

1                                   A bill to be entitled  
 2           An act relating to volunteer health services; amending  
 3           ss. 458.317 and 459.0075, F.S.; revising criteria  
 4           required for limited licensure for physicians;  
 5           amending s. 766.1115, F.S.; revising requirements for  
 6           patient referral under the "Access to Health Care  
 7           Act"; eliminating a requirement that the governmental  
 8           contractor approve all followup or hospital care;  
 9           requiring the Department of Health to post specified  
 10          information online concerning volunteer providers;  
 11          permitting volunteer providers to earn continuing  
 12          education credit for participation in the program up  
 13          to a specified amount; providing that rules adopted by  
 14          the department give providers the greatest flexibility  
 15          possible in order to serve eligible patients;  
 16          providing an effective date.

17  
 18   Be It Enacted by the Legislature of the State of Florida:

19  
 20           Section 1. Paragraphs (c) through (e) of subsection (1) of  
 21           section 458.317, Florida Statutes, are redesignated as  
 22           paragraphs (b) through (d), respectively, and present paragraphs  
 23           (a) and (b) of that subsection are amended, to read:

24           458.317 Limited licenses.—

25           (1) (a) Any person desiring to obtain a limited license  
 26           shall:

27           1. ~~Submit to the board, with an application and fee not to~~  
 28           exceed \$300 and demonstrate, ~~an affidavit stating~~ that he or she

29 | has been licensed to practice medicine in any jurisdiction in  
30 | the United States for at least 10 years and intends to practice  
31 | only pursuant to the restrictions of a limited license granted  
32 | pursuant to this section. However, a physician who is not fully  
33 | retired in all jurisdictions may use a limited license only for  
34 | noncompensated practice. If the person applying for a limited  
35 | license submits a ~~notarized~~ statement from the employing agency  
36 | or institution stating that he or she will not receive  
37 | compensation for any service involving the practice of medicine,  
38 | the application fee and all licensure fees shall be waived.  
39 | However, any person who receives a waiver of fees for a limited  
40 | license shall pay such fees if the person receives compensation  
41 | for the practice of medicine.

42 | ~~2. Meet the requirements in s. 458.311(1)(b)-(g) and (5).~~  
43 | ~~If the applicant graduated from medical school prior to 1946,~~  
44 | ~~the board or its appropriate committee may accept military~~  
45 | ~~medical training or medical experience as a substitute for the~~  
46 | ~~approved 1-year residency requirement in s. 458.311(1)(f).~~

47 | ~~(b) After approval of an application under this section,~~  
48 | ~~no license shall be issued until the applicant provides to the~~  
49 | ~~board an affidavit that there have been no substantial changes~~  
50 | ~~in status since initial application.~~

51 |  
52 | Nothing herein limits in any way any policy by the board,  
53 | otherwise authorized by law, to grant licenses to physicians  
54 | duly licensed in other states under conditions less restrictive  
55 | than the requirements of this section. Notwithstanding the other  
56 | provisions of this section, the board may refuse to authorize a

57 | physician otherwise qualified to practice in the employ of any  
58 | agency or institution otherwise qualified if the agency or  
59 | institution has caused or permitted violations of the provisions  
60 | of this chapter which it knew or should have known were  
61 | occurring.

62 |       Section 2. Subsection (7) of section 459.0075, Florida  
63 | Statutes, is renumbered as subsection (6), and present  
64 | subsections (1) and (6) of that section are amended, to read:

65 |       459.0075 Limited licenses.—

66 |       (1) Any person desiring to obtain a limited license shall:

67 |       (a) Submit to the board a licensure application and fee  
68 | required by this chapter. However, an osteopathic physician who  
69 | is not fully retired in all jurisdictions may use a limited  
70 | license only for noncompensated practice. If the person applying  
71 | for a limited license submits a ~~notarized~~ statement from the  
72 | employing agency or institution stating that she or he will not  
73 | receive monetary compensation for any service involving the  
74 | practice of osteopathic medicine, the application fee and all  
75 | licensure fees shall be waived. However, any person who receives  
76 | a waiver of fees for a limited license shall pay such fees if  
77 | the person receives compensation for the practice of osteopathic  
78 | medicine.

79 |       (b) Submit proof ~~an affidavit~~ that such osteopathic  
80 | physician has been licensed to practice osteopathic medicine in  
81 | any jurisdiction in the United States in good standing and  
82 | pursuant to law for at least 10 years.

83 |       (c) Complete an amount of continuing education established  
84 | by the board.

