

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 s. 456.074, F.S.; requiring the Secretary of  
58 | Business and Professional Regulation to consult with the  
59 | State Surgeon General before issuing an emergency  
60 | suspension order for certain licensed providers; providing  
61 | a deadline for the recommendation; amending ss. 458.3192  
62 | and 459.0082, F.S.; requiring the department to determine  
63 | by geographic area and specialty the number of physicians  
64 | who plan to relocate outside the state, practice medicine  
65 | in this state, and reduce or modify the scope of their  
66 | practice; authorizing the department to include additional  
67 | information in its report to the Governor and Legislature;  
68 | amending s. 499.003, F.S.; defining the term "medical  
69 | convenience kit" for purposes of pt. I of ch. 499, F.S.;  
70 | conforming cross-references; amending s. 499.01, F.S.;  
71 | creating an exemption from device manufacturer permits for  
72 | certain persons; amending s. 499.01212, F.S.; exempting  
73 | specified prescription drugs from pedigree paper  
74 | requirements under certain circumstances; amending s.  
75 | 499.029, F.S.; renaming the Cancer Drug Donation Program  
76 | as the Prescription Drug Donation Program; revising  
77 | definitions; expanding the drugs and supplies that may be  
78 | donated under the program; expanding the types of  
79 | facilities and practitioners that may participate in the  
80 | program; conforming provisions to changes in terminology;  
81 | amending s. 509.013, F.S.; revising the definitions of the  
82 | terms "public lodging establishment" and "public food  
83 | establishment"; transferring and reassigning certain  
84 | functions and responsibilities, including records,

85 personnel, property, and unexpended balances of  
 86 appropriations and other resources, from the Department of  
 87 Health to the Department of Business and Professional  
 88 Regulation by a type two transfer; providing for the  
 89 continued validity of pending judicial or administrative  
 90 actions to which the Department of Health is a party;  
 91 providing for the continued validity of lawful orders  
 92 issued by the Department of Health; transferring rules  
 93 created by the Department of Health to the Department of  
 94 Business and Professional Regulation; providing for the  
 95 continued validity of permits and certifications issued by  
 96 the Department of Health; providing effective dates.

97

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

99

100 Section 1. Section 20.43, Florida Statutes, is amended to  
 101 read:

102 20.43 Department of Health.—There is created a Department  
 103 of Health.

104 (1) (a) ~~The purpose of the Department of Health is~~  
 105 ~~responsible for to promote and protect the health of all~~  
 106 ~~residents and visitors in the state through organized state and~~  
 107 ~~community efforts, including cooperative agreements with~~  
 108 ~~counties. The department shall:~~

109 1.(a) Identifying, diagnosing, investigating, and  
 110 conducting surveillance of communicable diseases in the state  
 111 ~~Prevent to the fullest extent possible, the occurrence and~~  
 112 ~~progression of communicable and noncommunicable diseases and~~

113 ~~disabilities.~~

114 2.(b) Maintaining ~~Maintain~~ a constant surveillance of  
115 disease occurrence and accumulating ~~accumulate~~ health statistics  
116 necessary to establish disease trends and to design health  
117 programs.

118 3. Implementing interventions that prevent or limit the  
119 impact or spread of disease in the state.

120 4.(e) Maintaining and coordinating preparedness for and  
121 responses to public health emergencies in the state ~~Conduct~~  
122 ~~special studies of the causes of diseases and formulate~~  
123 ~~preventive strategies.~~

124 5.(d) Regulating environmental activities that have a  
125 direct impact on public health in the state ~~Promote the~~  
126 ~~maintenance and improvement of the environment as it affects~~  
127 ~~public health.~~

128 6.(e) Administering and providing health and related  
129 services for targeted populations in the state ~~Promote the~~  
130 ~~maintenance and improvement of health in the residents of the~~  
131 ~~state.~~

132 7.(f) Collecting, managing, and analyzing vital statistics  
133 data in the state ~~Provide leadership, in cooperation with the~~  
134 ~~public and private sectors, in establishing statewide and~~  
135 ~~community public health delivery systems.~~

136 ~~(g) Provide health care and early intervention services to~~  
137 ~~infants, toddlers, children, adolescents, and high risk~~  
138 ~~perinatal patients who are at risk for disabling conditions or~~  
139 ~~have chronic illnesses.~~

140 ~~(h) Provide services to abused and neglected children~~

141 ~~through child protection teams and sexual abuse treatment~~  
142 ~~programs.~~

143 ~~(i) Develop working associations with all agencies and~~  
144 ~~organizations involved and interested in health and health care~~  
145 ~~delivery.~~

146 ~~(j) Analyze trends in the evolution of health systems, and~~  
147 ~~identify and promote the use of innovative, cost-effective~~  
148 ~~health delivery systems.~~

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

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

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

167 (b) By November 1, 2010, the department shall submit a  
168 proposal to the President of the Senate, the Speaker of the

169 House of Representatives, and the appropriate substantive  
 170 legislative committees for a new department structure based upon  
 171 the responsibilities delegated under paragraph (a). The proposal  
 172 shall include reductions in the number of departmental bureaus  
 173 and divisions and limits on the number of executive positions in  
 174 a manner that enables the department to fulfill the  
 175 responsibilities delegated under paragraph (a). The department  
 176 shall identify existing functions and activities that are  
 177 inconsistent with the responsibilities delegated under paragraph  
 178 (a) and shall provide a job description for each bureau chief  
 179 and division director position proposed for retention.

180 (2)~~(a)~~ The head of the Department of Health is the State  
 181 Surgeon General and State Health Officer. The State Surgeon  
 182 General must be a physician licensed under chapter 458 or  
 183 chapter 459 who has advanced training or extensive experience in  
 184 public health administration. The State Surgeon General is  
 185 appointed by the Governor subject to confirmation by the Senate.  
 186 The State Surgeon General serves at the pleasure of the  
 187 Governor. The State Surgeon General shall manage the department  
 188 as it carries out the responsibilities delegated under paragraph  
 189 (1) (a) serve as the leading voice on wellness and disease  
 190 prevention efforts, including the promotion of healthful  
 191 lifestyles, immunization practices, health literacy, and the  
 192 assessment and promotion of the physician and health care  
 193 workforce in order to meet the health care needs of the state.  
 194 ~~The State Surgeon General shall focus on advocating healthy~~  
 195 ~~lifestyles, developing public health policy, and building~~  
 196 ~~collaborative partnerships with schools, businesses, health care~~

197 ~~practitioners, community-based organizations, and public and~~  
 198 ~~private institutions in order to promote health literacy and~~  
 199 ~~optimum quality of life for all Floridians.~~

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

203 (3) The following divisions of the Department of Health  
 204 are established:

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

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

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

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

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

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

223 (g) Division of Medical Quality Assurance, which is  
 224 responsible for the following boards and professions established



- 225 within the division:
- 226 1. The Board of Acupuncture, created under chapter 457.
  - 227 2. The Board of Medicine, created under chapter 458.
  - 228 3. The Board of Osteopathic Medicine, created under  
229 chapter 459.
  - 230 4. The Board of Chiropractic Medicine, created under  
231 chapter 460.
  - 232 5. The Board of Podiatric Medicine, created under chapter  
233 461.
  - 234 6. Naturopathy, as provided under chapter 462.
  - 235 7. The Board of Optometry, created under chapter 463.
  - 236 8. The Board of Nursing, created under part I of chapter  
237 464.
  - 238 9. Nursing assistants, as provided under part II of  
239 chapter 464.
  - 240 10. The Board of Pharmacy, created under chapter 465.
  - 241 11. The Board of Dentistry, created under chapter 466.
  - 242 12. Midwifery, as provided under chapter 467.
  - 243 13. The Board of Speech-Language Pathology and Audiology,  
244 created under part I of chapter 468.
  - 245 14. The Board of Nursing Home Administrators, created  
246 under part II of chapter 468.
  - 247 15. The Board of Occupational Therapy, created under part  
248 III of chapter 468.
  - 249 16. Respiratory therapy, as provided under part V of  
250 chapter 468.
  - 251 17. Dietetics and nutrition practice, as provided under  
252 part X of chapter 468.

- 253 |       18. The Board of Athletic Training, created under part
- 254 | XIII of chapter 468.
- 255 |       19. The Board of Orthotists and Prosthetists, created
- 256 | under part XIV of chapter 468.
- 257 |       20. Electrolysis, as provided under chapter 478.
- 258 |       21. The Board of Massage Therapy, created under chapter
- 259 | 480.
- 260 |       22. The Board of Clinical Laboratory Personnel, created
- 261 | under part III of chapter 483.
- 262 |       23. Medical physicists, as provided under part IV of
- 263 | chapter 483.
- 264 |       24. The Board of Opticianry, created under part I of
- 265 | chapter 484.
- 266 |       25. The Board of Hearing Aid Specialists, created under
- 267 | part II of chapter 484.
- 268 |       26. The Board of Physical Therapy Practice, created under
- 269 | chapter 486.
- 270 |       27. The Board of Psychology, created under chapter 490.
- 271 |       28. School psychologists, as provided under chapter 490.
- 272 |       29. The Board of Clinical Social Work, Marriage and Family
- 273 | Therapy, and Mental Health Counseling, created under chapter
- 274 | 491.

275 |  
 276 | This paragraph expires July 1, 2011.

277 |       (h) Division of Children's Medical Services Prevention and

278 | Intervention. This paragraph expires July 1, 2011, unless

279 | reviewed and reenacted by the Legislature before that date.

280 |       (i) Division of Information Technology. This paragraph

281 expires July 1, 2011, unless reviewed and reenacted by the  
 282 Legislature before that date.

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

286 (k) Division of Disability Determinations. This paragraph  
 287 expires July 1, 2011, unless reviewed and reenacted by the  
 288 Legislature before that date.

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

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

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

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

301  
 302 A member whose term has expired shall continue to serve on the  
 303 board until such time as a replacement is appointed. A vacancy  
 304 on the board shall be filled for the unexpired portion of the  
 305 term in the same manner as the original appointment. No member  
 306 may serve for more than the remaining portion of a previous  
 307 member's unexpired term, plus two consecutive 4-year terms of  
 308 the member's own appointment thereafter.

309 (b) Each board with five or more members shall have at  
 310 least two consumer members who are not, and have never been,  
 311 members or practitioners of the profession regulated by such  
 312 board or of any closely related profession. Each board with  
 313 fewer than five members shall have at least one consumer member  
 314 who is not, and has never been, a member or practitioner of the  
 315 profession regulated by such board or of any closely related  
 316 profession.

