ in consultation

530 with the department, ~~private and public schools.~~ These Rules

531 adopted under this subsection may include definitions of terms;

532 provisions relating to operation and maintenance of facilities,

533 buildings, grounds, equipment, furnishings, and occupant-space
534 requirements; lighting; heating, cooling, and ventilation; food
535 service; water supply and plumbing; sewage; sanitary facilities;
536 insect and rodent control; garbage; safety; personnel health,
537 hygiene, and work practices; and other matters the department
538 finds are appropriate or necessary to protect the safety and
539 health of the residents, staff, students, faculty, or patrons.
540 The department may not adopt rules that conflict with rules
541 adopted by the licensing or certifying agency. The department
542 may enter and inspect at reasonable hours to determine
543 compliance with applicable statutes or rules. In addition to any
544 sanctions that the department may impose for violations of rules
545 adopted under this section, the department shall also report
546 such violations to any agency responsible for licensing or
547 certifying the group care facility. The licensing or certifying
548 agency may also impose any sanction based solely on the findings
549 of the department.

550
551 The department may adopt rules to carry out the provisions of
552 this section.

553 Section 4. Subsections (1), (2), (3), and (6) of section
554 381.0072, Florida Statutes, are amended to read:

555 381.0072 Food service protection.—It shall be the duty of
556 the Department of Health to adopt and enforce sanitation rules
557 consistent with law to ensure the protection of the public from
558 food-borne illness. These rules shall provide the standards and
559 requirements for the storage, preparation, serving, or display
560 of food in food service establishments as defined in this

561 section and which are not permitted or licensed under chapter
 562 500 or chapter 509.

563 (1) DEFINITIONS.—As used in this section, the term:

564 (a) "Department" means the Department of Health or its
 565 representative county health department.

566 (b) "Food service establishment" means detention
 567 facilities, public or private schools, migrant labor camps,
 568 assisted living facilities, adult family-care homes, adult day
 569 care centers, short-term residential treatment centers,
 570 residential treatment facilities, homes for special services,
 571 transitional living facilities, crisis stabilization units,
 572 hospices, prescribed pediatric extended care centers,
 573 intermediate care facilities for persons with developmental
 574 disabilities, boarding schools, civic or fraternal
 575 organizations, bars and lounges, vending machines that dispense
 576 potentially hazardous foods at facilities expressly named in
 577 this paragraph, and facilities used as temporary food events or
 578 mobile food units at any facility expressly named ~~any facility,~~
 579 ~~as described~~ in this paragraph, where food is prepared and
 580 intended for individual portion service, including ~~and includes~~
 581 the site at which individual portions are provided, ~~. The term~~
 582 ~~includes any such facility~~ regardless of whether consumption is
 583 on or off the premises and regardless of whether there is a
 584 charge for the food. ~~The term includes detention facilities,~~
 585 ~~child care facilities, schools, institutions, civic or fraternal~~
 586 ~~organizations, bars and lounges and facilities used at temporary~~
 587 ~~food events, mobile food units, and vending machines at any~~
 588 ~~facility regulated under this section.~~ The term does not include

589 any entity not expressly named in this paragraph ~~private homes~~
 590 ~~where food is prepared or served for individual family~~
 591 ~~consumption; nor does the term include churches, synagogues, or~~
 592 ~~other not for profit religious organizations as long as these~~
 593 ~~organizations serve only their members and guests and do not~~
 594 ~~advertise food or drink for public consumption, or any facility~~
 595 ~~or establishment permitted or licensed under chapter 500 or~~
 596 ~~chapter 509; nor does the term include any theater, if the~~
 597 ~~primary use is as a theater and if patron service is limited to~~
 598 ~~food items customarily served to the admittees of theaters; nor~~
 599 ~~does the term include a research and development test kitchen~~
 600 ~~limited to the use of employees and which is not open to the~~
 601 ~~general public.~~

602 (c) "Operator" means the owner, operator, keeper,
 603 proprietor, lessee, manager, assistant manager, agent, or
 604 employee of a food service establishment.

605 (2) DUTIES.—

606 (a) The department may advise and consult with the Agency
 607 for Health Care Administration, the Department of Business and
 608 Professional Regulation, the Department of Agriculture and
 609 Consumer Services, and the Department of Children and Family
 610 Services concerning procedures related to the storage,
 611 preparation, serving, or display of food at any building,
 612 structure, or facility not expressly included in this section
 613 that is inspected, licensed, or regulated by those agencies.

614 (b) ~~(a)~~ The department shall adopt rules, including
 615 definitions of terms which are consistent with law prescribing
 616 minimum sanitation standards and manager certification

617 requirements as prescribed in s. 509.039, and which shall be
 618 enforced in food service establishments as defined in this
 619 section. The sanitation standards must address the construction,
 620 operation, and maintenance of the establishment; lighting,
 621 ventilation, laundry rooms, lockers, use and storage of toxic
 622 materials and cleaning compounds, and first-aid supplies; plan
 623 review; design, construction, installation, location,
 624 maintenance, sanitation, and storage of food equipment and
 625 utensils; employee training, health, hygiene, and work
 626 practices; food supplies, preparation, storage, transportation,
 627 and service, including access to the areas where food is stored
 628 or prepared; and sanitary facilities and controls, including
 629 water supply and sewage disposal; plumbing and toilet
 630 facilities; garbage and refuse collection, storage, and
 631 disposal; and vermin control. Public and private schools, if the
 632 food service is operated by school employees, ~~;~~ ~~hospitals~~
 633 ~~licensed under chapter 395; nursing homes licensed under part II~~
 634 ~~of chapter 400; child care facilities as defined in s. 402.301;~~
 635 ~~residential facilities colocated with a nursing home or~~
 636 ~~hospital, if all food is prepared in a central kitchen that~~
 637 ~~complies with nursing or hospital regulations; and bars and~~
 638 lounges, civic organizations, and any other facility that is not
 639 regulated under this section as defined by department rule, are
 640 exempt from the rules developed for manager certification. The
 641 department shall administer a comprehensive inspection,
 642 monitoring, and sampling program to ensure such standards are
 643 maintained. With respect to food service establishments
 644 permitted or licensed under chapter 500 or chapter 509, the

645 department shall assist the Division of Hotels and Restaurants
646 of the Department of Business and Professional Regulation and
647 the Department of Agriculture and Consumer Services with
648 rulemaking by providing technical information.

649 (c)~~(b)~~ The department shall carry out all provisions of
650 this chapter and all other applicable laws and rules relating to
651 the inspection or regulation of food service establishments as
652 defined in this section, for the purpose of safeguarding the
653 public's health, safety, and welfare.

654 (d)~~(e)~~ The department shall inspect each food service
655 establishment as often as necessary to ensure compliance with
656 applicable laws and rules. The department shall have the right
657 of entry and access to these food service establishments at any
658 reasonable time. In inspecting food service establishments as
659 provided under this section, the department shall provide each
660 inspected establishment with the food recovery brochure
661 developed under s. 570.0725.

