COMMITTEE/SUBCOMMITTEE ACTION					
ADOPTED	(Y/N)				
ADOPTED AS AMENDED	(Y/N)				
ADOPTED W/O OBJECTION	(Y/N)				
FAILED TO ADOPT	(Y/N)				
WITHDRAWN	(Y/N)				
OTHER					

Committee/Subcommittee hearing bill: Health & Human Services Committee

Representative Pigman offered the following:

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## Amendment (with title amendment)

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Section 1. Paragraphs (j) and (k) of subsection (4) of section 322.142, Florida Statutes, are amended, and paragraph

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(1) is added to that subsection, to read:

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322.142 Color photographic or digital imaged licenses.

Remove everything after the enacting clause and insert:

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The department may maintain a film negative or print file. The department shall maintain a record of the digital

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image and signature of the licensees, together with other data

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required by the department for identification and retrieval. Reproductions from the file or digital record are exempt from

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the provisions of s. 119.07(1) and shall be made and issued

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- (j) To district medical examiners pursuant to an interagency agreement for the purpose of identifying a deceased individual, determining cause of death, and notifying next of kin of any investigations, including autopsies and other laboratory examinations, authorized in s. 406.11; or
- (k) To the following persons for the purpose of identifying a person as part of the official work of a court:
  - 1. A justice or judge of this state;
- 2. An employee of the state courts system who works in a position that is designated in writing for access by the Chief Justice of the Supreme Court or a chief judge of a district or circuit court, or by his or her designee; or
- 3. A government employee who performs functions on behalf of the state courts system in a position that is designated in writing for access by the Chief Justice or a chief judge, or by his or her designee; or
- (1) To the Department of Health, pursuant to an interagency agreement to access digital images to verify the identity of an individual during an investigation under chapter 456, and for the reproduction of licenses issued by the Department of Health.
- Section 2. Subsection (1), paragraphs (a), (b), (g), and (h) of subsection (2), and paragraph (d) of subsection (4) of section 381.004, Florida Statutes, are amended, and subsection (1) of that section is reordered, to read:
  - 381.004 HIV testing.-

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- (1) DEFINITIONS.—As used in this section:
- (a) "Health care setting" means a setting devoted to both the diagnosis and care of persons, such as county health department clinics, hospital emergency departments, urgent care clinics, substance abuse treatment clinics, primary care settings, community clinics, mobile medical clinics, and correctional health care facilities.
- (b) (a) "HIV test" means a test ordered after July 6, 1988, to determine the presence of the antibody or antigen to human immunodeficiency virus or the presence of human immunodeficiency virus infection.
- (c) (b) "HIV test result" means a laboratory report of a human immunodeficiency virus test result entered into a medical record on or after July 6, 1988, or any report or notation in a medical record of a laboratory report of a human immunodeficiency virus test. As used in this section, The term "HIV test result" does not include test results reported to a health care provider by a patient.
- (d) "Nonhealth care setting" means a site that conducts
  HIV testing for the sole purpose of identifying HIV infection.
  Such setting does not provide medical treatment but may include community-based organizations, outreach settings, county health department HIV testing programs, and mobile vans.
  - (f) (c) "Significant exposure" means:
- 1. Exposure to blood or body fluids through needlestick, instruments, or sharps;

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- 2. Exposure of mucous membranes to visible blood or body fluids, to which universal precautions apply according to the National Centers for Disease Control and Prevention, including, without limitations, the following body fluids:
  - a. Blood.
  - b. Semen.
  - c. Vaginal secretions.
  - d. Cerebrospinal Cerebrospinal fluid (CSF).
  - e. Synovial fluid.
    - f. Pleural fluid.
    - q. Peritoneal fluid.
    - h. Pericardial fluid.
    - i. Amniotic fluid.
- j. Laboratory specimens that contain HIV (e.g., suspensions
  of concentrated virus); or
- 3. Exposure of skin to visible blood or body fluids, especially when the exposed skin is chapped, abraded, or afflicted with dermatitis or the contact is prolonged or involving an extensive area.
- (e) (d) "Preliminary HIV test" means an antibody or antibody-antigen screening test, such as the enzyme-linked immunosorbent assays (IA), or a rapid test approved by the United States Food and Drug Administration (ELISAs) or the Single-Use Diagnostic System (SUDS).
- $\underline{\text{(g)}}$  "Test subject" or "subject of the test" means the person upon whom an HIV test is performed, or the person who has

