

LEGISLATIVE ACTION

Senate House

Floor: WD 03/08/2012 06:42 PM

Senator Hays moved the following:

Senate Amendment (with title amendment)

Delete lines 2404 - 4214 and insert:

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Section 43. Subsection (5) of section 381.0303, Florida Statutes, is amended to read:

381.0303 Special needs shelters.-

(5) SPECIAL NEEDS SHELTER INTERAGENCY COMMITTEE.—The State Surgeon General may establish a special needs shelter interagency committee and serve as, or appoint a designee to serve as, the committee's chair. The department shall provide any necessary staff and resources to support the committee in the performance of its duties. The committee shall address and



resolve problems related to special needs shelters not addressed in the state comprehensive emergency medical plan and shall consult on the planning and operation of special needs shelters.

(a) The committee shall +

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- 1. develop, negotiate, and regularly review any necessary interagency agreements, and-
- 2. undertake other such activities as the department deems necessary to facilitate the implementation of this section.
 - 3. Submit recommendations to the Legislature as necessary.
- (b) The special needs shelter interagency committee shall be composed of representatives of emergency management, health, medical, and social services organizations. Membership shall include, but shall not be limited to, representatives of the Departments of Health, Children and Family Services, Elderly Affairs, and Education; the Agency for Health Care Administration; the Division of Emergency Management; the Florida Medical Association; the Florida Osteopathic Medical Association; Associated Home Health Industries of Florida, Inc.; the Florida Nurses Association; the Florida Health Care Association; the Florida Assisted Living Affiliation; the Florida Hospital Association; the Florida Statutory Teaching Hospital Council; the Florida Association of Homes for the Aging; the Florida Emergency Preparedness Association; the American Red Cross; Florida Hospices and Palliative Care, Inc.; the Association of Community Hospitals and Health Systems; the Florida Association of Health Maintenance Organizations; the Florida League of Health Systems; the Private Care Association; the Salvation Army; the Florida Association of Aging Services Providers; the AARP; and the Florida Renal Coalition.

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(c) Meetings of the committee shall be held in Tallahassee, and members of the committee shall serve at the expense of the agencies or organizations they represent. The committee shall make every effort to use teleconference or videoconference capabilities in order to ensure statewide input and participation.

Section 44. Section 381.04015, Florida Statutes, is repealed.

Section 45. Subsections (2), (3), and (4) of section 381.0403, Florida Statutes, are amended to read:

381.0403 The Community Hospital Education Act.-

- (2) ESTABLISHMENT OF PROGRAM LEGISLATIVE INTENT.-
- (a) It is the intent of the Legislature that health care services for the citizens of this state be upgraded and that a program for continuing these services be maintained through a plan for community medical education. The A program is intended established to plan for community medical education, provide additional outpatient and inpatient services, increase the $\frac{a}{a}$ continuing supply of highly trained physicians, and expand graduate medical education.
- (b) The Legislature further acknowledges the critical need for increased numbers of primary care physicians to provide the necessary current and projected health and medical services. In order to meet both present and anticipated needs, the Legislature supports an expansion in the number of family practice residency positions. The Legislature intends that the funding for graduate education in family practice be maintained and that funding for all primary care specialties be provided at a minimum of \$10,000 per resident per year. Should funding for

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act remain constant or be reduced, it is intended that all programs funded by this act be maintained or reduced proportionately.

- (3) PROGRAM FOR COMMUNITY HOSPITAL EDUCATION; STATE AND LOCAL PLANNING.-
- (a) There is established under the Department of Health a program for statewide graduate medical education. It is intended that continuing graduate medical education programs for interns and residents be established on a statewide basis. The program shall provide financial support for primary care specialty interns and residents based on recommendations of policies recommended and approved by the Community Hospital Education Council, herein established, and the Department of Health, as authorized by the General Appropriations Act. Only those programs with at least three residents or interns in each year of the training program are qualified to apply for financial support. Programs with fewer than three residents or interns per training year are qualified to apply for financial support, but only if the appropriate accrediting entity for the particular specialty has approved the program for fewer positions. New programs added after fiscal year 1997-1998 shall have 5 years to attain the requisite number of residents or interns. When feasible and to the extent allowed through the General Appropriations Act, state funds shall be used to generate federal matching funds under Medicaid, or other federal programs, and the resulting combined state and federal funds shall be allocated to participating hospitals for the support of graduate medical education.
 - (b) For the purposes of this section, primary care

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specialties include emergency medicine, family practice, internal medicine, pediatrics, psychiatry, obstetrics/gynecology, and combined pediatrics and internal medicine, and other primary care specialties as may be included by the council and Department of Health.

- (c) Medical institutions throughout the state may apply to the Community Hospital Education Council for grants-in-aid for financial support of their approved programs. Recommendations for funding of approved programs shall be forwarded to the Department of Health.
- (d) The program shall provide a plan for community clinical teaching and training with the cooperation of the medical profession, hospitals, and clinics. The plan shall also include formal teaching opportunities for intern and resident training. In addition, the plan shall establish an off-campus medical faculty with university faculty review to be located throughout the state in local communities.
 - (4) PROGRAM FOR GRADUATE MEDICAL EDUCATION INNOVATIONS.
- (a) There is established under the Department of Health a program for fostering graduate medical education innovations. Funds appropriated annually by the Legislature for this purpose shall be distributed to participating hospitals or consortia of participating hospitals and Florida medical schools or to a Florida medical school for the direct costs of providing graduate medical education in community-based clinical settings on a competitive grant or formula basis to achieve state health care workforce policy objectives, including, but not limited to:
- 1. Increasing the number of residents in primary care and other high demand specialties or fellowships;

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- 2. Enhancing retention of primary care physicians in Florida practice;
- 3. Promoting practice in medically underserved areas of the state:
- 4. Encouraging racial and ethnic diversity within the state's physician workforce; and
 - 5. Encouraging increased production of geriatricians.
- (b) Participating hospitals or consortia of participating hospitals and Florida medical schools or a Florida medical school providing graduate medical education in community-based clinical settings may apply to the Community Hospital Education Council for funding under this innovations program, except when such innovations directly compete with services or programs provided by participating hospitals or consortia of participating hospitals, or by both hospitals and consortia. Innovations program funding shall be allocated provide funding based on recommendations of policies recommended and approved by the Community Hospital Education Council and the Department of Health, as authorized by the General Appropriations Act.
- (c) Participating hospitals or consortia of participating hospitals and Florida medical schools or Florida medical schools awarded an innovations grant shall provide the Community Hospital Education Council and Department of Health with an annual report on their project.

Section 46. Subsection (7) of section 381.0405, Florida Statutes, is amended to read:

381.0405 Office of Rural Health.-

(7) APPROPRIATION. The Legislature shall appropriate such sums as are necessary to support the Office of Rural Health.



159 Section 47. Subsection (3) of section 381.0406, Florida Statutes, is amended to read: 160 381.0406 Rural health networks.-161 162 (3) Because each rural area is unique, with a different 163 health care provider mix, Health care provider membership may 164 vary, but all networks shall include members that provide public 165 health, comprehensive primary care, emergency medical care, and 166 acute inpatient care. 167 Section 48. Effective October 1, 2014, section 381.0407, 168 Florida Statutes, is repealed. 169 Section 49. Section 381.045, Florida Statutes, is repealed. 170 Section 50. Subsection (7) of section 381.06015, Florida Statutes, is amended to read: 171 172 381.06015 Public Cord Blood Tissue Bank.-173 (7) In order to fund the provisions of this section the 174 consortium participants, the Agency for Health Care 175 Administration, and the Department of Health shall seek private 176 or federal funds to initiate program actions for fiscal year 2000-2001. 177 178 Section 51. Section 381.0605, Florida Statutes, is 179 repealed. Section 52. Sections 381.1001, 381.1015, 381.102, and 180 181 381.103, Florida Statutes, are repealed. 182 Section 53. Subsection (2) of section 381.4018, Florida 183 Statutes, is repealed. 184 Section 54. Section 381.60225, Florida Statutes, is 185 repealed.

Section 55. Sections 381.732, 381.733, and 381.734, Florida

Statutes, are repealed.

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Section 56. Section 381.7352, Florida Statutes, is amended to read:

381.7352 Legislative findings and intent.-

(1) The Legislature finds that despite state investments in health care programs, certain racial and ethnic populations in Florida continue to have significantly poorer health outcomes when compared to non-Hispanic whites. The Legislature finds that local solutions to health care problems can have a dramatic and positive effect on the health status of these populations. Local governments and communities are best equipped to identify the health education, health promotion, and disease prevention needs of the racial and ethnic populations in their communities, mobilize the community to address health outcome disparities, enlist and organize local public and private resources, and faith-based organizations to address these disparities, and evaluate the effectiveness of interventions.

(2) It is therefore the intent of the Legislature to provide funds within Florida counties and Front Porch Florida Communities, in the form of Reducing Racial and Ethnic Health Disparities: Closing the Gap grants, to stimulate the development of community-based and neighborhood-based projects which will improve the health outcomes of racial and ethnic populations. Further, it is the intent of the Legislature that these programs foster the development of coordinated, collaborative, and broad-based participation by public and private entities, and faith-based organizations. Finally, it is the intent of the Legislature that the grant program function as a partnership between state and local governments, faith-based organizations, and private sector health care providers,

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including managed care, voluntary health care resources, social service providers, and nontraditional partners.

Section 57. Subsection (3) of section 381.7353, Florida Statutes, is amended to read:

381.7353 Reducing Racial and Ethnic Health Disparities: Closing the Gap grant program; administration; department duties.-

(3) Pursuant to s. 20.43(6), the State Surgeon General may appoint an ad hoc advisory committee to: examine areas where public awareness, public education, research, and coordination regarding racial and ethnic health outcome disparities are lacking; consider access and transportation issues which contribute to health status disparities; and make recommendations for closing gaps in health outcomes and increasing the public's awareness and understanding of health disparities that exist between racial and ethnic populations.

Section 58. Subsections (5) and (6) of section 381.7356, Florida Statutes, are renumbered as subsections (4) and (5), respectively, and present subsection (4) of that section is amended to read:

381.7356 Local matching funds; grant awards.-

(4) Dissemination of grant awards shall begin no later than January 1, 2001.