662 (e)~~(d)~~ The department or other appropriate regulatory
663 entity may inspect theaters exempted in subsection (1) to ensure
664 compliance with applicable laws and rules pertaining to minimum
665 sanitation standards. A fee for inspection shall be prescribed
666 by rule, but the aggregate amount charged per year per theater
667 establishment shall not exceed \$300, regardless of the entity
668 providing the inspection.

669 (3) LICENSES REQUIRED.—

670 (a) Licenses; annual renewals.—Each food service
671 establishment regulated under this section shall obtain a
672 license from the department annually. Food service establishment

673 licenses shall expire annually and are not transferable from one
 674 place or individual to another. However, those facilities
 675 licensed by the department's Office of Licensure and
 676 Certification, the Child Care Services Program Office, or the
 677 Agency for Persons with Disabilities are exempt from this
 678 subsection. It shall be a misdemeanor of the second degree,
 679 punishable as provided in s. 381.0061, s. 775.082, or s.
 680 775.083, for such an establishment to operate without this
 681 license. The department may refuse a license, or a renewal
 682 thereof, to any establishment that is not constructed or
 683 maintained in accordance with law and with the rules of the
 684 department. Annual application for renewal is not required.

685 (b) Application for license.—Each person who plans to open
 686 a food service establishment regulated under this section and
 687 not regulated under chapter 500 or chapter 509 shall apply for
 688 and receive a license prior to the commencement of operation.

689 (6) IMMINENT DANGERS; STOP-SALE ORDERS.—

690 (a) In the course of epidemiological investigations or for
 691 those establishments regulated by the department under this
 692 chapter, the department, to protect the public from food that is
 693 unwholesome or otherwise unfit for human consumption, may
 694 examine, sample, seize, and stop the sale or use of food to
 695 determine its condition. The department may stop the sale and
 696 supervise the proper destruction of food when the State Health
 697 Officer or his or her designee determines that such food
 698 represents a threat to the public health.

699 (b) The department may determine that a food service
 700 establishment regulated under this section is an imminent danger

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701 to the public health and require its immediate closure when such
 702 establishment fails to comply with applicable sanitary and
 703 safety standards and, because of such failure, presents an
 704 imminent threat to the public's health, safety, and welfare. The
 705 department may accept inspection results from state and local
 706 building and firesafety officials and other regulatory agencies
 707 as justification for such actions. Any facility so deemed and
 708 closed shall remain closed until allowed by the department or by
 709 judicial order to reopen.

710 Section 5. Paragraph (g) of subsection (2) of section
 711 381.0101, Florida Statutes, is amended to read:

712 (2) DEFINITIONS.—As used in this section:

713 (g) "Primary environmental health program" means those
 714 programs ~~determined by the department~~ is expressly authorized by
 715 law to administer ~~to be essential~~ for providing basic
 716 environmental and sanitary protection to the public. ~~At a~~
 717 ~~minimum,~~ These programs shall include food protection program
 718 work at food service establishments as defined in s. 381.0072
 719 and onsite sewage treatment and disposal system evaluations.

720 Section 6. Sections 381.001, 381.04015, 401.243, 411.23,
 721 411.231, and 411.232, Florida Statutes, are repealed.

722 Section 7. Section 381.4018, Florida Statutes, is amended
 723 to read:

724 381.4018 Physician workforce assessment and development.—

725 (1) DEFINITIONS.—As used in this section, the term:

726 (a) "Consortium" or "consortia" means a combination of
 727 statutory teaching hospitals, statutory rural hospitals, other
 728 hospitals, accredited medical schools, clinics operated by the

729 department, clinics operated by the Department of Veterans'
 730 Affairs, area health education centers, community health
 731 centers, federally qualified health centers, prison clinics,
 732 local community clinics, or other programs. At least one member
 733 of the consortium shall be a sponsoring institution accredited
 734 or currently seeking accreditation by the Accreditation Council
 735 for Graduate Medical Education or the American Osteopathic
 736 Association.

737 (b) "Council" means the Physician Workforce Advisory
 738 Council.

739 (c) "Department" means the Department of Health.

740 (d) "Graduate medical education program" means a program
 741 accredited by the Accreditation Council for Graduate Medical
 742 Education or the American Osteopathic Association.

743 (e) "Primary care specialty" means emergency medicine,
 744 family practice, internal medicine, pediatrics, psychiatry,
 745 obstetrics and gynecology, or combined internal medicine and
 746 other primary care specialties as determined by the council or
 747 the department.

748 (2)~~(1)~~ LEGISLATIVE INTENT.— The Legislature recognizes
 749 that physician workforce planning is an essential component of
 750 ensuring that there is an adequate and appropriate supply of
 751 well-trained physicians to meet this state's future health care
 752 service needs as the general population and elderly population
 753 of the state increase. The Legislature finds that items to
 754 consider relative to assessing the physician workforce may
 755 include physician practice status; specialty mix; geographic
 756 distribution; demographic information, including, but not

757 limited to, age, gender, race, and cultural considerations; and
758 needs of current or projected medically underserved areas in the
759 state. Long-term strategic planning is essential as the period
760 from the time a medical student enters medical school to
761 completion of graduate medical education may range from 7 to 10
762 years or longer. The Legislature recognizes that strategies to
763 provide for a well-trained supply of physicians must include
764 ensuring the availability and capacity of quality ~~graduate~~
765 medical schools and graduate medical education programs in this
766 state, as well as using new or existing state and federal
767 programs providing incentives for physicians to practice in
768 needed specialties and in underserved areas in a manner that
769 addresses projected needs for physician manpower.

770 (3)~~(2)~~ PURPOSE.—The Department of Health shall serve as a
771 coordinating and strategic planning body to actively assess the
772 state's current and future physician workforce needs and work
773 with multiple stakeholders to develop strategies and
774 alternatives to address current and projected physician
775 workforce needs.

776 (4)~~(3)~~ GENERAL FUNCTIONS.—The department shall maximize
777 the use of existing programs under the jurisdiction of the
778 department and other state agencies and coordinate governmental
779 and nongovernmental stakeholders and resources in order to
780 develop a state strategic plan and assess the implementation of
781 such strategic plan. In developing the state strategic plan, the
782 department shall:

783 (a) Monitor, evaluate, and report on the supply and
784 distribution of physicians licensed under chapter 458 or chapter

785 459. The department shall maintain a database to serve as a
786 statewide source of data concerning the physician workforce.

787 (b) Develop a model and quantify, on an ongoing basis, the
788 adequacy of the state's current and future physician workforce
789 as reliable data becomes available. Such model must take into
790 account demographics, physician practice status, place of
791 education and training, generational changes, population growth,
792 economic indicators, and issues concerning the "pipeline" into
793 medical education.

794 (c) Develop and recommend strategies to determine whether
795 the number of qualified medical school applicants who might
796 become competent, practicing physicians in this state will be
797 sufficient to meet the capacity of the state's medical schools.
798 If appropriate, the department shall, working with
799 representatives of appropriate governmental and nongovernmental
800 entities, develop strategies and recommendations and identify
801 best practice programs that introduce health care as a
802 profession and strengthen skills needed for medical school
803 admission for elementary, middle, and high school students, and
804 improve premedical education at the precollege and college level
805 in order to increase this state's potential pool of medical
806 students.