317 (c) Notwithstanding any other provision of law, the  
 318 department is authorized to establish uniform application forms  
 319 and certificates of licensure for use by the boards within the  
 320 department. Nothing in this paragraph authorizes the department  
 321 to vary any substantive requirements, duties, or eligibilities  
 322 for licensure or certification as provided by law.

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

333 (6) The State Surgeon General may ~~and division directors~~  
 334 ~~are authorized to~~ appoint ad hoc advisory committees as  
 335 necessary to address issues relating to the responsibilities  
 336 delegated to the department under paragraph (1)(a). The issue or

337 | problem that the ad hoc committee shall address, and the  
338 | timeframe within which the committee is to complete its work,  
339 | shall be specified at the time the committee is appointed. Ad  
340 | hoc advisory committees shall include representatives of groups  
341 | or entities affected by the issue or problem that the committee  
342 | is asked to examine. Members of ad hoc advisory committees shall  
343 | receive no compensation, but may, within existing departmental  
344 | resources, receive reimbursement for travel expenses as provided  
345 | in s. 112.061.

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

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

357 | ~~(b) Plan and conduct health education campaigns for the~~  
358 | ~~purpose of protecting or improving public health. The department~~  
359 | ~~may purchase promotional items, such as, but not limited to, t-~~  
360 | ~~shirts, hats, sports items such as water bottles and sweat~~  
361 | ~~bands, calendars, nutritional charts, baby bibs, growth charts,~~  
362 | ~~and other items printed with health promotion messages, and~~  
363 | ~~advertising, such as space on billboards or in publications or~~  
364 | ~~radio or television time, for health information and promotional~~

365 ~~messages that recognize that the following behaviors, among~~  
366 ~~others, are detrimental to public health: unprotected sexual~~  
367 ~~intercourse, other than with one's spouse; cigarette and cigar~~  
368 ~~smoking, use of smokeless tobacco products, and exposure to~~  
369 ~~environmental tobacco smoke; alcohol consumption or other~~  
370 ~~substance abuse during pregnancy; alcohol abuse or other~~  
371 ~~substance abuse; lack of exercise and poor diet and nutrition~~  
372 ~~habits; and failure to recognize and address a genetic tendency~~  
373 ~~to suffer from sickle-cell anemia, diabetes, high blood~~  
374 ~~pressure, cardiovascular disease, or cancer. For purposes of~~  
375 ~~activities under this paragraph, the Department of Health may~~  
376 ~~establish requirements for local matching funds or in-kind~~  
377 ~~contributions to create and distribute advertisements, in either~~  
378 ~~print or electronic format, which are concerned with each of the~~  
379 ~~targeted behaviors, establish an independent evaluation and~~  
380 ~~feedback system for the public health communication campaign,~~  
381 ~~and monitor and evaluate the efforts to determine which of the~~  
382 ~~techniques and methodologies are most effective.~~

383 ~~(c) Plan and conduct promotional campaigns to recruit~~  
384 ~~health professionals to be employed by the department or to~~  
385 ~~recruit participants in departmental programs for health~~  
386 ~~practitioners, such as scholarship, loan repayment, or volunteer~~  
387 ~~programs. To this effect the department may purchase promotional~~  
388 ~~items and advertising.~~

389 ~~(8) The department may hold copyrights, trademarks, and~~  
390 ~~service marks and enforce its rights with respect thereto,~~  
391 ~~except such authority does not extend to any public records~~  
392 ~~relating to the department's responsibilities for health care~~

393 ~~practitioners regulated under part II of chapter 455.~~

394 ~~(7)(9)~~ There is established within the Department of  
 395 Health the Office of Minority Health.

396 (8) (a) Beginning in fiscal year 2010-2011, the department  
 397 shall initiate or commence new programs, including any new  
 398 federally funded or grant-supported initiative, or make changes  
 399 in current programs only when the Legislature expressly  
 400 authorizes the department to do so.

401 (b) Beginning in fiscal year 2010-2011, prior to applying  
 402 for any continuation of federal or private grants, the  
 403 department shall request the express approval of the Legislative  
 404 Budget Commission. The request for approval shall provide  
 405 detailed information about the purpose of the grant, the prior  
 406 use of the grant, the reason for continuation, the intended use  
 407 of the continuation funds, and the number of full-time permanent  
 408 or temporary employees that participate in administering the  
 409 program funded by the grant. This paragraph is subject to the  
 410 notice, review, and objection procedures set forth in s.  
 411 216.177.

412 Section 2. Section 381.0011, Florida Statutes, is amended  
 413 to read:

414 381.0011 Duties and powers of the Department of Health.—It  
 415 is the duty of the Department of Health to:

416 (1) Assess the public health status and needs of the state  
 417 pursuant to the responsibilities delegated to the department  
 418 under s. 20.43 through statewide data collection and other  
 419 appropriate means, with special attention to future needs that  
 420 may result from population growth, technological advancements,

421 ~~new societal priorities, or other changes.~~

422       (2) Manage and coordinate emergency preparedness and  
 423 disaster response functions to: investigate and control the  
 424 spread of disease; coordinate the availability and staffing of  
 425 special needs shelters; support patient evacuation; ensure the  
 426 safety of food and drugs; provide critical incident stress  
 427 debriefing; and provide surveillance and control of  
 428 radiological, chemical, biological, and other environmental  
 429 hazards ~~Formulate general policies affecting the public health~~  
 430 ~~of the state.~~

431       (3) Include in the department's strategic plan developed  
 432 under s. 186.021 a summary of all aspects of the public health  
 433 related to the responsibilities delegated to the department  
 434 under s. 20.43(1) ~~mission and health status objectives to direct~~  
 435 ~~the use of public health resources with an emphasis on~~  
 436 ~~prevention.~~

437       (4) Administer and enforce laws and rules relating to  
 438 sanitation, control of communicable diseases, and illnesses and  
 439 hazards to health among humans and from animals to humans, ~~and~~  
 440 ~~the general health of the people of the state.~~

441       (5) Cooperate with and accept assistance from federal,  
 442 state, and local officials for the prevention and suppression of  
 443 communicable and other diseases, illnesses, injuries, and  
 444 hazards to human health and cooperate with the Federal  
 445 Government in enforcing public health laws and regulations.

446       (6) Declare, enforce, modify, and abolish quarantine of  
 447 persons, animals, and premises as the circumstances indicate for  
 448 controlling communicable diseases or providing protection from



449 unsafe conditions that pose a threat to public health, except as  
 450 provided in ss. 384.28 and 392.545-392.60.

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

454 1. The closure of premises.

455 2. The movement of persons or animals exposed to or  
 456 infected with a communicable disease.

457 3. The tests or treatment, including vaccination, for  
 458 communicable disease required prior to employment or admission  
 459 to the premises or to comply with a quarantine.

460 4. Testing or destruction of animals with or suspected of  
 461 having a disease transmissible to humans.

462 5. Access by the department to quarantined premises.

463 6. The disinfection of quarantined animals, persons, or  
 464 premises.

465 7. Methods of quarantine.

466 (b) Any health regulation that restricts travel or trade  
 467 within the state may not be adopted or enforced in this state  
 468 except by authority of the department.

469 (7) Identify, diagnose, investigate, and conduct  
 470 surveillance of communicable diseases in the state and promote  
 471 and implement interventions that prevent or limit the impact and  
 472 spread of disease in the state ~~Provide for a thorough~~  
 473 ~~investigation and study of the incidence, causes, modes of~~  
 474 ~~propagation and transmission, and means of prevention, control,~~  
 475 ~~and cure of diseases, illnesses, and hazards to human health.~~

476 (8) Issue, as necessary and in its discretion, health

477 alerts or advisories ~~Provide for the dissemination of~~  
 478 ~~information to the public relative to the prevention, control,~~  
 479 ~~and cure of diseases, illnesses, and hazards to human health.~~  
 480 ~~The department shall conduct a workshop before issuing any~~  
 481 ~~health alert or advisory~~ relating to food-borne illness or  
 482 communicable disease in public lodging or food service  
 483 establishments in order to inform persons, trade associations,  
 484 and businesses of the risk to public health and to seek the  
 485 input of affected persons, trade associations, and businesses on  
 486 the best methods of informing and protecting the public. The  
 487 department shall conduct a workshop before issuing any such  
 488 alert or advisory, except in an emergency, in which case the  
 489 workshop must be held within 14 days after the issuance of the  
 490 emergency alert or advisory.

491 (9) Act as registrar of vital statistics.

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

494 ~~(11) Cooperate with other departments, local officials,~~  
 495 ~~and private boards and organizations for the improvement and~~  
 496 ~~preservation of the public health.~~

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

498 (10)~~(13)~~ Adopt rules pursuant to ss. 120.536(1) and 120.54  
 499 to implement the provisions of law conferring duties upon it.  
 500 This subsection does not authorize the department to require a  
 501 permit or license or to inspect a building or facility, unless  
 502 such requirement is specifically provided by law.

503 ~~(11)~~~~(14)~~ Perform any other duties expressly assigned to  
 504 the department ~~prescribed~~ by law.

