1	A bill to be entitled
2	An act relating to health care practitioner licensure;
3	amending s. 456.076, F.S.; revising provisions related
4	to impaired practitioner programs; providing
5	definitions; deleting a requirement that the
6	Department of Health designate approved programs by
7	rule; deleting a requirement authorizing the
8	department to adopt by rule the manner in which
9	consultants work with the department; authorizing,
10	rather than requiring, the department to retain one or
11	more consultants to operate its impaired practitioner
12	program; requiring the department to establish the
13	terms and conditions of the program by contract;
14	providing contract terms; requiring consultants to
15	establish the terms of monitoring impaired
16	practitioners; authorizing consultants to consider the
17	recommendations of certain persons in establishing the
18	terms of monitoring; authorizing consultants to modify
19	monitoring terms under certain circumstances;
20	requiring consultants to assist the department and
21	licensure boards on certain matters; requiring the
22	department to refer practitioners to consultants under
23	certain circumstances; authorizing consultants to
24	withhold certain information about self-reporting
25	participants from the department under certain
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26 circumstances; requiring consultants to disclose all 27 information relating to practitioners who are 28 terminated from the program for specified reasons; 29 providing that all information obtained by a 30 consultant retains its confidential or exempt status; 31 providing that consultants, and certain agents of 32 consultants, may not be held liable financially or 33 have a cause of action for damages brought against them for disclosing certain information or for any 34 35 other act or omission relating to the program; 36 authorizing consultants to contract with a school or 37 program to provide services to certain students; amending s. 456.0635, F.S.; revising grounds for 38 39 refusing to issue or renew a license, certificate, or 40 registration in a health care profession; providing 41 applicability; amending ss. 401.411, 456.072, 457.109, 42 458.331, 459.015, 460.413, 461.013, 462.14, 463.016, 43 464.018, 465.016, 466.028, 467.203, 468.217, 468.3101, and 483.825, F.S.; providing that an impaired 44 45 practitioner may be reported to a consultant rather than the department under certain circumstances; 46 amending ss. 455.227, 464.204, and 474.221, F.S.; 47 48 conforming provisions to changes made by the act; providing effective dates. 49

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51	Be It Enacted by the Legislature of the State of Florida:
52	
53	Section 1. Section 456.076, Florida Statutes, is amended
54	to read:
55	456.076 Impaired practitioner programs Treatment programs
56	for impaired practitioners
57	(1) As used in this section, the term:
58	(a) "Consultant" means the individual or entity who
59	operates an approved impaired practitioner program pursuant to a
60	contract with the department and who is retained by the
61	department as provided in subsection (2).
62	(b) "Evaluator" means a state-licensed or nationally
63	certified individual who has been approved by a consultant or
64	the department, who has completed an evaluator training program
65	established by the consultant, and who is therefore authorized
66	to evaluate practitioners as part of an impaired practitioner
67	program.
68	(c) "Impaired practitioner" means a practitioner with an
69	impairment.
70	(d) "Impaired practitioner program" means a program
71	established by the department by contract with one or more
72	consultants to serve impaired and potentially impaired
73	practitioners for the protection of the health, safety, and
74	welfare of the public.
75	(e) "Impairment" means a potentially impairing health
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76 condition that is the result of the misuse or abuse of alcohol, 77 drugs, or both, or a mental or physical condition that could 78 affect a practitioner's ability to practice with skill and 79 safety. 80 (f) "Inability to progress" means a determination by a 81 consultant based on a participant's response to treatment and 82 prognosis that the participant is unable to safely practice 83 despite compliance with treatment requirements and his or her 84 participant contract. 85 (g) "Material noncompliance" means an act or omission by a 86 participant in violation of his or her participant contract as 87 determined by the department or consultant. "Participant" means a practitioner who is 88 (h) 89 participating in the impaired practitioner program by having 90 entered into a participant contract. A practitioner ceases to be 91 a participant when the participant contract is successfully 92 completed or is terminated for any reason. (i) "Participant contract" means a formal written document 93 94 outlining the requirements established by a consultant for a 95 participant to successfully complete the impaired practitioner 96 program, including the participant's monitoring plan. 97 (j) "Practitioner" means a person licensed, registered, 98 certified, or regulated by the department under part III of 99 chapter 401; chapter 457; chapter 458; chapter 459; chapter 460; 100 chapter 461; chapter 462; chapter 463; chapter 464; chapter 465;

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101 chapter 466; chapter 467; part I, part II, part III, part V, 102 part X, part XIII, or part XIV of chapter 468; chapter 478; 103 chapter 480; part III or part IV of chapter 483; chapter 484; chapter 486; chapter 490; or chapter 491; or an applicant for a 104 license, registration, or certification under the same laws. 105 106 "Referral" means a practitioner who has been referred, (k) either as a self-referral or otherwise, or reported to a 107 108 consultant for impaired practitioner program services, but who 109 is not under a participant contract. 110 "Treatment program" means a department-approved or (1) consultant-approved residential, intensive outpatient, partial 111 112 hospitalization, or other program through which an impaired 113 practitioner is treated based on the impaired practitioner's 114 diagnosis and the treatment plan approved by the consultant. 115 "Treatment provider" means a department-approved or (m) 116 consultant-approved residential state-licensed or nationally 117 certified individual who provides treatment to an impaired practitioner based on the practitioner's individual diagnosis 118 119 and a treatment plan approved by the consultant For professions 120 that do not have impaired practitioner programs provided for in 121 their practice acts, the department shall, by rule, designate 122 approved impaired practitioner programs under this section. The department may adopt rules setting forth appropriate criteria 123 for approval of treatment providers. The rules may specify the 124 125 manner in which the consultant, retained as set forth in

