CHAMBER ACTION

<u>Senate</u> <u>House</u>

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Representative Gonzalez offered the following:

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Amendment (with title amendment)

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Remove lines 245-1023 and insert:

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Section 3. Paragraph (a) of subsection (2) of section 381.7355, Florida Statutes, is amended, and paragraph (i) is added to subsection (3) of that section, to read:

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381.7355 Project requirements; review criteria.-

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(2) A proposal must include each of the following elements:

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(a) The purpose and objectives of the proposal, including identification of the particular racial or ethnic disparity the project will address. The proposal must address one or more of the following priority areas:

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- 1. Decreasing racial and ethnic disparities in maternal and infant mortality rates.
- 2. Decreasing racial and ethnic disparities in morbidity and mortality rates relating to cancer.
- 3. Decreasing racial and ethnic disparities in morbidity and mortality rates relating to HIV/AIDS.
- 4. Decreasing racial and ethnic disparities in morbidity and mortality rates relating to cardiovascular disease.
- 5. Decreasing racial and ethnic disparities in morbidity and mortality rates relating to diabetes.
- 6. Increasing adult and child immunization rates in certain racial and ethnic populations.
- 7. Decreasing racial and ethnic disparities in oral health care.
- 8. Decreasing racial and ethnic disparities in morbidity and mortality rates relating to sickle cell disease.
- 9. Improve neighborhood social determinants of health, such as transportation, safety, and food access, as outlined by the Centers for Disease Control and Prevention's "Tools for Putting Social Determinants of Health into Action."
 - (3) Priority shall be given to proposals that:
- (i) Incorporate policy approaches to achieve sustainable long-term improvement.
- Section 4. Subsection (4) of section 381.82, Florida Statutes, is amended, and subsection (8) is added to that section, to read:

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381.82	Ed	and	Ethel	Moore	Alzheimer's	Disease	Research
Program							

- (4) The board shall submit a fiscal-year progress report on the programs under its purview annually to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the State Surgeon General by February 15. The report must include:
- (a) For each A list of research project projects supported by grants or fellowships awarded under the program:
- 1.(b) A summary list of the research project and results or expected results of the research recipients of program grants or fellowships.
- 2. The status of the research project, including whether it has concluded or the estimated date of completion.
- 3. The amount of the grant or fellowship awarded and the estimated or actual cost of the research project.
- 4.(c) A list of principal investigators under the research project.
- 5. The title, citation, and summary of findings of a publication publications in a peer-reviewed journal resulting from the journals involving research supported by grants or fellowships awarded under the program.
- 6. The source and amount of any federal, state, or local government grants or donations or private grants or donations generated as a result of the research project.

resulting patent.

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7. The status of a patent, if any, generated from the

research project and an economic analysis of the impact of the

8. A list of postsecondary educational institutions

research project, and the number of students receiving training

disease research funding currently flowing into the state from

funded based on research supported by grants or fellowships

the prevention, diagnosis, treatment, and cure of Alzheimer's

(d) (g) Recommendations to further the mission of the

the balance of any appropriation from the General Revenue Fund

for the Ed and Ethel Moore Alzheimer's Disease Research Program

contract or committed to be expended by June 30 of the fiscal

year in which the funds are appropriated may be carried forward

which is not disbursed but which is obligated pursuant to

(b) (d) The state ranking and total amount of Alzheimer's

(e) New grants for Alzheimer's disease research which were

(c) (f) Progress toward programmatic goals, particularly in

(8) Notwithstanding s. 216.301 and pursuant to s. 216.351,

involved in the research project, a description of each

or performing research under the research project.

the National Institutes of Health.

awarded under the program.

postsecondary educational institution's involvement in the

- 91 <u>for up to 5 years after the effective date of the original</u> 92 <u>appropriation.</u>
 - Section 5. Subsection (3) of section 381.887, Florida Statutes, is amended to read:
 - 381.887 Emergency treatment for suspected opioid overdose.—
 - (3) An authorized health care practitioner may prescribe and dispense an emergency opioid antagonist to a patient or caregiver for use in accordance with this section, and pharmacists may dispense an emergency opioid antagonist <u>labeled</u> for administration by a patient or caregiver in a nonmedically supervised environment pursuant to <u>such</u> a prescription or pursuant to a nonpatient-specific standing order which must be issued in the name of the patient or caregiver, which is appropriately labeled with instructions for use.
 - (a) A nonpatient-specific standing order may not be valid for more than 48 months and may not be issued by an authorized health care practitioner employed by the dispensing pharmacist or pharmacy. A health care practitioner may not be remunerated by the dispensing pharmacist or pharmacy for issuing the standing order.
 - (b) When dispensing an emergency opioid antagonist to a patient or caregiver, a pharmacist licensed under chapter 465 must provide information that includes, but is not limited to, opioid overdose prevention, recognition, and response; safe administration and potential side effects or adverse effects of

administeri	ing an	emei	rgency	opioi	d antag	onist;	and	the	importance
of seeking	emerg	ency	medica	al car	e after	admin	istra	atior	n.