Section 59. Subsection (3) of section 381.765, Florida Statutes, is amended to read:

381.765 Retention of title to and disposal of equipment.-

(3) The department may adopt rules relating to records and recordkeeping for department-owned property referenced in subsections (1) and (2).



246 Section 60. Section 381.77, Florida Statutes, is repealed. Section 61. Section 381.795, Florida Statutes, is repealed. 247 Section 62. Subsections (2) through (5) of section 381.853, 248 249 Florida Statutes, are renumbered as subsections (1) through (4), 250 respectively, and present subsection (1) of that section is 251 amended to read: 252 381.853 Florida Center for Brain Tumor Research.-253 (1) The Legislature finds that each year an estimated 254 190,000 citizens of the United States are diagnosed with 255 cancerous and noncancerous brain tumors and that biomedical 256 research is the key to finding cures for these tumors. The 257 Legislature further finds that, although brain tumor research is being conducted throughout the state, there is a lack of 258 259 coordinated efforts among researchers and health care providers. 260 Therefore, the Legislature finds that there is a significant 261 need for a coordinated effort to achieve the goal of curing 262 brain tumors. The Legislature further finds that the biomedical 263 technology sector meets the criteria of a high-impact sector, 264 pursuant to s. 288.108(6), having a high importance to the state's economy with a significant potential for growth and 265 266 contribution to our universities and quality of life. 267 Section 63. Section 381.855, Florida Statutes, is repealed. 268 Section 64. Section 381.87, Florida Statutes, is repealed. 269 Section 65. Section 381.90, Florida Statutes, is repealed. 270 Section 66. Subsection (1) of section 381.91, Florida 271 Statutes, is amended to read: 272 381.91 Jessie Trice Cancer Prevention Program.-273 (1) It is the intent of the Legislature to: 274 (a) Reduce the rates of illness and death from lung cancer

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and other cancers and improve the quality of life among income African-American and Hispanic populations through increased access to early, effective screening and diagnosis, education, and treatment programs.

(b) create a community faith-based disease-prevention program in conjunction with the Health Choice Network and other community health centers to build upon the natural referral and education networks in place within minority communities and to increase access to health service delivery in Florida and-

(c) establish a funding source to build upon local private participation to sustain the operation of the program.

Section 67. Subsection (5) of section 381.922, Florida Statutes, is amended to read:

381.922 William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program. -

(5) The William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program is funded pursuant to s. 215.5602(12). Funds appropriated for the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program shall be distributed pursuant to this section to provide grants to researchers seeking cures for cancer and cancer-related illnesses, with emphasis given to the goals enumerated in this section. From the total funds appropriated, an amount of up to 10 percent may be used for administrative expenses. From funds appropriated to accomplish the goals of this section, up to \$250,000 shall be available for the operating costs of the Florida Center for Universal Research to Eradicate Disease.

Section 68. Paragraph (g) of subsection (1) of section 383.011, Florida Statutes, is amended to read:

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- 383.011 Administration of maternal and child health programs.-
- (1) The Department of Health is designated as the state agency for:
- (g) Receiving the federal funds for the "Special Supplemental Nutrition Program for Women, Infants, and Children," or WIC, authorized by the Child Nutrition Act of 1966, as amended, and for providing clinical leadership for administering the statewide WIC program.
- 1. The department shall establish an interagency agreement with the Department of Children and Family Services for fiscal management of the program. Responsibilities are delegated to each department, as follows:
- a. The department shall provide clinical leadership, manage program eligibility, and distribute nutritional guidance and information to participants.
- b. The Department of Children and Family Services shall develop and implement an electronic benefits transfer system.
- c. The Department of Children and Family Services shall develop a cost containment plan that provides timely and accurate adjustments based on wholesale price fluctuations and adjusts for the number of cash registers in calculating statewide averages.
- d. The department shall coordinate submission of information to appropriate federal officials in order to obtain approval of the electronic benefits system and cost containment plan, which must include participation of WIC-only stores.
- 2. The department shall assist the Department of Children and Family Services in the development of the electronic

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benefits system to ensure full implementation no later than July 1, 2013.

Section 69. Section 383.141, Florida Statutes, is created to read:

383.141 Prenatally diagnosed conditions; patient to be provided information; definitions; information clearinghouse; advisory council.-

- (1) As used in this section, the term:
- (a) "Down syndrome" means a chromosomal disorder caused by an error in cell division which results in the presence of an extra whole or partial copy of chromosome 21.
- (b) "Developmental disability" includes Down syndrome and other developmental disabilities defined by s. 393.063(9).
- (c) "Health care provider" means a practitioner licensed under chapter 458 or chapter 459.
- (d) "Prenatally diagnosed condition" means an adverse fetal health condition identified by prenatal testing.
- (e) "Prenatal test" or "prenatal testing" means a diagnostic procedure or screening procedure performed on a pregnant woman or her unborn offspring to obtain information about the offspring's health or development.
- (2) When a developmental disability is diagnosed based on the results of a prenatal test, the health care provider who ordered the prenatal test, or his or her designee, shall provide the patient with current information about the nature of the developmental disability, the accuracy of the prenatal test, and resources for obtaining relevant support services, including hotlines, resource centers, and information clearinghouses related to Down syndrome or other prenatally diagnosed

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developmental disabilities; support programs for parents and families; and developmental evaluation and intervention services under s. 391.303.

- (3) The Department of Health shall establish on its Internet website a clearinghouse of information related to developmental disabilities concerning providers of supportive services, information hotlines specific to Down syndrome and other prenatally diagnosed developmental disabilities, resource centers, educational programs, other support programs for parents and families, and developmental evaluation and intervention services under s. 391.303. Such information shall be made available to health care providers for use in counseling pregnant women whose unborn children have been prenatally diagnosed with developmental disabilities.
- (a) There is established an advisory council within the Department of Health which consists of health care providers and caregivers who perform health care services for persons who have developmental disabilities, including Down syndrome and autism. This group shall consist of nine members as follows:
 - 1. Three members appointed by the Governor;
- 2. Three members appointed by the President of the Senate; and
- 3. Three members appointed by the Speaker of the House of Representatives.
- (b) The advisory council shall provide technical assistance to the Department of Health in the establishment of the information clearinghouse and give the department the benefit of the council members' knowledge and experience relating to the needs of patients and families of patients with developmental

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disabilities and available support services.

- (c) Members of the council shall elect a chairperson and a vice chairperson. The elected chairperson and vice chairperson shall serve in these roles until their terms of appointment on the council expire.
- (d) The advisory council shall meet quarterly to review this clearinghouse of information, and may meet more often at the call of the chairperson or as determined by a majority of members.
- (e) The council members shall be appointed to 4-year terms, except that, to provide for staggered terms, one initial appointee each from the Governor, the President of the Senate, and the Speaker of the House of Representatives shall be appointed to a 2-year term, one appointee each from these officials shall be appointed to a 3-year term, and the remaining initial appointees shall be appointed to 4-year terms. All subsequent appointments shall be for 4-year terms. A vacancy shall be filled for the remainder of the unexpired term in the same manner as the original appointment.
- (f) Members of the council shall serve without compensation. Meetings of the council may be held in person, without reimbursement for travel expenses, or by teleconference or other electronic means.
- (g) The Department of Health shall provide administrative support for the advisory council.
- Section 70. Effective July 1, 2012, section 385.210, Florida Statutes, is repealed.
- Section 71. Section 391.016, Florida Statutes, is amended to read:

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- 391.016 Purposes and functions Legislative intent.-The Legislature intends that the Children's Medical Services program is established for the following purposes and authorized to perform the following functions:
- (1) Provide to children with special health care needs a family-centered, comprehensive, and coordinated statewide managed system of care that links community-based health care with multidisciplinary, regional, and tertiary pediatric specialty care. The program shall coordinate and maintain a consistent may provide for the coordination and maintenance of consistency of the medical home for participating children in families with a Children's Medical Services program participant, in order to achieve family-centered care.
- (2) Provide essential preventive, evaluative, and early intervention services for children at risk for or having special health care needs, in order to prevent or reduce long-term disabilities.
- (3) Serve as a principal provider for children with special health care needs under Titles XIX and XXI of the Social Security Act.
- (4) Be complementary to children's health training programs essential for the maintenance of a skilled pediatric health care workforce for all Floridians.
- Section 72. Section 391.021, Florida Statutes, is amended to read:
- 391.021 Definitions.-When used in this act, the term unless the context clearly indicates otherwise:
- (1) "Children's Medical Services network" or "network" means a statewide managed care service system that includes

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health care providers, as defined in this section.

- (2) "Children with special health care needs" means those children younger than 21 years of age who have chronic and serious physical, developmental, behavioral, or emotional conditions and who also require health care and related services of a type or amount beyond that which is generally required by children.
 - (3) "Department" means the Department of Health.
- (4) "Eligible individual" means a child with a special health care need or a female with a high-risk pregnancy, who meets the financial and medical eligibility standards established in s. 391.029.
- (5) "Health care provider" means a health care professional, health care facility, or entity licensed or certified to provide health services in this state that meets the criteria as established by the department.
- (6) "Health services" includes the prevention, diagnosis, and treatment of human disease, pain, injury, deformity, or disabling conditions.
- (7) "Participant" means an eligible individual who is enrolled in the Children's Medical Services program.
- (8) "Program" means the Children's Medical Services program established in the department.
- Section 73. Section 391.025, Florida Statutes, is amended to read:
 - 391.025 Applicability and scope.-
- (1) The Children's Medical Services program consists of the following components:
 - (a) The newborn screening program established in s. 383.14.

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- (b) The regional perinatal intensive care centers program established in ss. 383.15-383.21.
- (c) A federal or state program authorized by the Legislature.
- (c) (d) The developmental evaluation and intervention program, including the Florida Infants and Toddlers Early Intervention Program.
 - (d) (e) The Children's Medical Services network.
- (2) The Children's Medical Services program shall not be deemed an insurer and is not subject to the licensing requirements of the Florida Insurance Code or the rules adopted thereunder, when providing services to children who receive Medicaid benefits, other Medicaid-eligible children with special health care needs, and children participating in the Florida Kidcare program.

