The Florida Senate BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared	d By: The Profe	ssional Staff of the Appropri	iations Subcommi	ttee on Health and Human Services		
BILL:	CS/SB 160					
INTRODUCER:	Health Policy Committee; and Senator Richter and others					
SUBJECT:	Licensure Fee Exemptions for Military Veterans					
DATE: March 4, 2		REVISED:				
ANAL` 1. Spaulding	YST	STAFF DIRECTOR Ryon	REFERENCE MS	ACTION Favorable		
2. McElheney	,	Stovall	HP	Fav/CS		
3. Brown		Pigott	AHS	Pre-meeting		
4.	<u> </u>					
5.	<u> </u>					
6.						
Please see Section VIII. for Additional Information:						
A	A. COMMITTEE SUBSTITUTE X Statement of Substantial Changes					
В	B. AMENDMENTS Technical amendments were recommended					
	Amendments were recommended					
			Significant amend	ments were recommended		

I. Summary:

CS/SB 160 requires the Department of Health to waive certain licensure fees and initial certification fees for honorably discharged military veterans who apply for licensure within 24 months after discharge from any branch of the U.S. Armed Forces. Current law does not allow the Department of Health or its regulatory boards to distinguish applicants based on military service.

The bill will have an indeterminate, negative fiscal impact.

The bill substantially amends ss. 456.013 and 468.304 of the F.S.

II. Present Situation:

Military and Veteran Presence in Florida

The United States currently has 1.4 million people serving in the U.S. Armed Forces, over 23 million veterans living in the U.S. and over 200 military installations in 46 states, District of

Columbia, and Puerto Rico.¹ The military operations of the United States touch every state in some way.

The State of Florida, with 20 major military installations, is home to a large population of active duty and reserve military members as well as veterans. Currently, there are more than 61,000 active duty military members² and 12,000 National Guard members³ in Florida. The number of veterans living in Florida exceeds 1.6 million, second only to California.⁴

While the majority of programs and benefits for military personnel and veterans are administered by the Federal Government, states and state legislatures are playing an increasingly larger role in military issues.

Professional Licensure Benefits for Military Members, Veterans, and Spouses

In recent years, the Legislature has enacted laws to assist current military personnel, their spouses, and veterans in obtaining and renewing professional licensure in Florida.

Current law⁵ exempts military personnel from license renewal requirements for the duration of active duty while absent from the state of Florida, and for a period of 6 months after discharge or return to the state. This benefit applies to military members on active duty who hold certain professional licenses regulated by the Department of Business and Professional Regulation (DBPR) or the Department of Health (DOH), who are not practicing their profession in the private sector. This benefit is also available to the spouses of active duty military members.⁶

In order to address the obstacles military families face due to frequent moves, the Legislature enacted CS/CS/CS/HB 713 in 2010⁷ and CS/CS/CS/HB 1319⁸ in 2011 to allow the DBPR and the DOH, respectively, to issue a temporary professional license to the spouse of a military member. To obtain a temporary license, the spouse must submit proof of marriage to the military member, proof that he or she holds an active license in another state or jurisdiction, and proof that the military member is assigned to a duty station in Florida.

Most recently, in 2012, the Legislature enacted CS/CS/HB 887,⁹ which waives the initial licensing fee, the initial application fee, and the initial unlicensed activity fee for a military veteran who applies to the DBPR for a license within 24 months of being honorably discharged. These licensure fee waivers apply only to professions regulated by the DBPR and does not apply to health professions under the DOH.

¹ National Conference of State Legislatures, *Military and Veterans Affairs*, available at: http://www.ncsl.org/issues-research/env-res/military-and-veterans-affairs.aspx (Last viewed on January 21, 2013).

² University of West Florida: Florida Defense Industry, Economic Impact Analysis, 2013 Draft Report.

³ E-mail correspondence with Florida Department of Military Affairs staff. January 22, 2013.

⁴ United States Census Bureau, A Snapshot of Our Nation's Veterans, http://www.census.gov/how/pdf/census veterans.pdf (last visited January 22, 2013).

⁵ Sections 455.02(1) and 456.024(1), F.S.

⁶ Sections 455.02(2) and 456.024(2), F.S.

⁷ Ch. 2010-106, LOF.

⁸ Ch. 2011-95, LOF.

⁹ Ch. 2012-72, LOF.

Department of Health Regulated Professions

Section 20.43, F.S., creates several divisions under the DOH, including the Division of Medical Quality Assurance (MQA), which is responsible for the following boards and professions established within the division:

- The Board of Acupuncture, created under ch. 457, F.S.
- The Board of Medicine, created under ch. 458, F.S.
- The Board of Osteopathic Medicine, created under ch. 459, F.S.
- The Board of Chiropractic Medicine, created under ch. 460, F.S.
- The Board of Podiatric Medicine, created under ch. 461, F.S.
- The Board of Optometry, created under ch. 463, F.S.
- The Board of Nursing, created under part I of ch. 464, F.S.
- The Board of Pharmacy, created under ch. 465, F.S
- The Board of Dentistry, created under ch. 466, F.S.
- The Board of Speech-Language Pathology and Audiology, created under part I of ch. 468,
 F.S.
- The Board of Nursing Home Administrators, created under part II of ch. 468, F.S.
- The Board of Occupational Therapy, created under part III of ch. 468, F.S.
- The Board of Athletic Training, created under part XIII of ch. 468, F.S.
- The Board of Orthotists and Prosthetists, created under part XIV of ch. 468, F.S.
- The Board of Massage Therapy, created under ch. 480, F.S.
- The Board of Clinical Laboratory Personnel, created under part III of ch. 483, F.S.
- The Board of Opticianry, created under part I of ch. 484, F.S.
- The Board of Hearing Aid Specialists, created under part II of ch. 484, F.S.
- The Board of Physical Therapy Practice, created under ch. 486, F.S.
- The Board of Psychology, created under ch. 490, F.S.
- The Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling, created under ch. 491, F.S.