- (c) Such patient or caregiver is authorized to store and possess approved emergency opioid antagonists and, in an emergency situation when a physician is not immediately available, administer the emergency opioid antagonist to a person believed in good faith to be experiencing an opioid overdose, regardless of whether that person has a prescription for an emergency opioid antagonist.
- Section 6. Subsection (6) is added to section 381.922, Florida Statutes, to read:
- 381.922 William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program.—
- (6) The Biomedical Research Advisory Council shall submit a report relating to grants awarded under the program to the Governor, the President of the Senate, and the Speaker of the House of Representatives by December 15 each year. The report must include:
- (a) For each research project supported by grants or fellowships awarded under the program:
- 1. A summary of the research project and results or expected results of the research.
- 2. The status of the research project, including whether it has concluded or the estimated date of completion.
- 3. The amount of the grant or fellowship awarded and the estimated or actual cost of the research project.

143		4.	Α	list	of	principal	investigators	under	the	research
144	proje	ect.								

- 5. The title, citation, and summary of findings of a publication in a peer-reviewed journal resulting from the research.
- 6. The source and amount of any federal, state, or local government grants or donations or private grants or donations generated as a result of the research project.
- 7. The status of a patent, if any, generated from the research project and an economic analysis of the impact of the resulting patent.
- 8. A list of postsecondary educational institutions involved in the research project, a description of each postsecondary educational institution's involvement in the research project, and the number of students receiving training or performing research under the research project.
- (b) The state ranking and total amount of cancer research funding currently flowing into the state from the National Institutes of Health.
- (c) Progress toward programmatic goals, particularly in the prevention, diagnosis, treatment, and cure of cancer.
- (d) Recommendations to further the mission of the program.

 Section 7. Subsection (9) of section 382.003, Florida

 Statutes, is amended to read:
- 382.003 Powers and duties of the department.—The department shall:

(9) Appoint one or more suitable persons to act as subregistrars, who shall be authorized to produce and maintain paper death certificates and fetal death certificates, and to issue burial-transit permits in and for such portions of one or more districts as may be designated, and to issue certified copies of original certificates of death. A subregistrar may be removed from office by the department for neglect of or failure to perform his or her duty in accordance with this chapter. The department shall adopt rules for the issuance of certified copies of original certificates of death by subregistrars.

Section 8. Subsection (4) of section 382.025, Florida Statutes, is amended to read:

382.025 Certified copies of vital records; confidentiality; research.—

(4) CERTIFIED COPIES OF ORIGINAL CERTIFICATES.—Only the state registrar, and local registrars, and subregistrars may are authorized to issue a any certificate that which purports to be a certified copy of an original certificate of live birth, death, or fetal death. Except as provided in this section, preparing or issuing certificates is exempt from the provisions of s. 119.07(1).

Section 9. Subsection (2) of section 382.0255, Florida Statutes, is amended, and subsection (5) is added to that section, to read:

382.0255 Fees.-

- (2) The fee charged for each request for a certification of a birth record issued by the department or by the local registrar shall be subject to an additional fee of \$4, which shall be deposited in the appropriate departmental trust fund. On a quarterly basis, the department shall transfer \$1.50 to the Child Welfare Training Trust Fund created in s. 402.40. The fee charged by a subregistrar for each request for a certified copy of an original certificate of death may not exceed \$5 and shall be remitted to the department for deposit into the Planning and Evaluation Trust Fund.
- (5) Notwithstanding s. 406.06, a fee may not be charged for any determination of the cause of death under s. 406.11 or for any certification of the cause of death under s. 382.008.

Section 10. Subsection (3) of section 384.23, Florida Statutes, is amended to read:

384.23 Definitions.-

(3) "Sexually transmissible disease" means a bacterial, viral, fungal, or parasitic disease, determined by rule of the department to be sexually transmissible, to be a threat to the public health and welfare, and to be a disease for which a legitimate public interest will be served by providing for prevention, elimination, control, regulation and treatment. The department must, by rule, determine In considering which diseases are to be designated as sexually transmissible diseases, the department shall consider such diseases as chancroid, generated, granuloma inguinale, lymphogranuloma

venereum, genital herpes simplex, chlamydia, nongonococcal									
urethritis (NGU), pelvic inflammatory disease (PID)/acute									
salpingitis, syphilis, and human immune deficiency virus									
infection for designation, and shall consider the									
recommendations and classifications of the Centers for Disease									
Control $\underline{\text{and Prevention}}$ and other nationally recognized medical									
authorities <u>in that determination</u> . Not all diseases that are									
sexually transmissible need be designated for the purposes of									
this act.									