807 (d) Develop strategies to ensure that the number of
808 graduates from the state's public and private allopathic and
809 osteopathic medical schools are adequate to meet physician
810 workforce needs, based on the analysis of the physician
811 workforce data, so as to provide a high-quality medical
812 education to students in a manner that recognizes the uniqueness

813 | of each new and existing medical school in this state.

814 | (e) Pursue strategies and policies to create, expand, and
815 | maintain graduate medical education positions in the state based
816 | on the analysis of the physician workforce data. Such strategies
817 | and policies must take into account the effect of federal
818 | funding limitations on the expansion and creation of positions
819 | in graduate medical education. The department shall develop
820 | options to address such federal funding limitations. The
821 | department shall consider options to provide direct state
822 | funding for graduate medical education positions in a manner
823 | that addresses requirements and needs relative to accreditation
824 | of graduate medical education programs. The department shall
825 | consider funding residency positions as a means of addressing
826 | needed physician specialty areas, rural areas having a shortage
827 | of physicians, and areas of ongoing critical need, and as a
828 | means of addressing the state's physician workforce needs based
829 | on an ongoing analysis of physician workforce data.

830 | (f) Develop strategies to maximize federal and state
831 | programs that provide for the use of incentives to attract
832 | physicians to this state or retain physicians within the state.
833 | Such strategies should explore and maximize federal-state
834 | partnerships that provide incentives for physicians to practice
835 | in federally designated shortage areas. Strategies shall also
836 | consider the use of state programs, such as the Florida Health
837 | Service Corps established pursuant to s. 381.0302 and the
838 | Medical Education Reimbursement and Loan Repayment Program
839 | pursuant to s. 1009.65, which provide for education loan
840 | repayment or loan forgiveness and provide monetary incentives

841 for physicians to relocate to underserved areas of the state.

842 (g) Coordinate and enhance activities relative to
 843 physician workforce needs, undergraduate medical education, and
 844 graduate medical education provided by the Division of Medical
 845 Quality Assurance, the Community Hospital Education Program and
 846 the Graduate Medical Education Committee established pursuant to
 847 s. 381.0403, area health education center networks established
 848 pursuant to s. 381.0402, and other offices and programs within
 849 the Department of Health as designated by the State Surgeon
 850 General.

851 (h) Work in conjunction with and act as a coordinating
 852 body for governmental and nongovernmental stakeholders to
 853 address matters relating to the state's physician workforce
 854 assessment and development for the purpose of ensuring an
 855 adequate supply of well-trained physicians to meet the state's
 856 future needs. Such governmental stakeholders shall include, but
 857 need not be limited to, the State Surgeon General or his or her
 858 designee, the Commissioner of Education or his or her designee,
 859 the Secretary of Health Care Administration or his or her
 860 designee, and the Chancellor of the State University System or
 861 his or her designee ~~from the Board of Governors of the State~~
 862 ~~University System~~, and, at the discretion of the department,
 863 other representatives of state and local agencies that are
 864 involved in assessing, educating, or training the state's
 865 current or future physicians. Other stakeholders shall include,
 866 but need not be limited to, organizations representing the
 867 state's public and private allopathic and osteopathic medical
 868 schools; organizations representing hospitals and other

869 institutions providing health care, particularly those that have
 870 an interest in providing accredited medical education and
 871 graduate medical education to medical students and medical
 872 residents; organizations representing allopathic and osteopathic
 873 practicing physicians; and, at the discretion of the department,
 874 representatives of other organizations or entities involved in
 875 assessing, educating, or training the state's current or future
 876 physicians.

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

880 (j) Act as a clearinghouse for collecting and
 881 disseminating information concerning the physician workforce and
 882 medical education continuum in this state.

883 (5) PHYSICIAN WORKFORCE ADVISORY COUNCIL.—There is created
 884 in the department the Physician Workforce Advisory Council, an
 885 advisory council as defined in s. 20.03. The council shall
 886 comply with the requirements of s. 20.052, except as otherwise
 887 provided in this section.

888 (a) The council shall be composed of the following 23
 889 members:

890 1. The following members appointed by the State Surgeon
 891 General:

892 a. A designee from the department.

893 b. An individual recommended by the Area Health Education
 894 Center Network.

895 c. Two individuals recommended by the Council of Florida
 896 Medical School Deans, one representing a college of allopathic

897 medicine and one representing a college of osteopathic medicine.

898 d. Two individuals recommended by the Florida Hospital
 899 Association, one representing a statutory teaching hospital and
 900 one representing a hospital that is licensed under chapter 395,
 901 has an accredited graduate medical education program, and is not
 902 a statutory teaching hospital.

903 e. Two individuals recommended by the Florida Medical
 904 Association, one representing a primary care specialty and one
 905 representing a nonprimary care specialty.

906 f. Two individuals recommended by the Florida Osteopathic
 907 Medical Association, one representing a primary care specialty
 908 and one representing a nonprimary care specialty.

909 g. Two individuals who are program directors of accredited
 910 graduate medical education programs, one representing a program
 911 that is accredited by the Accreditation Council for Graduate
 912 Medical Education and one representing a program that is
 913 accredited by the American Osteopathic Association.

914 h. An individual recommended by the Florida Justice
 915 Association.

916 i. An individual representing a profession in the field of
 917 health services administration.

918 j. A layperson member.

919
 920 Each entity authorized to make recommendations under this
 921 subparagraph shall make at least two recommendations to the
 922 State Surgeon General for each appointment to the council. The
 923 State Surgeon General shall appoint one member for each position
 924 from among the recommendations made by each authorized entity.

925 2. The following members or designees appointed by the
 926 respective agency head, legislative presiding officer, or
 927 congressional delegation:

928 a. The Commissioner of Education or his or her designee.
 929 b. The Chancellor of the State University System or his or
 930 her designee.

931 c. The Secretary of Health Care Administration or his or
 932 her designee.

933 d. The executive director of the Department of Veterans'
 934 Affairs or his or her designee.

935 e. The Secretary of Elderly Affairs or his or her
 936 designee.

937 f. The President of the Senate or his or her designee.
 938 g. The Speaker of the House of Representatives or his or
 939 her designee.

940 h. A designee of Florida's Congressional Delegation.

941 (b) Each council member shall be appointed to a 4-year
 942 term. A member may not serve more than two full terms. Any
 943 council member may be removed from office for malfeasance,
 944 misfeasance, neglect of duty, incompetence, permanent inability
 945 to perform official duties, or pleading guilty or nolo
 946 contendere to, or being found guilty of, a felony. Any council
 947 member who meets the criteria for removal, or who is otherwise
 948 unwilling or unable to properly fulfill the duties of the
 949 office, shall be succeeded by an individual chosen by the State
 950 Surgeon General to serve out the remainder of the council
 951 member's term. If the remainder of the replaced council member's
 952 term is less than 18 months, notwithstanding the provisions of

953 this paragraph, the succeeding council member may be reappointed
 954 twice by the State Surgeon General.