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

507 381.006 Environmental health.—The department shall conduct  
 508 an environmental health program as part of fulfilling the  
 509 state's public health mission. The purpose of this program is to  
 510 detect and prevent disease caused by natural and manmade factors  
 511 in the environment. The environmental health program shall  
 512 include, but not be limited to:

513 (16) A group-care-facilities function. As used in this  
 514 subsection, the term, ~~where a "group care facility"~~ means any  
 515 public or private school, assisted living facility, adult  
 516 family-care home, adult day care center, short-term residential  
 517 treatment center, residential treatment facility, home for  
 518 special services, transitional living facility, crisis  
 519 stabilization unit, hospice, prescribed pediatric extended care  
 520 center, intermediate care facility for persons with  
 521 developmental disabilities, or boarding school housing, ~~building~~  
 522 ~~or buildings, section of a building, or distinct part of a~~  
 523 ~~building or other place, whether operated for profit or not,~~  
 524 ~~which undertakes, through its ownership or management, to~~  
 525 ~~provide one or more personal services, care, protection, and~~  
 526 ~~supervision to persons who require such services and who are not~~  
 527 ~~related to the owner or administrator.~~ The department may adopt  
 528 rules necessary to protect the health and safety of residents,  
 529 staff, and patrons of group care facilities. Rules related to  
 530 public and private schools shall be developed by, ~~such as child~~  
 531 ~~care facilities, family day care homes, assisted living~~  
 532 ~~facilities, adult day care centers, adult family care homes,~~

533 ~~hospices, residential treatment facilities, crisis stabilization~~  
534 ~~units, pediatric extended care centers, intermediate care~~  
535 ~~facilities for the developmentally disabled, group care homes,~~  
536 ~~and, jointly with the Department of Education in consultation~~  
537 ~~with the department, private and public schools.~~ These Rules  
538 adopted under this subsection may include definitions of terms;  
539 provisions relating to operation and maintenance of facilities,  
540 buildings, grounds, equipment, furnishings, and occupant-space  
541 requirements; lighting; heating, cooling, and ventilation; food  
542 service; water supply and plumbing; sewage; sanitary facilities;  
543 insect and rodent control; garbage; safety; personnel health,  
544 hygiene, and work practices; and other matters the department  
545 finds are appropriate or necessary to protect the safety and  
546 health of the residents, staff, students, faculty, or patrons.  
547 The department may not adopt rules that conflict with rules  
548 adopted by the licensing or certifying agency. The department  
549 may enter and inspect at reasonable hours to determine  
550 compliance with applicable statutes or rules. In addition to any  
551 sanctions that the department may impose for violations of rules  
552 adopted under this section, the department shall also report  
553 such violations to any agency responsible for licensing or  
554 certifying the group care facility. The licensing or certifying  
555 agency may also impose any sanction based solely on the findings  
556 of the department.

557  
558 The department may adopt rules to carry out the provisions of  
559 this section.

560 Section 4. Subsections (1), (2), (3), and (6) of section

561 381.0072, Florida Statutes, are amended to read:

562 381.0072 Food service protection.—It shall be the duty of  
 563 the Department of Health to adopt and enforce sanitation rules  
 564 consistent with law to ensure the protection of the public from  
 565 food-borne illness. These rules shall provide the standards and  
 566 requirements for the storage, preparation, serving, or display  
 567 of food in food service establishments as defined in this  
 568 section and which are not permitted or licensed under chapter  
 569 500 or chapter 509.

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

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

573 (b) "Food service establishment" means detention  
 574 facilities, public or private schools, migrant labor camps,  
 575 assisted living facilities, adult family-care homes, adult day  
 576 care centers, short-term residential treatment centers,  
 577 residential treatment facilities, homes for special services,  
 578 transitional living facilities, crisis stabilization units,  
 579 hospices, prescribed pediatric extended care centers,  
 580 intermediate care facilities for persons with developmental  
 581 disabilities, boarding schools, civic or fraternal  
 582 organizations, bars and lounges, vending machines that dispense  
 583 potentially hazardous foods at facilities expressly named in  
 584 this paragraph, and facilities used as temporary food events or  
 585 mobile food units at any facility expressly named ~~any facility,~~  
 586 ~~as described~~ in this paragraph, where food is prepared and  
 587 intended for individual portion service, including ~~and includes~~  
 588 the site at which individual portions are provided, ~~—The term~~

589 ~~includes any such facility~~ regardless of whether consumption is  
 590 on or off the premises and regardless of whether there is a  
 591 charge for the food. ~~The term includes detention facilities,~~  
 592 ~~child care facilities, schools, institutions, civic or fraternal~~  
 593 ~~organizations, bars and lounges and facilities used at temporary~~  
 594 ~~food events, mobile food units, and vending machines at any~~  
 595 ~~facility regulated under this section.~~ The term does not include  
 596 any entity not expressly named in this paragraph ~~private homes~~  
 597 ~~where food is prepared or served for individual family~~  
 598 ~~consumption; nor does the term include churches, synagogues, or~~  
 599 ~~other not-for-profit religious organizations as long as these~~  
 600 ~~organizations serve only their members and guests and do not~~  
 601 ~~advertise food or drink for public consumption, or any facility~~  
 602 ~~or establishment permitted or licensed under chapter 500 or~~  
 603 ~~chapter 509; nor does the term include any theater, if the~~  
 604 ~~primary use is as a theater and if patron service is limited to~~  
 605 ~~food items customarily served to the admittees of theaters; nor~~  
 606 ~~does the term include a research and development test kitchen~~  
 607 ~~limited to the use of employees and which is not open to the~~  
 608 ~~general public.~~

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

612 (2) DUTIES.—

613 (a) The department may advise and consult with the Agency  
 614 for Health Care Administration, the Department of Business and  
 615 Professional Regulation, the Department of Agriculture and  
 616 Consumer Services, and the Department of Children and Family

617 Services concerning procedures related to the storage,  
 618 preparation, serving, or display of food at any building,  
 619 structure, or facility not expressly included in this section  
 620 that is inspected, licensed, or regulated by those agencies.

621 (b)~~(a)~~ The department shall adopt rules, including  
 622 definitions of terms which are consistent with law prescribing  
 623 minimum sanitation standards and manager certification  
 624 requirements as prescribed in s. 509.039, and which shall be  
 625 enforced in food service establishments as defined in this  
 626 section. The sanitation standards must address the construction,  
 627 operation, and maintenance of the establishment; lighting,  
 628 ventilation, laundry rooms, lockers, use and storage of toxic  
 629 materials and cleaning compounds, and first-aid supplies; plan  
 630 review; design, construction, installation, location,  
 631 maintenance, sanitation, and storage of food equipment and  
 632 utensils; employee training, health, hygiene, and work  
 633 practices; food supplies, preparation, storage, transportation,  
 634 and service, including access to the areas where food is stored  
 635 or prepared; and sanitary facilities and controls, including  
 636 water supply and sewage disposal; plumbing and toilet  
 637 facilities; garbage and refuse collection, storage, and  
 638 disposal; and vermin control. Public and private schools, if the  
 639 food service is operated by school employees, ; ~~hospitals~~  
 640 ~~licensed under chapter 395; nursing homes licensed under part II~~  
 641 ~~of chapter 400; child care facilities as defined in s. 402.301;~~  
 642 ~~residential facilities colocated with a nursing home or~~  
 643 ~~hospital, if all food is prepared in a central kitchen that~~  
 644 ~~complies with nursing or hospital regulations; and bars and~~

645 lounges, civic organizations, and any other facility that is not  
 646 regulated under this section ~~as defined by department rule,~~ are  
 647 exempt from the rules developed for manager certification. The  
 648 department shall administer a comprehensive inspection,  
 649 monitoring, and sampling program to ensure such standards are  
 650 maintained. With respect to food service establishments  
 651 permitted or licensed under chapter 500 or chapter 509, the  
 652 department shall assist the Division of Hotels and Restaurants  
 653 of the Department of Business and Professional Regulation and  
 654 the Department of Agriculture and Consumer Services with  
 655 rulemaking by providing technical information.

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

661 (d) ~~(e)~~ The department shall inspect each food service  
 662 establishment as often as necessary to ensure compliance with  
 663 applicable laws and rules. The department shall have the right  
 664 of entry and access to these food service establishments at any  
 665 reasonable time. In inspecting food service establishments as  
 666 provided under this section, the department shall provide each  
 667 inspected establishment with the food recovery brochure  
 668 developed under s. 570.0725.

669 (e) ~~(d)~~ The department or other appropriate regulatory  
 670 entity may inspect theaters exempted in subsection (1) to ensure  
 671 compliance with applicable laws and rules pertaining to minimum  
 672 sanitation standards. A fee for inspection shall be prescribed



673 | by rule, but the aggregate amount charged per year per theater  
 674 | establishment shall not exceed \$300, regardless of the entity  
 675 | providing the inspection.

676 | (3) LICENSES REQUIRED.—

677 | (a) Licenses; annual renewals.—Each food service  
 678 | establishment regulated under this section shall obtain a  
 679 | license from the department annually. Food service establishment  
 680 | licenses shall expire annually and are not transferable from one  
 681 | place or individual to another. However, those facilities  
 682 | licensed by the department's Office of Licensure and  
 683 | Certification, the Child Care Services Program Office, or the  
 684 | Agency for Persons with Disabilities are exempt from this  
 685 | subsection. It shall be a misdemeanor of the second degree,  
 686 | punishable as provided in s. 381.0061, s. 775.082, or s.  
 687 | 775.083, for such an establishment to operate without this  
 688 | license. The department may refuse a license, or a renewal  
 689 | thereof, to any establishment that is not constructed or  
 690 | maintained in accordance with law and with the rules of the  
 691 | department. Annual application for renewal is not required.

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

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

697 | (a) In the course of epidemiological investigations or for  
 698 | those establishments regulated by the department under this  
 699 | chapter, the department, to protect the public from food that is  
 700 | unwholesome or otherwise unfit for human consumption, may

701 examine, sample, seize, and stop the sale or use of food to  
 702 determine its condition. The department may stop the sale and  
 703 supervise the proper destruction of food when the State Health  
 704 Officer or his or her designee determines that such food  
 705 represents a threat to the public health.

706 (b) The department may determine that a food service  
 707 establishment regulated under this section is an imminent danger  
 708 to the public health and require its immediate closure when such  
 709 establishment fails to comply with applicable sanitary and  
 710 safety standards and, because of such failure, presents an  
 711 imminent threat to the public's health, safety, and welfare. The  
 712 department may accept inspection results from state and local  
 713 building and firesafety officials and other regulatory agencies  
 714 as justification for such actions. Any facility so deemed and  
 715 closed shall remain closed until allowed by the department or by  
 716 judicial order to reopen.

717 Section 5. Paragraph (g) of subsection (2) of section  
 718 381.0101, Florida Statutes, is amended to read:

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

720 (g) "Primary environmental health program" means those  
 721 programs ~~determined by the department~~ is expressly authorized by  
 722 law to administer ~~to be essential~~ for providing basic  
 723 environmental and sanitary protection to the public. ~~At a~~  
 724 ~~minimum,~~ These programs shall include food protection program  
 725 work at food service establishments as defined in s. 381.0072  
 726 and onsite sewage treatment and disposal system evaluations.

727 Section 6. Sections 381.001, 381.04015, 401.243, 411.23,  
 728 411.231, and 411.232, Florida Statutes, are repealed.