Section 11. Subsection (7) is added to section 384.27, Florida Statutes, to read:

- 384.27 Physical examination and treatment.-
- (7) (a) A health care practitioner licensed under chapter
 458 or chapter 459 or certified under s. 464.012 may provide
 expedited partner therapy if the following requirements are met:
- 1. The patient has a laboratory-confirmed or suspected clinical diagnosis of a sexually transmissible disease.
- 2. The patient indicates that he or she has a partner with whom he or she engaged in sexual activity before the diagnosis of the sexually transmissible disease.
- 3. The patient indicates that his or her partner is unable or unlikely to seek clinical services in a timely manner.
- (b) A pharmacist licensed under chapter 465 may dispense medication to a person diagnosed with a sexually transmissible disease pursuant to a prescription for the purpose of treating that person's partner, regardless of whether the person's

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- partner has been personally examined by the prescribing health care practitioner.
 - (c) A pharmacist or health care practitioner must check for potential allergic reactions, in accordance with the prevailing professional standard of care, before dispensing a prescription or providing a medication under this subsection.
 - (d) The department may adopt rules to implement this subsection.
 - Section 12. Subsections (8) and (12) of section 401.27, Florida Statutes, are amended to read:
 - 401.27 Personnel; standards and certification.-
 - (8) Each emergency medical technician certificate and each paramedic certificate will expire automatically and may be renewed if the holder meets the qualifications for renewal as established by the department. A certificate that is not renewed at the end of the 2-year period will automatically revert to an inactive status for a period not to exceed two renewal periods 180 days. Such certificate may be reactivated and renewed within the two renewal periods 180 days if the certificateholder meets all other qualifications for renewal, including continuing education requirements, and pays a \$25 late fee. The certificateholder also must pass the certification examination to reactivate the certificate during the second of the two renewal periods. Reactivation shall be in a manner and on forms prescribed by department rule.

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(12) An applicant for certification as an emergency medical technician or paramedic who is trained outside the state, or trained in the military, must provide proof of a current, nationally recognized emergency medical technician or paramedic certification or registration that is recognized by the department and based upon successful completion of a training program approved by the department as being equivalent to the most recent EMT-Basic or EMT-Paramedic National Standard Curriculum or the National EMS Education Standards of the United States Department of Transportation and hold a current certificate of successful course completion in cardiopulmonary resuscitation (CPR) or advanced cardiac life support for emergency medical technicians or paramedics, respectively, to be eligible for the certification examination. The applicant must successfully complete the certification examination within 2 years after the date of the receipt of his or her application by the department. After 2 years, the applicant must submit a new application, meet all eligibility requirements, and submit all fees to reestablish eligibility to take the certification examination.

Section 13. Subsection (7) of section 456.013, Florida Statutes, is amended to read:

456.013 Department; general licensing provisions.-

(7) The boards, or the department when there is no board, shall require the completion of a 2-hour course relating to prevention of medical errors as part of the biennial licensure

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and renewal process. The 2-hour course counts toward shall count towards the total number of continuing education hours required for the profession. The course <u>must shall</u> be approved by the board or department, as appropriate, and <u>must shall</u> include a study of root-cause analysis, error reduction and prevention, and patient safety. In addition, the course approved by the Board of Medicine and the Board of Osteopathic Medicine <u>must shall</u> include information relating to the five most misdiagnosed conditions during the previous biennium, as determined by the board. If the course is being offered by a facility licensed pursuant to chapter 395 for its employees, the board may approve up to 1 hour of the 2-hour course to be specifically related to error reduction and prevention methods used in that facility.

Section 14. Subsections (3) and (4) of section 456.024, Florida Statutes, are amended to read:

456.024 Members of <u>United States</u> Armed Forces in good standing with administrative boards or the department; spouses; licensure.—

- (3) (a) A person is eligible for licensure as a health care practitioner in this state if he or she:
- $\underline{1.}$ who Serves or has served as a health care practitioner in the United States Armed Forces, $\underline{\text{the}}$ United States Reserve Forces, or the National Guard;
- $\underline{2.}$ or a person who Serves or has served on active duty with the United States Armed Forces as a health care practitioner in the United States Public Health Service; or

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3. Is a health care practitioner in another state, the District of Columbia, or a possession or territory of the United States and is the spouse of a person serving on active duty with the United States Armed Forces is eligible for licensure in this state.