955 (c) The chair of the council is the State Surgeon General,
 956 who shall designate a vice chair to serve in the absence of the
 957 State Surgeon General. A vacancy shall be filled for the
 958 remainder of the unexpired term in the same manner as the
 959 original appointment.

960 (d) Council members are not entitled to receive
 961 compensation or reimbursement for per diem or travel expenses.

962 (e) The council shall meet twice a year in person or by
 963 teleconference.

964 (f) The council shall:

965 1. Advise the State Surgeon General and the department on
 966 matters concerning current and future physician workforce needs
 967 in this state.

968 2. Review survey materials and the compilation of survey
 969 information.

970 3. Provide recommendations to the department for the
 971 development of additional items to be incorporated in the survey
 972 completed by physicians licensed under chapter 458 or chapter
 973 459.

974 4. Assist the department in preparing the annual report to
 975 the Legislature pursuant to ss. 458.3192 and 459.0082.

976 5. Assist the department in preparing an initial strategic
 977 plan, conducting ongoing strategic planning in accordance with
 978 this section, and providing ongoing advice on implementing the
 979 recommendations.

980 6. Monitor the need for an increased number of primary

981 care physicians to provide the necessary current and projected
 982 health and medical services for the state.

983 7. Monitor the status of graduate medical education in
 984 this state, including, but not limited to, as considered
 985 appropriate:

986 a. The role of residents and medical faculty in the
 987 provision of health care.

988 b. The relationship of graduate medical education to the
 989 state's physician workforce.

990 c. The availability and use of state and federal
 991 appropriated funds for graduate medical education.

992 Section 8. Section 392.51, Florida Statutes, is amended to
 993 read:

994 392.51 Findings and intent.—The Legislature finds and
 995 declares that active tuberculosis is a highly contagious
 996 infection that is sometimes fatal and constitutes a serious
 997 threat to the public health. The Legislature finds that there is
 998 a significant reservoir of tuberculosis infection in this state
 999 and that there is a need to develop community programs to
 1000 identify tuberculosis and to respond quickly with appropriate
 1001 measures. The Legislature finds that some patients who have
 1002 active tuberculosis have complex medical, social, and economic
 1003 problems that make outpatient control of the disease difficult,
 1004 if not impossible, without posing a threat to the public health.
 1005 The Legislature finds that in order to protect the citizenry
 1006 from those few persons who pose a threat to the public, it is
 1007 necessary to establish a system of mandatory contact
 1008 identification, treatment to cure, hospitalization, and

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1009 isolation for contagious cases and to provide a system of
 1010 voluntary, community-oriented care and surveillance in all other
 1011 cases. The Legislature finds that the delivery of tuberculosis
 1012 control services is best accomplished by the coordinated efforts
 1013 of the respective county health departments, ~~the A.G. Holley~~
 1014 ~~State Hospital,~~ and the private health care delivery system.

1015 Section 9. Subsection (5) is added to section 392.69,
 1016 Florida Statutes, to read:

1017 392.69 Appropriation, sinking, and maintenance trust
 1018 funds; additional powers of the department.—

1019 (5) The department shall develop a plan that exclusively
 1020 uses private and nonstate public hospitals to provide treatment
 1021 to cure, hospitalization, and isolation for persons with
 1022 contagious cases of tuberculosis who pose a threat to the
 1023 public. The department shall submit the plan to the Governor,
 1024 the President of the Senate, and the Speaker of the House of
 1025 Representatives by November 1, 2010. The plan shall include the
 1026 following elements:

1027 (a) Identification of hospitals functionally capable of
 1028 caring for such patients.

1029 (b) Reimbursement for hospital inpatient services at the
 1030 Medicaid rate and reimbursement for other medically necessary
 1031 services that are not hospital inpatient services at the
 1032 relevant Medicaid rate.

1033 (c) Projected cost estimates.

1034 (d) A transition plan for closing the A. G. Holley State
 1035 Hospital and transferring patients to private and nonstate
 1036 public hospitals over a 90-day period of time.

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1037 Section 10. Paragraph (d) of subsection (5) of section
1038 411.01, Florida Statutes, is amended to read:

1039 411.01 School readiness programs; early learning
1040 coalitions.—

1041 (5) CREATION OF EARLY LEARNING COALITIONS.—

1042 (d) Implementation.—

1043 1. An early learning coalition may not implement the
1044 school readiness program until the coalition is authorized
1045 through approval of the coalition's school readiness plan by the
1046 Agency for Workforce Innovation.

1047 2. Each early learning coalition shall develop a plan for
1048 implementing the school readiness program to meet the
1049 requirements of this section and the performance standards and
1050 outcome measures adopted by the Agency for Workforce Innovation.
1051 The plan must demonstrate how the program will ensure that each
1052 3-year-old and 4-year-old child in a publicly funded school
1053 readiness program receives scheduled activities and instruction
1054 designed to enhance the age-appropriate progress of the children
1055 in attaining the performance standards adopted by the Agency for
1056 Workforce Innovation under subparagraph (4) (d) 8. Before
1057 implementing the school readiness program, the early learning
1058 coalition must submit the plan to the Agency for Workforce
1059 Innovation for approval. The Agency for Workforce Innovation may
1060 approve the plan, reject the plan, or approve the plan with
1061 conditions. The Agency for Workforce Innovation shall review
1062 school readiness plans at least annually.

1063 3. If the Agency for Workforce Innovation determines
1064 during the annual review of school readiness plans, or through

1065 monitoring and performance evaluations conducted under paragraph
1066 (4)(1), that an early learning coalition has not substantially
1067 implemented its plan, has not substantially met the performance
1068 standards and outcome measures adopted by the agency, or has not
1069 effectively administered the school readiness program or
1070 Voluntary Prekindergarten Education Program, the Agency for
1071 Workforce Innovation may dissolve the coalition and temporarily
1072 contract with a qualified entity to continue school readiness
1073 and prekindergarten services in the coalition's county or
1074 multicounty region until the coalition is reestablished through
1075 resubmission of a school readiness plan and approval by the
1076 agency.

1077 4. The Agency for Workforce Innovation shall adopt
1078 criteria for the approval of school readiness plans. The
1079 criteria must be consistent with the performance standards and
1080 outcome measures adopted by the agency and must require each
1081 approved plan to include the following minimum standards and
1082 provisions:

1083 a. A sliding fee scale establishing a copayment for
1084 parents based upon their ability to pay, which is the same for
1085 all program providers, to be implemented and reflected in each
1086 program's budget.

1087 b. A choice of settings and locations in licensed,
1088 registered, religious-exempt, or school-based programs to be
1089 provided to parents.

1090 c. Instructional staff who have completed the training
1091 course as required in s. 402.305(2)(d)1., as well as staff who
1092 have additional training or credentials as required by the

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1093 Agency for Workforce Innovation. The plan must provide a method
1094 for assuring the qualifications of all personnel in all program
1095 settings.

1096 d. Specific eligibility priorities for children within the
1097 early learning coalition's county or multicounty region in
1098 accordance with subsection (6).

1099 e. Performance standards and outcome measures adopted by
1100 the Agency for Workforce Innovation.