729 Section 7. Section 381.4018, Florida Statutes, is amended  
 730 to read:

731 381.4018 Physician workforce assessment and development.—

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

733 (a) "Consortium" or "consortia" means a combination of  
 734 statutory teaching hospitals, statutory rural hospitals, other  
 735 hospitals, accredited medical schools, clinics operated by the  
 736 department, clinics operated by the Department of Veterans'  
 737 Affairs, area health education centers, community health  
 738 centers, federally qualified health centers, prison clinics,  
 739 local community clinics, or other programs. At least one member  
 740 of the consortium shall be a sponsoring institution accredited  
 741 or currently seeking accreditation by the Accreditation Council  
 742 for Graduate Medical Education or the American Osteopathic  
 743 Association.

744 (b) "Council" means the Physician Workforce Advisory  
 745 Council.

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

747 (d) "Graduate medical education program" means a program  
 748 accredited by the Accreditation Council for Graduate Medical  
 749 Education or the American Osteopathic Association.

750 (e) "Primary care specialty" means emergency medicine,  
 751 family practice, internal medicine, pediatrics, psychiatry,  
 752 obstetrics and gynecology, or combined internal medicine and  
 753 other primary care specialties as determined by the council or  
 754 the department.

755 (2) ~~(1)~~ LEGISLATIVE INTENT.— The Legislature recognizes  
 756 that physician workforce planning is an essential component of

757 ensuring that there is an adequate and appropriate supply of  
758 well-trained physicians to meet this state's future health care  
759 service needs as the general population and elderly population  
760 of the state increase. The Legislature finds that items to  
761 consider relative to assessing the physician workforce may  
762 include physician practice status; specialty mix; geographic  
763 distribution; demographic information, including, but not  
764 limited to, age, gender, race, and cultural considerations; and  
765 needs of current or projected medically underserved areas in the  
766 state. Long-term strategic planning is essential as the period  
767 from the time a medical student enters medical school to  
768 completion of graduate medical education may range from 7 to 10  
769 years or longer. The Legislature recognizes that strategies to  
770 provide for a well-trained supply of physicians must include  
771 ensuring the availability and capacity of quality ~~graduate~~  
772 medical schools and graduate medical education programs in this  
773 state, as well as using new or existing state and federal  
774 programs providing incentives for physicians to practice in  
775 needed specialties and in underserved areas in a manner that  
776 addresses projected needs for physician manpower.

777 (3) ~~(2)~~ PURPOSE.—The Department of Health shall serve as a  
778 coordinating and strategic planning body to actively assess the  
779 state's current and future physician workforce needs and work  
780 with multiple stakeholders to develop strategies and  
781 alternatives to address current and projected physician  
782 workforce needs.

783 (4) ~~(3)~~ GENERAL FUNCTIONS.—The department shall maximize  
784 the use of existing programs under the jurisdiction of the

785 department and other state agencies and coordinate governmental  
786 and nongovernmental stakeholders and resources in order to  
787 develop a state strategic plan and assess the implementation of  
788 such strategic plan. In developing the state strategic plan, the  
789 department shall:

790 (a) Monitor, evaluate, and report on the supply and  
791 distribution of physicians licensed under chapter 458 or chapter  
792 459. The department shall maintain a database to serve as a  
793 statewide source of data concerning the physician workforce.

794 (b) Develop a model and quantify, on an ongoing basis, the  
795 adequacy of the state's current and future physician workforce  
796 as reliable data becomes available. Such model must take into  
797 account demographics, physician practice status, place of  
798 education and training, generational changes, population growth,  
799 economic indicators, and issues concerning the "pipeline" into  
800 medical education.

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

813 students.

814 (d) Develop strategies to ensure that the number of  
815 graduates from the state's public and private allopathic and  
816 osteopathic medical schools are adequate to meet physician  
817 workforce needs, based on the analysis of the physician  
818 workforce data, so as to provide a high-quality medical  
819 education to students in a manner that recognizes the uniqueness  
820 of each new and existing medical school in this state.

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

837 (f) Develop strategies to maximize federal and state  
838 programs that provide for the use of incentives to attract  
839 physicians to this state or retain physicians within the state.  
840 Such strategies should explore and maximize federal-state

841 | partnerships that provide incentives for physicians to practice  
842 | in federally designated shortage areas. Strategies shall also  
843 | consider the use of state programs, such as the Florida Health  
844 | Service Corps established pursuant to s. 381.0302 and the  
845 | Medical Education Reimbursement and Loan Repayment Program  
846 | pursuant to s. 1009.65, which provide for education loan  
847 | repayment or loan forgiveness and provide monetary incentives  
848 | for physicians to relocate to underserved areas of the state.

849 |       (g) Coordinate and enhance activities relative to  
850 | physician workforce needs, undergraduate medical education, and  
851 | graduate medical education provided by the Division of Medical  
852 | Quality Assurance, the Community Hospital Education Program and  
853 | the Graduate Medical Education Committee established pursuant to  
854 | s. 381.0403, area health education center networks established  
855 | pursuant to s. 381.0402, and other offices and programs within  
856 | the Department of Health as designated by the State Surgeon  
857 | General.

858 |       (h) Work in conjunction with and act as a coordinating  
859 | body for governmental and nongovernmental stakeholders to  
860 | address matters relating to the state's physician workforce  
861 | assessment and development for the purpose of ensuring an  
862 | adequate supply of well-trained physicians to meet the state's  
863 | future needs. Such governmental stakeholders shall include, but  
864 | need not be limited to, the State Surgeon General or his or her  
865 | designee, the Commissioner of Education or his or her designee,  
866 | the Secretary of Health Care Administration or his or her  
867 | designee, and the Chancellor of the State University System or  
868 | his or her designee ~~from the Board of Governors of the State~~

869 ~~University System~~, and, at the discretion of the department,  
 870 other representatives of state and local agencies that are  
 871 involved in assessing, educating, or training the state's  
 872 current or future physicians. Other stakeholders shall include,  
 873 but need not be limited to, organizations representing the  
 874 state's public and private allopathic and osteopathic medical  
 875 schools; organizations representing hospitals and other  
 876 institutions providing health care, particularly those that have  
 877 an interest in providing accredited medical education and  
 878 graduate medical education to medical students and medical  
 879 residents; organizations representing allopathic and osteopathic  
 880 practicing physicians; and, at the discretion of the department,  
 881 representatives of other organizations or entities involved in  
 882 assessing, educating, or training the state's current or future  
 883 physicians.

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

887 (j) Act as a clearinghouse for collecting and  
 888 disseminating information concerning the physician workforce and  
 889 medical education continuum in this state.

890 (5) PHYSICIAN WORKFORCE ADVISORY COUNCIL.—There is created  
 891 in the department the Physician Workforce Advisory Council, an  
 892 advisory council as defined in s. 20.03. The council shall  
 893 comply with the requirements of s. 20.052, except as otherwise  
 894 provided in this section.

895 (a) The council shall be composed of the following 23  
 896 members:



- 897        1. The following members appointed by the State Surgeon  
 898 General:  
 899        a. A designee from the department.  
 900        b. An individual recommended by the Area Health Education  
 901 Center Network.  
 902        c. Two individuals recommended by the Council of Florida  
 903 Medical School Deans, one representing a college of allopathic  
 904 medicine and one representing a college of osteopathic medicine.  
 905        d. Two individuals recommended by the Florida Hospital  
 906 Association, one representing a statutory teaching hospital and  
 907 one representing a hospital that is licensed under chapter 395,  
 908 has an accredited graduate medical education program, and is not  
 909 a statutory teaching hospital.  
 910        e. Two individuals recommended by the Florida Medical  
 911 Association, one representing a primary care specialty and one  
 912 representing a nonprimary care specialty.  
 913        f. Two individuals recommended by the Florida Osteopathic  
 914 Medical Association, one representing a primary care specialty  
 915 and one representing a nonprimary care specialty.  
 916        g. Two individuals who are program directors of accredited  
 917 graduate medical education programs, one representing a program  
 918 that is accredited by the Accreditation Council for Graduate  
 919 Medical Education and one representing a program that is  
 920 accredited by the American Osteopathic Association.  
 921        h. An individual recommended by the Florida Justice  
 922 Association.  
 923        i. An individual representing a profession in the field of  
 924 health services administration.

925 j. A layperson member.

926  
 927 Each entity authorized to make recommendations under this  
 928 subparagraph shall make at least two recommendations to the  
 929 State Surgeon General for each appointment to the council. The  
 930 State Surgeon General shall appoint one member for each position  
 931 from among the recommendations made by each authorized entity.

932 2. The following members or designees appointed by the  
 933 respective agency head, legislative presiding officer, or  
 934 congressional delegation:

935 a. The Commissioner of Education or his or her designee.

936 b. The Chancellor of the State University System or his or  
 937 her designee.

938 c. The Secretary of Health Care Administration or his or  
 939 her designee.

940 d. The executive director of the Department of Veterans'  
 941 Affairs or his or her designee.

942 e. The Secretary of Elderly Affairs or his or her  
 943 designee.

944 f. The President of the Senate or his or her designee.

945 g. The Speaker of the House of Representatives or his or  
 946 her designee.

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

948 (b) Each council member shall be appointed to a 4-year  
 949 term. A member may not serve more than two full terms. Any  
 950 council member may be removed from office for malfeasance,  
 951 misfeasance, neglect of duty, incompetence, permanent inability  
 952 to perform official duties, or pleading guilty or nolo

953 contendere to, or being found guilty of, a felony. Any council  
954 member who meets the criteria for removal, or who is otherwise  
955 unwilling or unable to properly fulfill the duties of the  
956 office, shall be succeeded by an individual chosen by the State  
957 Surgeon General to serve out the remainder of the council  
958 member's term. If the remainder of the replaced council member's  
959 term is less than 18 months, notwithstanding the provisions of  
960 this paragraph, the succeeding council member may be reappointed  
961 twice by the State Surgeon General.

962 (c) The chair of the council is the State Surgeon General,  
963 who shall designate a vice chair to serve in the absence of the  
964 State Surgeon General. A vacancy shall be filled for the  
965 remainder of the unexpired term in the same manner as the  
966 original appointment.

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

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

971 (f) The council shall:

972 1. Advise the State Surgeon General and the department on  
973 matters concerning current and future physician workforce needs  
974 in this state.

975 2. Review survey materials and the compilation of survey  
976 information.

977 3. Provide recommendations to the department for the  
978 development of additional items to be incorporated in the survey  
979 completed by physicians licensed under chapter 458 or chapter  
980 459.

