

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 By: The Professional Staff of the Committee on Health Policy

BILL: SB 160

INTRODUCER: Senators Richter and Dean

SUBJECT: Licensure Fee Exemptions for Military Veterans

DATE: January 30, 2013

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Spaulding</u>	<u>Ryon</u>	<u>MS</u>	Favorable
2.	<u>McElheney</u>	<u>Stovall</u>	<u>HP</u>	Pre-meeting
3.	_____	_____	<u>AHS</u>	_____
4.	_____	_____	<u>AP</u>	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

I. Summary:

Senate Bill 160 requires the Department of Health to waive certain licensure fees for honorably discharged military veterans 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 substantially amends section 456.013 of the Florida Statutes.

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

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.

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

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.

Department of Health Regulated Professions

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

- The Board of Acupuncture, created under chapter 457.
- The Board of Medicine, created under chapter 458.
- The Board of Osteopathic Medicine, created under chapter 459.
- The Board of Chiropractic Medicine, created under chapter 460.
- The Board of Podiatric Medicine, created under chapter 461.
- The Board of Optometry, created under chapter 463.
- The Board of Nursing, created under part I of chapter 464.
- The Board of Pharmacy, created under chapter 465.

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 Chapter 2010-106, Laws of Florida

⁸ Chapter 2011-95, Laws of Florida

⁹ Chapter 2012-72, Laws of Florida

- The Board of Dentistry, created under chapter 466.
- The Board of Speech-Language Pathology and Audiology, created under part I of chapter 468.
- The Board of Nursing Home Administrators, created under part II of chapter 468.
- The Board of Occupational Therapy, created under part III of chapter 468.
- The Board of Athletic Training, created under part XIII of chapter 468.
- The Board of Orthotists and Prosthetists, created under part XIV of chapter 468.
- The Board of Massage Therapy, created under chapter 480.
- The Board of Clinical Laboratory Personnel, created under part III of chapter 483.
- The Board of Opticianry, created under part I of chapter 484.
- The Board of Hearing Aid Specialists, created under part II of chapter 484.
- The Board of Physical Therapy Practice, created under chapter 486.
- The Board of Psychology, created under chapter 490.
- The Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling, created under chapter 491.

In addition to the professions regulated by the various aforementioned boards, the DOH also regulates the following professions: naturopathy, as provided under chapter 462; nursing assistants, as provided under part II of chapter 464; midwifery, as provided under chapter 467; respiratory therapy, as provided under part V of chapter 468; dietetics and nutrition practice, as provided under part X of chapter 468; electrolysis, as provided under chapter 478; medical physicists, as provided under part IV of chapter 483; and school psychologists, as provided under chapter 490.

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 FY 2011-12:

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

¹⁰ Pursuant to s. 456.013(2), F.S., before the issuance of any license, the DOH shall 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.

¹³ Section 456.025(3), F.S.

III. Effect of Proposed Changes:

The bill 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, within 24 months after discharge from the U.S. Armed Forces.

The fiscal impact of the bill is indeterminate; however, it is anticipated that the bill will have an insignificant impact on the Division of Medical Quality Assurance trust fund related to the reduction in licensing fees.¹⁴

The bill provides an effective date of July 1, 2013.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

According to the DOH, it is indeterminate the number of military veterans that will apply for licensure, who have been honorably discharged from the U.S. Armed Forces within 24 months prior to applying for licensure; therefore, the fiscal impact cannot be determined at this time. However, it is anticipated that the bill will have an insignificant impact on the Division of Medical Quality Assurance trust fund related to the reduction in licensing fees.¹⁵

B. Private Sector Impact:

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

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

¹⁵ Supra, fn 14.

C. Government Sector Impact:

It is indeterminate the number of military veterans that will apply for licensure, who have been honorably discharged from the United States Armed Forces within 24 months prior to applying for licensure; therefore, the fiscal impact cannot be determined at this time.¹⁶

However, a similar law enacted last year affected professions licensed by the DBPR. From July 1, 2012 to January 1, 2013 DBPR granted 38 military fee waivers and the fiscal impact to DBPR was \$5,830.00.

According to the DOH, there will be a non-recurring increase in work associated with the modification of the Customer Oriented Medical Practitioner Administration System licensure system to accommodate the new requirements in the bill. The DOH states that current resources are adequate to absorb this one-time workload increase.¹⁷ Additionally, applicants who are not granted a fee waiver will be entitled to a hearing on the denial, but the impact is expected to be minimal.

VI. Technical Deficiencies:

The title of the bill does not indicate that s. 456.013, F.S., is being amended. Line 3 should be deleted and the following inserted: military veterans; amending s. 456.013, F.S.; requiring that the Department of

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.)

None.

B. Amendments:

None.

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

¹⁶ Supra, fn 14.

¹⁷ Id.