- The department shall develop an application form, and each board, or the department if there is no board, shall waive the application fee, licensure fee, and unlicensed activity fee for such applicants. For purposes of this subsection, "health care practitioner" means a health care practitioner as defined in s. 456.001 and a person licensed under part III of chapter 401 or part IV of chapter 468.
- (b) (a) The board, or the department if there is no board, shall issue a license to practice in this state to a person who:
 - 1. Submits a complete application.
- 2. If he or she is member of the United States Armed Forces, submits proof that he or she has received Receives an honorable discharge within 6 months before, or will receive an honorable discharge within 6 months after, the date of submission of the application.
- 3.a. Holds an active, unencumbered license issued by another state, the District of Columbia, or a possession or territory of the United States and who has not had disciplinary action taken against him or her in the 5 years preceding the date of submission of the application;

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 b. Is a military health care practitioner in a profession
for which licensure in a state or jurisdiction is not required
to practice in the United States Armed Forces, if he or she
submits to the department evidence of military training or
experience substantially equivalent to the requirements for
licensure in this state in that profession and evidence that he
or she has obtained a passing score on the appropriate
examination of a national or regional standards organization if
required for licensure in this state; or

- c. Is the spouse of a person serving on active duty in the United States Armed Forces and is a health care practitioner in a profession for which licensure in another state or jurisdiction is not required, if he or she submits to the department evidence of training or experience substantially equivalent to the requirements for licensure in this state in that profession and evidence that he or she has obtained a passing score on the appropriate examination of a national or regional standards organization if required for licensure in this state.
- 4. Attests that he or she is not, at the time of submission of the application, the subject of a disciplinary proceeding in a jurisdiction in which he or she holds a license or by the United States Department of Defense for reasons related to the practice of the profession for which he or she is applying.

- 5. Actively practiced the profession for which he or she is applying for the 3 years preceding the date of submission of the application.
- 6. Submits a set of fingerprints for a background screening pursuant to s. 456.0135, if required for the profession for which he or she is applying.

The department shall verify information submitted by the applicant under this subsection using the National Practitioner Data Bank.

- (c) (b) Each applicant who meets the requirements of this subsection shall be licensed with all rights and responsibilities as defined by law. The applicable board, or the department if there is no board, may deny an application if the applicant has been convicted of or pled guilty or nolo contendere to, regardless of adjudication, any felony or misdemeanor related to the practice of a health care profession regulated by this state.
- (d) (e) An applicant for initial licensure under this subsection must submit the information required by ss. 456.039(1) and 456.0391(1) no later than 1 year after the license is issued.
- (4) (a) The board, or the department if there is no board, may issue a temporary professional license to the spouse of an active duty member of the Armed Forces of the United States who submits to the department:

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	Amenament No.
400	1. A completed application upon a form prepared and
401	furnished by the department in accordance with the board's
402	rules;
403	2. The required application fee;
404	3. Proof that the applicant is married to a member of the
405	Armed Forces of the United States who is on active duty;
406	4. Proof that the applicant holds a valid license for the
407	profession issued by another state, the District of Columbia, or
408	a possession or territory of the United States, and is not the
409	subject of any disciplinary proceeding in any jurisdiction in
410	which the applicant holds a license to practice a profession
411	regulated by this chapter;
412	5. Proof that the applicant's spouse is assigned to a duty
413	station in this state pursuant to the member's official active
414	duty military orders; and
415	6. Proof that the applicant would otherwise be entitled to

- 6. Proof that the applicant would otherwise be entitled to full licensure under the appropriate practice act, and is eligible to take the respective licensure examination as required in Florida.
- (b) The applicant must also submit to the Department of Law Enforcement a complete set of fingerprints. The Department of Law Enforcement shall conduct a statewide criminal history check and forward the fingerprints to the Federal Bureau of Investigation for a national criminal history check.
- (c) Each board, or the department if there is no board, shall review the results of the state and federal criminal

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- (d) The applicant shall pay the cost of fingerprint processing. If the fingerprints are submitted through an authorized agency or vendor, the agency or vendor shall collect the required processing fees and remit the fees to the Department of Law Enforcement.
- (e) The department shall set an application fee, which may not exceed the cost of issuing the license.
- (f) A temporary license expires 12 months after the date of issuance and is not renewable.
- (g) An applicant for a temporary license under this subsection is subject to the requirements under s. 456.013(3)(a) and (c).
- (h) An applicant shall be deemed ineligible for a temporary license pursuant to this section if the applicant:
- 1. Has been convicted of or pled nolo contendere to, regardless of adjudication, any felony or misdemeanor related to the practice of a health care profession;
- 2. Has had a health care provider license revoked or suspended from another of the United States, the District of Columbia, or a United States territory;
- 3. Has been reported to the National Practitioner Data

 Bank, unless the applicant has successfully appealed to have his or her name removed from the data bank; or

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- (i) The board, or department if there is no board, may revoke a temporary license upon finding that the individual violated the profession's governing practice act.
- (j) An applicant who is issued a temporary professional license to practice as a dentist pursuant to this section must practice under the indirect supervision, as defined in s. 466.003, of a dentist licensed pursuant to chapter 466.
- Section 15. Section 456.0241, Florida Statutes, is created to read:
- 456.0241 Temporary certificate for active duty military health care practitioners.—
 - (1) As used in this section, the term:
 - (a) "Military health care practitioner" means:
- 1. A person practicing as a health care practitioner as defined in s. 456.001, as a person licensed under part III of chapter 401, or as a person licensed under part IV of chapter 468 who is serving on active duty in the United States Armed Forces, the United States Reserve Forces, or the National Guard; or
- 2. A person who is serving on active duty in the United States Armed Forces and serving in the United States Public Health Service.