Section 74. Section 391.026, Florida Statutes, is amended to read:

- 391.026 Powers and duties of the department.—The department shall have the following powers, duties, and responsibilities:
- (1) To provide or contract for the provision of health services to eligible individuals.
- (2) To provide services to abused and neglected children through child protective teams pursuant to s. 39.303.
- (3) (2) To determine the medical and financial eligibility standards for the program and to determine the medical and financial eligibility of individuals seeking health services from the program.
- (3) To recommend priorities for the implementation of comprehensive plans and budgets.

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- (4) To coordinate a comprehensive delivery system for eligible individuals to take maximum advantage of all available funds.
- (5) To promote, establish, and coordinate with programs relating to children's medical services in cooperation with other public and private agencies and to coordinate funding of health care programs with federal, state, or local indigent health care funding mechanisms.
- (6) To initiate and, coordinate, and request review of applications to federal agencies and private organizations and state agencies for funds, services, or commodities relating to children's medical programs.
- (7) To sponsor or promote grants for projects, programs, education, or research in the field of medical needs of children with special health needs, with an emphasis on early diagnosis and treatment.
- (8) To oversee and operate the Children's Medical Services network.
- (9) To establish reimbursement mechanisms for the Children's Medical Services network.
- (10) To establish Children's Medical Services network standards and credentialing requirements for health care providers and health care services.
- (11) To serve as a provider and principal case manager for children with special health care needs under Titles XIX and XXI of the Social Security Act.
- (12) To monitor the provision of health services in the program, including the utilization and quality of health services.

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- (13) To administer the Children with Special Health Care Needs program in accordance with Title V of the Social Security Act.
- (14) To establish and operate a grievance resolution process for participants and health care providers.
- (15) To maintain program integrity in the Children's Medical Services program.
- (16) To receive and manage health care premiums, capitation payments, and funds from federal, state, local, and private entities for the program. The department may contract with a third-party administrator for processing claims, monitoring medical expenses, and other related services necessary to the efficient and cost-effective operation of the Children's Medical Services network. The department is authorized to maintain a minimum reserve for the Children's Medical Services network in an amount that is the greater of:
- (a) Ten percent of total projected expenditures for Title XIX-funded and Title XXI-funded children; or
- (b) Two percent of total annualized payments from the Agency for Health Care Administration for Title XIX and Title XXI of the Social Security Act.
- (17) To provide or contract for appoint health care consultants for the purpose of providing peer review and other quality-improvement activities making recommendations to enhance the delivery and quality of services in the Children's Medical Services program.
- (18) To adopt rules pursuant to ss. 120.536(1) and 120.54 to administer the Children's Medical Services Act. The rules may include requirements for definitions of terms, program

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organization, and program description; a process for selecting an area medical director; responsibilities of applicants and clients; requirements for service applications, including required medical and financial information; eligibility requirements for initial treatment and for continued eligibility, including financial and custody issues; methodologies for resource development and allocation, including medical and financial considerations; requirements for reimbursement services rendered to a client; billing and payment requirements for providers; requirements for qualification, appointments, verification, and emergency exceptions for healthprofessional consultants; general and diagnostic-specific standards for diagnostic and treatment facilities; and standards for the method of service delivery, including consultant services, respect-for-privacy considerations, examination requirements, family support plans, and clinic design.

Section 75. Section 391.028, Florida Statutes, is amended to read:

391.028 Administration. The Children's Medical Services program shall have a central office and area offices.

(1) The Director of Children's Medical Services must be a physician licensed under chapter 458 or chapter 459 who has specialized training and experience in the provision of health care to children and who has recognized skills in leadership and the promotion of children's health programs. The director shall be the deputy secretary and the Deputy State Health Officer for Children's Medical Services and is appointed by and reports to the State Surgeon General. The director may appoint such other staff as necessary for the operation of the program division

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directors subject to the approval of the State Surgeon General.

- (2) The director shall provide for operational system using such department staff and contract providers as necessary. The program shall implement the following program activities under physician supervision on a statewide basis designate Children's Medical Services area offices to perform operational activities, including, but not limited to:
- (a) Providing Case management services for the network participants; -
- (b) Management and Providing local oversight of local the program activities; -
- (c) Determining an individual's Medical and financial eligibility determination for the program in accordance with s. 391.029;-
- (d) Participating in the Determination of a level of care and medical complexity for long-term care services; -
- (e) Authorizing services in the program and developing spending plans; -
- (f) Participating in the Development of treatment plans; and-
- (g) Taking part in the Resolution of complaints and grievances from participants and health care providers.
- (3) Each Children's Medical Services area office shall be directed by a physician licensed under chapter 458 or chapter 459 who has specialized training and experience in the provision of health care to children. The director of a Children's Medical Services area office shall be appointed by the director from the active panel of Children's Medical Services physician consultants.



Section 76. Section 391.029, Florida Statutes, is amended to read:

391.029 Program eligibility.-

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- (1) Eligibility The department shall establish the medical criteria to determine if an applicant for the Children's Medical Services program is based on the diagnosis of one or more chronic and serious medical conditions and the family's need for specialized services an eligible individual.
- (2) The following individuals are financially eligible to receive services through the program:
- (a) A high-risk pregnant female who is enrolled in eligible for Medicaid.
- (b) Children with serious special health care needs from birth to 21 years of age who are enrolled in eligible for Medicaid.
- (c) Children with serious special health care needs from birth to 19 years of age who are enrolled in eligible for a program under Title XXI of the Social Security Act.
- (3) Subject to the availability of funds, the following individuals may receive services through the program:
- (a) Children with serious special health care needs from birth to 21 years of age who do not qualify for Medicaid or whose family income is above the requirements for financial eligibility under Title XXI of the Social Security Act but who are unable to access, due to lack of providers or lack of financial resources, specialized services that are medically necessary or essential family support services and whose projected annual cost of care adjusts the family income to Medicaid financial criteria. Families In cases where the family

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income is adjusted based on a projected annual cost of care, the family shall participate financially in the cost of care based on a sliding fee scale criteria established by the department.

- (b) Children with special health care needs from birth to 21 years of age, as provided in Title V of the Social Security Act.
- (c) An infant who receives an award of compensation under s. 766.31(1). The Florida Birth-Related Neurological Injury Compensation Association shall reimburse the Children's Medical Services Network the state's share of funding, which must thereafter be used to obtain matching federal funds under Title XXI of the Social Security Act.
- (4) The department shall determine the financial and medical eligibility of children for the program. The department shall also determine the financial ability of the parents, or persons or other agencies having legal custody over such individuals, to pay the costs of health services under the program. The department may pay reasonable travel expenses related to the determination of eligibility for or the provision of health services.
- (4) (5) Any child who has been provided with surgical or medical care or treatment under this act prior to being adopted and has serious and chronic special health needs shall continue to be eligible to be provided with such care or treatment after his or her adoption, regardless of the financial ability of the persons adopting the child.

Section 77. Section 391.0315, Florida Statutes, is amended to read:

391.0315 Benefits.—Benefits provided under the program for

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children with special health care needs shall be equivalent to the same benefits provided to children as specified in ss. 409.905 and 409.906. The department may offer additional benefits for early intervention services, respite services, genetic testing, genetic and nutritional counseling, and parent support services, if such services are determined to be medically necessary. No child or person determined eligible for the program who is eligible under Title XIX or Title XXI of the Social Security Act shall receive any service other than an initial health care screening or treatment of an emergency medical condition as defined in s. 395.002, until such child or person is enrolled in Medicaid or a Title XXI program.

Section 78. Effective January 1, 2013, section 392.51, Florida Statutes, is amended to read:

392.51 Tuberculosis control Findings and intent.-A statewide system is established to control tuberculosis infection and mitigate its effects. The system consists The Legislature finds and declares that active tuberculosis is a highly contagious infection that is sometimes fatal and constitutes a serious threat to the public health. The Legislature finds that there is a significant reservoir of tuberculosis infection in this state and that there is a need to develop community programs to identify tuberculosis and to respond quickly with appropriate measures. The Legislature finds that some patients who have active tuberculosis have complex medical, social, and economic problems that make outpatient control of the disease difficult, if not impossible, without posing a threat to the public health. The Legislature finds that in order to protect the citizenry from those few persons who

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pose a threat to the public, it is necessary to establish a system of mandatory contact identification, treatment to cure, hospitalization, and isolation for contagious cases, and to provide a system of voluntary, community-oriented care and surveillance in all other cases. The Legislature finds that the delivery of Tuberculosis control services shall be provided is best accomplished by the coordinated efforts of the respective county health departments and contracted or other private health care providers, the A.G. Holley State Hospital, and the private health care delivery system.

Section 79. Effective January 1, 2013, subsection (4) of section 392.61, Florida Statutes, is amended to read:

392.61 Community tuberculosis control programs. -

(4) The department shall develop, by rule, a methodology for distributing funds appropriated for tuberculosis control programs. Criteria to be considered in this methodology include, but are not limited to, the basic infrastructure available for tuberculosis control, caseload requirements, laboratory support services needed, and epidemiologic factors.

Section 80. Effective January 1, 2013, section 392.62, Florida Statutes, is amended to read:

392.62 Hospitalization and placement programs.-

(1) The department shall contract for operation of operate a program for the treatment hospitalization of persons who have active tuberculosis in hospitals licensed under chapter 395 and may provide for appropriate placement of persons who have active tuberculosis in other health care facilities or residential facilities. The department shall require the contractor to use existing licensed community hospitals and other facilities for

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the care and treatment to cure of persons who have active tuberculosis or a history of noncompliance with prescribed drug regimens and require inpatient or other residential services.