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- 96 legal authority to make health care decisions for the test 97 subject.
  - (2) HUMAN IMMUNODEFICIENCY VIRUS TESTING; INFORMED CONSENT; RESULTS; COUNSELING; CONFIDENTIALITY.—
    - (a) Before performing an HIV test:
  - 1. In a health care setting, the person to be tested shall be provided information about the test, and shall be notified that the test is planned, that he or she has the right to decline the test, and that he or she has the right to confidential treatment of information identifying the subject of the test and of the results of the test as provided by the law. If the person to be tested declines the test, such decision shall be documented in the medical record. No person in this state shall order a test designed to identify the human immunodeficiency virus, or its antigen or antibody, without first obtaining the informed consent of the person upon whom the test is being performed, except as specified in paragraph (h). Informed consent shall be preceded by an explanation of the right to confidential treatment of information identifying the subject of the test and the results of the test to the extent provided by law. Information shall also be provided on the fact that a positive HIV test result will be reported to the county health department with sufficient information to identify the test subject and on the availability and location of sites at which anonymous testing is performed. As required in paragraph (3) (c), each county health department shall maintain a list of

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sites at which anonymous testing is performed, including the locations, phone numbers, and hours of operation of the sites. Consent need not be in writing provided there is documentation in the medical record that the test has been explained and the consent has been obtained.

2. In a nonhealth care setting, a provider shall obtain the informed consent of the person upon whom the test is being performed. Informed consent shall be preceded by an explanation of the right to confidential treatment of information identifying the subject of the test and the results of the test as provided by law.

- The test subject shall also be informed that a positive HIV test result will be reported to the county health department with sufficient information to identify the test subject and on the availability and location of sites at which anonymous testing is performed. As required in paragraph (3)(c), each county health department shall maintain a list of sites at which anonymous testing is performed, including the locations, telephone numbers, and hours of operation of the sites.
- (b) Except as provided in paragraph (h), informed consent must be obtained from a legal guardian or other person authorized by law if when the person:
- 1. Is not competent, is incapacitated, or is otherwise unable to make an informed judgment; or

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- 2. Has not reached the age of majority, except as provided in s. 384.30.
  - (g) Human immunodeficiency virus test results contained in the medical records of a hospital licensed under chapter 395 may be released in accordance with s. 395.3025 without being subject to the requirements of subparagraph (e)2., subparagraph (e)9., or paragraph (f) if; provided the hospital has notified the patient of the limited confidentiality protections afforded HIV test results contained in hospital medical records obtained written informed consent for the HIV test in accordance with provisions of this section.
  - (h) Notwithstanding the provisions of paragraph (a), informed consent is not required:
  - 1. When testing for sexually transmissible diseases is required by state or federal law, or by rule including the following situations:
  - a. HIV testing pursuant to s. 796.08 of persons convicted of prostitution or of procuring another to commit prostitution.
  - b. HIV testing of inmates pursuant to s. 945.355 <u>before</u> prior to their release from prison by reason of parole, accumulation of gain-time credits, or expiration of sentence.
  - c. Testing for HIV by a medical examiner in accordance with s. 406.11.
    - d. HIV testing of pregnant women pursuant to s. 384.31.
- 2. Those exceptions provided for blood, plasma, organs, skin, semen, or other human tissue pursuant to s. 381.0041.

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- 3. For the performance of an HIV-related test by licensed medical personnel in bona fide medical emergencies  $\underline{if}$  when the test results are necessary for medical diagnostic purposes to provide appropriate emergency care or treatment to the person being tested and the patient is unable to consent, as supported by documentation in the medical record. Notification of test results in accordance with paragraph (c) is required.
- 4. For the performance of an HIV-related test by licensed medical personnel for medical diagnosis of acute illness where, in the opinion of the attending physician, providing notification obtaining informed consent would be detrimental to the patient, as supported by documentation in the medical record, and the test results are necessary for medical diagnostic purposes to provide appropriate care or treatment to the person being tested. Notification of test results in accordance with paragraph (c) is required if it would not be detrimental to the patient. This subparagraph does not authorize the routine testing of patients for HIV infection without notification informed consent.
- 5. If When HIV testing is performed as part of an autopsy for which consent was obtained pursuant to s. 872.04.
- 6. For the performance of an HIV test upon a defendant pursuant to the victim's request in a prosecution for any type of sexual battery where a blood sample is taken from the defendant voluntarily, pursuant to court order for any purpose, or pursuant to the provisions of s. 775.0877, s. 951.27, or s.