(b) "Military platform" means a military training
agreement with a nonmilitary health care provider that is
designed to develop and support medical, surgical, or other
health care treatment opportunities in a nonmilitary health care
provider setting to authorize a military health care
practitioner to develop and maintain the technical proficiency
necessary to meet the present and future health care needs of
the United States Armed Forces. Such agreements may include
Training Affiliation Agreements and External Resource Sharing
Agreements.

- (2) The department may issue a temporary certificate to an active duty military health care practitioner to practice in a regulated profession in this state if the applicant:
- (a) Submits proof that he or she will be practicing pursuant to a military platform.
- (b) Submits a complete application and a nonrefundable application fee.
- (c) Holds an active, unencumbered license to practice as a health care professional issued by another state, the District of Columbia, or a possession or territory of the United States or is a military health care practitioner in a profession for which licensure in a state or jurisdiction is not required for practice in the United States Armed Forces and provides evidence of military training and experience substantially equivalent to the requirements for licensure in this state in that profession.

(d) Attests that he or she is not, at the time of
submission of the application, the subject of a disciplinary
proceeding in a jurisdiction in which he or she holds a license
or by the United States Department of Defense for reasons
related to the practice of the profession for which he or she is
applying.

- (e) Has been determined to be competent in the profession for which he or she is applying.
- (f) Submits a set of fingerprints for a background screening pursuant to s. 456.0135, if required for the profession for which he or she is applying.

- The department shall verify information submitted by the applicant under this subsection using the National Practitioner Data Bank.
- (3) A temporary certificate issued under this section expires 6 months after issuance but may be renewed upon proof of continuing military orders for active duty assignment in this state and evidence that the military health care practitioner continues to be a military platform participant.
- (4) A military health care practitioner applying for a temporary certificate under this section is exempt from ss.

 456.039-456.046. All other provisions of this chapter apply to such military health care practitioner.
- (5) An applicant for a temporary certificate under this section is deemed ineligible if he or she:

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528	(a) Has been convicted of or pled guilty or nolo
529	contendere to, regardless of adjudication, any felony or
530	misdemeanor related to the practice of a health care profession;
531	(b) Has had a health care provider license revoked or
532	suspended in another state, the District of Columbia, or a
533	possession or territory of the United States;
534	(c) Has failed to obtain a passing score on the Florida
535	examination required to receive a license to practice the
536	profession for which he or she is applying; or
537	(d) Is under investigation in another jurisdiction for an
538	act that would constitute a violation of the applicable
539	licensing chapter or this chapter until the investigation is
540	complete and all charges against him or her are disposed of by
541	dismissal, nolle prosequi, or acquittal.
542	(6) The department shall, by rule, set an application fee
543	not to exceed \$50 and a renewal fee not to exceed \$50.
544	(7) Application shall be made on a form prescribed and
545	furnished by the department.
546	(8) The department shall adopt rules to implement this
547	section.
548	Section 16. Section 456.0361, Florida Statutes, is created
549	to read:
550	456.0361 Compliance with continuing education
551	requirements
552	(1) The department shall establish an electronic

continuing education tracking system to monitor licensee

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compliance with applicable continuing education requirements and to determine whether a licensee is in full compliance with the requirements at the time of his or her application for license renewal. The tracking system shall be integrated into the department's licensure and renewal process.

- (2) The department may not renew a license until the licensee complies with all applicable continuing education requirements. This subsection does not prohibit the department or the boards from imposing additional penalties under the applicable professional practice act or applicable rules for failure to comply with continuing education requirements.
- (3) The department may adopt rules to implement this section.

Section 17. Subsection (20) 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.—

when there is no board, may temporarily or permanently appoint a person or entity as a custodian of medical records in the event of the death of a practitioner, the mental or physical incapacitation of <u>a</u> the practitioner, or the abandonment of medical records by a practitioner. <u>Such The</u> custodian appointed shall comply with <u>all provisions of</u> this section. The department may contract with a third party to provide these services under

the confidentiality and disclosure requirements of this section, including the release of patient records.