- (2) The department may operate a licensed hospital for the care and treatment to cure of persons who have active tuberculosis. The hospital may have a forensic unit where, under medical protocol, a patient can be held in a secure or protective setting. The department shall also seek to maximize use of existing licensed community hospitals for the care and treatment to cure of persons who have active tuberculosis.
- (2) The program for control of tuberculosis shall provide funding for participating facilities and require any such facilities to meet the following conditions Any licensed hospital operated by the department, any licensed hospital under contract with the department, and any other health care facility or residential facility operated by or under contract with the department for the care and treatment of patients who have active tuberculosis shall:
- (a) Admit patients voluntarily and under court order as appropriate for each particular facility;
- (b) Require that each patient pay the actual cost of care provided whether the patient is admitted voluntarily or by court order;
- (c) Provide for a method of paying for the care of patients in the program regardless of ability to pay who cannot afford to do so;
- (d) Require a primary clinical diagnosis of active tuberculosis by a physician licensed under chapter 458 or chapter 459 before admitting the patient; provided that there



may be more than one primary diagnosis;

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- (e) Provide a method of notification to the county health department and to the patient's family, if any, before discharging the patient from the hospital or other facility;
- (f) Provide for the necessary exchange of medical information to assure adequate community treatment to cure and followup of discharged patients, as appropriate; and
- (q) Provide for a method of medical care and counseling and for housing, social service, and employment referrals, if appropriate, for all patients discharged from the hospital.
- (3) (4) A hospital may, pursuant to court order, place a patient in temporary isolation for a period of no more than 72 continuous hours. The department shall obtain a court order in the same manner as prescribed in s. 392.57. Nothing in this subsection precludes a hospital from isolating an infectious patient for medical reasons.
- (4) (4) (5) Any person committed under s. 392.57 who leaves the tuberculosis hospital or residential facility without having been discharged by the designated medical authority, except as provided in s. 392.63, shall be apprehended by the sheriff of the county in which the person is found and immediately delivered to the facility from which he or she left.

Section 81. Subsection (1) of section 395.1027, Florida Statutes, is amended to read:

395.1027 Regional poison control centers.-

(1) There shall be created three certified regional poison control centers, one each in the north, central, and southern regions of the state. Each regional poison control center shall be affiliated with and physically located in a certified Level I

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trauma center. Each regional poison control center shall be affiliated with an accredited medical school or college of pharmacy. The regional poison control centers shall be coordinated under the aegis of the Division of Children's Medical Services Prevention and Intervention in the department.

Section 82. The Department of Health shall develop and implement a transition plan for the closure of A.G. Holley State Hospital. The plan shall include specific steps to end voluntary admissions; transfer patients to alternate facilities; communicate with families, providers, other affected parties, and the general public; enter into any necessary contracts with providers; and coordinate with the Department of Management Services regarding the disposition of equipment and supplies and the closure of the facility; and the Agency for Health Care Administration is directed to modify its reimbursement plans and seek federal approval, if necessary, to continue Medicaid funding throughout the treatment period in community hospitals and other facilities. The plan shall be submitted to the Governor, the Speaker of the House of Representatives, and the President of the Senate by May 31, 2012. The department shall fully implement the plan by January 1, 2013.

Section 83. Subsection (4) of section 401.243, Florida Statutes, is amended to read:

401.243 Injury prevention.—The department shall establish an injury-prevention program with responsibility for the statewide coordination and expansion of injury-prevention activities. The duties of the department under the program may include, but are not limited to, data collection, surveillance, education, and the promotion of interventions. In addition, the



department may:

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(4) Adopt rules governing the implementation of grant programs. The rules may include, but need not be limited to, criteria regarding the application process, the selection of grantees, the implementation of injury-prevention activities, data collection, surveillance, education, and the promotion of interventions.

Section 84. Subsection (6) of section 401.245, Florida Statutes, is renumbered as subsection (5), and present subsection (5) of that section is amended to read:

401.245 Emergency Medical Services Advisory Council.-

(5) The department shall adopt rules to implement this section, which rules shall serve as formal operating procedures for the Emergency Medical Services Advisory Council.

Section 85. Section 401.271, Florida Statutes, is amended to read:

401.271 Certification of emergency medical technicians and paramedics who are on active duty with the Armed Forces of the United States; spouses of members of the Armed Forces.-

(1) Any member of the Armed Forces of the United States on active duty who, at the time he or she became a member, was in good standing with the department and was entitled to practice as an emergency medical technician or paramedic in the state remains in good standing without registering, paying dues or fees, or performing any other act, as long as he or she is a member of the Armed Forces of the United States on active duty and for a period of 6 months after his or her discharge from active duty as a member of the Armed Forces of the United States.

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(2) The department may adopt rules exempting the spouse of a member of the Armed Forces of the United States on active duty from certification renewal provisions while the spouse is absent from the state because of the member's active duty with the Armed Forces.

Section 86. Section 402.45, Florida Statutes is repealed. Section 87. Subsections (3) and (4) of section 403.863, Florida Statutes, are amended to read:

403.863 State public water supply laboratory certification program.-

- (3) The Department of Health shall have the responsibility for the operation and implementation of the state laboratory certification program. The Department of Health shall contract for the evaluation and review of laboratory certification applications, and laboratory inspections. - except that, Upon completion of the evaluation and review of the laboratory certification application, the evaluation shall be forwarded, along with recommendations, to the department for review and comment, prior to final approval or disapproval by the Department of Health.
- (4) The following acts constitute grounds for which the disciplinary actions specified in subsection (5) may be taken:
- (a) Making false statements on an application or on any document associated with certification.
- (b) Making consistent errors in analyses or erroneous reporting.
- (c) Permitting personnel who are not qualified, as required by rules of the Department of Health, to perform analyses.
 - (d) Falsifying the results of analyses.

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- (e) Failing to employ approved laboratory methods in performing analyses as outlined in rules of the Department of Health.
- (f) Failing to properly maintain facilities and equipment according to the laboratory's quality assurance plan.
- (q) Failing to report analytical test results or maintain required records of test results as outlined in rules of the Department of Health.
- (h) Failing to participate successfully in a performance evaluation program approved by the Department of Health.
- (i) Violating any provision of this section or of the rules adopted under this section.
 - (j) Falsely advertising services or credentials.
- (k) Failing to pay fees for initial certification or renewal certification or to pay inspection expenses incurred by the Department of Health.
- (1) Failing to report any change of an item included in the initial or renewal certification application.
- (m) Refusing to allow representatives of the department or the Department of Health to inspect a laboratory and its records during normal business hours.

Section 88. Subsection (1) of section 400.914, Florida Statutes, is amended to read:

- 400.914 Rules establishing standards.-
- (1) Pursuant to the intention of the Legislature to provide safe and sanitary facilities and healthful programs, the agency in conjunction with the Division of Children's Medical Services Prevention and Intervention of the Department of Health shall adopt and publish rules to implement the provisions of this part

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and part II of chapter 408, which shall include reasonable and fair standards. Any conflict between these standards and those that may be set forth in local, county, or city ordinances shall be resolved in favor of those having statewide effect. Such standards shall relate to:

- (a) The assurance that PPEC services are family centered and provide individualized medical, developmental, and family training services.
- (b) The maintenance of PPEC centers, not in conflict with the provisions of chapter 553 and based upon the size of the structure and number of children, relating to plumbing, heating, lighting, ventilation, and other building conditions, including adequate space, which will ensure the health, safety, comfort, and protection from fire of the children served.
- (c) The appropriate provisions of the most recent edition of the "Life Safety Code" (NFPA-101) shall be applied.
- (d) The number and qualifications of all personnel who have responsibility for the care of the children served.
- (e) All sanitary conditions within the PPEC center and its surroundings, including water supply, sewage disposal, food handling, and general hygiene, and maintenance thereof, which will ensure the health and comfort of children served.
- (f) Programs and basic services promoting and maintaining the health and development of the children served and meeting the training needs of the children's legal guardians.
- (g) Supportive, contracted, other operational, and transportation services.
- (h) Maintenance of appropriate medical records, data, and information relative to the children and programs. Such records

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shall be maintained in the facility for inspection by the agency.

Section 89. Paragraph (f) of subsection (8) of section 411.203, Florida Statutes, is amended to read:

411.203 Continuum of comprehensive services.—The Department of Education and the Department of Health and Rehabilitative Services shall utilize the continuum of prevention and early assistance services for high-risk pregnant women and for highrisk and handicapped children and their families, as outlined in this section, as a basis for the intraagency and interagency program coordination, monitoring, and analysis required in this chapter. The continuum shall be the guide for the comprehensive statewide approach for services for high-risk pregnant women and for high-risk and handicapped children and their families, and may be expanded or reduced as necessary for the enhancement of those services. Expansion or reduction of the continuum shall be determined by intraagency or interagency findings and agreement, whichever is applicable. Implementation of the continuum shall be based upon applicable eligibility criteria, availability of resources, and interagency prioritization when programs impact both agencies, or upon single agency prioritization when programs impact only one agency. The continuum shall include, but not be limited to:

- (8) SUPPORT SERVICES FOR ALL EXPECTANT PARENTS AND PARENTS OF HIGH-RISK CHILDREN.-
- (f) Parent support groups, such as the community resource mother or father program as established in s. 402.45, or parents as first teachers, to strengthen families and to enable families of high-risk children to better meet their needs.

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Section 90. Paragraph (d) of subsection (11) of section 409.256, Florida Statutes, is amended to read:

409.256 Administrative proceeding to establish paternity or paternity and child support; order to appear for genetic testing.-

- (11) FINAL ORDER ESTABLISHING PATERNITY OR PATERNITY AND CHILD SUPPORT; CONSENT ORDER; NOTICE TO OFFICE OF VITAL STATISTICS.-
- (d) Upon rendering a final order of paternity or a final order of paternity and child support, the department shall notify the Office Division of Vital Statistics of the Department of Health that the paternity of the child has been established.

Section 91. Section 458.346, Florida Statutes, is repealed.

Section 92. Subsection (3) of section 462.19, Florida Statutes, is renumbered as subsection (2), and present subsection (2) of that section is amended to read:

462.19 Renewal of license; inactive status.-

(2) The department shall adopt rules establishing a procedure for the biennial renewal of licenses.