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126	subsection (2), works with the department in intervention,
127	requirements for evaluating and treating a professional,
128	requirements for continued care of impaired professionals by
129	approved treatment providers, continued monitoring by the
130	consultant of the care provided by approved treatment providers
131	regarding the professionals under their care, and requirements
132	related to the consultant's expulsion of professionals from the
133	program.
134	(2) (a) The department <u>may</u> shall retain one or more
135	impaired practitioner consultants to operate its impaired
136	practitioner program. Each consultant who are each licensees
137	under the jurisdiction of the Division of Medical Quality
138	Assurance within the department and who must be:
139	(a)1. A practitioner or recovered practitioner licensed
140	under chapter 458, chapter 459, or part I of chapter 464; or
141	(b) 2. An entity that employs:
142	<u>1.</u> a. A medical director who <u>is</u> must be a practitioner or
143	recovered practitioner licensed under chapter 458 or chapter
144	459; or
145	2.b. An executive director who is must be a registered
146	nurse or a recovered registered nurse licensed under part I of
147	chapter 464.
148	(3) The terms and conditions of the impaired practitioner
149	program must be established by the department by contract with a
150	consultant for the protection of the health, safety, and welfare
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151	of the public and must provide, at a minimum, that the
152	<pre>consultant:</pre>
153	(a) Accepts referrals;
154	(b) Arranges for the evaluation and treatment of impaired
155	practitioners by a treatment provider when the consultant deems
156	such evaluation and treatment necessary;
157	(c) Monitors the recovery progress and status of impaired
158	practitioners to ensure that such practitioners are able to
159	practice their profession with skill and safety. Such monitoring
160	must continue until the consultant or department concludes that
161	monitoring by the consultant is no longer required for the
162	protection of the public or until the practitioner's
163	participation in the program is terminated for material
	noncompliance or inability to progress; and
164	noncompitance of inability to progress, and
164 165	(d) Does not directly evaluate, treat, or otherwise
165	(d) Does not directly evaluate, treat, or otherwise
165 166	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the
165 166 167	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the impaired practitioner program.
165 166 167 168	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the impaired practitioner program. (4) The department shall specify, in its contract with
165 166 167 168 169	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the impaired practitioner program. (4) The department shall specify, in its contract with each consultant, the types of licenses, registrations, or
165 166 167 168 169 170	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the impaired practitioner program. (4) The department shall specify, in its contract with each consultant, the types of licenses, registrations, or certifications of the practitioners to be served by that
165 166 167 168 169 170 171	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the impaired practitioner program. (4) The department shall specify, in its contract with each consultant, the types of licenses, registrations, or certifications of the practitioners to be served by that consultant.
165 166 167 168 169 170 171 172	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the impaired practitioner program. (4) The department shall specify, in its contract with each consultant, the types of licenses, registrations, or certifications of the practitioners to be served by that consultant. (5) A consultant shall enter into a participant contract
165 166 167 168 169 170 171 172 173	(d) Does not directly evaluate, treat, or otherwise provide patient care to a practitioner in the operation of the impaired practitioner program. (4) The department shall specify, in its contract with each consultant, the types of licenses, registrations, or certifications of the practitioners to be served by that consultant. (5) A consultant shall enter into a participant contract with an impaired practitioner and shall establish the terms of

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176 consultant may consider the recommendations of one or more 177 approved evaluators, treatment programs, or treatment providers. 178 A consultant may modify the terms of monitoring if the consultant concludes, through the course of monitoring, that 179 180 extended, additional, or amended terms of monitoring are 181 required for the protection of the health, safety, and welfare 182 of the public. 183 (6) (b) A An entity retained as an impaired practitioner consultant under this section which employs a medical director 184 185 or an executive director is not required to be licensed as a substance abuse provider or mental health treatment provider 186 187 under chapter 394, chapter 395, or chapter 397 for purposes of 188 providing services under this program. 189 (7) (c)1. Each The consultant shall assist the department 190 and licensure boards on matters of impaired practitioners, 191 including the determination of probable cause panel and the 192 department in carrying out the responsibilities of this section. 193 This includes working with department investigators to determine 194 whether a practitioner is, in fact, impaired, as specified in 195 the consultant's contract with the department. 196 2. The consultant may contract with a school or program to provide services to a student enrolled for the purpose of 197 preparing for licensure as a health care practitioner as defined 198 199 in this chapter or as a veterinarian under chapter 474 if the 200 student is allegedly impaired as a result of the misuse or abuse Page 8 of 39

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201 of alcohol or drugs, or both, or due to a mental or physical 202 condition. The department is not responsible for paying for the 203 care provided by approved treatment providers or a consultant. 204 (d) A medical school accredited by the Liaison Committee 205 on Medical Education or the Commission on Osteopathic College 206 Accreditation, or another school providing for the education of 207 students enrolled in preparation for licensure as a health care 208 practitioner as defined in this chapter or a veterinarian under chapter 474 which is governed by accreditation standards 209 210 requiring notice and the provision of due process procedures to 211 students, is not liable in any civil action for referring a 212 student to the consultant retained by the department or for 213 disciplinary actions that adversely affect the status of a 214 student when the disciplinary actions are instituted in 215 reasonable reliance on the recommendations, reports, or 216 conclusions provided by such consultant, if the school, in 217 referring the student or taking disciplinary action, adheres to 218 the due process procedures adopted by the applicable 219 accreditation entities and if the school committed no 220 intentional fraud in carrying out the provisions of this 221 section. 222 (8) (3) Before issuing an approval of, or intent to deny,

223 <u>an application for licensure</u>, each board and profession within 224 the Division of Medical Quality Assurance may delegate to its 225 chair or other designee its authority to determine, before

