

LEGISLATIVE ACTION

Senate House • Comm: RCS 04/23/2015 The Committee on Appropriations (Grimsley) recommended the following: Senate Amendment (with title amendment) Between lines 232 and 233 insert: Section 8. Section 296.42, Florida Statutes, is created to read: 296.42 Site selection process for state veterans' nursing homes.-(1) The department shall contract for a study to determine the need for new state veterans' nursing homes and the most

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11	appropriate counties in which to locate the homes based on the
12	greatest level of need. The department shall submit the study to
13	the Governor, the President of the Senate, and the Speaker of
14	the House of Representatives by November 1, 2015.
15	(2) The study shall use the following criteria to rank each
16	county according to need:
17	(a) The distance from the geographic center of the county
18	to the nearest existing state veterans' nursing home.
19	(b) The number of veterans age 65 years or older residing
20	in the county.
21	(c) The presence of an existing federal Veterans' Health
22	Administration medical center or outpatient clinic in the
23	county.
24	(d) Elements of emergency health care in the county, as
25	determined by:
26	1. The number of general hospitals.
27	2. The number of emergency room holding beds per hospital.
28	The term "emergency room holding bed" means a bed located in the
29	emergency room of a hospital licensed under ch. 395 which is
30	used for a patient admitted to the hospital through the
31	emergency room, but is waiting for an available bed in an
32	inpatient unit of the hospital.
33	3. The number of employed physicians per hospital in the
34	emergency room 24 hours per day.
35	(e) The number of existing community nursing home beds per
36	1,000 males age 65 years or older residing in the county.
37	(f) The presence of an accredited educational institution
38	offering health care programs in the county.
39	(g) The county poverty rate.

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40 (3) For each new nursing home, the department shall select 41 the highest-ranked county in the applicable study under this 42 section which does not have a veterans' nursing home. If the 43 highest-ranked county cannot serve as the site, the department 44 shall select the next-highest ranked county. The selection is 45 subject to the approval of the Governor and Cabinet. 46 (4) The department shall use the 2014 site selection study 47 to select a county for any new state veterans' nursing home 48 authorized before November 1, 2015. 49 (5) The department shall use the November 2015 site 50 selection study ranking to select each new state veterans' 51 nursing home site authorized before July 1, 2020. 52 (6) The department shall contract for and submit a new site 53 selection study to the Governor, the President of the Senate, 54 and the Speaker of the House of Representatives using the county 55 ranking criteria in paragraph (3) by November 1, 2019 for site 56 selections on or after July 1, 2020. The department must conduct 57 new site selection studies every 4 years using the county 58 ranking criteria under paragraph (3) with each report due by November 1st for the selection period that begins the following 59 60 July 1st. Section 9. Section 624.27, Florida Statutes, is created to 61 62 read: 63 624.27 Application of code as to direct primary care 64 agreements.-65 (1) As used in this section, the term: 66 (a) "Direct primary care agreement" means a contract 67 between a primary care provider or primary care group practice and a patient, the patient's legal representative, or an 68

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69	employer which must satisfy the criteria in subsection (4) and
70	does not indemnify for services provided by a third party.
71	(b) "Primary care provider" means a health care provider
72	licensed under chapter 458, chapter 459, or chapter 464 who
73	provides medical services to patients which are commonly
74	provided without referral from another health care provider.
75	(c) "Primary care service" means the screening, assessment,
76	diagnosis, and treatment of a patient for the purpose of
77	promoting health or detecting and managing disease or injury
78	within the competency and training of the primary care provider.
79	(2) A direct primary care agreement does not constitute
80	insurance and is not subject to this code. The act of entering
81	into a direct primary care agreement does not constitute the
82	business of insurance and is not subject to this code.
83	(3) A primary care provider or an agent of a primary care
84	provider is not required to obtain a certificate of authority or
85	license under this code to market, sell, or offer to sell a
86	direct primary care agreement.
87	(4) For purposes of this section, a direct primary care
88	agreement must:
89	(a) Be in writing.
90	(b) Be signed by the primary care provider or an agent of
91	the primary care provider and the patient or the patient's legal
92	representative.
93	(c) Allow a party to terminate the agreement by written
94	notice to the other party after a period specified in the
95	agreement.
96	(d) Describe the scope of the primary care services that
97	are covered by the monthly fee.