Section 18. Subsection (2) of section 456.0635, Florida Statutes, is amended to read:

456.0635 Health care fraud; disqualification for license, certificate, or registration.—

- (2) Each board within the jurisdiction of the department, or the department if there is no board, shall refuse to admit a candidate to any examination and refuse to issue a license, certificate, or registration to any applicant if the candidate or applicant or any principal, officer, agent, managing employee, or affiliated person of the applicant:
- (a) Has been convicted of, or entered a plea of guilty or nolo contendere to, regardless of adjudication, a felony under chapter 409, chapter 817, or chapter 893, or a similar felony offense committed in another state or jurisdiction, unless the candidate or applicant has successfully completed a drug court program for that felony and provides proof that the plea has been withdrawn or the charges have been dismissed. Any such conviction or plea shall exclude the applicant or candidate from licensure, examination, certification, or registration unless the sentence and any subsequent period of probation for such conviction or plea ended:
- 1. For felonies of the first or second degree, more than 15 years before the date of application.

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- 2. For felonies of the third degree, more than 10 years before the date of application, except for felonies of the third degree under s. 893.13(6)(a).
- 3. For felonies of the third degree under s. 893.13(6)(a), more than 5 years before the date of application;
- (b) Has been convicted of, or entered a plea of guilty or nolo contendere to, regardless of adjudication, a felony under 21 U.S.C. ss. 801-970, or 42 U.S.C. ss. 1395-1396, unless the sentence and any subsequent period of probation for such conviction or plea ended more than 15 years before the date of the application;
- (c) Has been terminated for cause from the Florida Medicaid program pursuant to s. 409.913, unless the candidate or applicant has been in good standing with the Florida Medicaid program for the most recent 5 years;
- (d) Has been terminated for cause, pursuant to the appeals procedures established by the state, from any other state Medicaid program, unless the candidate or applicant has been in good standing with a state Medicaid program for the most recent 5 years and the termination occurred at least 20 years before the date of the application; or
- (e) Is currently listed on the United States Department of Health and Human Services Office of Inspector General's List of Excluded Individuals and Entities.

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This subsection does not apply to candidates or applicants for initial licensure or certification who were enrolled in an educational or training program on or before July 1, 2009, which was recognized by a board or, if there is no board, recognized by the department, and who applied for licensure after July 1, 2012.

Section 19. Subsection (3) of section 457.107, Florida Statutes, is amended to read:

457.107 Renewal of licenses; continuing education.-

The board shall by rule prescribe by rule continuing education requirements of up to, not to exceed 30 hours biennially, as a condition for renewal of a license. All education programs that contribute to the advancement, extension, or enhancement of professional skills and knowledge related to the practice of acupuncture, whether conducted by a nonprofit or profitmaking entity, are eligible for approval. The continuing professional education requirements must be in acupuncture or oriental medicine subjects, including, but not limited to, anatomy, biological sciences, adjunctive therapies, sanitation and sterilization, emergency protocols, and diseases. The board may $\frac{\text{shall have the authority to}}{\text{set a fee of up to}_{\boldsymbol{\tau}}}$ not to exceed \$1007 for each continuing education provider. The licensee shall retain in his or her records the certificates of completion of continuing professional education requirements to prove compliance with this subsection. The board may request such documentation without cause from applicants who are

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selected at random. All national and state acupuncture and oriental medicine organizations and acupuncture and oriental medicine schools are approved to provide continuing professional education in accordance with this subsection.

Section 20. Paragraph (e) of subsection (4) of section 458.347, Florida Statutes, is amended to read:

458.347 Physician assistants.-

- (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.-
- (e) A supervisory physician may delegate to a fully licensed physician assistant the authority to prescribe or dispense any medication used in the supervisory physician's practice unless such medication is listed on the formulary created pursuant to paragraph (f). A fully licensed physician assistant may only prescribe or dispense such medication under the following circumstances:
- 1. A physician assistant must clearly identify to the patient that he or she is a physician assistant and. Furthermore, the physician assistant must inform the patient that the patient has the right to see the physician before a prior to any prescription is being prescribed or dispensed by the physician assistant.
- 2. The supervisory physician must notify the department of his or her intent to delegate, on a department-approved form, before delegating such authority and notify the department of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a

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supervising physician who is registered as a dispensing practitioner in compliance with s. 465.0276.

- 3. The physician assistant must complete file with the department a signed affidavit that he or she has completed a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal application.
- 4. The department may issue a prescriber number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the foregoing requirements of this paragraph. The physician assistant is shall not be required to independently register pursuant to s. 465.0276.
- 5. The prescription must be written in a form that complies with chapter 499 and, in addition to the supervisory physician's name, address, and telephone number, must contain; in addition to the supervisory physician's name, address, and telephone number, the physician assistant's prescriber number. Unless it is a drug or drug sample dispensed by the physician assistant, the prescription must be filled in a pharmacy permitted under chapter 465 and must be dispensed in that pharmacy by a pharmacist licensed under chapter 465. The inclusion appearance of the prescriber number creates a presumption that the physician assistant is authorized to prescribe the medicinal drug and the prescription is valid.