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226 certifying or declining to certify an application for licensure 227 to the department, that an applicant for licensure under its 228 jurisdiction may have an impairment be impaired as a result of 229 the misuse or abuse of alcohol or drugs, or both, or due 230 mental or physical condition that could affect the applicant's 231 ability to practice with skill and safety. Upon such 232 determination, the chair or other designee may refer the 233 applicant to the consultant to facilitate for an evaluation 234 before the board issues an approval of, certifies or intent to 235 deny, declines to certify his or her application to the department. If the applicant agrees to be evaluated by the 236 237 consultant, the department's deadline for approving or denying 238 the application pursuant to s. 120.60(1) is tolled until the 239 evaluation is completed and the result of the evaluation and 240 recommendation by the consultant is communicated to the board by 241 the consultant. If the applicant declines to be evaluated by the 242 consultant, the board shall issue an approval of, or intent to 243 deny, certify or decline to certify the applicant's application 244 to the department notwithstanding the lack of an evaluation and 245 recommendation by the consultant.

246 <u>(9)(a)(4)(a)</u> When Whenever the department receives a 247 written or oral legally sufficient complaint alleging that a 248 practitioner has an impairment licensee under the jurisdiction 249 of the Division of Medical Quality Assurance within the 250 department is impaired as a result of the misuse or abuse of

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251 alcohol or drugs, or both, or due to a mental or physical 252 condition which could affect the licensee's ability to practice 253 with skill and safety, and no complaint exists against the 254 practitioner licensee other than impairment exists, the 255 department shall refer the practitioner to the consultant, along 256 with all information in the department's possession relating to 257 the impairment. The impairment does reporting of such 258 information shall not constitute grounds for discipline pursuant 259 to s. 456.072 or the corresponding grounds for discipline within the applicable practice act if the probable cause panel of the 260 261 appropriate board, or the department when there is no board, 262 finds: 263 1. The practitioner licensee has acknowledged the 264 impairment; problem. 265 The practitioner becomes a participant licensee has 2. 266 voluntarily enrolled in an impaired practitioner program and 267 successfully completes a participant contract under terms 268 established by the consultant; appropriate, approved treatment 269 program. 270 3. The practitioner licensee has voluntarily withdrawn 271 from practice or has limited the scope of his or her practice if 272 as required by the consultant; , in each case, until such time as the panel, or the department when there is no board, is 273 274 satisfied the licensee has successfully completed an approved 275 treatment program.

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276 The practitioner licensee has provided to the 4. 277 consultant, or has authorized the consultant to obtain, all 278 records and information relating to the impairment from any 279 source and all other medical records of the practitioner 280 requested by the consultant; and executed releases for medical 281 records, authorizing the release of all records of evaluations, 282 diagnoses, and treatment of the licensee, including records of 283 treatment for emotional or mental conditions, to the consultant. 284 The consultant shall make no copies or reports of records that 285 do not regard the issue of the licensee's impairment and his 286 her participation in a treatment program. 287 The practitioner has authorized the consultant, in the 5. 288 event of the practitioner's termination from the impaired 289 practitioner program, to report the termination to the 290 department and provide the department with copies of all 291 information in the consultant's possession relating to the 292 practitioner. 293 To encourage practitioners who are or may be impaired (b) 294 to voluntarily self-refer to a consultant, the consultant may 295 not provide information to the department relating to a self-296 referring participant if the consultant has no knowledge of a 297 pending department investigation, complaint, or disciplinary action against the participant and if the participant is in 298 299 compliance and making progress with the terms of the impaired 300 practitioner program and contract, unless authorized by the

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301	participant If, however, the department has not received a
302	legally sufficient complaint and the licensee agrees to withdraw
303	from practice until such time as the consultant determines the
304	licensee has satisfactorily completed an approved treatment
305	program or evaluation, the probable cause panel, or the
306	department when there is no board, shall not become involved in
307	the licensee's case.
308	(c) Inquiries related to impairment treatment programs
309	designed to provide information to the licensee and others and
310	which do not indicate that the licensee presents a danger to the
311	public shall not constitute a complaint within the meaning of s.
312	456.073 and shall be exempt from the provisions of this
313	subsection.
314	(d) Whenever the department receives a legally sufficient
315	complaint alleging that a licensee is impaired as described in
316	paragraph (a) and no complaint against the licensee other than
317	impairment exists, the department shall forward all information
318	in its possession regarding the impaired licensee to the
319	consultant. For the purposes of this section, a suspension from
320	hospital staff privileges due to the impairment does not
321	constitute a complaint.
322	(c) The probable cause panel, or the department when there
323	is no board, shall work directly with the consultant, and all
324	information concerning a practitioner obtained from the
325	consultant by the panel, or the department when there is no
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326 board, shall remain confidential and exempt from the provisions 327 of s. 119.07(1), subject to the provisions of subsections (6) 328 and (7).

329 (f) A finding of probable cause shall not be made as long 330 as the panel, or the department when there is no board, is 331 satisfied, based upon information it receives from the 332 consultant and the department, that the licensee is progressing 333 satisfactorily in an approved impaired practitioner program and 334 no other complaint against the licensee exists.

(10) (5) In any disciplinary action for a violation other 335 336 than impairment in which a practitioner licensee establishes the 337 violation for which the practitioner licensee is being 338 prosecuted was due to or connected with impairment and further 339 establishes the practitioner licensee is satisfactorily 340 progressing through or has successfully completed an impaired 341 practitioner program approved treatment program pursuant to this 342 section, such information may be considered by the board, or the 343 department when there is no board, as a mitigating factor in 344 determining the appropriate penalty. This subsection does not 345 limit mitigating factors the board may consider.