Section 93. Subsection (6) of section 464.019, Florida Statutes, is amended to read:

464.019 Approval of nursing education programs. -

- (6) ACCOUNTABILITY.-
- (a) 1. An approved program must achieve a graduate passage rate that is not lower than 10 percentage points less than the average passage rate for graduates of comparable degree programs who are United States educated first-time test takers on the National Council of State Boards of Nursing Licensing Examination during a calendar year, as calculated by the

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contract testing service of the National Council of State Boards of Nursing. For purposes of this subparagraph, an approved program is comparable to all degree programs of the same program type from among the following program types:

- a. Professional nursing education programs that terminate in a bachelor's degree.
- b. Professional nursing education programs that terminate in an associate degree.
- c. Professional nursing education programs that terminate in a diploma.
 - d. Practical nursing education programs.
- 2. Beginning with graduate passage rates for calendar year 2010, if an approved program's graduate passage rates do not equal or exceed the required passage rates for 2 consecutive calendar years, the board shall place the program on probationary status pursuant to chapter 120 and the program director must appear before the board to present a plan for remediation. The program shall remain on probationary status until it achieves a graduate passage rate that equals or exceeds the required passage rate for any 1 calendar year. The board shall deny a program application for a new prelicensure nursing education program submitted by an educational institution if the institution has an existing program that is already on probationary status.
- 3. Upon the program's achievement of a graduate passage rate that equals or exceeds the required passage rate, the board, at its next regularly scheduled meeting following release of the program's graduate passage rate by the National Council of State Boards of Nursing, shall remove the program's

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probationary status. However, if the program, during the 2 calendar years following its placement on probationary status, does not achieve the required passage rate for any 1 calendar year, the board shall terminate the program pursuant to chapter 120.

- (b) If an approved program fails to submit the annual report required in subsection (4), the board shall notify the program director and president or chief executive officer of the educational institution in writing within 15 days after the due date of the annual report. The program director must appear before the board at the board's next regularly scheduled meeting to explain the reason for the delay. The board shall terminate the program pursuant to chapter 120 if it does not submit the annual report within 6 months after the due date.
- (c) An approved program on probationary status shall disclose its probationary status in writing to the program's students and applicants.

Section 94. Section 464.0197, Florida Statutes, is repealed.

Section 95. Subsection (1) of section 464.203, Florida Statutes, is amended to read:

464.203 Certified nursing assistants; certification requirement.-

- (1) The board shall issue a certificate to practice as a certified nursing assistant to any person who demonstrates a minimum competency to read and write and successfully passes the required background screening pursuant to s. 400.215 and meets one of the following requirements:
 - (a) Has successfully completed an approved training program

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and achieved a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion approved by the board and administered at a site and by personnel approved by the department.

- (b) Has achieved a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion, approved by the board and administered at a site and by personnel approved by the department and:
 - 1. Has a high school diploma, or its equivalent; or
 - 2. Is at least 18 years of age.
- (c) Is currently certified in another state; is listed on that state's certified nursing assistant registry; and has not been found to have committed abuse, neglect, or exploitation in that state.
- (d) Has completed the curriculum developed under the Enterprise Florida Jobs and Education Partnership Grant by the Department of Education and achieved a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion, approved by the board and administered at a site and by personnel approved by the department.

Section 96. Subsection (4) of section 464.208, Florida Statutes, is amended to read:

- 464.208 Background screening information; rulemaking authority.-
 - (4) The board shall adopt rules to administer this part.

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Section 97. Section 466.00775, Florida Statutes, is repealed.

Section 98. Subsection (4) of section 514.011, Florida Statutes, is amended to read:

514.011 Definitions.—As used in this chapter:

(4) "Public bathing place" means a body of water, natural or modified by humans, for swimming, diving, and recreational bathing, together with adjacent shoreline or land area, buildings, equipment, and appurtenances pertaining thereto, used by consent of the owner or owners and held out to the public by any person or public body, irrespective of whether a fee is charged for the use thereof. The bathing water areas of public bathing places include, but are not limited to, lakes, ponds, rivers, streams, artificial impoundments, and waters along the coastal and intracoastal beaches and shores of the state.

Section 99. Section 514.021, Florida Statutes, is amended to read:

514.021 Department authorization.

(1) The department may adopt and enforce rules, which may include definitions of terms, to protect the health, safety, or welfare of persons by setting sanitation and safety standards for using public swimming pools and public bathing places. The department shall review and revise such rules as necessary, but not less than biennially. Sanitation and safety standards shall include, but not be limited to, matters relating to structure; appurtenances; operation; source of water supply; microbiological bacteriological, chemical, and physical quality of water in the pool or bathing area; method of water purification, treatment, and disinfection; lifesaving apparatus;

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and measures to ensure safety of bathers; and measures the personal cleanliness of bathers.

(2) The department may not establish by rule any regulation governing the design, alteration, modification, or repair of public swimming pools and bathing places which has no impact on sanitation and safety the health, safety, and welfare of persons using public swimming pools and bathing places. Further, the department may not adopt by rule any regulation governing the construction, erection, or demolition of public swimming pools and bathing places. It is the intent of the Legislature to preempt those functions to the Florida Building Commission through adoption and maintenance of the Florida Building Code. The department shall provide technical assistance to the commission in updating the construction standards of the Florida Building Code which govern public swimming pools and bathing places. Further, the department is authorized to conduct plan reviews, to issue approvals, and to enforce the specialoccupancy provisions of the Florida Building Code which apply to public swimming pools and bathing places in conducting any inspections authorized by this chapter. This subsection does not abrogate the authority of the department to adopt and enforce appropriate sanitary regulations and requirements as authorized in subsection (1).

Section 100. Section 514.023, Florida Statutes, is amended to read:

- 514.023 Sampling of beach waters and public bathing places; health advisories.-
- (1) As used in this section, the term "beach waters" means the waters along the coastal and intracoastal beaches and shores

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of the state, and includes salt water and brackish water.

- (2) The department may adopt and enforce rules to protect the health, safety, and welfare of persons using the beach waters and public bathing places of the state. The rules must establish health standards and prescribe procedures and timeframes for bacteriological sampling of beach waters and public bathing places.
- (3) The department may issue health advisories if the quality of beach waters or a public bathing place fails to meet standards established by the department. The issuance of health advisories related to the results of bacteriological sampling of beach waters is preempted to the state.
- (4) When the department issues a health advisory against swimming in beach waters or a public bathing place on the basis of finding elevated levels of fecal coliform, Escherichia coli, or enterococci bacteria in a water sample, the department shall concurrently notify the municipality or county in which the affected beach waters are located, whichever has jurisdiction, and the local office of the Department of Environmental Protection, of the advisory. The local office of the Department of Environmental Protection shall promptly investigate wastewater treatment facilities within 1 mile of the affected beach waters or public bathing place to determine if a facility experienced an incident that may have contributed to the contamination and provide the results of the investigation in writing or by electronic means to the municipality or county, as applicable.
- (5) Contingent upon legislative appropriation to the department in the amount of \$600,000 nonrecurring, the

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department will perform a 3-year study to determine the water quality at beaches throughout the state. The study will be performed in all counties that have public-access saltwater and brackish water beaches.

Section 101. Section 514.025, Florida Statutes, is amended to read:

514.025 Assignment of authority to county health departments.-

- (1) The department shall assign to county health departments that are staffed with qualified engineering personnel shall perform the functions of reviewing applications and plans for the construction, development, or modification of public swimming pools or bathing places; of conducting inspections for and issuance of initial operating permits; and of issuing all permits. If the county health department determines that qualified staff are not available is not assigned the functions of application and plan review and the issuance of initial operating permits, the department shall be responsible for such functions. The department shall make the determination concerning the qualifications of county health department personnel to perform these functions and may make and enforce such rules pertaining thereto as it shall deem proper.
- (2) After the initial operating permit is issued, the County health departments are responsible shall assume full responsibility for routine surveillance of water quality in all public swimming pools and bathing places, including responsibility for a minimum of two routine inspections annually, complaint investigations, enforcement procedures, and reissuance of operating permits, and renewal of operating



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(3) The department may assign the responsibilities and functions specified in this section to any multicounty independent special district created by the Legislature to perform multiple functions, to include municipal services and improvements, to the same extent and under the same conditions as provided in subsections (1) and (2), upon request of the special district.

Section 102. Section 514.03, Florida Statutes, is amended to read:

514.03 Construction plans Approval necessary to construct, develop, or modify public swimming pools or public bathing places.-It is unlawful for any person or public body to construct, develop, or modify any public swimming pool or bathing place, other than coastal or intracoastal beaches, without a valid construction plans approval from the department. This section does not preempt the authority of Local governments or local enforcement districts may determine to conduct plan reviews and inspections of public swimming pools and bathing places for compliance with the general construction standards of the Florida Building Code, pursuant to s. 553.80. Local governments or local enforcement districts may conduct plan reviews and inspections of public swimming pools and public bathing places for this purpose.

(1) Any person or public body desiring to construct, develop, or modify any public swimming pool or bathing place shall file an application for a construction plans approval with the department on application forms provided by the department and shall accompany such application with:

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- (a) Engineering drawings, specifications, descriptions, and detailed maps of the structure, its appurtenances, and its intended operation.
- (b) A description of the source or sources of water supply and amount and quality of water available and intended to be used.
- (c) A description of the method and manner of water purification, treatment, disinfection, and heating.
- (d) Other applicable information deemed necessary by the department to fulfill the requirements of this chapter.
- (2) If the proposed construction of, development of, or modification of a public swimming pool or bathing place meets standards of public health and safety as defined in this chapter and rules adopted hereunder, the department shall grant the application for the construction plans approval within 30 days after receipt of a complete submittal. If engineering plans submitted are in substantial compliance with the standards aforementioned, the department may approve the plans with provisions for corrective action to be completed prior to issuance of the operating permit.
- (3) If the proposed construction, development, or modification of a public swimming pool or bathing place fails to meet standards of public health and safety as defined in this chapter and rules adopted hereunder, the department shall deny the application for construction plans approval pursuant to the provisions of chapter 120. Such denial shall be issued in writing within 30 days and shall list the circumstances for denial. Upon correction of such circumstances, an applicant previously denied permission to construct, develop, or modify a

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public swimming pool or bathing place may reapply for construction plans approval.

(4) An approval of construction plans issued by the department under this section becomes void 1 year after the date the approval was issued if the construction is not commenced within 1 year after the date of issuance.