1101 f. Payment rates adopted by the early learning coalition
1102 and approved by the Agency for Workforce Innovation. Payment
1103 rates may not have the effect of limiting parental choice or
1104 creating standards or levels of services that have not been
1105 authorized by the Legislature.

1106 g. Systems support services, including a central agency,
1107 child care resource and referral, eligibility determinations,
1108 training of providers, and parent support and involvement.

1109 h. Direct enhancement services to families and children.
1110 System support and direct enhancement services shall be in
1111 addition to payments for the placement of children in school
1112 readiness programs.

1113 i. The business organization of the early learning
1114 coalition, which must include the coalition's articles of
1115 incorporation and bylaws if the coalition is organized as a
1116 corporation. If the coalition is not organized as a corporation
1117 or other business entity, the plan must include the contract
1118 with a fiscal agent. An early learning coalition may contract
1119 with other coalitions to achieve efficiency in multicounty
1120 services, and these contracts may be part of the coalition's

1121 school readiness plan.

1122 j. Strategies to meet the needs of unique populations,
1123 such as migrant workers.

1124

1125 As part of the school readiness plan, the early learning
1126 coalition may request the Governor to apply for a waiver to
1127 allow the coalition to administer the Head Start Program to
1128 accomplish the purposes of the school readiness program. If a
1129 school readiness plan demonstrates that specific statutory goals
1130 can be achieved more effectively by using procedures that
1131 require modification of existing rules, policies, or procedures,
1132 a request for a waiver to the Agency for Workforce Innovation
1133 may be submitted as part of the plan. Upon review, the Agency
1134 for Workforce Innovation may grant the proposed modification.

1135 5. Persons with an early childhood teaching certificate
1136 may provide support and supervision to other staff in the school
1137 readiness program.

1138 6. An early learning coalition may not implement its
1139 school readiness plan until it submits the plan to and receives
1140 approval from the Agency for Workforce Innovation. Once the plan
1141 is approved, the plan and the services provided under the plan
1142 shall be controlled by the early learning coalition. The plan
1143 shall be reviewed and revised as necessary, but at least
1144 biennially. An early learning coalition may not implement the
1145 revisions until the coalition submits the revised plan to and
1146 receives approval from the Agency for Workforce Innovation. If
1147 the Agency for Workforce Innovation rejects a revised plan, the
1148 coalition must continue to operate under its prior approved

1149 plan.

1150 7. Sections 125.901(2)(a)3. and, 411.221, ~~and 411.232~~ do
 1151 not apply to an early learning coalition with an approved school
 1152 readiness plan. To facilitate innovative practices and to allow
 1153 the regional establishment of school readiness programs, an
 1154 early learning coalition may apply to the Governor and Cabinet
 1155 for a waiver of, and the Governor and Cabinet may waive, any of
 1156 the provisions of ss. 411.223, ~~411.232~~, and 1003.54, if the
 1157 waiver is necessary for implementation of the coalition's school
 1158 readiness plan.

1159 8. Two or more counties may join for purposes of planning
 1160 and implementing a school readiness program.

1161 9. An early learning coalition may, subject to approval by
 1162 the Agency for Workforce Innovation as part of the coalition's
 1163 school readiness plan, receive subsidized child care funds for
 1164 all children eligible for any federal subsidized child care
 1165 program.

1166 10. An early learning coalition may enter into multiparty
 1167 contracts with multicounty service providers in order to meet
 1168 the needs of unique populations such as migrant workers.

1169 Section 11. Paragraphs (f) and (g) of subsection (2) of
 1170 section 411.224, Florida Statutes, are redesignated as
 1171 paragraphs (e) and (f), respectively, and present paragraph (e)
 1172 of that subsection is amended to read:

1173 411.224 Family support planning process.—The Legislature
 1174 establishes a family support planning process to be used by the
 1175 Department of Children and Family Services as the service
 1176 planning process for targeted individuals, children, and

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1177 families under its purview.

1178 (2) To the extent possible within existing resources, the
 1179 following populations must be included in the family support
 1180 planning process:

1181 ~~(e) Participants who are served by the Children's Early~~
 1182 ~~Investment Program established in s. 411.232.~~

1183 Section 12. Section 458.3192, Florida Statutes, is amended
 1184 to read:

1185 458.3192 Analysis of survey results; report.—

1186 (1) Each year, the Department of Health shall analyze the
 1187 results of the physician survey required by s. 458.3191 and
 1188 determine by geographic area and specialty the number of
 1189 physicians who:

1190 (a) Perform deliveries of children in this state ~~Florida~~.

1191 (b) Read mammograms and perform breast-imaging-guided
 1192 procedures in this state ~~Florida~~.

1193 (c) Perform emergency care on an on-call basis for a
 1194 hospital emergency department.

1195 (d) Plan to reduce or increase emergency on-call hours in
 1196 a hospital emergency department.

1197 (e) Plan to relocate ~~their allopathic or osteopathic~~
 1198 ~~practice~~ outside the state.

1199 (f) Practice medicine in this state.

1200 (g) Reduce or modify the scope of their practice.

1201 (2) The Department of Health must report its findings to
 1202 the Governor, the President of the Senate, and the Speaker of
 1203 the House of Representatives by November 1 each year. The
 1204 department may also include in its report findings,

1205 recommendations, or other information requested by the council.

1206 Section 13. Section 459.0082, Florida Statutes, is amended
1207 to read:

1208 459.0082 Analysis of survey results; report.—

1209 (1) Each year, the Department of Health shall analyze the
1210 results of the physician survey required by s. 459.0081 and
1211 determine by geographic area and specialty the number of
1212 physicians who:

1213 (a) Perform deliveries of children in this state ~~Florida~~.

1214 (b) Read mammograms and perform breast-imaging-guided
1215 procedures in this state ~~Florida~~.

1216 (c) Perform emergency care on an on-call basis for a
1217 hospital emergency department.

1218 (d) Plan to reduce or increase emergency on-call hours in
1219 a hospital emergency department.

1220 (e) Plan to relocate ~~their allopathic or osteopathic~~
1221 ~~practice~~ outside the state.

1222 (f) Practice medicine in this state.

1223 (g) Reduce or modify the scope of their practice.

1224 (2) The Department of Health must report its findings to
1225 the Governor, the President of the Senate, and the Speaker of
1226 the House of Representatives by November 1 each year. The
1227 department may also include in its report findings,
1228 recommendations, or other information requested by the council.

1229 Section 14. Paragraph (q) of subsection (2) of section
1230 499.01, Florida Statutes, is amended to read:

1231 499.01 Permits.—

1232 (2) The following permits are established:

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1233 (q) Device manufacturer permit.—

1234 1. A device manufacturer permit is required for any person
 1235 that engages in the manufacture, repackaging, or assembly of
 1236 medical devices for human use in this state, except that a
 1237 permit is not required if:

1238 a. The person is engaged only in manufacturing,
 1239 repackaging, or assembling a medical device pursuant to a
 1240 practitioner's order for a specific patient; or

1241 b. The person does not manufacture, repackage, or assemble
 1242 any medical devices or components for such devices, except those
 1243 devices or components which are exempt from registration
 1244 pursuant to s. 499.015(8).