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960.003; however, the results of  $\underline{an}$   $\underline{any}$  HIV test performed shall be disclosed solely to the victim and the defendant, except as provided in ss. 775.0877, 951.27, and 960.003.

- 7. If When an HIV test is mandated by court order.
- 8. For epidemiological research pursuant to s. 381.0031, for research consistent with institutional review boards created by 45 C.F.R. part 46, or for the performance of an HIV-related test for the purpose of research, if the testing is performed in a manner by which the identity of the test subject is not known and may not be retrieved by the researcher.
- 9. If When human tissue is collected lawfully without the consent of the donor for corneal removal as authorized by s. 765.5185 or enucleation of the eyes as authorized by s. 765.519.
- 10. For the performance of an HIV test upon an individual who comes into contact with medical personnel in such a way that a significant exposure has occurred during the course of employment or within the scope of practice and where a blood sample is available which that was taken from that individual voluntarily by medical personnel for other purposes. The term "medical personnel" includes a licensed or certified health care professional; an employee of a health care professional or health care facility; employees of a laboratory licensed under chapter 483; personnel of a blood bank or plasma center; a medical student or other student who is receiving training as a health care professional at a health care facility; and a

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paramedic or emergency medical technician certified by the department to perform life-support procedures under s. 401.23.

- a. Before performing Prior to performance of an HIV test on a voluntarily obtained blood sample, the individual from whom the blood was obtained shall be requested to consent to the performance of the test and to the release of the results. If consent cannot be obtained within the time necessary to perform the HIV test and begin prophylactic treatment of the exposed medical personnel, all information concerning the performance of an HIV test and any HIV test result shall be documented only in the medical personnel's record unless the individual gives written consent to entering this information on the individual's medical record.
- b. Reasonable attempts to locate the individual and to obtain consent shall be made, and all attempts must be documented. If the individual cannot be found or is incapable of providing consent, an HIV test may be conducted on the available blood sample. If the individual does not voluntarily consent to the performance of an HIV test, the individual shall be informed that an HIV test will be performed, and counseling shall be furnished as provided in this section. However, HIV testing shall be conducted only after appropriate medical personnel under the supervision of a licensed physician documents, in the medical record of the medical personnel, that there has been a significant exposure and that, in accordance with the written protocols based on the National Centers for Disease Control and

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Prevention guidelines on HIV postexposure prophylaxis and in the physician's medical judgment, the information is medically necessary to determine the course of treatment for the medical personnel.

- c. Costs of <u>an</u> any HIV test of a blood sample performed with or without the consent of the individual, as provided in this subparagraph, shall be borne by the medical personnel or the employer of the medical personnel. However, costs of testing or treatment not directly related to the initial HIV tests or costs of subsequent testing or treatment may not be borne by the medical personnel or the employer of the medical personnel.
- d. In order to <u>use utilize</u> the provisions of this subparagraph, the medical personnel must <del>either</del> be tested for HIV pursuant to this section or provide the results of an HIV test taken within 6 months <u>before</u> prior to the significant exposure if such test results are negative.
- e. A person who receives the results of an HIV test pursuant to this subparagraph shall maintain the confidentiality of the information received and of the persons tested. Such confidential information is exempt from s. 119.07(1).
- f. If the source of the exposure will not voluntarily submit to HIV testing and a blood sample is not available, the medical personnel or the employer of such person acting on behalf of the employee may seek a court order directing the source of the exposure to submit to HIV testing. A sworn statement by a physician licensed under chapter 458 or chapter

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459 that a significant exposure has occurred and that, in the physician's medical judgment, testing is medically necessary to determine the course of treatment constitutes probable cause for the issuance of an order by the court. The results of the test shall be released to the source of the exposure and to the person who experienced the exposure.