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

983           5. Assist the department in preparing an initial strategic  
 984 plan, conducting ongoing strategic planning in accordance with  
 985 this section, and providing ongoing advice on implementing the  
 986 recommendations.

987           6. Monitor the need for an increased number of primary  
 988 care physicians to provide the necessary current and projected  
 989 health and medical services for the state.

990           7. Monitor the status of graduate medical education in  
 991 this state, including, but not limited to, as considered  
 992 appropriate:

993           a. The role of residents and medical faculty in the  
 994 provision of health care.

995           b. The relationship of graduate medical education to the  
 996 state's physician workforce.

997           c. The availability and use of state and federal  
 998 appropriated funds for graduate medical education.

999           Section 8. Section 392.51, Florida Statutes, is amended to  
 1000 read:

1001           392.51 Findings and intent.—The Legislature finds and  
 1002 declares that active tuberculosis is a highly contagious  
 1003 infection that is sometimes fatal and constitutes a serious  
 1004 threat to the public health. The Legislature finds that there is  
 1005 a significant reservoir of tuberculosis infection in this state  
 1006 and that there is a need to develop community programs to  
 1007 identify tuberculosis and to respond quickly with appropriate  
 1008 measures. The Legislature finds that some patients who have

1009 active tuberculosis have complex medical, social, and economic  
 1010 problems that make outpatient control of the disease difficult,  
 1011 if not impossible, without posing a threat to the public health.  
 1012 The Legislature finds that in order to protect the citizenry  
 1013 from those few persons who pose a threat to the public, it is  
 1014 necessary to establish a system of mandatory contact  
 1015 identification, treatment to cure, hospitalization, and  
 1016 isolation for contagious cases and to provide a system of  
 1017 voluntary, community-oriented care and surveillance in all other  
 1018 cases. The Legislature finds that the delivery of tuberculosis  
 1019 control services is best accomplished by the coordinated efforts  
 1020 of the respective county health departments, ~~the A.G. Holley~~  
 1021 ~~State Hospital,~~ and the private health care delivery system.

1022 Section 9. Subsection (5) is added to section 392.69,  
 1023 Florida Statutes, to read:

1024 392.69 Appropriation, sinking, and maintenance trust  
 1025 funds; additional powers of the department.—

1026 (5) The department shall develop a plan that exclusively  
 1027 uses private and nonstate public hospitals to provide treatment  
 1028 to cure, hospitalization, and isolation for persons with  
 1029 contagious cases of tuberculosis who pose a threat to the  
 1030 public. The department shall submit the plan to the Governor,  
 1031 the President of the Senate, and the Speaker of the House of  
 1032 Representatives by November 1, 2010. The plan shall include the  
 1033 following elements:

1034 (a) Identification of hospitals functionally capable of  
 1035 caring for such patients.

1036 (b) Reimbursement for hospital inpatient services at the

1037 Medicaid rate and reimbursement for other medically necessary  
 1038 services that are not hospital inpatient services at the  
 1039 relevant Medicaid rate.

1040 (c) Projected cost estimates.

1041 (d) A transition plan for closing the A. G. Holley State  
 1042 Hospital and transferring patients to private and nonstate  
 1043 public hospitals over a 90-day period of time.

1044 Section 10. Paragraph (d) of subsection (5) of section  
 1045 411.01, Florida Statutes, is amended to read:

1046 411.01 School readiness programs; early learning  
 1047 coalitions.—

1048 (5) CREATION OF EARLY LEARNING COALITIONS.—

1049 (d) Implementation.—

1050 1. An early learning coalition may not implement the  
 1051 school readiness program until the coalition is authorized  
 1052 through approval of the coalition's school readiness plan by the  
 1053 Agency for Workforce Innovation.

1054 2. Each early learning coalition shall develop a plan for  
 1055 implementing the school readiness program to meet the  
 1056 requirements of this section and the performance standards and  
 1057 outcome measures adopted by the Agency for Workforce Innovation.  
 1058 The plan must demonstrate how the program will ensure that each  
 1059 3-year-old and 4-year-old child in a publicly funded school  
 1060 readiness program receives scheduled activities and instruction  
 1061 designed to enhance the age-appropriate progress of the children  
 1062 in attaining the performance standards adopted by the Agency for  
 1063 Workforce Innovation under subparagraph (4)(d)8. Before  
 1064 implementing the school readiness program, the early learning

1065 coalition must submit the plan to the Agency for Workforce  
1066 Innovation for approval. The Agency for Workforce Innovation may  
1067 approve the plan, reject the plan, or approve the plan with  
1068 conditions. The Agency for Workforce Innovation shall review  
1069 school readiness plans at least annually.

1070 3. If the Agency for Workforce Innovation determines  
1071 during the annual review of school readiness plans, or through  
1072 monitoring and performance evaluations conducted under paragraph  
1073 (4)(1), that an early learning coalition has not substantially  
1074 implemented its plan, has not substantially met the performance  
1075 standards and outcome measures adopted by the agency, or has not  
1076 effectively administered the school readiness program or  
1077 Voluntary Prekindergarten Education Program, the Agency for  
1078 Workforce Innovation may dissolve the coalition and temporarily  
1079 contract with a qualified entity to continue school readiness  
1080 and prekindergarten services in the coalition's county or  
1081 multicounty region until the coalition is reestablished through  
1082 resubmission of a school readiness plan and approval by the  
1083 agency.

1084 4. The Agency for Workforce Innovation shall adopt  
1085 criteria for the approval of school readiness plans. The  
1086 criteria must be consistent with the performance standards and  
1087 outcome measures adopted by the agency and must require each  
1088 approved plan to include the following minimum standards and  
1089 provisions:

1090 a. A sliding fee scale establishing a copayment for  
1091 parents based upon their ability to pay, which is the same for  
1092 all program providers, to be implemented and reflected in each

1093 program's budget.

1094       b. A choice of settings and locations in licensed,  
1095 registered, religious-exempt, or school-based programs to be  
1096 provided to parents.

1097       c. Instructional staff who have completed the training  
1098 course as required in s. 402.305(2)(d)1., as well as staff who  
1099 have additional training or credentials as required by the  
1100 Agency for Workforce Innovation. The plan must provide a method  
1101 for assuring the qualifications of all personnel in all program  
1102 settings.

1103       d. Specific eligibility priorities for children within the  
1104 early learning coalition's county or multicounty region in  
1105 accordance with subsection (6).

1106       e. Performance standards and outcome measures adopted by  
1107 the Agency for Workforce Innovation.

1108       f. Payment rates adopted by the early learning coalition  
1109 and approved by the Agency for Workforce Innovation. Payment  
1110 rates may not have the effect of limiting parental choice or  
1111 creating standards or levels of services that have not been  
1112 authorized by the Legislature.

1113       g. Systems support services, including a central agency,  
1114 child care resource and referral, eligibility determinations,  
1115 training of providers, and parent support and involvement.

1116       h. Direct enhancement services to families and children.  
1117 System support and direct enhancement services shall be in  
1118 addition to payments for the placement of children in school  
1119 readiness programs.

1120       i. The business organization of the early learning



1121 coalition, which must include the coalition's articles of  
 1122 incorporation and bylaws if the coalition is organized as a  
 1123 corporation. If the coalition is not organized as a corporation  
 1124 or other business entity, the plan must include the contract  
 1125 with a fiscal agent. An early learning coalition may contract  
 1126 with other coalitions to achieve efficiency in multicounty  
 1127 services, and these contracts may be part of the coalition's  
 1128 school readiness plan.

1129 j. Strategies to meet the needs of unique populations,  
 1130 such as migrant workers.

1131  
 1132 As part of the school readiness plan, the early learning  
 1133 coalition may request the Governor to apply for a waiver to  
 1134 allow the coalition to administer the Head Start Program to  
 1135 accomplish the purposes of the school readiness program. If a  
 1136 school readiness plan demonstrates that specific statutory goals  
 1137 can be achieved more effectively by using procedures that  
 1138 require modification of existing rules, policies, or procedures,  
 1139 a request for a waiver to the Agency for Workforce Innovation  
 1140 may be submitted as part of the plan. Upon review, the Agency  
 1141 for Workforce Innovation may grant the proposed modification.

1142 5. Persons with an early childhood teaching certificate  
 1143 may provide support and supervision to other staff in the school  
 1144 readiness program.

1145 6. An early learning coalition may not implement its  
 1146 school readiness plan until it submits the plan to and receives  
 1147 approval from the Agency for Workforce Innovation. Once the plan  
 1148 is approved, the plan and the services provided under the plan

1149 shall be controlled by the early learning coalition. The plan  
 1150 shall be reviewed and revised as necessary, but at least  
 1151 biennially. An early learning coalition may not implement the  
 1152 revisions until the coalition submits the revised plan to and  
 1153 receives approval from the Agency for Workforce Innovation. If  
 1154 the Agency for Workforce Innovation rejects a revised plan, the  
 1155 coalition must continue to operate under its prior approved  
 1156 plan.

1157 7. Sections 125.901(2)(a)3. and, ~~411.221, and 411.232~~ do  
 1158 not apply to an early learning coalition with an approved school  
 1159 readiness plan. To facilitate innovative practices and to allow  
 1160 the regional establishment of school readiness programs, an  
 1161 early learning coalition may apply to the Governor and Cabinet  
 1162 for a waiver of, and the Governor and Cabinet may waive, any of  
 1163 the provisions of ss. ~~411.223, 411.232,~~ and 1003.54, if the  
 1164 waiver is necessary for implementation of the coalition's school  
 1165 readiness plan.

1166 8. Two or more counties may join for purposes of planning  
 1167 and implementing a school readiness program.

1168 9. An early learning coalition may, subject to approval by  
 1169 the Agency for Workforce Innovation as part of the coalition's  
 1170 school readiness plan, receive subsidized child care funds for  
 1171 all children eligible for any federal subsidized child care  
 1172 program.

1173 10. An early learning coalition may enter into multiparty  
 1174 contracts with multicounty service providers in order to meet  
 1175 the needs of unique populations such as migrant workers.

1176 Section 11. Paragraphs (f) and (g) of subsection (2) of

1177 section 411.224, Florida Statutes, are redesignated as  
 1178 paragraphs (e) and (f), respectively, and present paragraph (e)  
 1179 of that subsection is amended to read:

1180 411.224 Family support planning process.—The Legislature  
 1181 establishes a family support planning process to be used by the  
 1182 Department of Children and Family Services as the service  
 1183 planning process for targeted individuals, children, and  
 1184 families under its purview.