85 ~~(d) Within 60 days after receipt of an application for a~~  
 86 ~~limited license, the board shall review the application and~~  
 87 ~~issue the limited license or notify the applicant of denial.~~

88 ~~(6) Any person desiring a limited license shall meet all~~  
 89 ~~the requirements of s. 459.0055, except s. 459.0055(1)(d).~~

90 Section 3. Subsections (10) and (11) of section 766.1115,  
 91 Florida Statutes, are renumbered as sections (11) and (12),  
 92 respectively, a new subsection (10) is added to that section,  
 93 and paragraphs (d), (f), and (g) of subsection (4) and present  
 94 subsections (8) and (10) of that section are amended, to read:

95 766.1115 Health care providers; creation of agency  
 96 relationship with governmental contractors.—

97 (4) CONTRACT REQUIREMENTS.—A health care provider that  
 98 executes a contract with a governmental contractor to deliver  
 99 health care services on or after April 17, 1992, as an agent of  
 100 the governmental contractor is an agent for purposes of s.  
 101 768.28(9), while acting within the scope of duties under the  
 102 contract, if the contract complies with the requirements of this  
 103 section and regardless of whether the individual treated is  
 104 later found to be ineligible. A health care provider under  
 105 contract with the state may not be named as a defendant in any  
 106 action arising out of medical care or treatment provided on or  
 107 after April 17, 1992, under contracts entered into under this  
 108 section. The contract must provide that:

109 (d) Patient selection and initial referral must be made  
 110 ~~solely~~ solely by the governmental contractor or the provider, ~~and the~~  
 111 ~~provider must accept all referred patients. However, the number~~  
 112 ~~of patients that must be accepted may be limited by the~~

113 ~~contract, and~~ Patients may not be transferred to the provider  
114 based on a violation of the antidumping provisions of the  
115 Omnibus Budget Reconciliation Act of 1989, the Omnibus Budget  
116 Reconciliation Act of 1990, or chapter 395.

117 ~~(f) Patient care, including any followup or hospital care,~~  
118 ~~is subject to approval by the governmental contractor.~~

119 (f)(g) The provider is subject to supervision and regular  
120 inspection by the governmental contractor.

121

122 A governmental contractor that is also a health care provider is  
123 not required to enter into a contract under this section with  
124 respect to the health care services delivered by its employees.

125 (8) REPORTING REPORT TO THE LEGISLATURE.—

126 (a) Annually, the department shall report to the President  
127 of the Senate, the Speaker of the House of Representatives, and  
128 the minority leaders and relevant substantive committee  
129 chairpersons of both houses, summarizing the efficacy of access  
130 and treatment outcomes with respect to providing health care  
131 services for low-income persons pursuant to this section.

132 (b) The department shall provide an online listing of all  
133 providers participating in this program and the number of  
134 volunteer service hours and patient visits each provided. A  
135 provider may request in writing to the department to be excluded  
136 from the online listing.

137 (10) CONTINUING EDUCATION CREDIT.—Notwithstanding the  
138 maximum allowable credit of 25 percent of continuing education  
139 hours pursuant to s. 456.013(9), a provider may fulfill 1 hour  
140 of continuing education credit by performing 1 hour of volunteer

141 services to the indigent as provided in this section, up to a  
142 maximum of 8 continuing education hours per licensure renewal  
143 period.

144 ~~(11)(10)~~ RULES.—The department shall adopt rules to  
145 administer this section in a manner consistent with its purpose  
146 to provide and facilitate access to appropriate, safe, and cost-  
147 effective health care services and to maintain health care  
148 quality. ~~The rules may include services to be provided and~~  
149 ~~authorized procedures.~~ Notwithstanding the requirements of  
150 paragraph (4) (d), the department shall adopt rules that specify  
151 required methods for determination and approval of patient  
152 eligibility and referral by government contractors and  
153 providers. The rules adopted by the department under this  
154 subsection shall give providers the greatest flexibility  
155 possible in order to serve eligible patients. The department  
156 shall retain review and oversight authority of the patient  
157 eligibility and referral determination ~~and the contractual~~  
158 ~~conditions under which a health care provider may perform the~~  
159 ~~patient eligibility and referral process on behalf of the~~  
160 ~~department. These rules shall include, but not be limited to,~~  
161 ~~the following requirements:~~

162 ~~(a) The provider must accept all patients referred by the~~  
163 ~~department. However, the number of patients that must be~~  
164 ~~accepted may be limited by the contract.~~

165 ~~(b) The provider shall comply with departmental rules~~  
166 ~~regarding the determination and approval of patient eligibility~~  
167 ~~and referral.~~

168 ~~(c) The provider shall complete training conducted by the~~

CS/CS/HB 1093

2013

169 | ~~department regarding compliance with the approved methods for~~  
170 | ~~determination and approval of patient eligibility and referral.~~

171 | ~~(d) The department shall retain review and oversight~~  
172 | ~~authority of the patient eligibility and referral determination.~~

173 | Section 4. This act shall take effect July 1, 2013.