- 11. For the performance of an HIV test upon an individual who comes into contact with medical personnel in such a way that a significant exposure has occurred during the course of employment or within the scope of practice of the medical personnel while the medical personnel provides emergency medical treatment to the individual; or notwithstanding s. 384.287, an individual who comes into contact with nonmedical personnel in such a way that a significant exposure has occurred while the nonmedical personnel provides emergency medical assistance during a medical emergency. For the purposes of this subparagraph, a medical emergency means an emergency medical condition outside of a hospital or health care facility that provides physician care. The test may be performed only during the course of treatment for the medical emergency.
- a. An individual who is capable of providing consent shall be requested to consent to an HIV test <u>before</u> prior to the testing. If consent cannot be obtained within the time necessary to perform the HIV test and begin prophylactic treatment of the exposed medical personnel and nonmedical personnel, all information concerning the performance of an HIV test and its

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result, shall be documented only in the medical personnel's or nonmedical personnel's record unless the individual gives written consent to entering this information  $\underline{\text{in}}$  on the individual's medical record.

- b. HIV testing shall be conducted only after appropriate medical personnel under the supervision of a licensed physician documents, in the medical record of the medical personnel or nonmedical personnel, that there has been a significant exposure and that, in accordance with the written protocols based on the National Centers for Disease Control and Prevention guidelines on HIV postexposure prophylaxis and in the physician's medical judgment, the information is medically necessary to determine the course of treatment for the medical personnel or nonmedical personnel.
- c. Costs of any HIV test performed with or without the consent of the individual, as provided in this subparagraph, shall be borne by the medical personnel or the employer of the medical personnel or nonmedical personnel. However, costs of testing or treatment not directly related to the initial HIV tests or costs of subsequent testing or treatment may not be borne by the medical personnel or the employer of the medical personnel or nonmedical personnel.
- d. In order to <u>use utilize</u> the provisions of this subparagraph, the medical personnel or nonmedical personnel shall be tested for HIV pursuant to this section or shall provide the results of an HIV test taken within 6 months before

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prior to the significant exposure if such test results are
negative.

- e. A person who receives the results of an HIV test pursuant to this subparagraph shall maintain the confidentiality of the information received and of the persons tested. Such confidential information is exempt from s. 119.07(1).
- f. If the source of the exposure will not voluntarily submit to HIV testing and a blood sample was not obtained during treatment for the medical emergency, the medical personnel, the employer of the medical personnel acting on behalf of the employee, or the nonmedical personnel may seek a court order directing the source of the exposure to submit to HIV testing. A sworn statement by a physician licensed under chapter 458 or chapter 459 that a significant exposure has occurred and that, in the physician's medical judgment, testing is medically necessary to determine the course of treatment constitutes probable cause for the issuance of an order by the court. The results of the test shall be released to the source of the exposure and to the person who experienced the exposure.
- 12. For the performance of an HIV test by the medical examiner or attending physician upon an individual who expired or could not be resuscitated while receiving emergency medical assistance or care and who was the source of a significant exposure to medical or nonmedical personnel providing such assistance or care.

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- a. HIV testing may be conducted only after appropriate medical personnel under the supervision of a licensed physician documents in the medical record of the medical personnel or nonmedical personnel that there has been a significant exposure and that, in accordance with the written protocols based on the National Centers for Disease Control and Prevention guidelines on HIV postexposure prophylaxis and in the physician's medical judgment, the information is medically necessary to determine the course of treatment for the medical personnel or nonmedical personnel.
- b. Costs of  $\underline{an}$   $\underline{any}$  HIV test performed under this subparagraph may not be charged to the deceased or to the family of the deceased person.
- c. For the provisions of this subparagraph to be applicable, the medical personnel or nonmedical personnel must be tested for HIV under this section or must provide the results of an HIV test taken within 6 months before the significant exposure if such test results are negative.
- d. A person who receives the results of an HIV test pursuant to this subparagraph shall comply with paragraph (e).
- 13. For the performance of an HIV-related test medically indicated by licensed medical personnel for medical diagnosis of a hospitalized infant as necessary to provide appropriate care and treatment of the infant <u>if</u> when, after a reasonable attempt, a parent cannot be contacted to provide consent. The medical records of the infant must shall reflect the reason consent of

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the parent was not initially obtained. Test results shall be provided to the parent when the parent is located.