Section 103. Section 514.031, Florida Statutes, is amended to read:

- 514.031 Permit necessary to operate public swimming pool or bathing place. -
- (1) It is unlawful for any person or public body to operate or continue to operate any public swimming pool or bathing place without a valid permit from the department, such permit to be obtained in the following manner:
- (a) Any person or public body desiring to operate any public swimming pool or bathing place shall file an application for a permit with the department, on application forms provided by the department, and shall accompany such application with:
- 1. Descriptions of the structure, its appurtenances, and its operation.
- 1.2. Description of the source or sources of water supply, and the amount and quality of water available and intended to be used.
- 2.3. Method and manner of water purification, treatment, disinfection, and heating.
 - 3.4. Safety equipment and standards to be used.
 - 5. Measures to ensure personal cleanliness of bathers.
- 4.6. Any other pertinent information deemed necessary by the department to fulfill the requirements of this chapter.

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- (b) If the department determines that the public swimming pool or bathing place is or may reasonably be expected to be operated in compliance with this chapter and the rules adopted hereunder, the department shall grant the application for permit.
- (c) If the department determines that the public swimming pool or bathing place does not meet the provisions outlined in this chapter or the rules adopted hereunder, the department shall deny the application for a permit pursuant to the provisions of chapter 120. Such denial shall be in writing and shall list the circumstances for the denial. Upon correction of such circumstances, an applicant previously denied permission to operate a public swimming pool or bathing place may reapply for a permit.
- (2) Operating permits shall not be required for coastal or intracoastal beaches.
- (3) Operating permits may be transferred shall not be transferable from one name or owner to another. When the ownership or name of an existing public swimming pool or bathing place is changed and such establishment is operating at the time of the change with a valid permit from the department, the new owner of the establishment shall apply to the department, upon forms provided by the department, within 30 days after such a change, for a reissuance of the existing permit.
- (4) Each such operating permit shall be renewed annually and the permit must be posted in a conspicuous place.
- (5) An owner or operator of a public swimming pool, including, but not limited to, a spa, wading, or special purpose pool, to which admittance is obtained by membership for a fee

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shall post in a prominent location within the facility the most recent pool inspection report issued by the department pertaining to the health and safety conditions of such facility. The report shall be legible and readily accessible to members or potential members. The department shall adopt rules to enforce this subsection. A portable pool may not be used as a public pool.

Section 104. Section 514.033, Florida Statutes, is amended to read:

514.033 Creation of fee schedules authorized.-

- (1) The department is authorized to establish a schedule of fees to be charged by the department or by any authorized county health department as detailed in s. 514.025 for the review of applications and plans to construct, develop, or modify a public swimming pool or bathing place, for the issuance of permits to operate such establishments, and for the review of variance applications for public swimming pools and bathing places. Fees assessed under this chapter shall be in an amount sufficient to meet the cost of carrying out the provisions of this chapter.
- (2) The fee schedule shall be: for original construction or development plan approval, not less than \$275 and not more than \$500; for modification of original construction, not less than \$100 and not more than \$150; for an initial operating permit, not less than \$125 and not more than \$250; and for review of variance applications, not less than \$240 and not more than \$400. The department shall assess the minimum fees provided in this subsection until a fee schedule is promulgated by rule of the department.
 - (3) Fees shall be Any person or public body operating a

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public swimming pool or bathing place shall pay to the department an annual operating permit fee based on pool or bathing place aggregate gallonage, which shall be: up to and including 25,000 gallons, not less than \$75 and not more than \$125; and in excess of 25,000 gallons, not less than \$160 and not more than \$265, except for a pool inspected pursuant to s. 514.0115(2)(b) for which the annual fee shall be \$50.

- (4) Fees collected by the department in accordance with this chapter shall be deposited into the Grants and Donations Trust Fund or Public Swimming Pool and Bathing Place Trust Fund for the payment of costs incurred in the administration of this chapter. Fees collected by county health departments performing functions pursuant to s. 514.025 shall be deposited into the County Health Department Trust Fund. Any fee collected under this chapter is nonrefundable.
- (5) The department may not charge any fees for services provided under this chapter other than those fees authorized in this section. However, the department shall prorate the initial annual fee for an operating permit on a half-year basis.

Section 105. Subsections (4) and (5) of section 514.05, Florida Statutes, are amended to read:

514.05 Denial, suspension, or revocation of permit; administrative fines.-

- (4) All amounts collected pursuant to this section shall be deposited into the Grants and Donations Trust Fund Public Swimming Pool and Bathing Place Trust Fund or into the County Health Department Trust Fund, whichever is applicable.
- (5) Under conditions specified by rule, the department may close a public pool that is not in compliance with this chapter



or the rules adopted under this chapter.

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Section 106. Section 514.06, Florida Statutes, is amended to read:

514.06 Injunction to restrain violations.—Any public swimming pool or public bathing place presenting a significant risk to public health by failing to meet the water quality and safety standards established pursuant to constructed, developed, operated, or maintained contrary to the provisions of this chapter is declared to be a public nuisance, dangerous to health or safety. Such nuisances may be abated or enjoined in an action brought by the county health department or the department.

Section 107. Subsections (1) and (2) of section 633.115, Florida Statutes, are amended to read:

- 633.115 Fire and Emergency Incident Information Reporting Program; duties; fire reports.-
- (1) (a) The Fire and Emergency Incident Information Reporting Program is created within the Division of State Fire Marshal. The program shall:
- 1. Establish and maintain an electronic communication system capable of transmitting fire and emergency incident information to and between fire protection agencies.
- 2. Initiate a Fire and Emergency Incident Information Reporting System that shall be responsible for:
- a. Receiving fire and emergency incident information from fire protection agencies.
- b. Preparing and disseminating annual reports to the Governor, the President of the Senate, the Speaker of the House of Representatives, fire protection agencies, and, upon request, the public. Each report shall include, but not be limited to,

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the information listed in the National Fire Incident Reporting System.

- c. Upon request, providing other states and federal agencies with fire and emergency incident data of this state.
- 3. Adopt rules to effectively and efficiently implement, administer, manage, maintain, and use the Fire and Emergency Incident Information Reporting Program. The rules shall be considered minimum requirements and shall not preclude a fire protection agency from implementing its own requirements which shall not conflict with the rules of the Division of State Fire Marshal.
- 4. By rule, establish procedures and a format for each fire protection agency to voluntarily monitor its records and submit reports to the program.
- 5. Establish an electronic information database which is accessible and searchable by fire protection agencies.
- (b) The Division of State Fire Marshal shall consult with the Division of Forestry of the Department of Agriculture and Consumer Services and the Division Bureau of Emergency Preparedness and Community Support Medical Services of the Department of Health to coordinate data, ensure accuracy of the data, and limit duplication of efforts in data collection, analysis, and reporting.
- (2) The Fire and Emergency Incident Information System Technical Advisory Panel is created within the Division of State Fire Marshal. The panel shall advise, review, and recommend to the State Fire Marshal with respect to the requirements of this section. The membership of the panel shall consist of the following 15 members:

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- (a) The current 13 members of the Firefighters Employment, Standards, and Training Council as established in s. 633.31.
 - (b) One member from the Division of Forestry of the Department of Agriculture and Consumer Services, appointed by the division director.
 - (c) One member from the Division Bureau of Emergency Preparedness and Community Support Medical Services of the Department of Health, appointed by the division director bureau chief.

Section 108. Subsections (4), (5), (6), (8), (9), (10), (11), and (12) of section 1009.66, Florida Statutes, are amended to read:

1009.66 Nursing Student Loan Forgiveness Program.-

- (4) From the funds available, the Department of Education Health may make loan principal repayments of up to \$4,000 a year for up to 4 years on behalf of selected graduates of an accredited or approved nursing program. All repayments shall be contingent upon continued proof of employment in the designated facilities in this state and shall be made directly to the holder of the loan. The state shall bear no responsibility for the collection of any interest charges or other remaining balance. In the event that the designated facilities are changed, a nurse shall continue to be eligible for loan forgiveness as long as he or she continues to work in the facility for which the original loan repayment was made and otherwise meets all conditions of eligibility.
- (5) There is created the Nursing Student Loan Forgiveness Trust Fund to be administered by the Department of Education Health pursuant to this section and s. 1009.67 and department

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rules. The Chief Financial Officer shall authorize expenditures from the trust fund upon receipt of vouchers approved by the Department of Education Health. All moneys collected from the private health care industry and other private sources for the purposes of this section shall be deposited into the Nursing Student Loan Forgiveness Trust Fund. Any balance in the trust fund at the end of any fiscal year shall remain therein and shall be available for carrying out the purposes of this section and s. 1009.67.

- (6) In addition to licensing fees imposed under part I of chapter 464, there is hereby levied and imposed an additional fee of \$5, which fee shall be paid upon licensure or renewal of nursing licensure. Revenues collected from the fee imposed in this subsection shall be deposited in the Nursing Student Loan Forgiveness Trust Fund of the Department of Education Health and will be used solely for the purpose of carrying out the provisions of this section and s. 1009.67. Up to 50 percent of the revenues appropriated to implement this subsection may be used for the nursing scholarship program established pursuant to s. 1009.67.
- (8) The Department of Health may solicit technical assistance relating to the conduct of this program from the Department of Education.
- (8) (9) The Department of Education Health is authorized to recover from the Nursing Student Loan Forgiveness Trust Fund its costs for administering the Nursing Student Loan Forgiveness Program.
- (9) (10) The Department of Education Health may adopt rules necessary to administer this program.

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(10) This section shall be implemented only as specifically funded.

(11) (12) Students receiving a nursing scholarship pursuant to s. 1009.67 are not eligible to participate in the Nursing Student Loan Forgiveness Program.

Section 109. Section 1009.67, Florida Statutes, is amended to read:

1009.67 Nursing scholarship program.-

- (1) There is established within the Department of Education Health a scholarship program for the purpose of attracting capable and promising students to the nursing profession.
- (2) A scholarship applicant shall be enrolled in an approved nursing program leading to the award of an associate degree, a baccalaureate degree, or a graduate degree in nursing.
- (3) A scholarship may be awarded for no more than 2 years, in an amount not to exceed \$8,000 per year. However, registered nurses pursuing a graduate degree for a faculty position or to practice as an advanced registered nurse practitioner may receive up to \$12,000 per year. These amounts shall be adjusted by the amount of increase or decrease in the consumer price index for urban consumers published by the United States Department of Commerce.
- (4) Credit for repayment of a scholarship shall be as follows:
- (a) For each full year of scholarship assistance, the recipient agrees to work for 12 months in a faculty position in a college of nursing or Florida College System institution nursing program in this state or at a health care facility in a medically underserved area as designated approved by the

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Department of Health. Scholarship recipients who attend school on a part-time basis shall have their employment service obligation prorated in proportion to the amount of scholarship payments received.