1245 ~~2.1.~~ A manufacturer or repackager of medical devices in
 1246 this state must comply with all appropriate state and federal
 1247 good manufacturing practices and quality system rules.

1248 ~~3.2.~~ The department shall adopt rules related to storage,
 1249 handling, and recordkeeping requirements for manufacturers of
 1250 medical devices for human use.

1251 Section 15. Paragraph (i) is added to subsection (3) of
 1252 section 499.01212, Florida Statutes, to read:

1253 499.01212 Pedigree paper.—

1254 (3) EXCEPTIONS.—A pedigree paper is not required for:

1255 (i) The wholesale distribution of prescription drugs that
 1256 are contained within a sealed medical convenience kit provided
 1257 that:

1258 1. The medical convenience kit is assembled in an
 1259 establishment that is registered as a medical device
 1260 manufacturer with the Food and Drug Administration; and

1261 2. The medical convenience kit does not contain any
 1262 controlled substance that appears in any schedule contained in
 1263 or subject to chapter 893 or the federal Comprehensive Drug
 1264 Abuse Prevention and Control Act of 1970.

1265 Section 16. Section 499.029, Florida Statutes, is amended
 1266 to read:

1267 499.029 Prescription ~~Cancer~~ Drug Donation Program.—

1268 (1) This section may be cited as the Prescription "~~Cancer~~
 1269 Drug Donation Program Act."

1270 (2) There is created a Prescription ~~Cancer~~ Drug Donation
 1271 Program within the department for the purpose of authorizing and
 1272 facilitating the donation of prescription ~~cancer~~ drugs and
 1273 supplies to eligible patients.

1274 (3) As used in this section, the term:

1275 ~~(a) "Cancer drug" means a prescription drug that has been~~
 1276 ~~approved under s. 505 of the federal Food, Drug, and Cosmetic~~
 1277 ~~Act and is used to treat cancer or its side effects or is used~~
 1278 ~~to treat the side effects of a prescription drug used to treat~~
 1279 ~~cancer or its side effects. "Cancer drug" does not include a~~
 1280 ~~substance listed in Schedule II, Schedule III, Schedule IV, or~~
 1281 ~~Schedule V of s. 893.03.~~

1282 (a) (b) "Closed drug delivery system" means a system in
 1283 which the actual control of the unit-dose medication package is
 1284 maintained by the facility rather than by the individual
 1285 patient.

1286 (b) "Dispensing practitioner" means a practitioner
 1287 registered under s. 465.0276.

1288 (c) "Donor" means a patient or patient representative who

1289 donates prescription ~~cancer~~ drugs or supplies needed to
 1290 administer prescription ~~cancer~~ drugs that have been maintained
 1291 within a closed drug delivery system; health care facilities,
 1292 nursing homes, hospices, or hospitals with closed drug delivery
 1293 systems; or pharmacies, prescription drug manufacturers, medical
 1294 device manufacturers or suppliers, or wholesalers of
 1295 prescription drugs or supplies, in accordance with this section.
 1296 The term "donor" includes a physician licensed under chapter 458
 1297 or chapter 459 who receives prescription ~~cancer~~ drugs or
 1298 supplies directly from a drug manufacturer, wholesale
 1299 distributor, or pharmacy.

1300 (d) "Eligible patient" means a person who the department
 1301 determines is eligible to receive prescription ~~cancer~~ drugs from
 1302 the program.

1303 (e) "Participant ~~facility~~" means a ~~class II hospital~~
 1304 pharmacy or dispensing practitioner that has elected to
 1305 participate in the program and that accepts donated prescription
 1306 ~~cancer~~ drugs and supplies under the rules adopted by the
 1307 department for the program.

1308 (f) "Prescribing practitioner" means a physician licensed
 1309 under chapter 458 or chapter 459 or any other medical
 1310 professional with authority under state law to prescribe drugs
 1311 ~~cancer medication~~.

1312 (g) "Prescription drug" does not include a substance
 1313 listed in Schedule II, Schedule III, Schedule IV, or Schedule V
 1314 of s. 893.03.

1315 (h) ~~(g)~~ "Program" means the Prescription Cancer Drug
 1316 Donation Program created by this section.

1317 (i) ~~(h)~~ "Supplies" means any supplies used in the
 1318 administration of a prescription ~~cancer~~ drug.

1319 (4) Any donor may donate prescription ~~cancer~~ drugs or
 1320 supplies to a participant ~~facility~~ that elects to participate in
 1321 the program and meets criteria established by the department for
 1322 such participation. Prescription ~~Cancer~~ drugs or supplies may
 1323 not be donated to a specific ~~cancer~~ patient, and donated
 1324 prescription drugs or supplies may not be resold by the
 1325 participant ~~program~~. Prescription ~~Cancer~~ drugs billed to and
 1326 paid for by Medicaid in long-term care facilities that are
 1327 eligible for return to stock under federal Medicaid regulations
 1328 shall be credited to Medicaid and are not eligible for donation
 1329 under the program. A participant ~~facility~~ may provide dispensing
 1330 and counseling ~~consulting~~ services to individuals who are not
 1331 patients of the participant ~~hospital~~.

1332 (5) The prescription ~~cancer~~ drugs or supplies donated to
 1333 the program may be prescribed only by a prescribing practitioner
 1334 for use by an eligible patient and may be dispensed only by a
 1335 pharmacist or a dispensing practitioner.

1336 (6) (a) A prescription ~~cancer~~ drug may only be accepted or
 1337 dispensed under the program if the drug is in its original,
 1338 unopened, sealed container, or in a tamper-evident unit-dose
 1339 packaging, except that a prescription ~~cancer~~ drug packaged in
 1340 single-unit doses may be accepted and dispensed if the outside
 1341 packaging is opened but the single-unit-dose packaging is
 1342 unopened with tamper-resistant packaging intact.

1343 (b) A prescription ~~cancer~~ drug may not be accepted or
 1344 dispensed under the program if the drug bears an expiration date

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1345 that is less than 6 months after the date the drug was donated
 1346 or if the drug appears to have been tampered with or mislabeled
 1347 as determined in paragraph (c).

1348 (c) Before ~~Prior to~~ being dispensed to an eligible
 1349 patient, the prescription ~~cancer~~ drug or supplies donated under
 1350 the program shall be inspected by a pharmacist or dispensing
 1351 practitioner to determine that the drug and supplies do not
 1352 appear to have been tampered with or mislabeled.

1353 (d) A dispenser of donated prescription ~~cancer~~ drugs or
 1354 supplies may not submit a claim or otherwise seek reimbursement
 1355 from any public or private third-party payor for donated
 1356 prescription ~~cancer~~ drugs or supplies dispensed to any patient
 1357 under the program, and a public or private third-party payor is
 1358 not required to provide reimbursement to a dispenser for donated
 1359 prescription ~~cancer~~ drugs or supplies dispensed to any patient
 1360 under the program.