- 14. For the performance of HIV testing conducted to monitor the clinical progress of a patient previously diagnosed to be HIV positive.
- 15. For the performance of repeated HIV testing conducted to monitor possible conversion from a significant exposure.
- (4) HUMAN IMMUNODEFICIENCY VIRUS TESTING REQUIREMENTS;
  REGISTRATION WITH THE DEPARTMENT OF HEALTH; EXEMPTIONS FROM
  REGISTRATION.—No county health department and no other person in
  this state shall conduct or hold themselves out to the public as
  conducting a testing program for acquired immune deficiency
  syndrome or human immunodeficiency virus status without first
  registering with the Department of Health, reregistering each
  year, complying with all other applicable provisions of state
  law, and meeting the following requirements:
- (d) A program in a health care setting shall meet the notification criteria contained in subparagraph (2)(a)1. A program in a nonhealth care setting shall meet all informed consent criteria contained in subparagraph (2)(a)2. The program must meet all the informed consent criteria contained in subsection (2).

Section 3. Paragraph (e) of subsection (4) of section 395.3025, Florida Statutes, is amended to read:

395.3025 Patient and personnel records; copies; examination.—

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- (4) Patient records are confidential and <u>may must</u> not be disclosed without the consent of the patient or his or her legal representative, but appropriate disclosure may be made without such consent to:
- The department agency upon subpoena issued pursuant to (e) s. 456.071., but The records obtained thereby must be used solely for the purpose of the department agency and the appropriate professional board in its investigation, prosecution, and appeal of disciplinary proceedings. If the department agency requests copies of the records, the facility shall charge a fee pursuant to this section no more than its actual copying costs, including reasonable staff time. The department and the appropriate professional board must maintain the confidentiality of patient records obtained under this paragraph pursuant to s. 456.057. A licensee who is the subject of a department investigation may inspect or receive a copy of a patient record connected with the investigation if the licensee agrees in writing to maintain the confidentiality of the patient record pursuant to s. 456.057 must be sealed and must not be available to the public pursuant to s. 119.07(1) or any other statute providing access to records, nor may they be available to the public as part of the record of investigation for and prosecution in disciplinary proceedings made available to the public by the agency or the appropriate regulatory board. However, the agency must make available, upon written request by a practitioner against whom probable cause has been found, any

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such records that form the basis of the determination of probable cause.

Section 4. Subsection (2) of section 456.013, Florida Statutes, is amended to read:

456.013 Department; general licensing provisions.-

(2) Before the issuance of <u>a</u> any license, the department shall charge an initial license fee as determined by the applicable board or, if there is no board, by rule of the department. Upon receipt of the appropriate license fee, the department shall issue a license to <u>a</u> any person certified by the appropriate board, or its designee, as having met the licensure requirements imposed by law or rule. The license shall consist of a wallet-size identification card and a wall card measuring 6 1/2 inches by 5 inches. The licensee shall surrender the license to the department the wallet-size identification card and the wall card if the licensee's license was is issued in error or is revoked.

Section 5. Subsections (5) through (11) of section 456.025, Florida Statutes, are renumbered as subsections (4) through (10), respectively, and present subsections (4) and (6) are amended to read:

456.025 Fees; receipts; disposition.

(4) Each board, or the department if there is no board, may charge a fee not to exceed \$25, as determined by rule, for the issuance of a wall certificate pursuant to s. 456.013(2) requested by a licensee who was licensed prior to July 1, 1998,

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or for the issuance of a duplicate wall certificate requested by any licensee.

(5)(6) If the cash balance of the trust fund at the end of any fiscal year exceeds the total appropriation provided for the regulation of the health care professions in the prior fiscal year, the boards, in consultation with the department, may lower the license renewal fees. When the department determines, based on long-range estimates of revenue, that a profession's trust fund balance exceeds the amount required to cover necessary functions, each board, or the department when there is no board, may adopt rules to implement the waiver of initial application fees, initial licensure fees, unlicensed activity fees, or renewal fees for that profession. The waiver of renewal fees may not exceed 2 years.

Section 6. 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-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) (f) 381.004(1) (c), to blood or body fluids. The employer may test the blood or body fluid to determine if it is

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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 7. Subsection (17) of section 456.057, Florida Statutes, is amended to read:

456.057 Ownership and control of patient records; report or copies of records to be furnished; disclosure of information.—

(17) A health care practitioner or records owner furnishing copies of reports or records or making the reports or records available for digital scanning pursuant to this section shall charge no more than the actual cost of copying, including reasonable staff time, or the amount specified in administrative rule by the appropriate board, or the department when there is no board. The rates charged for reproduction of written or typed medical records must be the same regardless of format or medium.