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- 707 6. The physician assistant must note the prescription or dispensing of medication in the appropriate medical record.
 - Section 21. Paragraph (e) of subsection (4) of section 459.022, Florida Statutes, is amended to read:
 - 459.022 Physician assistants.-
 - (4) PERFORMANCE OF PHYSICIAN ASSISTANTS.-
 - (e) A supervisory physician may delegate to a fully licensed physician assistant the authority to prescribe or dispense any medication used in the supervisory physician's practice unless such medication is listed on the formulary created pursuant to s. 458.347. A fully licensed physician assistant may only prescribe or dispense such medication under the following circumstances:
 - 1. A physician assistant must clearly identify to the patient that she or he is a physician assistant and. Furthermore, the physician assistant must inform the patient that the patient has the right to see the physician before a prior to any prescription is being prescribed or dispensed by the physician assistant.
 - 2. The supervisory physician must notify the department of her or his intent to delegate, on a department-approved form, before delegating such authority and notify the department of any change in prescriptive privileges of the physician assistant. Authority to dispense may be delegated only by a supervisory physician who is registered as a dispensing practitioner in compliance with s. 465.0276.

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- 3. The physician assistant must complete file with the department a signed affidavit that she or he has completed a minimum of 10 continuing medical education hours in the specialty practice in which the physician assistant has prescriptive privileges with each licensure renewal application.
- 4. The department may issue a prescriber number to the physician assistant granting authority for the prescribing of medicinal drugs authorized within this paragraph upon completion of the foregoing requirements of this paragraph. The physician assistant is shall not be required to independently register pursuant to s. 465.0276.
- 5. The prescription must be written in a form that complies with chapter 499 and, in addition to the supervisory physician's name, address, and telephone number, must contain; in addition to the supervisory physician's name, address, and telephone number, the physician assistant's prescriber number. Unless it is a drug or drug sample dispensed by the physician assistant, the prescription must be filled in a pharmacy permitted under chapter 465, and must be dispensed in that pharmacy by a pharmacist licensed under chapter 465. The inclusion appearance of the prescriber number creates a presumption that the physician assistant is authorized to prescribe the medicinal drug and the prescription is valid.
- 6. The physician assistant must note the prescription or dispensing of medication in the appropriate medical record.

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758 Section 22. Subsection (7) is added to section 460.402, 759 Florida Statutes, to read:

460.402 Exceptions.—The provisions of this chapter shall not apply to:

- (7) A chiropractic physician who holds an active license in another state, the District of Columbia, or a possession or territory of the United States and is performing chiropractic procedures or demonstrating equipment or supplies for educational purposes at a board-approved continuing education program.
- Section 23. Subsection (3) of section 463.007, Florida Statutes, is amended to read:

463.007 Renewal of license; continuing education.-

Unless otherwise provided by law, the board shall require

licensees to periodically demonstrate his or her their

professional competence, as a condition of renewal of a license,

by completing up to 30 hours of continuing education during the

2-year period preceding license renewal. For certified

optometrists, the 30-hour continuing education requirement

includes shall include 6 or more hours of approved transcript
quality coursework in ocular and systemic pharmacology and the

diagnosis, treatment, and management of ocular and systemic

conditions and diseases during the 2-year period preceding

application for license renewal.

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Section 24. Subsection (7) of section 464.203, Florida
Statutes, is amended to read:

464.203 Certified nursing assistants; certification requirement.—

- (7) A certified nursing assistant shall complete 24 12 hours of inservice training during each biennium calendar year. The certified nursing assistant shall maintain 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 25. <u>Section 464.2085</u>, Florida Statutes, is repealed.

Section 26. Subsection (1) of section 465.009, Florida Statutes, is amended to read:

465.009 Continuing professional pharmaceutical education.-

- (1) No license renewal shall be issued by the department until the licensee submits proof satisfactory to the board that during the 2 years prior to her or his application for renewal the licensee has participated in not less than 30 hours of continuing professional pharmaceutical education in courses approved by the board.
- (a) Each pharmacist shall complete, as a part of the 30 hours of continuing professional pharmaceutical education required for biennial licensure renewal, a training program approved by the board regarding, but not limited to, proper

809	medical	recor	d documer	ntation	and	patient	educat	ion	procedure	s
810	relatino	g to ti	he disper	nsing of	eme	ergency	opioid	anta	agonists.	