346 <u>(11) (a) (6) (a)</u> Upon request by the consultant, and with the 347 <u>authorization of the practitioner when required by law</u>, an 348 approved <u>evaluator</u>, treatment program, or treatment provider 349 shall, upon request, disclose to the consultant all information 350 in its possession regarding a referral or participant the issue

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351 of a licensee's impairment and participation in the treatment 352 program. All information obtained by the consultant and 353 department pursuant to this section is confidential and exempt 354 from the provisions of s. 119.07(1), subject to the provisions 355 of this subsection and subsection (7). Failure to provide such 356 information to the consultant is grounds for withdrawal of 357 approval of such evaluator, treatment program, or treatment 358 provider.

When a referral or participant is terminated from the 359 (b) 360 impaired practitioner program for material noncompliance with a 361 participant contract, inability to progress, or any other reason 362 than completion of the program, the consultant shall disclose If 363 in the opinion of the consultant, after consultation with the 364 treatment provider, an impaired licensee has not progressed 365 satisfactorily in a treatment program, all information regarding 366 the issue of a licensee's impairment and participation in a 367 treatment program in the consultant's possession relating to the 368 practitioner shall be disclosed to the department. Such 369 disclosure shall constitute a complaint pursuant to the general 370 provisions of s. 456.073. In addition, whenever the consultant 371 concludes that impairment affects a practitioner's licensee's 372 practice and constitutes an immediate, serious danger to the public health, safety, or welfare, the consultant shall 373 374 immediately communicate such that conclusion shall be 375 communicated to the department and disclose all information in

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376 the consultant's possession relating to the practitioner to the 377 department State Surgeon General. 378 All information obtained by the consultant pursuant (12)379 to this section is confidential and exempt from s. 119.07(1) and 380 s. 24(a), Art. I of the State Constitution. 381 (7) A consultant, licensee, or approved treatment provider 382 who makes a disclosure pursuant to this section is not subject 383 to civil liability for such disclosure or its consequences. 384 The provisions of s. 766.101 apply to any consultant (13)385 and the consultant's directors, officers, employees, or agents 386 in regards to providing information relating to a participant to 387 a medical review committee if the participant authorizes such 388 disclosure officer, employee, or agent of the department or the 389 board and to any officer, employee, or agent of any entity with which the department has contracted pursuant to this section. 390 391 (14) (a) (8) (a) A consultant retained pursuant to this 392 section and subsection (2), a consultant's directors, officers, 393 and employees, or agents and those acting at the direction of 394 the consultant for the limited purpose of an emergency 395 intervention on behalf of a licensee or student as described in 396 subsection (2) when the consultant is unable to perform such 397 intervention shall be considered agents of the department for purposes of s. 768.28 while acting within the scope of the 398 399 consultant's duties under the contract with the department if 400 the contract complies with the requirements of this section. The

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401	contract must require that:
402	1. The consultant indemnify the state for any liabilities
403	incurred up to the limits set out in chapter 768.
404	2. The consultant establish a quality assurance program to
405	monitor services delivered under the contract.
406	3. The consultant's quality assurance program, treatment,
407	and monitoring records be evaluated quarterly.
408	4. The consultant's quality assurance program be subject
409	to review and approval by the department.
410	5. The consultant operate under policies and procedures
411	approved by the department.
412	6. The consultant provide to the department for approval a
413	policy and procedure manual that comports with all statutes,
414	rules, and contract provisions approved by the department.
415	7. The department be entitled to review the records
416	relating to the consultant's performance under the contract for
417	the purpose of management audits, financial audits, or program
418	evaluation.
419	8. All performance measures and standards be subject to
420	verification and approval by the department.
421	9. The department be entitled to terminate the contract
422	with the consultant for noncompliance with the contract.
423	(b) In accordance with s. 284.385, the Department of
424	Financial Services shall defend any claim, suit, action, or
425	proceeding, including a claim, suit, action, or proceeding for
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426 injunctive, affirmative, or declaratory relief, against the 427 consultant, or the consultant's directors, officers, or 428 employees, and agents, brought as the result of any action or 429 omission relating to the impaired practitioner program or those 430 acting at the direction of the consultant for the limited 431 purpose of an emergency intervention on behalf of a licensee or 432 student as described in subsection (2) when the consultant is 433 unable to perform such intervention, which claim, suit, action, or proceeding is brought as a result of an act or omission by 434 435 any of the consultant's officers and employees and those acting 436 under the direction of the consultant for the limited purpose of 437 an emergency intervention on behalf of the licensee or student 438 when the consultant is unable to perform such intervention, if 439 the act or omission arises out of and is in the scope of the 440 consultant's duties under its contract with the department. 441 (15) (c) If a the consultant retained by the department 442 pursuant to this section subsection (2) is also retained by 443 another any other state agency to operate an impaired 444 practitioner program for that agency, this section also applies 445 to the consultant's operation of an impaired practitioner 446 program for that agency, and if the contract between such state 447 agency and the consultant complies with the requirements of this section, the consultant, the consultant's officers and 448 employees, and those acting under the direction of the 449 450 consultant for the limited purpose of an emergency intervention

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451 on behalf of a licensee or student as described in subsection 452 (2) when the consultant is unable to perform such intervention 453 shall be considered agents of the state for the purposes of this 454 section while acting within the scope of and pursuant 455 guidelines established in the contract between such state agency 456 and the consultant. 457 (16) (9) A An impaired practitioner consultant is the official custodian of records relating to the referral of an 458 459 impaired licensee or applicant to that consultant and any other 460 interaction between the licensee or applicant and the 461 consultant. The consultant may disclose to a referral or 462 participant, or to the legal representative of the referral or 463 participant, the documents, records, or other information from 464 the consultant's file, including information received by the 465 consultant from other sources; information on the terms required 466 for the referral's or participant's monitoring contract, the 467 referral's or participant's progress or inability to progress, 468 or the referral's or participant's discharge or termination; 469 information supporting the conclusion of material noncompliance; 470 or any other information required by law the impaired licensee 471 or applicant or his or her designee any information that is 472 disclosed to or obtained by the consultant or that is 473 confidential under paragraph (6) (a), but only to the extent that 474 it is necessary to do so to carry out the consultant's duties 475 under this section. The department, and any other entity that