Section 8. Subsections (2), (3), and (4) of section 458.319, Florida Statutes, are renumbered as subsections (3), (4), and (5), respectively, and a new subsection (2) is added to that section to read:

458.319 Renewal of license.-

(2) Each licensee shall demonstrate his or her professional competency by completing at least 40 hours of

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508	continuing medical education every 2 years. The board, by rule,						
509	may:						
510	(a) Provide that continuing medical education approved by						
511	the American Medical Association satisfies some or all of the						
512	continuing medical education requirements.						
513	(b) Mandate specific continuing medical education						
514	requirements.						
515	(c) Approve alternative methods for obtaining continuing						
516	medical education credits, including, but not limited to:						
517	1. Attendance at a board meeting at which another licensee						
518	is disciplined;						
519	2. Service as a volunteer expert witness for the						
520	department in a disciplinary proceeding; or						
521	3. Service as a member of a probable cause panel following						
522	expiration of a board member's term.						
523	Section 9. Subsection (3) of section 458.3485, Florida						
524	Statutes, is amended to read:						
525	458.3485 Medical assistant.—						
526	(3) CERTIFICATION Medical assistants may be certified by						
527	the American Association of Medical Assistants or as a						
528	Registered Medical Assistant by the American Medical						
529	<del>Technologists.</del>						
530	Section 10. Subsection (7) of section 464.203, Florida						
531	Statutes, is amended to read:						
532	464.203 Certified nursing assistants; certification						

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533 requirement.—

(7) A certified nursing assistant shall complete $\underline{24}$ $\underline{12}$								
hours of inservice training <a href="every 2 years">every 2 years</a> during each calendar								
$rac{ ext{year}}{ ext{.}}$ The certified nursing assistant $\underline{ ext{is}}$ $rac{ ext{shall be}}{ ext{shall be}}$ responsible								
for maintaining documentation demonstrating compliance with								
these provisions. The Council on Certified Nursing Assistants,								
in accordance with s. 464.2085(2)(b), shall propose rules to								
implement this subsection.								

Section 11. <u>Section 464.2085</u>, Florida Statutes, is repealed.

Section 12. Subsection (2) of section 466.032, Florida Statutes, is amended to read:

466.032 Registration.-

(2) Upon the failure of any dental laboratory operator to comply with subsection (1), the department shall notify her or him by registered mail, within 1 month after the registration renewal date, return receipt requested, at her or his last known address, of such failure and inform her or him of the provisions of subsections (3) and (4).

Section 13. Subsection (8) of section 467.009, Florida Statutes, is amended to read:

467.009 Midwifery programs; education and training requirements.—

(8) Nonpublic educational institutions that conduct approved midwifery programs shall be accredited by a member of the Council of on Higher Education Accreditation Commission on

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559 Recognition of Postsecondary Accreditation and shall be licensed by the Commission for Independent Education.

Section 14. Subsection (2) of section 468.1665, Florida Statutes, is amended to read:

468.1665 Board of Nursing Home Administrators; membership; appointment; terms.-

Four Three members of the board must be licensed (2)nursing home administrators. One member Two members of the board must be a health care practitioner practitioners. The remaining two members of the board must be laypersons who are not, and have never been, nursing home administrators or members of any health care profession or occupation. At least one member of the board must be 60 years of age or older.

Section 15. Subsection (2) of section 468.1695, Florida Statutes, is amended to read:

468.1695 Licensure by examination.

- The department shall examine each applicant who the board certifies has completed the application form and remitted an examination fee set by the board not to exceed \$250 and who:
- (a)1. Holds a baccalaureate or master's degree from an accredited college or university and majored in health care administration, health services administration, or an equivalent major, or has credit for at least 60 semester hours in subjects, as prescribed by rule of the board, which prepare the applicant for total management of a nursing home; and

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2. Has fulfilled the requirements of a college-affiliated
or university-affiliated internship in nursing home
administration or of a 1,000-hour nursing home administrator-in
training program prescribed by the board; or

- (b)1. Holds a baccalaureate degree from an accredited college or university; and
- 2.a. Has fulfilled the requirements of a 2,000-hour nursing home administrator-in-training program prescribed by the board; or
- b. Has 1 year of management experience allowing for the application of executive duties and skills, including the staffing, budgeting, and directing of resident care, dietary, and bookkeeping departments within a skilled nursing facility, hospital, hospice, assisted living facility with a minimum of 60 licensed beds, or geriatric residential treatment program and, if such experience is not in a skilled nursing facility, has fulfilled the requirements of a 1,000-hour nursing home administrator-in-training program prescribed by the board.
- Section 16. <u>Section 468.1735</u>, Florida Statutes, is repealed.
- Section 17. Subsection (11) of section 468.503, Florida Statutes, is amended to read:
  - 468.503 Definitions.—As used in this part:
- (11) "Registered dietitian" means an individual registered with the accrediting body of the Academy of Nutrition and

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609	<u>Dietetics</u>	Commission	on Diete	<del>tic Registration,</del>	the	accrediting
610	<del>body of t</del>	<del>ne American</del>	Dietetic	Association.		