- (b) The board shall adopt rules regarding the content and length of the training program required in paragraph (a).
- Section 27. Section 465.027, Florida Statutes, is amended to read:

465.027 Exceptions.

- (1) This chapter shall not be construed to prohibit the sale of home remedies or preparations commonly known as patents or proprietary preparations, when such are sold only in original or unbroken packages, nor shall this chapter be construed to prevent businesses from engaging in the sale of sundries or patents or proprietary preparations.
- (2) This chapter shall not apply to a manufacturer, or its agent, holding an active permit as a manufacturer under chapter 499 and engaged solely in the manufacture or distribution of dialysate, drugs, or devices necessary to perform home renal dialysis on patients with chronic kidney failure, if the dialysate, drugs, or devices are:
- (a) Approved or cleared by the United States Food and Drug Administration; and
- (b) Delivered in the original, sealed packaging after receipt of a physician's order to dispense to:
- 1. A patient with chronic kidney failure, or the patient's designee, for the patient's self-administration of the dialysis therapy; or

2. A health care practitioner or an institution for administration or delivery of the dialysis therapy to a patient with chronic kidney failure.

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TITLE AMENDMENT

Remove lines 11-103 and insert: courses; amending s. 381.7355, F.S.; revising the review criteria for Closing the Gap grant proposals; amending s. 381.82, F.S.; revising the reporting requirements for the Alzheimer's Disease Research Grant Advisory Board under the Ed and Ethel Moore Alzheimer's Disease Research Program; providing for the carryforward for a limited period of any unexpended balance of an appropriation for the program; amending s. 381.877, F.S.; providing that a pharmacist may dispense an emergency opioid antagonist pursuant to a prescription or a non-patient specific standing order for an auto injection delivery system or an intranasal delivery system; prohibiting health care practitioners employed by the pharmacist from issuing a non-patient specific standing order for an emergency opioid antagonist; prohibiting a health care practitioner from receiving remuneration for issuing a non-patient specific standing order for an emergency opioid antagonist; requiring pharmacists dispensing

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emergency opioid antagonists to provide certain information to the patient or caregiver; amending s. 381.922, F.S.; providing reporting requirements for the Biomedical Research Advisory Council under the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program; amending s. 382.003, F.S.; authorizing subregistrars to issue certified copies of original certificates of death; requiring the department to adopt rules; amending s. 382.025, F.S.; authorizing a subregistrar to issue a certified copy of an original certificate of live birth, death, or fetal death; amending s. 382.0255, F.S.; providing for the charge and distribution of a fee for a certified copy of an original certificate of death; prohibiting a fee for a determination or certification of the cause of death under certain provisions; amending s. 384.23, F.S.; revising the factors to be considered in designating a condition as a sexually transmissible disease; amending s. 384.27, F.S.; authorizing certain health care practitioners to provide partner therapy under certain conditions; authorizing the department to adopt rules; amending s. 401.27, F.S.; increasing the length of time that an emergency medical technician or paramedic certificate may remain in an inactive status; revising the requirements for reactivating and renewing such a certificate; revising

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eligibility for certification; deleting a requirement that applicants successfully complete a certification examination within a specified timeframe; amending s. 456.013, F.S.; revising course requirements for renewing a certain license; amending s. 456.024, F.S.; revising the eligibility criteria for a member of the United States Armed Forces, the United States Reserve Forces, or the National Guard and the spouse of an active duty military member to be issued a license to practice as a health care practitioner in this state; deleting provisions relating to temporary professional licensure for spouses of active duty members of the United States Armed Forces; creating s. 456.0241, F.S.; providing definitions; providing for issuance of a temporary certificate under certain conditions for certain military health care practitioners; providing for the automatic expiration of the temporary certificate unless renewed; providing for application and renewal fees; requiring the department to adopt rules; creating s. 456.0361, F.S.; requiring the department to establish an electronic continuing education tracking system; prohibiting the department from renewing a license unless the licensee has complied with all continuing education requirements; authorizing the department to adopt rules; amending s. 456.057, F.S.; requiring a person or entity appointed

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by t	he board as a custodian of medical records to be
appr	oved by the department; authorizing the department
to c	contract with a third party to provide custodial
serv	rices; amending s. 456.0635, F.S.; deleting a
prov	rision on applicability relating to the issuance of
lice	nses; amending s. 457.107, F.S.; deleting a
prov	rision authorizing the Board of Acupuncture to
requ	est certain documentation from applicants;
amen	ding s. 458.347, F.S.; deleting a requirement that
a ph	ysician assistant file a signed affidavit with the
depa	rtment; amending s. 459.022, F.S.; deleting a
requ	irement that a physician assistant file a signed
affi	davit with the department; amending s. 460.402,
F.S.	; providing an additional exception to licensure
requ	irements for chiropractic physicians; amending s.
463.	007, F.S.; making technical changes; amending s.
464.	203, F.S.; revising inservice training
requ	irements for certified nursing assistants;
repe	ealing s. 464.2085, F.S., relating to the Council
on C	Certified Nursing Assistants; amending s. 465.009,
prov	riding training requirements for pharmacists
rela	ted to opioid antagonist dispensing; authorizing
the	department to adopt rules; amending 465.027, F.S.;
prov	riding an additional exception to pharmacy
regu	lations for manufacturers of dialysis drugs or
supp	lies; amending s. 465.0276, F.S.; deleting a

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