- (b) Eligible health care facilities include nursing homes and hospitals in this state, state-operated medical or health care facilities, public schools, county health departments, federally sponsored community health centers, colleges of nursing in universities in this state, and Florida College System institution nursing programs in this state, family practice teaching hospitals as defined in s. 395.805, or specialty children's hospitals as described in s. 409.9119. The recipient shall be encouraged to complete the service obligation at a single employment site. If continuous employment at the same site is not feasible, the recipient may apply to the department for a transfer to another approved health care facility.
- (c) Any recipient who does not complete an appropriate program of studies, who does not become licensed, who does not accept employment as a nurse at an approved health care facility, or who does not complete 12 months of approved employment for each year of scholarship assistance received shall repay to the Department of Education Health, on a schedule to be determined by the department, the entire amount of the scholarship plus 18 percent interest accruing from the date of the scholarship payment. Moneys repaid shall be deposited into the Nursing Student Loan Forgiveness Trust Fund established in s. 1009.66. However, the department may provide additional time for repayment if the department finds that circumstances beyond

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the control of the recipient caused or contributed to the default.

- (5) Scholarship payments shall be transmitted to the recipient upon receipt of documentation that the recipient is enrolled in an approved nursing program. The Department of Education Health shall develop a formula to prorate payments to scholarship recipients so as not to exceed the maximum amount per academic year.
- (6) The Department of Education Health shall adopt rules, including rules to address extraordinary circumstances that may cause a recipient to default on either the school enrollment or employment contractual agreement, to implement this section.
- (7) The Department of Education Health may recover from the Nursing Student Loan Forgiveness Trust Fund its costs for administering the nursing scholarship program.

Section 110. Department of Health; type two transfer.-

- (1) All powers, duties, functions, records, offices, personnel, associated administrative support positions, property, pending issues, existing contracts, administrative authority, administrative rules, and unexpended balances of appropriations, allocations, and other funds relating to the Nursing Student Loan Forgiveness Program and the nursing scholarship program in the Department of Health are transferred by a type two transfer, as defined in s. 20.06(2), Florida Statutes, to the Department of Education.
- (2) The Nursing Student Loan Forgiveness Trust Fund is transferred from the Department of Health to the Department of Education.
 - (3) Any binding contract or interagency agreement related

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to the Nursing Student Loan Forgiveness Program existing before July 1, 2012, between the Department of Health, or an entity or agent of the agency, and any other agency, entity, or person shall continue as a binding contract or agreement for the remainder of the term of such contract or agreement on the successor department, agency, or entity responsible for the program, activity, or functions relative to the contract or agreement.

- (4) Notwithstanding s. 216.292 and pursuant to s. 216.351, Florida Statutes, upon approval by the Legislative Budget Commission, the Executive Office of the Governor may transfer funds and positions between agencies to implement this act.
- (5) The transfer of any program, activity, duty, or function under this act includes the transfer of any records and unexpended balances of appropriations, allocations, or other funds related to such program, activity, duty, or function. Unless otherwise provided, the successor organization to any program, activity, duty, or function transferred under this act shall become the custodian of any property of the organization that was responsible for the program, activity, duty, or function immediately before the transfer.

Section 111. The Division of Medical Quality Assurance shall develop a plan to improve the efficiency of its functions. Specifically, the plan shall delineate methods to: reduce the average length of time for a qualified applicant to receive initial and renewal licensure, certification, or registration, by one-third; improve the agenda process for board meetings to increase transparency, timeliness, and usefulness for board decisionmaking; and improve the cost-effectiveness and

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efficiency of the joint functions of the division and the regulatory boards. In developing the plan, the division shall identify and analyze best practices found within the division and other state agencies with similar functions, options for information technology improvements, options for contracting with outside entities, and any other option the division deems useful. The division shall consult with and solicit recommendations from the regulatory boards in developing the plan. The division shall submit the plan to the Governor, the Speaker of the House of Representatives, and the President of the Senate by November 1, 2012. All executive branch agencies are instructed, and all other state agencies are requested, to assist the division in accomplishing its purposes under this section.

Section 112. Paragraph (e) of subsection (2) of section 154.503, Florida Statutes, is amended to read:

154.503 Primary Care for Children and Families Challenge Grant Program; creation; administration. -

- (2) The department shall:
- (e) Coordinate with the primary care program developed pursuant to s. 154.011, the Florida Healthy Kids Corporation program created in s. 624.91, the school health services program created in ss. 381.0056 and 381.0057, the Healthy Communities, Healthy People Program created in s. 381.734, and the volunteer health care provider program developed pursuant to s. 766.1115.

Section 113. Subsection (1), paragraph (c) of subsection (3), and subsection (9) of section 381.0041, Florida Statutes, are amended to read:

381.0041 Donation and transfer of human tissue; testing



requirements.-

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- (1) Every donation of blood, plasma, organs, skin, or other human tissue for transfusion or transplantation to another shall be tested prior to transfusion or other use for human immunodeficiency virus infection and other communicable diseases specified by rule of the Department of Health. Tests for the human immunodeficiency virus infection shall be performed only after obtaining written, informed consent from the potential donor or the donor's legal representative. Such consent may be given by a minor pursuant to s. 743.06. Obtaining consent shall include a fair explanation of the procedures to be followed and the meaning and use of the test results. Such explanation shall include a description of the confidential nature of the test as described in s. 381.004(2) $\frac{381.004(3)}{}$. If consent for testing is not given, then the person shall not be accepted as a donor except as otherwise provided in subsection (3).
- (3) No person shall collect any blood, organ, skin, or other human tissue from one human being and hold it for, or actually perform, any implantation, transplantation, transfusion, grafting, or any other method of transfer to another human being without first testing such tissue for the human immunodeficiency virus and other communicable diseases specified by rule of the Department of Health, or without performing another process approved by rule of the Department of Health capable of killing the causative agent of those diseases specified by rule. Such testing shall not be required:
- (c) When there is insufficient time to obtain the results of a confirmatory test for any tissue or organ which is to be transplanted, notwithstanding the provisions of s. 381.004(2)(d)

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381.004(3)(d). In such circumstances, the results of preliminary screening tests may be released to the potential recipient's treating physician for use in determining organ or tissue suitability.

(9) All blood banks shall be governed by the confidentiality provisions of s. 381.004(2) $\frac{381.004(3)}{381.004(3)}$.

Section 114. Paragraph (b) of subsection (3) of section 384.25, Florida Statutes, is amended to read:

384.25 Reporting required.-

- (3) To ensure the confidentiality of persons infected with the human immunodeficiency virus (HIV), reporting of HIV infection and AIDS must be conducted using a system developed by the Centers for Disease Control and Prevention of the United States Public Health Service or an equivalent system.
- (b) The reporting may not affect or relate to anonymous HIV testing programs conducted pursuant to s. 381.004(3) 381.004(4).

Section 115. Subsection (5) of section 392.56, Florida Statutes, is amended to read:

- 392.56 Hospitalization, placement, and residential isolation.-
- (5) If the department petitions the circuit court to order that a person who has active tuberculosis be hospitalized in a facility operated under s. $392.62 \cdot (2)$, the department shall notify the facility of the potential court order.

Section 116. Subsection (2) of section 456.032, Florida Statutes, is amended to read:

456.032 Hepatitis B or HIV carriers.-

(2) Any person licensed by the department and any other person employed by a health care facility who contracts a blood-

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borne infection shall have a rebuttable presumption that the illness was contracted in the course and scope of his or her employment, provided that the person, as soon as practicable, reports to the person's supervisor or the facility's risk manager any significant exposure, as that term is defined in s. $381.004(1)(c) \frac{381.004(2)(c)}{c}$, to blood or body fluids. The employer may test the blood or body fluid to determine if it is infected with the same disease contracted by the employee. The employer may rebut the presumption by the preponderance of the evidence. Except as expressly provided in this subsection, there shall be no presumption that a blood-borne infection is a jobrelated injury or illness.

Section 117. Subsection (15) of section 499.003, Florida Statutes, is amended to read:

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

(15) "Department" means the Department of Business and Professional Regulation Department of Health.

Section 118. Subsection (2) of section 499.601, Florida Statutes, is amended to read:

499.601 Legislative intent; construction.-

(2) The provisions of this part are cumulative and shall not be construed as repealing or affecting any powers, duties, or authority of the department of Health under any other law of this state; except that, with respect to the regulation of ether as herein provided, in instances in which the provisions of this part may conflict with any other such law, the provisions of this part shall control.

Section 119. Subsection (2) of section 499.61, Florida

Statutes, is amended to read:



1726 499.61 Definitions.—As used in this part: 1727 (2) "Department" means the Department of Business and Professional Regulation Department of Health. 1728 1729 Section 120. Subsection (2) of section 513.10, Florida 1730 Statutes, is amended to read: 1731 513.10 Operating without permit; enforcement of chapter; 1732 penalties.-1733

(2) This chapter or rules adopted under this chapter may be enforced in the manner provided in s. 381.0012 and as provided in this chapter. Violations of this chapter and the rules adopted under this chapter are subject to the penalties provided in this chapter and in s. ss. 381.0025 and 381.0061.