Section 18. Subsection (4) of section 468.505, Florida Statutes, is amended to read:

468.505 Exemptions; exceptions.-

- (4) Notwithstanding any other provision of this part, an individual registered by the accrediting body of the Academy of Nutrition and Dietetics Commission on Dietetic Registration of the American Dietetic Association has the right to use the title "Registered Dietitian" and the designation "R.D."
- Section 19. Subsection (5) of section 480.033, Florida Statutes, is amended to read:

480.033 Definitions.—As used in this act:

- (5) "Apprentice" means a person approved by the board to study massage under the instruction of a licensed massage therapist.
- Section 20. Subsections (1) and (4) of section 480.041, Florida Statutes, are amended to read:
- 480.041 Massage therapists; qualifications; licensure; endorsement.—
- (1)  $\underline{A}$  Any person is qualified for licensure as a massage therapist under this act who:
- (a) Is at least 18 years of age or has received a high school diploma or graduate equivalency diploma;

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- (b) Has completed a course of study at a board-approved massage school or has completed an apprenticeship program that meets standards adopted by the board; and
- (c) Has received a passing grade on an examination administered by the department.
  - (4) The board shall adopt rules:
- (a) Establishing a minimum training program for apprentices.
- (b) Providing for educational standards, examination, and certification for the practice of colonic irrigation, as defined in s.  $480.033 \frac{480.033(6)}{6}$ , by massage therapists.
- (b) (c) Specifying licensing procedures for practitioners desiring to be licensed in this state who hold an active license and have practiced in any other state, territory, or jurisdiction of the United States or any foreign national jurisdiction which has licensing standards substantially similar to, equivalent to, or more stringent than the standards of this state.
- Section 21. Subsection (5) of section 480.042, Florida Statutes, is amended to read:

480.042 Examinations.

(5) All licensing examinations shall be conducted in such manner that the applicant shall be known to the department by number until her or his examination is completed and the proper grade determined. An accurate record of each examination shall be maintained, shall be made; and that record, together with all

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examination papers, shall be filed with the State Surgeon

General and shall be kept by the testing entities for reference and inspection for a period of not less than 2 years immediately following the examination.

Section 22. Paragraph (h) of subsection (1) of section 480.044, Florida Statutes, is amended to read:

480.044 Fees; disposition.—

- (1) The board shall set fees according to the following schedule:
  - (h) Fee for apprentice: not to exceed \$100.
- Section 23. Subsection (4) of section 766.1115, Florida Statutes, is amended to read:
- 766.1115 Health care providers; creation of agency relationship with governmental contractors.—
- (4) CONTRACT REQUIREMENTS.—A health care provider that executes a contract with a governmental contractor to deliver health care services on or after April 17, 1992, as an agent of the governmental contractor is an agent for purposes of s. 768.28(9), while acting within the scope of duties under the contract, if the contract complies with the requirements of this section and regardless of whether the individual treated is later found to be ineligible. A health care provider shall continue to be an agent for purposes of s. 768.28(9) for 30 days after a determination of ineligibility to allow for treatment until the individual transitions to treatment by another health care provider. A health care provider under contract with the

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state may not be named as a defendant in any action arising out of medical care or treatment provided on or after April 17, 1992, under contracts entered into under this section. The contract must provide that:

- (a) The right of dismissal or termination of any health care provider delivering services under the contract is retained by the governmental contractor.
- (b) The governmental contractor has access to the patient records of any health care provider delivering services under the contract.
- (c) Adverse incidents and information on treatment outcomes must be reported by any health care provider to the governmental contractor if the incidents and information pertain to a patient treated under the contract. The health care provider shall submit the reports required by s. 395.0197. If an incident involves a professional licensed by the Department of Health or a facility licensed by the Agency for Health Care Administration, the governmental contractor shall submit such incident reports to the appropriate department or agency, which shall review each incident and determine whether it involves conduct by the licensee that is subject to disciplinary action. All patient medical records and any identifying information contained in adverse incident reports and treatment outcomes which are obtained by governmental entities under this paragraph are confidential and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. I of the State Constitution.