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476	enters into a contract with the consultant to receive the
477	services of the consultant, has direct administrative control
478	over the consultant to the extent necessary to receive
479	disclosures from the consultant as allowed by federal law. If a
480	consultant discloses information to the department in accordance
481	with this part, a referral or participant, or his or her legal
482	representative, may obtain a complete copy of the consultant's
483	file from the consultant or disciplinary proceeding is pending,
484	an impaired licensee may obtain such information from the
485	department under s. 456.073.
486	(17)(a) The consultant may contract with a school or
487	program to provide impaired practitioner program services to a
488	student enrolled for the purpose of preparing for licensure as a
489	health care practitioner as defined in this chapter or as a
490	veterinarian under chapter 474 if the student has or is
491	suspected of having an impairment. The department is not
492	responsible for paying for the care provided by approved
493	treatment providers or approved treatment programs or for the
494	services provided by a consultant to a student.
495	(b) A medical school accredited by the Liaison Committee
496	on Medical Education or the Commission on Osteopathic College
497	Accreditation, or another school providing for the education of
498	students enrolled in preparation for licensure as a health care
499	practitioner as defined in this chapter, or a veterinarian under
500	chapter 474, which is governed by accreditation standards
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501	requiring notice and the provision of due process procedures to
502	students, is not liable in any civil action for referring a
503	student to the consultant retained by the department or for
504	disciplinary actions that adversely affect the status of a
505	student when the disciplinary actions are instituted in
506	reasonable reliance on the recommendations, reports, or
507	conclusions provided by such consultant, if the school, in
508	referring the student or taking disciplinary action, adheres to
509	the due process procedures adopted by the applicable
510	accreditation entities and if the school committed no
511	intentional fraud in carrying out the provisions of this
512	section.
513	Section 2. Effective December 31, 2018, or upon enactment
514	of the Nurse Licensure Compact into law by 26 states, whichever
515	occurs first, subsection (9) of section 456.076, Florida
516	Statutes, as amended by section 2 of chapter 2016-139, Laws of
517	Florida, is amended to read:
518	456.076 Impaired practitioner programs
519	(16) (9) A An impaired practitioner consultant is the
520	official custodian of records relating to the referral of an
521	impaired licensee or applicant to that consultant and any other
522	interaction between the licensee or applicant and the
523	consultant. The consultant may disclose to <u>a referral or</u>
524	participant, or to the legal representative of the referral or
525	participant, the documents, records, or other information from
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526	the consultant's file, including information received by the
527	consultant from other sources; information on the terms required
528	for the referral's or participant's monitoring contract, the
529	referral's or participant's progress or inability to progress,
530	or the referral's or participant's discharge or termination;
531	information supporting the conclusion of material noncompliance;
532	or any other information required by law the impaired licensee
533	or applicant or his or her designee any information that is
534	disclosed to or obtained by the consultant or that is
535	confidential under paragraph (6)(a), but only to the extent that
536	it is necessary to do so to carry out the consultant's duties
537	under this section. The department, and any other entity that
538	enters into a contract with the consultant to receive the
539	services of the consultant, has direct administrative control
540	over the consultant to the extent necessary to receive
541	disclosures from the consultant as allowed by federal law. The
542	consultant must disclose to the department, upon the
543	department's request, whether an applicant for a multistate
544	license under s. 464.0095 is participating in a treatment
545	program and must report to the department when a nurse holding a
546	multistate license under s. 464.0095 enters a treatment program.
547	A nurse holding a multistate license pursuant to s. 464.0095
548	must report to the department within 2 business days after
549	entering a treatment program pursuant to this section. If a
550	consultant discloses information to the department in accordance

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551 with this part, a referral or participant, or his or her legal 552 representative, may obtain a complete copy of the consultant's 553 file from the consultant or disciplinary proceeding is pending, 554 an impaired licensee may obtain such information from the 555 department under s. 456.073.

556 Section 3. Subsections (2) and (3) of section 456.0635, 557 Florida Statutes, are amended to read:

558 456.0635 Health care fraud; disqualification for license, 559 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 <u>candidate or</u> applicant:

566 Has been convicted of, or entered a plea of guilty or (a) 567 nolo contendere to, regardless of adjudication, a felony under chapter 409, chapter 817, or chapter 893, or a similar felony 568 569 offense committed in another state or jurisdiction, unless the 570 candidate or applicant has successfully completed a pretrial 571 diversion or drug court program for that felony and provides 572 proof that the plea has been withdrawn or the charges have been dismissed. Any such conviction or plea shall exclude the 573 574 applicant or candidate from licensure, examination, 575 certification, or registration unless the sentence and any

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576 subsequent period of probation for such conviction or plea 577 ended:

578 1. For felonies of the first or second degree, more than 579 15 years before the date of application.

580 2. For felonies of the third degree, more than 10 years 581 before the date of application, except for felonies of the third 582 degree under s. 893.13(6)(a).

583 3. For felonies of the third degree under s. 893.13(6)(a), 584 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 599 5 years and the termination occurred at least 20 years before 600 the date of the application; or

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(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.