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======== T I T L E A M E N D M E N T ========= And the title is amended as follows:

Delete lines 160 - 427 1741

1742 and insert:

> management of public health; amending s. 381.0303, F.S.; eliminating the requirement that the Special Needs Shelter Interagency Committee submit recommendations to the Legislature; repealing s. 381.04015, F.S.; eliminating the Women's Health Strategy Office and Officer of Women's Health Strategy; amending s. 381.0403, F.S., relating to the "Community Hospital Education Act"; deleting legislative findings and intent; revising the mission of the program; requiring minimum funding for graduate education in family practice; deleting reference to an

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intent to establish a statewide graduate medical education program; amending s. 381.0405, F.S.; deleting an appropriation to the Office of Rural Health; amending s. 381.0406, F.S.; deleting unnecessary introductory language in provisions relating to rural health networks; repealing s. 381.0407, F.S., to eliminate the mandatory payment of claims from public health care providers and county health departments by managed care plans; repealing s. 381.045, F.S.; eliminating department authority to provide services to certain health care providers infected with Hepatitis B or HIV; amending s. 381.06015, F.S.; deleting an obsolete provision that requires the department, the Agency for Health Care Administration, and private consortium members seeking private or federal funds to initiate certain program actions relating to the Public Cord Blood Tissue Bank; repealing s. 381.0605, F.S., relating to designating the Agency for Health Care Administration as the state agency to administer the Federal Hospital and Medical Facilities Amendments of 1964; eliminating authority of the Governor to provide for administration of the amendments; repealing ss. 381.1001-381.103, F.S., the Florida Community Health Protection Act; repealing s. 381.4018(2), F.S., relating to legislative findings and intent with respect to physician workforce assessment and development; repealing s. 381.60225, F.S., to eliminate background screening requirements for health care professionals and owners, operators,

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and employees of certain health care providers, services, and programs; repealing ss. 381.732-381.734, F.S., the "Healthy People, Healthy Communities Act"; amending s. 381.7352, F.S.; deleting legislative findings relating to the "Reducing Racial and Ethnic Health Disparities: Closing the Gap Act"; amending s. 381.7353, F.S.; removing the authority of the State Surgeon General to appoint an ad hoc committee to study certain aspects of racial and ethnic health outcome disparities and make recommendations; amending s. 381.7356, F.S.; deleting a provision requiring dissemination of Closing the Gap grant awards to begin on a date certain; amending s. 381.765, F.S.; repealing unused rulemaking authority relating to records and recordkeeping for department-owned property; repealing s. 381.77, F.S., to eliminate the annual survey of nursing home residents age 55 and under; repealing s. 381.795, F.S., to eliminate the requirement that the department establish a program of long-term community-based supports and services for individuals with traumatic brain or spinal cord injuries; amending s. 381.853, F.S.; deleting legislative findings relating to brain tumor research; repealing s. 381.855, F.S., which established the Florida Center for Universal Research to Eradicate Disease; repealing s. 381.87, F.S., to eliminate the osteoporosis prevention and education program; repealing s. 381.90, F.S., to eliminate the Health Information Systems Council; amending s. 381.91, F.S.,

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relating to the Jesse Trice Cancer Program; revising legislative intent; amending 381.922, F.S.; conforming a reference; amending s. 383.011, F.S.; requiring the Department of Health to establish an interagency agreement with the Department of Children and Family Services for management of the Special Supplemental Nutrition program for Women, Infants, and Children; specifying responsibilities of each department; creating s. 383.141, F.S.; providing legislative findings; providing definitions; requiring that health care providers provide pregnant women with current information about the nature of the developmental disabilities tested for in certain prenatal tests, the accuracy of such tests, and resources for obtaining support services for Down syndrome and other prenatally diagnosed developmental disabilities; providing duties for the Department of Health concerning establishment of an information clearinghouse; creating an advocacy council within the Department of Health to provide technical assistance in forming the clearinghouse; providing membership for the council; providing duties of the council; providing terms for members of the council; providing for election of a chairperson and vice chairperson; providing meeting times for the council; requiring the members to serve without compensation or reimbursement for travel expenses; authorizing meetings by teleconference or other electronic means; requiring the Department of Health to provide administrative

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support; repealing s. 385.210, F.S., the Arthritis Prevention and Education Act by a specific date; amending s. 391.016, F.S.; clarifying the purposes and functions of the Children's Medical Services program; requiring the coordination and maintenance of a medical home for participating children; amending s. 391.021, F.S.; revising definitions; amending s. 391.025, F.S.; revising the components of the Children's Medical Services program; amending s. 391.026, F.S.; revising the powers and duties of the department in administering the Children's Medical Services network; amending s. 391.028, F.S.; eliminating the central office and area offices of the Children's Medical Services program; authorizing the Director of Children's Medical Services to appoint necessary staff and contract with providers to establish a system to provide certain program activities on a statewide basis; amending s. 391.029, F.S.; specifying eligibility for services provided under the Children's Medical Services program; clarifying who may receive services under the program; deleting the requirement that the department determine financial and medical eligibility for program; deleting the requirement that the department determine the financial ability of parents to pay for services; eliminating discretion of the department to pay reasonable travel expenses; amending s. 391.0315, F.S.; deleting a prohibition against a child eligible under Title XIX or XXI of the Social Security Act from

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receiving services under the program until the child is enrolled in Medicaid or a Title XXI program; amending s. 392.51, F.S., relating to tuberculosis control; removing legislative findings and intent; amending s. 392.61, F.S.; eliminating the requirement that the department develop a methodology for distributing funds appropriated for community tuberculosis control programs; amending s. 392.62, F.S.; requiring a contractor to use licensed community hospitals and other facilities for the care and treatment of persons who have active tuberculosis or a history of noncompliance with prescribed drug regimens and require inpatient or other residential services; removing authority of the department to operate a licensed hospital to treat tuberculosis patients; requiring the tuberculosis control program to fund participating facilities; requiring facilities to meet specific conditions; requiring the department to develop a transition plan for the closure of A.G. Holley State Hospital; specifying content of transition plan; requiring submission of the plan to the Governor and Legislature; requiring full implementation of the transition plan by a certain date; amending s. 401.243, F.S.; repealing unused rulemaking authority governing the implementation of injury-prevention grant programs; amending s. 401.245, F.S.; repealing unused rulemaking authority relating to operating procedures for the Emergency Medical Services Advisory Council; amending s. 401.271, F.S.;

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repealing unused rulemaking authority relating to an exemption for the spouse of a member of the Armed Forces of the United States on active duty from certification renewal provisions while the spouse is absent from the state because of the member's active duty with the Armed Forces; repealing s. 402.45, F.S.; repealing unused rulemaking authority relating to the community resource mother or father program; amending s. 403.863, F.S.; directing the department to contract to perform state public water supply laboratory certification application review and evaluation and laboratory inspections; adding certain actions to the list of acts constituting grounds for which disciplinary actions may be taken under the section; amending ss. 400.914 and 409.256, F.S.; conforming references; repealing s. 458.346, F.S., which created the Public Sector Physician Advisory Committee and established its responsibilities; amending s. 462.19, F.S., relating to the renewal of licenses for practitioners of naturopathy; repealing unused rulemaking authority; amending s. 464.019, F.S., requiring the Board of Nursing to deny a program application for new prelicensure nursing education program while the existing program is on probationary status; repealing s. 464.0197, F.S., relating to state budget support for the Florida Center for Nursing; amending s. 464.203, F.S.; revising the certification requirements for certified nursing assistants; amending s. 464.208, F.S.; repealing unused rulemaking

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authority relating to background screening information of certified nursing assistants; repealing s. 466.00775, F.S., relating to unused rulemaking authority relating to dental health access and dental laboratory registration provisions; amending ss. 212.08, 499.003, 499.601, and 499.61, F.S.; updating departmental designation; amending s. 514.011, F.S.; revising the definition of "public bathing place"; amending s. 514.021, F.S.; restricting rulemaking authority of the department; limiting scope of standards for public pools and public bathing places; prohibiting the department from adopting by rule any regulation regarding the design, alteration, or repair of a public pool or public bathing; eliminating authority of the department to review plans, issue approvals, and enforce occupancy provisions of the Florida Building Code; amending s. 514.023, F.S.; adding public bathing places to the provisions allowing sampling of beach waters to determine sanitation and allowing health advisories to be issued for elevated levels of bacteria in such waters; deleting an obsolete provision; amending s. 514.025, F.S.; requiring the department to review applications and plans for the construction or placement of public pools or bathing places; providing for the department to review applications and plans if no qualified staff are employed at the county health department; establishing that the department is responsible to monitor water quality in public pools and bathing

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places; amending s. 514.03, F.S.; permitting local governments or local enforcement districts to determine compliance with general construction provisions of the Florida Building Code; permitting local governments or local enforcement districts to conduct plan reviews and inspections of public pools and bathing places to determine compliance; eliminating an application process for review of building plans for a public pool or bathing place by the department; amending s. 514.031, F.S.; requiring a valid permit from the department to operate a public pool; revising the list of documents that must accompany an application for a permit to operate a public pool; providing the department with authority to review, approve, and deny an application for a permit to operate a public pool; amending s. 514.033, F.S.; deleting authority of the department to establish a fee schedule; requiring fees collected by the department or county health department to be deposited into the Grants and Donations Trust Fund or the County Health Department Trust Fund; amending s. 514.05, F.S.; requiring all amounts collected to be deposited in the Grants and Donations Trust Fund or the County Health Department Trust Fund; granting the county health department the authority to close a public pool that is not in compliance with ch. 514, F.S., or applicable rules; amending s. 514.06, F.S.; deeming a public pool or bathing place to present a significant risk to public health by failing to meet

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water quality and safety to be a public nuisance; allowing for a public nuisance to be abated or enjoined; amending s. 633.115, F.S.; making conforming changes; amending s. 1009.66, F.S.; reassigning responsibility for the Nursing Student Loan Forgiveness Program from the Department of Health to the Department of Education; amending s. 1009.67, F.S.; reassigning responsibility for the nursing scholarship program from the Department of Health to the Department of Education; providing type two transfers of the programs; providing for transfer of a trust fund; providing applicability to contracts; authorizing transfer of funds and positions between departments; requiring the Division of Medical Quality and Assurance to create a plan to improve efficiency of the function of the division; directing the division to take certain actions in creating the plan; directing the division to address particular topics in the plan; requiring all executive branch agencies to assist the department in creating the plan; requesting all other state agencies to assist the department in creating the plan; amending ss. 154.503, 381.0041, 384.25, 392.56, 395.1027, 411.203, 456.032, 513.10, and 775.0877, F.S.; conforming cross-