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98	(e) Specify the monthly fee and any fees for primary care
99	services not covered by the monthly fee.
100	(f) Specify the duration of the agreement and any automatic
101	renewal provisions.
102	(g) Offer a refund to the patient of monthly fees paid in
103	advance if the primary care provider ceases to offer primary
104	care services for any reason.
105	(h) State that the agreement is not health insurance.
106	Section 10. Paragraphs (a) and (d) of subsection (3) and
107	subsections (4) and (5) of section 766.1115, Florida Statutes,
108	are amended to read:
109	766.1115 Health care providers; creation of agency
110	relationship with governmental contractors
111	(3) DEFINITIONS.—As used in this section, the term:
112	(a) "Contract" means an agreement executed in compliance
113	with this section between a health care provider and a
114	governmental contractor which allows the health care provider,
115	or any employee or agent of the health care provider, to deliver
116	health care services to low-income recipients as an agent of the
117	governmental contractor. The contract must be for volunteer,
118	uncompensated services, except as provided in paragraph (4)(g).
119	For services to qualify as volunteer, uncompensated services
120	under this section, the health care provider must receive no
121	compensation from the governmental contractor for any services
122	provided under the contract and must not bill or accept
123	compensation from the recipient, or a public or private third-
124	party payor, for the specific services provided to the low-
125	income recipients covered by the contract except as provided in
126	paragraph (4)(g). A free clinic as described in subparagraph

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127	(3) (d) 14. may receive a legislative appropriation, a grant
128	through a legislative appropriation, or a grant from a
129	governmental entity or nonprofit corporation to support the
130	delivery of such contracted services by volunteer health care
131	providers, including the employment of health care providers to
132	supplement, coordinate, or support the delivery of services by
133	volunteer health care providers. Such an appropriation or grant
134	does not constitute compensation under this paragraph from the
135	governmental contractor for services provided under the
136	contract, nor does receipt and use of the appropriation or grant
137	constitute the acceptance of compensation under this paragraph
138	for the specific services provided to the low-income recipients
139	covered by the contract.
140	(d) "Health care provider" or "provider" means:
141	1. A birth center licensed under chapter 383.
142	2. An ambulatory surgical center licensed under chapter
143	395.
144	3. A hospital licensed under chapter 395.
145	4. A physician or physician assistant licensed under
146	chapter 458.
147	5. An osteopathic physician or osteopathic physician
148	assistant licensed under chapter 459.
149	6. A chiropractic physician licensed under chapter 460.
150	7. A podiatric physician licensed under chapter 461.
151	8. A registered nurse, nurse midwife, licensed practical
152	nurse, or advanced registered nurse practitioner licensed or
153	registered under part I of chapter 464 or any facility which
154	employs nurses licensed or registered under part I of chapter
155	464 to supply all or part of the care delivered under this

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156	section.
157	9. A midwife licensed under chapter 467.
158	10. A health maintenance organization certificated under
159	part I of chapter 641.
160	11. A health care professional association and its
161	employees or a corporate medical group and its employees.
162	12. Any other medical facility the primary purpose of which
163	is to deliver human medical diagnostic services or which
164	delivers nonsurgical human medical treatment, and which includes
165	an office maintained by a provider.
166	13. A dentist or dental hygienist licensed under chapter
167	466.
168	14. A free clinic that delivers only medical diagnostic
169	services or nonsurgical medical treatment free of charge to all
170	low-income recipients.
171	15. Any other health care professional, practitioner,
172	provider, or facility under contract with a governmental
173	contractor, including a student enrolled in an accredited
174	program that prepares the student for licensure as any one of
175	the professionals listed in subparagraphs 49.
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177	The term includes any nonprofit corporation qualified as exempt
178	from federal income taxation under s. 501(a) of the Internal
179	Revenue Code, and described in s. 501(c) of the Internal Revenue
180	Code, which delivers health care services provided by licensed
181	professionals listed in this paragraph, any federally funded
182	community health center, and any volunteer corporation or
183	volunteer health care provider that delivers health care
184	services.

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185 (4) CONTRACT REQUIREMENTS. - A health care provider that 186 executes a contract with a governmental contractor to deliver 187 health care services on or after April 17, 1992, as an agent of 188 the governmental contractor, or any employee or agent of such 189 health care provider, is an agent for purposes of s. 768.28(9), 190 while acting within the scope of duties under the contract, if 191 the contract complies with the requirements of this section and 192 regardless of whether the individual treated is later found to be ineligible. A health care provider, or any employee or agent 193 194 of such health care provider, shall continue to be an agent for 195 purposes of s. 768.28(9) for 30 days after a determination of 196 ineligibility to allow for treatment until the individual 197 transitions to treatment by another health care provider. A 198 health care provider under contract with the state, or any 199 employee or agent of such health care provider, may not be named 200 as a defendant in any action arising out of medical care or 201 treatment provided on or after April 17, 1992, under contracts 202 entered into under this section. The contract must provide that: 203

(a) The right of dismissal or termination of any healthcare provider delivering services under the contract is retainedby 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

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214 involves a professional licensed by the Department of Health or 215 a facility licensed by the Agency for Health Care 216 Administration, the governmental contractor shall submit such 217 incident reports to the appropriate department or agency, which 218 shall review each incident and determine whether it involves 219 conduct by the licensee that is subject to disciplinary action. 220 All patient medical records and any identifying information 221 contained in adverse incident reports and treatment outcomes 2.2.2 which are obtained by governmental entities under this paragraph 223 are confidential and exempt from the provisions of s. 119.07(1) 224 and s. 24(a), Art. I of the State Constitution.

(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.