605 This subsection does not apply to an applicant for initial 606 licensure, certification, or registration who was arrested or 607 charged with a felony specified in paragraph (a) or paragraph 608 (b) before July 1, 2009.

(3) The department shall refuse to renew a license,
certificate, or registration of any applicant if the applicant
or any principal, officer, agent, managing employee, or
affiliated person of the applicant:

Has been convicted of, or entered a plea of guilty or 613 (a) 614 nolo contendere to, regardless of adjudication, a felony under 615 chapter 409, chapter 817, or chapter 893, or a similar felony 616 offense committed in another state or jurisdiction, unless the 617 applicant is currently enrolled in a pretrial diversion or drug court program that allows the withdrawal of the plea for that 618 619 felony upon successful completion of that program. Any such 620 conviction or plea excludes the applicant from licensure renewal 621 unless the sentence and any subsequent period of probation for 622 such conviction or plea ended:

623 1. For felonies of the first or second degree, more than624 15 years before the date of application.

625

2. For felonies of the third degree, more than 10 years

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before the date of application, except for felonies of the thirddegree under s. 893.13(6)(a).

628 3. For felonies of the third degree under s. 893.13(6)(a),
629 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 since July 1,
2009, 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 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 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.

(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.

649

650 This subsection does not apply to an applicant for renewal of

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651	licensure, certification, or registration who was arrested or
652	charged with a felony specified in paragraph (a) or paragraph
653	(b) before July 1, 2009.
654	Section 4. Paragraph (1) of subsection (1) of section
655	401.411, Florida Statutes, is amended to read:
656	401.411 Disciplinary action; penalties
657	(1) The department may deny, suspend, or revoke a license,
658	certificate, or permit or may reprimand or fine any licensee,
659	certificateholder, or other person operating under this part for
660	any of the following grounds:
661	(1) The failure to report to the department any person
662	known to be in violation of this part. However, a professional
663	known to be operating under this part without reasonable skill
664	and without regard for the safety of the public by reason of
665	illness, drunkenness, or the use of drugs, narcotics, chemicals,
666	or any other type of material, or as a result of a mental or
667	physical condition, may be reported to a consultant operating an
668	impaired practitioner program as described in s. 456.076 rather
669	than to the department.
670	Section 5. Paragraph (u) of subsection (1) of section
671	455.227, Florida Statutes, is amended to read:
672	455.227 Grounds for discipline; penalties; enforcement
673	(1) The following acts shall constitute grounds for which
674	the disciplinary actions specified in subsection (2) may be
675	taken:
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(u) Termination from <u>an impaired practitioner program</u> a
treatment program for impaired practitioners as described in s.
456.076 for failure to comply, without good cause, with the
terms of the monitoring or <u>participant</u> treatment contract
entered into by the licensee or failing to successfully complete
a drug or alcohol treatment program.

682 Section 6. Paragraphs (i) and (hh) of subsection (1) of 683 section 456.072, Florida Statutes, are amended to read:

456.072 Grounds for discipline; penalties; enforcement.-

(1) The following acts shall constitute grounds for which
the disciplinary actions specified in subsection (2) may be
taken:

688 Except as provided in s. 465.016, failing to report to (i) 689 the department any person who the licensee knows is in violation 690 of this chapter, the chapter regulating the alleged violator, or the rules of the department or the board. However, a person who 691 692 the licensee knows is unable to practice with reasonable skill 693 and safety to patients by reason of illness or use of alcohol, 694 drugs, narcotics, chemicals, or any other type of material, or 695 as a result of a mental or physical condition, may be reported 696 to a consultant operating an impaired practitioner program as 697 described in s. 456.076 rather than to the department. 698 (hh) Being terminated from an impaired practitioner

699 program that a treatment program for impaired practitioners,

700 which is overseen by a an impaired practitioner consultant as

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described in s. 456.076, for failure to comply, without good cause, with the terms of the monitoring or <u>participant</u> treatment contract entered into by the licensee, or for not successfully completing any drug treatment or alcohol treatment program.

705Section 7. Paragraph (f) of subsection (1) of section706457.109, Florida Statutes, is amended to read:

707 457.109 Disciplinary actions; grounds; action by the708 board.-

709 (1) The following acts constitute grounds for denial of a
710 license or disciplinary action, as specified in s. 456.072(2):

711 Failing to report to the department any person who the (f) 712 licensee knows is in violation of this chapter or of the rules 713 of the department. However, a person who the licensee knows is 714 unable to practice acupuncture with reasonable skill and safety 715 to patients by reason of illness or use of alcohol, drugs, 716 narcotics, chemicals, or any other type of material, or as a 717 result of a mental or physical condition, may be reported to a 718 consultant operating an impaired practitioner program as 719 described in s. 456.076 rather than to the department.

Section 8. Paragraph (e) of subsection (1) of section458.331, Florida Statutes, is amended to read:

458.331 Grounds for disciplinary action; action by theboard and department.-

(1) The following acts constitute grounds for denial of a
license or disciplinary action, as specified in s. 456.072(2):