1185 (2) To the extent possible within existing resources, the  
 1186 following populations must be included in the family support  
 1187 planning process:

1188 ~~(e) Participants who are served by the Children's Early~~  
 1189 ~~Investment Program established in s. 411.232.~~

1190 Section 12. Subsection (5) is added to section 456.074,  
 1191 Florida Statutes, to read:

1192 456.074 Certain health care practitioners; immediate  
 1193 suspension of license.—

1194 (5) Effective July 1, 2011, before issuing an emergency  
 1195 order suspending the license of a physician licensed under  
 1196 chapter 458, chapter 459, or chapter 461 or a dentist licensed  
 1197 under chapter 466, the Secretary of Business and Professional  
 1198 Regulation shall consult with, and receive a recommendation  
 1199 from, the State Surgeon General. The State Surgeon General shall  
 1200 provide a recommendation within 24 hours after the consultation.

1201 Section 13. Section 458.3192, Florida Statutes, is amended  
 1202 to read:

1203 458.3192 Analysis of survey results; report.—

1204 (1) Each year, the Department of Health shall analyze the

1205 results of the physician survey required by s. 458.3191 and  
 1206 determine by geographic area and specialty the number of  
 1207 physicians who:

1208 (a) Perform deliveries of children in this state Florida.

1209 (b) Read mammograms and perform breast-imaging-guided  
 1210 procedures in this state Florida.

1211 (c) Perform emergency care on an on-call basis for a  
 1212 hospital emergency department.

1213 (d) Plan to reduce or increase emergency on-call hours in  
 1214 a hospital emergency department.

1215 (e) Plan to relocate ~~their allopathic or osteopathic~~  
 1216 ~~practice~~ outside the state.

1217 (f) Practice medicine in this state.

1218 (g) Reduce or modify the scope of their practice.

1219 (2) The Department of Health must report its findings to  
 1220 the Governor, the President of the Senate, and the Speaker of  
 1221 the House of Representatives by November 1 each year. The  
 1222 department may also include in its report findings,  
 1223 recommendations, or other information requested by the council.

1224 Section 14. Section 459.0082, Florida Statutes, is amended  
 1225 to read:

1226 459.0082 Analysis of survey results; report.—

1227 (1) Each year, the Department of Health shall analyze the  
 1228 results of the physician survey required by s. 459.0081 and  
 1229 determine by geographic area and specialty the number of  
 1230 physicians who:

1231 (a) Perform deliveries of children in this state Florida.

1232 (b) Read mammograms and perform breast-imaging-guided

1233 procedures in this state ~~Florida~~.

1234 (c) Perform emergency care on an on-call basis for a  
1235 hospital emergency department.

1236 (d) Plan to reduce or increase emergency on-call hours in  
1237 a hospital emergency department.

1238 (e) Plan to relocate ~~their allopathic or osteopathic~~  
1239 ~~practice~~ outside the state.

1240 (f) Practice medicine in this state.

1241 (g) Reduce or modify the scope of their practice.

1242 (2) The Department of Health must report its findings to  
1243 the Governor, the President of the Senate, and the Speaker of  
1244 the House of Representatives by November 1 each year. The  
1245 department may also include in its report findings,  
1246 recommendations, or other information requested by the council.

1247 Section 15. Subsections (32) through (54) of section  
1248 499.003, Florida Statutes, are renumbered as subsections (33)  
1249 through (55), respectively, present subsection (42) and  
1250 paragraph (a) of present subsection (53) are amended, and a new  
1251 subsection (32) is added to that subsection, to read:

1252 499.003 Definitions of terms used in this part.—As used in  
1253 this part, the term:

1254 (32) "Medical convenience kit" means packages or units  
1255 that contain combination products as defined in 21 C.F.R. s.  
1256 3.2(e)(2).

1257 (43)~~(42)~~ "Prescription drug" means a prescription,  
1258 medicinal, or legend drug, including, but not limited to,  
1259 finished dosage forms or active ingredients subject to, defined  
1260 by, or described by s. 503(b) of the Federal Food, Drug, and

1261 Cosmetic Act or s. 465.003(8), s. 499.007(13), or subsection  
 1262 (11), subsection (46) ~~(45)~~, or subsection (53) ~~(52)~~.

1263 (54) ~~(53)~~ "Wholesale distribution" means distribution of  
 1264 prescription drugs to persons other than a consumer or patient,  
 1265 but does not include:

1266 (a) Any of the following activities, which is not a  
 1267 violation of s. 499.005(21) if such activity is conducted in  
 1268 accordance with s. 499.01(2)(g):

1269 1. The purchase or other acquisition by a hospital or  
 1270 other health care entity that is a member of a group purchasing  
 1271 organization of a prescription drug for its own use from the  
 1272 group purchasing organization or from other hospitals or health  
 1273 care entities that are members of that organization.

1274 2. The sale, purchase, or trade of a prescription drug or  
 1275 an offer to sell, purchase, or trade a prescription drug by a  
 1276 charitable organization described in s. 501(c)(3) of the  
 1277 Internal Revenue Code of 1986, as amended and revised, to a  
 1278 nonprofit affiliate of the organization to the extent otherwise  
 1279 permitted by law.

1280 3. The sale, purchase, or trade of a prescription drug or  
 1281 an offer to sell, purchase, or trade a prescription drug among  
 1282 hospitals or other health care entities that are under common  
 1283 control. For purposes of this subparagraph, "common control"  
 1284 means the power to direct or cause the direction of the  
 1285 management and policies of a person or an organization, whether  
 1286 by ownership of stock, by voting rights, by contract, or  
 1287 otherwise.

1288 4. The sale, purchase, trade, or other transfer of a

1289 prescription drug from or for any federal, state, or local  
 1290 government agency or any entity eligible to purchase  
 1291 prescription drugs at public health services prices pursuant to  
 1292 Pub. L. No. 102-585, s. 602 to a contract provider or its  
 1293 subcontractor for eligible patients of the agency or entity  
 1294 under the following conditions:

1295       a. The agency or entity must obtain written authorization  
 1296 for the sale, purchase, trade, or other transfer of a  
 1297 prescription drug under this subparagraph from the State Surgeon  
 1298 General or his or her designee.

1299       b. The contract provider or subcontractor must be  
 1300 authorized by law to administer or dispense prescription drugs.

1301       c. In the case of a subcontractor, the agency or entity  
 1302 must be a party to and execute the subcontract.

1303       ~~d. A contract provider or subcontractor must maintain~~  
 1304 ~~separate and apart from other prescription drug inventory any~~  
 1305 ~~prescription drugs of the agency or entity in its possession.~~

1306       d.e. The contract provider and subcontractor must maintain  
 1307 and produce immediately for inspection all records of movement  
 1308 or transfer of all the prescription drugs belonging to the  
 1309 agency or entity, including, but not limited to, the records of  
 1310 receipt and disposition of prescription drugs. Each contractor  
 1311 and subcontractor dispensing or administering these drugs must  
 1312 maintain and produce records documenting the dispensing or  
 1313 administration. Records that are required to be maintained  
 1314 include, but are not limited to, a perpetual inventory itemizing  
 1315 drugs received and drugs dispensed by prescription number or  
 1316 administered by patient identifier, which must be submitted to

1317 the agency or entity quarterly.

1318 ~~e.f.~~ The contract provider or subcontractor may administer  
1319 or dispense the prescription drugs only to the eligible patients  
1320 of the agency or entity or must return the prescription drugs  
1321 for or to the agency or entity. The contract provider or  
1322 subcontractor must require proof from each person seeking to  
1323 fill a prescription or obtain treatment that the person is an  
1324 eligible patient of the agency or entity and must, at a minimum,  
1325 maintain a copy of this proof as part of the records of the  
1326 contractor or subcontractor required under sub-subparagraph d.  
1327 ~~e.~~

1328 ~~f.g.~~ In addition to the departmental inspection authority  
1329 set forth in s. 499.051, the establishment of the contract  
1330 provider and subcontractor and all records pertaining to  
1331 prescription drugs subject to this subparagraph shall be subject  
1332 to inspection by the agency or entity. All records relating to  
1333 prescription drugs of a manufacturer under this subparagraph  
1334 shall be subject to audit by the manufacturer of those drugs,  
1335 without identifying individual patient information.

1336 Section 16. Paragraph (q) of subsection (2) of section  
1337 499.01, Florida Statutes, is amended to read:

1338 499.01 Permits.—

1339 (2) The following permits are established:

1340 (q) Device manufacturer permit.—

1341 1. A device manufacturer permit is required for any person  
1342 that engages in the manufacture, repackaging, or assembly of  
1343 medical devices for human use in this state, except that a  
1344 permit is not required if:



1345        a. The person is engaged only in manufacturing,  
 1346 repackaging, or assembling a medical device pursuant to a  
 1347 practitioner's order for a specific patient; or

1348        b. The person does not manufacture, repackage, or assemble  
 1349 any medical devices or components for such devices, except those  
 1350 devices or components which are exempt from registration  
 1351 pursuant to s. 499.015(8).

1352        ~~2.1.~~ A manufacturer or repackager of medical devices in  
 1353 this state must comply with all appropriate state and federal  
 1354 good manufacturing practices and quality system rules.

1355        ~~3.2.~~ The department shall adopt rules related to storage,  
 1356 handling, and recordkeeping requirements for manufacturers of  
 1357 medical devices for human use.

1358        Section 17. Paragraph (i) is added to subsection (3) of  
 1359 section 499.01212, Florida Statutes, to read:

1360        499.01212 Pedigree paper.—

1361        (3) EXCEPTIONS.—A pedigree paper is not required for:

1362        (i) The wholesale distribution of prescription drugs  
 1363 within a medical convenience kit if:

1364        1. The medical convenience kit is assembled in an  
 1365 establishment that is registered with the United States Food and  
 1366 Drug Administration as a medical device manufacturer;

1367        2. The medical convenience kit manufacturer is an  
 1368 authorized distributor of record, as defined by 21 C.F.R. s.  
 1369 203.3, for the manufacturer of the specific drugs contained  
 1370 within the kit; and

1371        3. The drugs contained in the medical convenience kit are:

1372        a. Intravenous solutions intended for the replenishment of

- 1373 fluids and electrolytes;
- 1374 b. Products intended to maintain the equilibrium of water
- 1375 and minerals in the body;
- 1376 c. Products intended for irrigation or reconstitution;
- 1377 d. Anesthetics; or
- 1378 e. Anticoagulants.