1361 (7) (a) A donation of prescription ~~cancer~~ drugs or supplies
 1362 shall be made only at a participant's ~~participant~~ facility. A
 1363 participant ~~facility~~ may decline to accept a donation. A
 1364 participant ~~facility~~ that accepts donated prescription ~~cancer~~
 1365 drugs or supplies under the program shall comply with all
 1366 applicable provisions of state and federal law relating to the
 1367 storage and dispensing of the donated prescription ~~cancer~~ drugs
 1368 or supplies.

1369 (b) A participant ~~facility~~ that voluntarily takes part in
 1370 the program may charge a handling fee sufficient to cover the
 1371 cost of preparation and dispensing of prescription ~~cancer~~ drugs
 1372 or supplies under the program. The fee shall be established in

1373 rules adopted by the department.

1374 (8) The department, upon the recommendation of the Board
 1375 of Pharmacy, shall adopt rules to carry out the provisions of
 1376 this section. ~~Initial rules under this section shall be adopted~~
 1377 ~~no later than 90 days after the effective date of this act.~~ The
 1378 rules shall include, but not be limited to:

1379 (a) Eligibility criteria, including a method to determine
 1380 priority of eligible patients under the program.

1381 (b) Standards and procedures for participants ~~participant~~
 1382 ~~facilities~~ that accept, store, distribute, or dispense donated
 1383 prescription cancer drugs or supplies.

1384 (c) Necessary forms for administration of the program,
 1385 including, but not limited to, forms for use by entities that
 1386 donate, accept, distribute, or dispense prescription cancer
 1387 drugs or supplies under the program.

1388 (d) The maximum handling fee that may be charged by a
 1389 participant ~~facility~~ that accepts and distributes or dispenses
 1390 donated prescription cancer drugs or supplies.

1391 (e) Categories of prescription cancer drugs and supplies
 1392 that the program will accept for dispensing; however, the
 1393 department may exclude any drug based on its therapeutic
 1394 effectiveness or high potential for abuse or diversion.

1395 (f) Maintenance and distribution of the participant
 1396 ~~facility~~ registry established in subsection (10).

1397 (9) A person who is eligible to receive prescription
 1398 ~~cancer~~ drugs or supplies under the state Medicaid program or
 1399 under any other prescription drug program funded in whole or in
 1400 part by the state, by any other prescription drug program funded

1401 in whole or in part by the Federal Government, or by any other
 1402 prescription drug program offered by a third-party insurer,
 1403 unless benefits have been exhausted, ~~7~~ or a certain prescription
 1404 ~~cancer~~ drug or supply is not covered by the prescription drug
 1405 program, is ineligible to participate in the program created
 1406 under this section.

1407 (10) The department shall establish and maintain a
 1408 participant ~~facility~~ registry for the program. The participant
 1409 ~~facility~~ registry shall include the participant's ~~participant~~
 1410 ~~facility's~~ name, address, and telephone number. The department
 1411 shall make the participant ~~facility~~ registry available on the
 1412 department's website to any donor wishing to donate prescription
 1413 ~~cancer~~ drugs or supplies to the program. The department's
 1414 website shall also contain links to prescription ~~cancer~~ drug
 1415 manufacturers that offer drug assistance programs or free
 1416 medication.

1417 (11) Any donor of prescription ~~cancer~~ drugs or supplies,
 1418 or any participant in the program, who exercises reasonable care
 1419 in donating, accepting, distributing, or dispensing prescription
 1420 ~~cancer~~ drugs or supplies under the program and the rules adopted
 1421 under this section shall be immune from civil or criminal
 1422 liability and from professional disciplinary action of any kind
 1423 for any injury, death, or loss to person or property relating to
 1424 such activities.

1425 (12) A pharmaceutical manufacturer is not liable for any
 1426 claim or injury arising from the transfer of any prescription
 1427 ~~cancer~~ drug under this section, including, but not limited to,
 1428 liability for failure to transfer or communicate product or

1429 consumer information regarding the transferred drug, as well as
 1430 the expiration date of the transferred drug.

1431 (13) If any conflict exists between the provisions in this
 1432 section and the provisions in this chapter or chapter 465, the
 1433 provisions in this section shall control the operation of the
 1434 ~~Cancer Drug Donation~~ program.

1435 Section 17. Subsections (4) and (5) of section 509.013,
 1436 Florida Statutes, are amended to read:

1437 509.013 Definitions.—As used in this chapter, the term:

1438 (4) (a) "Public lodging establishment" includes a transient
 1439 public lodging establishment as defined in subparagraph 1. and a
 1440 nontransient public lodging establishment as defined in
 1441 subparagraph 2.

1442 1. "Transient public lodging establishment" means any
 1443 unit, group of units, dwelling, building, or group of buildings
 1444 within a single complex of buildings which is rented to guests
 1445 more than three times in a calendar year for periods of less
 1446 than 30 days or 1 calendar month, whichever is less, or which is
 1447 advertised or held out to the public as a place regularly rented
 1448 to guests.

1449 2. "Nontransient public lodging establishment" means any
 1450 unit, group of units, dwelling, building, or group of buildings
 1451 within a single complex of buildings which is rented to guests
 1452 for periods of at least 30 days or 1 calendar month, whichever
 1453 is less, or which is advertised or held out to the public as a
 1454 place regularly rented to guests for periods of at least 30 days
 1455 or 1 calendar month.

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1457 License classifications of public lodging establishments, and
1458 the definitions therefor, are set out in s. 509.242. For the
1459 purpose of licensure, the term does not include condominium
1460 common elements as defined in s. 718.103.

1461 (b) The following are excluded from the definitions in
1462 paragraph (a):

1463 1. Any dormitory or other living or sleeping facility
1464 maintained by a public or private school, college, or university
1465 for the use of students, faculty, or visitors;

1466 2. Any facility certified or licensed and regulated by the
1467 Agency for Health Care Administration or the Department of
1468 Children and Family Services ~~hospital, nursing home, sanitarium,~~
1469 ~~assisted living facility,~~ or other similar place regulated under
1470 s. 381.0072;

1471 3. Any place renting four rental units or less, unless the
1472 rental units are advertised or held out to the public to be
1473 places that are regularly rented to transients;

1474 4. Any unit or group of units in a condominium,
1475 cooperative, or timeshare plan and any individually or
1476 collectively owned one-family, two-family, three-family, or
1477 four-family dwelling house or dwelling unit that is rented for
1478 periods of at least 30 days or 1 calendar month, whichever is
1479 less, and that is not advertised or held out to the public as a
1480 place regularly rented for periods of less than 1 calendar
1481 month, provided that no more than four rental units within a
1482 single complex of buildings are available for rent;

1483 5. Any migrant labor camp or residential migrant housing
1484 permitted by the Department of Health; under ss. 381.008-

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1485 381.00895; and

1486 6. Any establishment inspected by the Department of Health
1487 and regulated by chapter 513.

1488 (5) (a) "Public food service establishment" means any
1489 building, vehicle, place, or structure, or any room or division
1490 in a building, vehicle, place, or structure where food is
1491 prepared, served, or sold for immediate consumption on or in the
1492 vicinity of the premises; called for or taken out by customers;
1493 or prepared prior to being delivered to another location for
1494 consumption.