(g) As an agent of the governmental contractor for purposes of s. 768.28(9), while acting within the scope of duties under the contract, A health care provider licensed under chapter 466, as an agent of the governmental contractor for purposes of s.768.28(9), may allow a patient, or a parent or guardian of the

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243 patient, to voluntarily contribute a monetary amount to cover 244 costs of dental laboratory work related to the services provided 245 to the patient within the scope of duties under the contract. 246 This contribution may not exceed the actual cost of the dental 247 laboratory charges.

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.

252 (5) NOTICE OF AGENCY RELATIONSHIP.-The governmental 253 contractor must provide written notice to each patient, or the 254 patient's legal representative, receipt of which must be 255 acknowledged in writing at the initial visit, that the provider 256 is an agent of the governmental contractor and that the 257 exclusive remedy for injury or damage suffered as the result of 258 any act or omission of the provider or of any employee or agent 259 thereof acting within the scope of duties pursuant to the 260 contract is by commencement of an action pursuant to the provisions of s. 768.28. Thereafter, and with respect to any 261 262 federally funded community health center, the notice 263 requirements may be met by posting in a place conspicuous to all 264 persons a notice that the health care provider federally funded 265 community health center is an agent of the governmental 266 contractor and that the exclusive remedy for injury or damage 267 suffered as the result of any act or omission of the provider or 268 of any employee or agent thereof acting within the scope of 269 duties pursuant to the contract is by commencement of an action 270 pursuant to the provisions of s. 768.28.

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Section 11. Paragraph (b) of subsection (9) of section

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272 768.28, Florida Statutes, is amended to read: 273 768.28 Waiver of sovereign immunity in tort actions; recovery limits; limitation on attorney fees; statute of 274 275 limitations; exclusions; indemnification; risk management 276 programs.-277 (9) 278 (b) As used in this subsection, the term: 279 1. "Employee" includes any volunteer firefighter. 280 2. "Officer, employee, or agent" includes, but is not 281 limited to, any health care provider, and its employees or 282 agents, when providing services pursuant to s. 766.1115; any 283 nonprofit independent college or university located and 284 chartered in this state which owns or operates an accredited 285 medical school, and its employees or agents, when providing 286 patient services pursuant to paragraph (10)(f); and any public 287 defender or her or his employee or agent, including, among 288 others, an assistant public defender and an investigator. 289 290 291 And the title is amended as follows: Delete lines 2 - 24 292 293 and insert: 294 An act relating to the access to health care services; amending ss. 458.347 and 459.022, F.S.; revising the 295 296 authority of a licensed physician assistant to order 297 medication under the direction of a supervisory 298 physician for a specified patient; amending s. 299 464.012, F.S.; authorizing an advanced registered nurse practitioner to order medication for 300

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301 administration to a specified patient; amending s. 302 465.003, F.S.; revising the term "prescription" to exclude an order for drugs or medicinal supplies by a 303 304 licensed practitioner that is dispensed for certain 305 administration; amending s. 893.02, F.S.; revising the 306 term "administer" to include the term 307 "administration"; revising the term "prescription" to 308 exclude an order for drugs or medicinal supplies by a 309 licensed practitioner that is dispensed for certain 310 administration; amending s. 893.04, F.S.; conforming 311 provisions to changes made by act; amending s. 893.05, 312 F.S.; authorizing a licensed practitioner to authorize 313 a licensed physician assistant or advanced registered 314 nurse practitioner to order controlled substances for 315 a specified patient under certain circumstances; 316 creating s. 296.42, F.S.; directing the Department of 317 Veterans' Affairs to contract for a study to determine 318 the need and location for additional state veterans' 319 nursing homes; directing the department to submit the 320 study to the Governor and Legislature; providing study 321 criteria for ranking each county according to need; providing site selection criteria; requiring approval 322 323 of the Governor and Cabinet for site selection; 324 requiring the department to use specified studies to 325 select new nursing home sites; directing the 326 department to contract for subsequent studies and 327 submit the studies to the Governor and Legislature; 328 creating s. 624.27, F.S.; providing definitions; 329 specifying that a direct primary care agreement does

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330 not constitute insurance and is not subject to the 331 Florida Insurance Code; specifying that entering into 332 a direct primary care agreement does not constitute 333 the business of insurance and is not subject to the 334 code; providing that a health care provider is not 335 required to obtain a certificate of authority to 336 market, sell, or offer to sell a direct primary care 337 agreement; specifying criteria for a direct primary 338 care agreement; amending s. 766.1115, F.S.; redefining 339 terms relating to agency relationships with 340 governmental health care contractors; deleting an 341 obsolete date; extending sovereign immunity to 342 employees or agents of a health care provider that 343 executes a contract with a governmental contractor; 344 clarifying that a receipt of specified notice must be 345 acknowledged by a patient or the patient's 346 representative at the initial visit; requiring the 347 posting of notice that a specified health care 348 provider is an agent of a governmental contractor; 349 amending s. 768.28, F.S.; redefining the term 350 "officer, employee, or agent" to include employees or 351 agents of a health care provider;