1379

1380 This paragraph does not apply to a medical convenience kit

1381 containing any controlled substance that appears in any schedule

1382 contained in or subject to chapter 893 or the Federal

1383 Comprehensive Drug Abuse Prevention and Control Act of 1970.

1384 Section 18. Section 499.029, Florida Statutes, is amended

1385 to read:

1386 499.029 Prescription ~~Cancer~~ Drug Donation Program.—

1387 (1) This section may be cited as the Prescription "Cancer

1388 Drug Donation Program Act."

1389 (2) There is created a Prescription ~~Cancer~~ Drug Donation

1390 Program within the department for the purpose of authorizing and

1391 facilitating the donation of prescription ~~cancer~~ drugs and

1392 supplies to eligible patients.

1393 (3) As used in this section, the term:

1394 ~~(a) "Cancer drug" means a prescription drug that has been~~

1395 ~~approved under s. 505 of the federal Food, Drug, and Cosmetic~~

1396 ~~Act and is used to treat cancer or its side effects or is used~~

1397 ~~to treat the side effects of a prescription drug used to treat~~

1398 ~~cancer or its side effects. "Cancer drug" does not include a~~

1399 ~~substance listed in Schedule II, Schedule III, Schedule IV, or~~

1400 ~~Schedule V of s. 893.03.~~

1401            (a) ~~(b)~~ "Closed drug delivery system" means a system in  
 1402 which the actual control of the unit-dose medication package is  
 1403 maintained by the facility rather than by the individual  
 1404 patient.

1405            (b) "Dispensing practitioner" means a practitioner  
 1406 registered under s. 465.0276.

1407            (c) "Donor" means a patient or patient representative who  
 1408 donates prescription ~~cancer~~ drugs or supplies needed to  
 1409 administer prescription ~~cancer~~ drugs that have been maintained  
 1410 within a closed drug delivery system; health care facilities,  
 1411 nursing homes, hospices, or hospitals with closed drug delivery  
 1412 systems; or pharmacies, prescription drug manufacturers, medical  
 1413 device manufacturers or suppliers, or wholesalers of  
 1414 prescription drugs or supplies, in accordance with this section.  
 1415 The term "donor" includes a physician licensed under chapter 458  
 1416 or chapter 459 who receives prescription ~~cancer~~ drugs or  
 1417 supplies directly from a drug manufacturer, wholesale  
 1418 distributor, or pharmacy.

1419            (d) "Eligible patient" means a person who the department  
 1420 determines is eligible to receive prescription ~~cancer~~ drugs from  
 1421 the program.

1422            (e) "Participant ~~facility~~" means a ~~class II hospital~~  
 1423 pharmacy or dispensing practitioner that has elected to  
 1424 participate in the program and that accepts donated prescription  
 1425 ~~cancer~~ drugs and supplies under the rules adopted by the  
 1426 department for the program.

1427            (f) "Prescribing practitioner" means a physician licensed  
 1428 under chapter 458 or chapter 459 or any other medical

1429 professional with authority under state law to prescribe drugs  
 1430 ~~cancer medication~~.

1431 (g) "Prescription drug" does not include a substance  
 1432 listed in Schedule II, Schedule III, Schedule IV, or Schedule V  
 1433 of s. 893.03.

1434 (h)~~(g)~~ "Program" means the Prescription Cancer Drug  
 1435 Donation Program created by this section.

1436 (i)~~(h)~~ "Supplies" means any supplies used in the  
 1437 administration of a prescription cancer drug.

1438 (4) Any donor may donate prescription cancer drugs or  
 1439 supplies to a participant ~~facility~~ that elects to participate in  
 1440 the program and meets criteria established by the department for  
 1441 such participation. Prescription Cancer drugs or supplies may  
 1442 not be donated to a specific ~~cancer~~ patient, and donated  
 1443 prescription drugs or supplies may not be resold by the  
 1444 participant program. Prescription Cancer drugs billed to and  
 1445 paid for by Medicaid in long-term care facilities that are  
 1446 eligible for return to stock under federal Medicaid regulations  
 1447 shall be credited to Medicaid and are not eligible for donation  
 1448 under the program. A participant ~~facility~~ may provide dispensing  
 1449 and counseling ~~consulting~~ services to individuals who are not  
 1450 patients of the participant hospital.

1451 (5) The prescription cancer drugs or supplies donated to  
 1452 the program may be prescribed only by a prescribing practitioner  
 1453 for use by an eligible patient and may be dispensed only by a  
 1454 pharmacist or a dispensing practitioner.

1455 (6) (a) A prescription cancer drug may only be accepted or  
 1456 dispensed under the program if the drug is in its original,

1457 unopened, sealed container, or in a tamper-evident unit-dose  
1458 packaging, except that a prescription ~~cancer~~ drug packaged in  
1459 single-unit doses may be accepted and dispensed if the outside  
1460 packaging is opened but the single-unit-dose packaging is  
1461 unopened with tamper-resistant packaging intact.

1462 (b) A prescription ~~cancer~~ drug may not be accepted or  
1463 dispensed under the program if the drug bears an expiration date  
1464 that is less than 6 months after the date the drug was donated  
1465 or if the drug appears to have been tampered with or mislabeled  
1466 as determined in paragraph (c).

1467 (c) Before ~~Prior to~~ being dispensed to an eligible  
1468 patient, the prescription ~~cancer~~ drug or supplies donated under  
1469 the program shall be inspected by a pharmacist or dispensing  
1470 practitioner to determine that the drug and supplies do not  
1471 appear to have been tampered with or mislabeled.

1472 (d) A dispenser of donated prescription ~~cancer~~ drugs or  
1473 supplies may not submit a claim or otherwise seek reimbursement  
1474 from any public or private third-party payor for donated  
1475 prescription ~~cancer~~ drugs or supplies dispensed to any patient  
1476 under the program, and a public or private third-party payor is  
1477 not required to provide reimbursement to a dispenser for donated  
1478 prescription ~~cancer~~ drugs or supplies dispensed to any patient  
1479 under the program.

1480 (7) (a) A donation of prescription ~~cancer~~ drugs or supplies  
1481 shall be made only at a participant's ~~participant~~ facility. A  
1482 participant ~~facility~~ may decline to accept a donation. A  
1483 participant ~~facility~~ that accepts donated prescription ~~cancer~~  
1484 drugs or supplies under the program shall comply with all

1485 applicable provisions of state and federal law relating to the  
 1486 storage and dispensing of the donated prescription ~~cancer~~ drugs  
 1487 or supplies.

1488 (b) A participant ~~facility~~ that voluntarily takes part in  
 1489 the program may charge a handling fee sufficient to cover the  
 1490 cost of preparation and dispensing of prescription ~~cancer~~ drugs  
 1491 or supplies under the program. The fee shall be established in  
 1492 rules adopted by the department.

1493 (8) The department, upon the recommendation of the Board  
 1494 of Pharmacy, shall adopt rules to carry out the provisions of  
 1495 this section. ~~Initial rules under this section shall be adopted~~  
 1496 ~~no later than 90 days after the effective date of this act.~~ The  
 1497 rules shall include, but not be limited to:

1498 (a) Eligibility criteria, including a method to determine  
 1499 priority of eligible patients under the program.

1500 (b) Standards and procedures for participants ~~participant~~  
 1501 ~~facilities~~ that accept, store, distribute, or dispense donated  
 1502 prescription ~~cancer~~ drugs or supplies.

1503 (c) Necessary forms for administration of the program,  
 1504 including, but not limited to, forms for use by entities that  
 1505 donate, accept, distribute, or dispense prescription ~~cancer~~  
 1506 drugs or supplies under the program.

1507 (d) The maximum handling fee that may be charged by a  
 1508 participant ~~facility~~ that accepts and distributes or dispenses  
 1509 donated prescription ~~cancer~~ drugs or supplies.

1510 (e) Categories of prescription ~~cancer~~ drugs and supplies  
 1511 that the program will accept for dispensing; however, the  
 1512 department may exclude any drug based on its therapeutic

1513 effectiveness or high potential for abuse or diversion.

1514 (f) Maintenance and distribution of the participant  
1515 ~~facility~~ registry established in subsection (10).

1516 (9) A person who is eligible to receive prescription  
1517 ~~cancer~~ drugs or supplies under the state Medicaid program or  
1518 under any other prescription drug program funded in whole or in  
1519 part by the state, by any other prescription drug program funded  
1520 in whole or in part by the Federal Government, or by any other  
1521 prescription drug program offered by a third-party insurer,  
1522 unless benefits have been exhausted, or a certain prescription  
1523 ~~cancer~~ drug or supply is not covered by the prescription drug  
1524 program, is ineligible to participate in the program created  
1525 under this section.

1526 (10) The department shall establish and maintain a  
1527 participant ~~facility~~ registry for the program. The participant  
1528 ~~facility~~ registry shall include the participant's ~~participant~~  
1529 ~~facility's~~ name, address, and telephone number. The department  
1530 shall make the participant ~~facility~~ registry available on the  
1531 department's website to any donor wishing to donate prescription  
1532 ~~cancer~~ drugs or supplies to the program. The department's  
1533 website shall also contain links to prescription ~~cancer~~ drug  
1534 manufacturers that offer drug assistance programs or free  
1535 medication.

1536 (11) Any donor of prescription ~~cancer~~ drugs or supplies,  
1537 or any participant in the program, who exercises reasonable care  
1538 in donating, accepting, distributing, or dispensing prescription  
1539 ~~cancer~~ drugs or supplies under the program and the rules adopted  
1540 under this section shall be immune from civil or criminal

1541 liability and from professional disciplinary action of any kind  
 1542 for any injury, death, or loss to person or property relating to  
 1543 such activities.

1544 (12) A pharmaceutical manufacturer is not liable for any  
 1545 claim or injury arising from the transfer of any prescription  
 1546 ~~cancer~~ drug under this section, including, but not limited to,  
 1547 liability for failure to transfer or communicate product or  
 1548 consumer information regarding the transferred drug, as well as  
 1549 the expiration date of the transferred drug.

1550 (13) If any conflict exists between the provisions in this  
 1551 section and the provisions in this chapter or chapter 465, the  
 1552 provisions in this section shall control the operation of the  
 1553 ~~Cancer Drug Donation~~ program.