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726	(e) Failing to report to the department any person who the
727	licensee knows is in violation of this chapter or of the rules
728	of the department or the board. <u>However, a person who the</u>
729	licensee knows is unable to practice medicine with reasonable
730	skill and safety to patients by reason of illness or use of
731	alcohol, drugs, narcotics, chemicals, or any other type of
732	material, or as a result of a mental or physical condition, may
733	be reported to a consultant operating an impaired practitioner
734	program as described in s. 456.076 rather than to the department
735	A treatment provider approved pursuant to s. 456.076 shall
736	provide the department or consultant with information in
737	accordance with the requirements of s. 456.076(4), (5), (6),
738	(7), and (9) .
739	Section 9. Paragraph (e) of subsection (1) of section
740	459.015, Florida Statutes, is amended to read:
741	459.015 Grounds for disciplinary action; action by the
742	board and department
743	(1) The following acts constitute grounds for denial of a
744	license or disciplinary action, as specified in s. 456.072(2):
745	(e) Failing to report to the department or the
746	department's impaired professional consultant any person who the
747	licensee or certificateholder knows is in violation of this
748	chapter or of the rules of the department or the board. <u>However,</u>
749	a person who the licensee knows is unable to practice
750	osteopathic medicine with reasonable skill and safety to
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751 patients by reason of illness or use of alcohol, drugs, 752 narcotics, chemicals, or any other type of material, or as a 753 result of a mental or physical condition, may be reported to a 754 consultant operating an impaired practitioner program as 755 described in s. 456.076 rather than to the department A 756 treatment provider, approved pursuant to s. 456.076, shall 757 provide the department or consultant with information in 758 accordance with the requirements of s. 456.076(4), (5), (6), 759 (7), and (9). 760 Section 10. Paragraph (g) of subsection (1) of section 761 460.413, Florida Statutes, is amended to read: 762 460.413 Grounds for disciplinary action; action by board 763 or department.-The following acts constitute grounds for denial of a 764 (1) 765 license or disciplinary action, as specified in s. 456.072(2): 766 Failing to report to the department any person who the (q) 767 licensee knows is in violation of this chapter or of the rules 768 of the department or the board. However, a person who the 769 licensee knows is unable to practice chiropractic medicine with 770 reasonable skill and safety to patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type 771 772 of material, or as a result of a mental or physical condition, 773 may be reported to a consultant operating an impaired 774 practitioner program as described in s. 456.076 rather than to 775 the department.

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776 Section 11. Paragraph (f) of subsection (1) of section 777 461.013, Florida Statutes, is amended to read: 778 461.013 Grounds for disciplinary action; action by the 779 board; investigations by department.-780 (1)The following acts constitute grounds for denial of a 781 license or disciplinary action, as specified in s. 456.072(2): 782 (f) Failing to report to the department any person who the 783 licensee knows is in violation of this chapter or of the rules 784 of the department or the board. However, a person who the 785 licensee knows is unable to practice podiatric medicine with 786 reasonable skill and safety to patients by reason of illness or 787 use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a result of a mental or physical condition, 788 789 may be reported to a consultant operating an impaired 790 practitioner program as described in s. 456.076 rather than to 791 the department. 792 Section 12. Paragraph (f) of subsection (1) of section 793 462.14, Florida Statutes, is amended to read: 794 462.14 Grounds for disciplinary action; action by the 795 department.-796 The following acts constitute grounds for denial of a (1)797 license or disciplinary action, as specified in s. 456.072(2): 798 (f) Failing to report to the department any person who the 799 licensee knows is in violation of this chapter or of the rules of the department. However, a person who the licensee knows is 800

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801 unable to practice naturopathic medicine with reasonable skill 802 and safety to patients by reason of illness or use of alcohol, 803 drugs, narcotics, chemicals, or any other type of material, or 804 as a result of a mental or physical condition, may be reported 805 to a consultant operating an impaired practitioner program as 806 described in s. 456.076 rather than to the department. 807 Section 13. Paragraph (1) of subsection (1) of section 808 463.016, Florida Statutes, is amended to read: 809 463.016 Grounds for disciplinary action; action by the 810 board.-The following acts constitute grounds for denial of a 811 (1)812 license or disciplinary action, as specified in s. 456.072(2): Willfully failing to report any person who the 813 (1) 814 licensee knows is in violation of this chapter or of rules of 815 the department or the board. However, a person who the licensee 816 knows is unable to practice optometry with reasonable skill and 817 safety to patients by reason of illness or use of alcohol, 818 drugs, narcotics, chemicals, or any other type of material, or 819 as a result of a mental or physical condition, may be reported 820 to a consultant operating an impaired practitioner program as 821 described in s. 456.076 rather than to the department. 822 Section 14. Paragraph (k) of subsection (1) of section 464.018, Florida Statutes, is amended to read: 823 824 464.018 Disciplinary actions.-825 (1) The following acts constitute grounds for denial of a

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826	license or disciplinary action, as specified in s. 456.072(2):
827	(k) Failing to report to the department any person who the
828	licensee knows is in violation of this part or of the rules of
829	the department or the board. However, a person who the licensee
830	knows is unable to practice nursing with reasonable skill and
831	safety to patients by reason of illness or use of alcohol,
832	drugs, narcotics, chemicals, or any other type of material, or
833	as a result of a mental or physical condition, may be reported
834	to a consultant operating an impaired practitioner program as
835	described in s. 456.076 rather than to the department; however,
836	if the licensee verifies that such person is actively
837	participating in a board-approved program for the treatment of a
838	physical or mental condition, the licensee is required to report
839	such person only to an impaired professionals consultant.
840	Section 15. Paragraph (c) of subsection (2) of section
841	464.204, Florida Statutes, is amended to read:
842	464.204 Denial, suspension, or revocation of
843	certification; disciplinary actions
844	(2) When the board finds any person guilty of any of the
845	grounds set forth in subsection (1), it may enter an order
846	imposing one or more of the following penalties:
847	(c) Imposition of probation or restriction of
848	certification, including conditions such as corrective actions
849	as retraining or compliance with the department's impaired
850	practitioner program operated by a consultant as described in s.