1495 (b) The following are excluded from the definition in
1496 paragraph (a):

1497 1. Any place maintained and operated by a public or
1498 private school, college, or university:

1499 a. For the use of students and faculty; or

1500 b. Temporarily to serve such events as fairs, carnivals,
1501 and athletic contests.

1502 2. Any eating place maintained and operated by a church or
1503 a religious, nonprofit fraternal, or nonprofit civic
1504 organization:

1505 a. For the use of members and associates; or

1506 b. Temporarily to serve such events as fairs, carnivals,
1507 or athletic contests.

1508 3. Any eating place located on an airplane, train, bus, or
1509 watercraft which is a common carrier.

1510 4. Any eating place maintained by a facility certified or
1511 licensed and regulated by the Agency for Health Care
1512 Administration or the Department of Children and Family Services

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1513 ~~hospital, nursing home, sanitarium, assisted living facility,~~
 1514 ~~adult day care center,~~ or other similar place that is regulated
 1515 under s. 381.0072.

1516 5. Any place of business issued a permit or inspected by
 1517 the Department of Agriculture and Consumer Services under s.
 1518 500.12.

1519 6. Any place of business where the food available for
 1520 consumption is limited to ice, beverages with or without
 1521 garnishment, popcorn, or prepackaged items sold without
 1522 additions or preparation.

1523 7. Any theater, if the primary use is as a theater and if
 1524 patron service is limited to food items customarily served to
 1525 the admittees of theaters.

1526 8. Any vending machine that dispenses any food or
 1527 beverages other than potentially hazardous foods, as defined by
 1528 division rule.

1529 9. Any vending machine that dispenses potentially
 1530 hazardous food and which is located in a facility regulated
 1531 under s. 381.0072.

1532 10. Any research and development test kitchen limited to
 1533 the use of employees and which is not open to the general
 1534 public.

1535 Section 18. (1) All of the statutory powers, duties, and
 1536 functions, records, personnel, property, and unexpended balances
 1537 of appropriations, allocations, or other funds for the
 1538 administration of part I of chapter 499, Florida Statutes,
 1539 relating to drugs, devices, cosmetics, and household products
 1540 shall be transferred by a type two transfer, as defined in s.

1541 20.06(2), Florida Statutes, from the Department of Health to the
 1542 Department of Business and Professional Regulation.

1543 (2) The transfer of regulatory authority under part I of
 1544 chapter 499, Florida Statutes, provided by this section shall
 1545 not affect the validity of any judicial or administrative action
 1546 pending as of 11:59 p.m. on the day before the effective date of
 1547 this section to which the Department of Health is at that time a
 1548 party, and the Department of Business and Professional
 1549 Regulation shall be substituted as a party in interest in any
 1550 such action.

1551 (3) All lawful orders issued by the Department of Health
 1552 implementing or enforcing or otherwise in regard to any
 1553 provision of part I of chapter 499, Florida Statutes, issued
 1554 prior to the effective date of this section shall remain in
 1555 effect and be enforceable after the effective date of this
 1556 section unless thereafter modified in accordance with law.

1557 (4) The rules of the Department of Health relating to the
 1558 implementation of part I of chapter 499, Florida Statutes, that
 1559 were in effect at 11:59 p.m. on the day prior to the effective
 1560 date of this section shall become the rules of the Department of
 1561 Business and Professional Regulation and shall remain in effect
 1562 until amended or repealed in the manner provided by law.

1563 (5) Notwithstanding the transfer of regulatory authority
 1564 under part I of chapter 499, Florida Statutes, provided by this
 1565 section, persons and entities holding in good standing any
 1566 permit under part I of chapter 499, Florida Statutes, as of
 1567 11:59 p.m. on the day prior to the effective date of this
 1568 section shall, as of the effective date of this section, be

1569 deemed to hold in good standing a permit in the same capacity as
 1570 that for which the permit was formerly issued.

1571 (6) Notwithstanding the transfer of regulatory authority
 1572 under part I of chapter 499, Florida Statutes, provided by this
 1573 section, persons holding in good standing any certification
 1574 under part I of chapter 499, Florida Statutes, as of 11:59 p.m.
 1575 on the day prior to the effective date of this section shall, as
 1576 of the effective date of this section, be deemed to be certified
 1577 in the same capacity in which they were formerly certified.

1578 (7) This section shall take effect July 1, 2011.

1579 Section 19. (1) All of the statutory powers, duties, and
 1580 functions, records, personnel, property, and unexpended balances
 1581 of appropriations, allocations, or other funds for the
 1582 administration of the boards and professions established within
 1583 the Division of Medical Quality Assurance as specified in s.
 1584 20.43(3)(g), Florida Statutes, shall be transferred by a type
 1585 two transfer, as defined in s. 20.06(2), Florida Statutes, from
 1586 the Department of Health to the Department of Business and
 1587 Professional Regulation.

1588 (2) The transfer of regulatory authority of the Division
 1589 of Medical Quality Assurance provided by this section shall not
 1590 affect the validity of any judicial or administrative action
 1591 pending as of 11:59 p.m. on the day before the effective date of
 1592 this section to which the Department of Health is at that time a
 1593 party, and the Department of Business and Professional
 1594 Regulation shall be substituted as a party in interest in any
 1595 such action.

1596 (3) All lawful orders issued by the Department of Health

1597 implementing or enforcing or otherwise in regard to any function
 1598 of the Division of Medical Quality Assurance issued prior to the
 1599 effective date of this section shall remain in effect and be
 1600 enforceable after the effective date of this section unless
 1601 thereafter modified in accordance with law.

1602 (4) The rules of the Department of Health relating to the
 1603 implementation of statutory directives administered by the
 1604 Division of Medical Quality Assurance that were in effect at
 1605 11:59 p.m. on the day prior to the effective date of this
 1606 section shall become the rules of the Department of Business and
 1607 Professional Regulation and shall remain in effect until amended
 1608 or repealed in the manner provided by law.

1609 (5) Notwithstanding the transfer of regulatory authority
 1610 of the Division of Medical Quality Assurance provided by this
 1611 section, persons and entities holding in good standing any
 1612 license or permit issued by the Division of Medical Quality
 1613 Assurance as of 11:59 p.m. on the day prior to the effective
 1614 date of this section shall, as of the effective date of this
 1615 section, be deemed to hold in good standing a permit in the same
 1616 capacity as that for which the permit was formerly issued.

1617 (6) Notwithstanding the transfer of regulatory authority
 1618 of the Division of Medical Quality Assurance provided by this
 1619 section, persons holding in good standing any certification
 1620 issued by the Division of Medical Quality Assurance as of 11:59
 1621 p.m. on the day prior to the effective date of this section
 1622 shall, as of the effective date of this section, be deemed to be
 1623 certified in the same capacity in which they were formerly
 1624 certified.

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1625 | (7) This section shall take effect July 1, 2011.
1626 | Section 20. Except as otherwise expressly provided in this
1627 | act, this act shall take effect July 1, 2010.