1554 Section 19. Subsections (4) and (5) of section 509.013,  
 1555 Florida Statutes, are amended to read:

1556 509.013 Definitions.—As used in this chapter, the term:

1557 (4) (a) "Public lodging establishment" includes a transient  
 1558 public lodging establishment as defined in subparagraph 1. and a  
 1559 nontransient public lodging establishment as defined in  
 1560 subparagraph 2.

1561 1. "Transient public lodging establishment" means any  
 1562 unit, group of units, dwelling, building, or group of buildings  
 1563 within a single complex of buildings which is rented to guests  
 1564 more than three times in a calendar year for periods of less  
 1565 than 30 days or 1 calendar month, whichever is less, or which is  
 1566 advertised or held out to the public as a place regularly rented  
 1567 to guests.

1568 2. "Nontransient public lodging establishment" means any



1569 unit, group of units, dwelling, building, or group of buildings  
 1570 within a single complex of buildings which is rented to guests  
 1571 for periods of at least 30 days or 1 calendar month, whichever  
 1572 is less, or which is advertised or held out to the public as a  
 1573 place regularly rented to guests for periods of at least 30 days  
 1574 or 1 calendar month.

1575  
 1576 License classifications of public lodging establishments, and  
 1577 the definitions therefor, are set out in s. 509.242. For the  
 1578 purpose of licensure, the term does not include condominium  
 1579 common elements as defined in s. 718.103.

1580 (b) The following are excluded from the definitions in  
 1581 paragraph (a):

1582 1. Any dormitory or other living or sleeping facility  
 1583 maintained by a public or private school, college, or university  
 1584 for the use of students, faculty, or visitors;

1585 2. Any facility certified or licensed and regulated by the  
 1586 Agency for Health Care Administration or the Department of  
 1587 Children and Family Services ~~hospital, nursing home, sanitarium,~~  
 1588 ~~assisted living facility,~~ or other similar place regulated under  
 1589 s. 381.0072;

1590 3. Any place renting four rental units or less, unless the  
 1591 rental units are advertised or held out to the public to be  
 1592 places that are regularly rented to transients;

1593 4. Any unit or group of units in a condominium,  
 1594 cooperative, or timeshare plan and any individually or  
 1595 collectively owned one-family, two-family, three-family, or  
 1596 four-family dwelling house or dwelling unit that is rented for

1597 periods of at least 30 days or 1 calendar month, whichever is  
 1598 less, and that is not advertised or held out to the public as a  
 1599 place regularly rented for periods of less than 1 calendar  
 1600 month, provided that no more than four rental units within a  
 1601 single complex of buildings are available for rent;

1602 5. Any migrant labor camp or residential migrant housing  
 1603 permitted by the Department of Health; under ss. 381.008-  
 1604 381.00895; and

1605 6. Any establishment inspected by the Department of Health  
 1606 and regulated by chapter 513.

1607 (5) (a) "Public food service establishment" means any  
 1608 building, vehicle, place, or structure, or any room or division  
 1609 in a building, vehicle, place, or structure where food is  
 1610 prepared, served, or sold for immediate consumption on or in the  
 1611 vicinity of the premises; called for or taken out by customers;  
 1612 or prepared prior to being delivered to another location for  
 1613 consumption.

1614 (b) The following are excluded from the definition in  
 1615 paragraph (a):

1616 1. Any place maintained and operated by a public or  
 1617 private school, college, or university:

1618 a. For the use of students and faculty; or

1619 b. Temporarily to serve such events as fairs, carnivals,  
 1620 and athletic contests.

1621 2. Any eating place maintained and operated by a church or  
 1622 a religious, nonprofit fraternal, or nonprofit civic  
 1623 organization:

1624 a. For the use of members and associates; or

- 1625           b. Temporarily to serve such events as fairs, carnivals,  
 1626 or athletic contests.
- 1627           3. Any eating place located on an airplane, train, bus, or  
 1628 watercraft which is a common carrier.
- 1629           4. Any eating place maintained by a facility certified or  
 1630 licensed and regulated by the Agency for Health Care  
 1631 Administration or the Department of Children and Family Services  
 1632 ~~hospital, nursing home, sanitarium, assisted living facility,~~  
 1633 ~~adult day care center,~~ or other similar place that is regulated  
 1634 under s. 381.0072.
- 1635           5. Any place of business issued a permit or inspected by  
 1636 the Department of Agriculture and Consumer Services under s.  
 1637 500.12.
- 1638           6. Any place of business where the food available for  
 1639 consumption is limited to ice, beverages with or without  
 1640 garnishment, popcorn, or prepackaged items sold without  
 1641 additions or preparation.
- 1642           7. Any theater, if the primary use is as a theater and if  
 1643 patron service is limited to food items customarily served to  
 1644 the admittees of theaters.
- 1645           8. Any vending machine that dispenses any food or  
 1646 beverages other than potentially hazardous foods, as defined by  
 1647 division rule.
- 1648           9. Any vending machine that dispenses potentially  
 1649 hazardous food and which is located in a facility regulated  
 1650 under s. 381.0072.
- 1651           10. Any research and development test kitchen limited to  
 1652 the use of employees and which is not open to the general

1653 public.

1654       Section 20. (1) All of the statutory powers, duties, and  
1655 functions, records, personnel, property, and unexpended balances  
1656 of appropriations, allocations, or other funds for the  
1657 administration of part I of chapter 499, Florida Statutes,  
1658 relating to drugs, devices, cosmetics, and household products  
1659 shall be transferred by a type two transfer, as defined in s.  
1660 20.06(2), Florida Statutes, from the Department of Health to the  
1661 Department of Business and Professional Regulation.

1662       (2) The transfer of regulatory authority under part I of  
1663 chapter 499, Florida Statutes, provided by this section shall  
1664 not affect the validity of any judicial or administrative action  
1665 pending as of 11:59 p.m. on the day before the effective date of  
1666 this section to which the Department of Health is at that time a  
1667 party, and the Department of Business and Professional  
1668 Regulation shall be substituted as a party in interest in any  
1669 such action.

1670       (3) All lawful orders issued by the Department of Health  
1671 implementing or enforcing or otherwise in regard to any  
1672 provision of part I of chapter 499, Florida Statutes, issued  
1673 prior to the effective date of this section shall remain in  
1674 effect and be enforceable after the effective date of this  
1675 section unless thereafter modified in accordance with law.

1676       (4) The rules of the Department of Health relating to the  
1677 implementation of part I of chapter 499, Florida Statutes, that  
1678 were in effect at 11:59 p.m. on the day prior to the effective  
1679 date of this section shall become the rules of the Department of  
1680 Business and Professional Regulation and shall remain in effect

1681 until amended or repealed in the manner provided by law.

1682 (5) Notwithstanding the transfer of regulatory authority  
 1683 under part I of chapter 499, Florida Statutes, provided by this  
 1684 section, persons and entities holding in good standing any  
 1685 permit under part I of chapter 499, Florida Statutes, as of  
 1686 11:59 p.m. on the day prior to the effective date of this  
 1687 section shall, as of the effective date of this section, be  
 1688 deemed to hold in good standing a permit in the same capacity as  
 1689 that for which the permit was formerly issued.

1690 (6) Notwithstanding the transfer of regulatory authority  
 1691 under part I of chapter 499, Florida Statutes, provided by this  
 1692 section, persons holding in good standing any certification  
 1693 under part I of chapter 499, Florida Statutes, as of 11:59 p.m.  
 1694 on the day prior to the effective date of this section shall, as  
 1695 of the effective date of this section, be deemed to be certified  
 1696 in the same capacity in which they were formerly certified.

1697 (7) This section shall take effect July 1, 2011.

1698 Section 21. (1) All of the statutory powers, duties, and  
 1699 functions, records, personnel, property, and unexpended balances  
 1700 of appropriations, allocations, or other funds for the  
 1701 administration of the boards and professions established within  
 1702 the Division of Medical Quality Assurance as specified in s.  
 1703 20.43(3)(g), Florida Statutes, shall be transferred by a type  
 1704 two transfer, as defined in s. 20.06(2), Florida Statutes, from  
 1705 the Department of Health to the Department of Business and  
 1706 Professional Regulation.

1707 (2) The transfer of regulatory authority of the Division  
 1708 of Medical Quality Assurance provided by this section shall not

1709 affect the validity of any judicial or administrative action  
 1710 pending as of 11:59 p.m. on the day before the effective date of  
 1711 this section to which the Department of Health is at that time a  
 1712 party, and the Department of Business and Professional  
 1713 Regulation shall be substituted as a party in interest in any  
 1714 such action.

1715 (3) All lawful orders issued by the Department of Health  
 1716 implementing or enforcing or otherwise in regard to any function  
 1717 of the Division of Medical Quality Assurance issued prior to the  
 1718 effective date of this section shall remain in effect and be  
 1719 enforceable after the effective date of this section unless  
 1720 thereafter modified in accordance with law.

1721 (4) The rules of the Department of Health relating to the  
 1722 implementation of statutory directives administered by the  
 1723 Division of Medical Quality Assurance that were in effect at  
 1724 11:59 p.m. on the day prior to the effective date of this  
 1725 section shall become the rules of the Department of Business and  
 1726 Professional Regulation and shall remain in effect until amended  
 1727 or repealed in the manner provided by law.

1728 (5) Notwithstanding the transfer of regulatory authority  
 1729 of the Division of Medical Quality Assurance provided by this  
 1730 section, persons and entities holding in good standing any  
 1731 license or permit issued by the Division of Medical Quality  
 1732 Assurance as of 11:59 p.m. on the day prior to the effective  
 1733 date of this section shall, as of the effective date of this  
 1734 section, be deemed to hold in good standing a permit in the same  
 1735 capacity as that for which the permit was formerly issued.

1736 (6) Notwithstanding the transfer of regulatory authority

CS/HB 7183, Engrossed 1

2010

1737 of the Division of Medical Quality Assurance provided by this  
1738 section, persons holding in good standing any certification  
1739 issued by the Division of Medical Quality Assurance as of 11:59  
1740 p.m. on the day prior to the effective date of this section  
1741 shall, as of the effective date of this section, be deemed to be  
1742 certified in the same capacity in which they were formerly  
1743 certified.

1744 (7) This section shall take effect July 1, 2011.

1745 Section 22. Except as otherwise expressly provided in this  
1746 act, this act shall take effect July 1, 2010.