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- (d) Patient selection and initial referral must be made by the governmental contractor or the provider. Patients may not be transferred to the provider based on a violation of the antidumping provisions of the Omnibus Budget Reconciliation Act of 1989, the Omnibus Budget Reconciliation Act of 1990, or chapter 395.
- (e) If emergency care is required, the patient need not be referred before receiving treatment, but must be referred within 48 hours after treatment is commenced or within 48 hours after the patient has the mental capacity to consent to treatment, whichever occurs later.
- (f) The provider is subject to supervision and regular inspection by the governmental contractor.

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

Section 24. Subsection (3) of section 823.05, Florida Statutes, is amended to read:

- 823.05 Places and groups engaged in criminal gang-related activity declared a nuisance; massage establishments engaged in prohibited activity; may be abated and enjoined.—
- (3) A massage establishment as defined in s.  $\underline{480.033}$   $\underline{480.033(7)}$  that operates in violation of s. 480.0475 or s. 480.0535(2) is declared a nuisance and may be abated or enjoined as provided in ss. 60.05 and 60.06.

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737 Section 25. This act shall take effect July 1, 2014.
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## TITLE AMENDMENT

Remove everything before the enacting clause and insert:

A bill to be entitled

An act relating to the Department of Health; amending s. 322.142, F.S.; authorizing the Department of Highway Safety and Motor Vehicles to provide reproductions of specified records to the Department of Health under certain circumstances; amending s. 381.004, F.S.; revising and providing definitions; specifying the notification and consent procedures for performing an HIV test in a health care setting and a nonhealth care setting; amending s. 395.3025, F.S.; clarifying duties of the Department of Health to maintain the confidentiality of patient records that it obtains under subpoena pursuant to an investigation; authorizing licensees under investigation to inspect or receive copies of patient records connected with the investigation, subject to certain conditions; amending s. 456.013, F.S.; deleting requirements for the physical size of licenses issued for various health professions; amending s. 456.025, F.S.; deleting fee for issuance of wall certificates for various health profession

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licenses; authorizing the boards or the department to adopt rules waiving certain fees for a specified period in certain circumstances; amending s. 456.032, F.S.; conforming a cross-reference; amending s. 456.057, F.S.; providing a requirement for rates charged for reproduction of certain records; amending s. 458.319, F.S.; providing continuing medical education requirements for Board of Medicine licensees; authorizing the board to adopt rules; amending s. 458.3485, F.S.; deleting a provision authorizing medical assistants to be certified by certain entities; amending s. 464.203, F.S.; revising certified nursing assistant inservice training requirements; repealing s. 464.2085, F.S., relating to the creation, membership, and duties of the Council on Certified Nursing Assistants; amending s. 466.032, F.S.; deleting a requirement that the department provide certain notice to a dental laboratory operator who fails to renew her or his registration; amending s. 467.009, F.S.; revising the organization that must accredit certain midwifery programs; amending s. 468.1665, F.S.; revising membership of the Board of Nursing Home Administrators; amending s. 468.1695, F.S.; revising an educational requirement for an applicant to be eligible to take the nursing home administrator licensure examination; repealing s.

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## COMMITTEE/SUBCOMMITTEE AMENDMENT Bill No. CS/CS/HB 819 (2014)

Amendment No.

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468.1735, F.S., relating to provisional licenses for nursing home administrators; amending ss. 468.503 and 468.505, F.S.; revising the organization with whom an individual must be registered to be a registered dietitian; revising a definition; amending ss. 480.033 and 480.041, F.S.; deleting provisions relating to massage therapy apprentices and apprenticeship programs; deleting a definition and revising licensure requirements for massage therapists, to conform; amending s. 480.042, F.S.; revising requirements for conducting massage therapist licensing examinations and maintaining examination records; amending s. 480.044, F.S.; deleting fee for massage therapy apprentices; amending s. 766.1115, F.S.; requiring a health care provider to continue to be an agent for a specified period after determination of ineligibility; amending s. 823.05, F.S.; conforming a crossreference; providing an effective date.

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