In addition to the professions regulated by the various aforementioned boards, the MQA also regulates the following professions:

- Emergency medical technicians and paramedics, as provided under ch. 401, F.S.
- Naturopathy, as provided under ch. 462, F.S.
- Nursing assistants, as provided under part II of ch. 464, F.S.
- Midwifery, as provided under ch. 467, F.S.
- Respiratory therapy, as provided under part V of ch. 468, F.S.
- Dietetics and nutrition practice, as provided under part X of ch. 468, F.S.
- Electrolysis, as provided under ch. 478, F.S.
- Medical physicists, as provided under part IV of ch. 483, F.S.
- School psychologists, as provided under ch. 490, F.S.

All professions regulated by the MQA are subject to the general licensing provisions in s. 456.013, F.S.

The DOH also regulates and certifies radiological personnel under part IV of ch. 468, F.S. Certification provisions for radiological personnel are found in s. 468.304, F.S.

Typical fees associated with obtaining an initial license for a profession within the jurisdiction of the DOH include an initial licensing fee, ¹⁰ an initial application fee, ¹¹ an initial unlicensed activity fee of \$5 and fees associated with criminal background checks. ¹² Each board within the jurisdiction of the DOH, or the DOH when there is no board, determines by rule the amount of license fees for the profession it regulates. ¹³

The following chart displays the initial application and initial license fees for three of the top ten professions in terms of the number of applications received during the 2011-2012 fiscal year:

PROFESSION	FEE TYPE	FEE
MASSAGE THERAPY	APPLICATION THERAPIST	\$50
MASSAGE THERAPY	INITIAL	\$100
REGISTERED NURSE	APPLICATION EXAM	\$90
REGISTERED NURSE	INITIAL	\$75
PHARMACIST	APPLICATION	\$100
PHARMACIST	INITIAL	\$190

III. Effect of Proposed Changes:

CS/SB 160 amends s. 456.013, F.S., to require the DOH to waive the initial licensing fee, the initial application fee, and the initial unlicensed activity fee for an honorably discharged military veteran who applies to the DOH for a license and the fee waiver, within 24 months after discharge from the U.S. Armed Forces.

The bill also amends s. 468.304, F.S., to require DOH to waive the initial application fee for an honorably discharged military veteran who applies to the DOH for one of the certifications applicable to radiological personnel and the fee waiver, within 24 months after discharge from the U.S. Armed Forces.

The effective date of the bill is July 1, 2013.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

¹³ Section 456.025(3), F.S.

¹⁰ Pursuant to s. 456.013(2), F.S., before the issuance of any license, the DOH must charge an initial license fee as determined by the applicable board or, if there is no board, by rule of the DOH.

¹¹ Each DOH board, or the DOH when there is no board, determines by rule the amount of initial application fees for the profession it regulates.

¹² Pursuant to s. 456.065, F.S, the DOH imposes upon initial licensure and each licensure renewal, a special fee of \$5 per license to fund efforts to combat unlicensed activity.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

Under the bill, licensing fees for military veterans applying for DOH licensure within 24 months after being honorably discharged from the U. S. Armed Forces will be waived.

B. Private Sector Impact:

The bill eliminates fees associated with initial health care licensure for military veterans within 24 months of having been honorably discharged from the U.S. Armed Forces prior to applying for licensure.

C. Government Sector Impact:

The number of military veterans who will apply for licensure or certification within 24 months after being honorably discharged from the U. S. Armed Forces is unknown. Accordingly, the fiscal impact of the bill is unknown. The reduction of licensing fees associated with the bill is expected to have an insignificant impact on the MQA trust fund.¹⁴

However, a similar law enacted last year affected professions licensed by the DPBR. From July 1, 2012, to January 1, 2013, DBPR granted 38 military fee waivers and the fiscal impact to DBPR was \$5,830.

According to the DOH, the modification of the Customer Oriented Medical Practitioner Administration System licensing system to accommodate the requirements in the bill will produce a non-recurring workload increase. DOH has indicated that current resources are adequate to absorb this one-time workload increase. ¹⁵ Additionally, applicants who are denied a fee waiver are entitled to a hearing; however, that impact is expected to be minimal.

VI. Technical Deficiencies:

None.

¹⁴ Florida Department of Health, SB 160 Agency Bill Analysis. (January 3, 2013).

¹³ *Id*.

VII. Related Issues:

None.

VIII. Additional Information:

A. Committee Substitute – Statement of Substantial Changes: (Summarizing differences between the Committee Substitute and the prior version of the bill.)

CS by Health Policy on February 6, 2013:

The committee substitute requires the applicant for licensure to apply for the fee waiver. The waiver of initial application fees is expanded to include similarly situated veterans seeking radiological personnel certifications.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.