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851 456.076 an approved treatment program for impaired 852 practitioners. 853 Section 16. Paragraph (o) of subsection (1) of section 854 465.016, Florida Statutes, is amended to read: 855 465.016 Disciplinary actions.-856 The following acts constitute grounds for denial of a (1)857 license or disciplinary action, as specified in s. 456.072(2): 858 Failing to report to the department any licensee under (0)859 chapter 458 or under chapter 459 who the pharmacist knows has violated the grounds for disciplinary action set out in the law 860 861 under which that person is licensed and who provides health care 862 services in a facility licensed under chapter 395, or a health 863 maintenance organization certificated under part I of chapter 864 641, in which the pharmacist also provides services. However, a 865 person who the licensee knows is unable to practice medicine or 866 osteopathic medicine with reasonable skill and safety to 867 patients by reason of illness or use of alcohol, drugs, 868 narcotics, chemicals, or any other type of material, or as a 869 result of a mental or physical condition, may be reported to a 870 consultant operating an impaired practitioner program as 871 described in s. 456.076 rather than to the department. 872 Section 17. Paragraph (f) of subsection (1) of section 466.028, Florida Statutes, is amended to read: 873 874 466.028 Grounds for disciplinary action; action by the 875 board.-

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876 (1)The following acts constitute grounds for denial of a 877 license or disciplinary action, as specified in s. 456.072(2): 878 (f) Failing to report to the department any person who the 879 licensee knows, or has reason to believe, is clearly in 880 violation of this chapter or of the rules of the department or 881 the board. However, a person who the licensee knows, or has 882 reason to believe, is clearly unable to practice her or his 883 profession with reasonable skill and safety to patients by 884 reason of illness or use of alcohol, drugs, narcotics, 885 chemicals, or any other type of material, or as a result of a 886 mental or physical condition, may be reported to a consultant 887 operating an impaired practitioner program as described in s. 888 456.076 rather than to the department. 889 Section 18. Paragraph (h) of subsection (1) of section 890 467.203, Florida Statutes, is amended to read: 891 467.203 Disciplinary actions; penalties.-892 (1)The following acts constitute grounds for denial of a 893 license or disciplinary action, as specified in s. 456.072(2): 894 Failing to report to the department any person who the (h) 895 licensee knows is in violation of this chapter or of the rules of the department. However, a person who the licensee knows is 896 897 unable to practice midwifery with reasonable skill and safety to 898 patients by reason of illness or use of alcohol, drugs, narcotics, chemicals, or any other type of material, or as a 899 900 result of a mental or physical condition, may be reported to a

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901 consultant operating an impaired practitioner program as 902 described in s. 456.076 rather than to the department. 903 Section 19. Paragraph (f) of subsection (1) of section 904 468.217, Florida Statutes, is amended to read: 905 468.217 Denial of or refusal to renew license; suspension 906 and revocation of license and other disciplinary measures.-907 (1) The following acts constitute grounds for denial of a 908 license or disciplinary action, as specified in s. 456.072(2): 909 (f) Failing to report to the department any person who the licensee knows is in violation of this part or of the rules of 910 911 the department or of the board. However, a person who the 912 licensee knows is unable to practice occupational therapy with 913 reasonable skill and safety to patients by reason of illness or 914 use of alcohol, drugs, narcotics, chemicals, or any other type 915 of material, or as a result of a mental or physical condition, 916 may be reported to a consultant operating an impaired 917 practitioner program as described in s. 456.076 rather than to the department. 918 919 Section 20. Paragraph (n) of subsection (1) of section 920 468.3101, Florida Statutes, is amended to read: 921 468.3101 Disciplinary grounds and actions.-922 The department may make or require to be made any (1) investigations, inspections, evaluations, and tests, and require 923 924 the submission of any documents and statements, which it considers necessary to determine whether a violation of this 925

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926 part has occurred. The following acts shall be grounds for 927 disciplinary action as set forth in this section: 928 Being terminated from an impaired practitioner program (n) 929 operated by a consultant as described in s. 456.076 for failure 930 to comply, without good cause, with the terms of monitoring or a 931 participant contract entered into by the licensee, or for not 932 successfully completing a drug treatment or alcohol treatment 933 program Failing to comply with the recommendations of the 934 department's impaired practitioner program for treatment, 935 evaluation, or monitoring. A letter from the director of the 936 impaired practitioner program that the certificateholder is not 937 in compliance shall be considered conclusive proof under this 938 part. 939 Section 21. Section 474.221, Florida Statutes, is amended 940 to read: 941 474.221 Impaired practitioner provisions; applicability.-942 Notwithstanding the transfer of the Division of Medical Quality 943 Assurance to the Department of Health or any other provision of 944 law to the contrary, veterinarians licensed under this chapter 945 shall be governed by the treatment of impaired practitioner 946 program provisions of s. 456.076 as if they were under the 947 jurisdiction of the Division of Medical Quality Assurance, except that for veterinarians the Department of Business and 948

950 the powers granted to the Department of Health by that section,

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Professional Regulation shall, at its option, exercise any of

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951	and "board" shall mean board as defined in this chapter.
952	Section 22. Paragraph (o) of subsection (1) of section
953	483.825, Florida Statutes, is amended to read:
954	483.825 Grounds for disciplinary action
955	(1) The following acts constitute grounds for denial of a
956	license or disciplinary action, as specified in s. 456.072(2):
957	(o) Failing to report to the department a person or other
958	licensee who the licensee knows is in violation of this chapter
959	or the rules of the department or board adopted hereunder.
960	However, a person or other licensee who the licensee knows is
961	unable to perform or report on clinical laboratory examinations
962	with reasonable skill and safety to patients by reason of
963	illness or use of alcohol, drugs, narcotics, chemicals, or any
964	other type of material, or as a result of a mental or physical
965	condition, may be reported to a consultant operating an impaired
966	practitioner program as described in s. 456.076 rather than to
967	the department.
968	Section 23. Except as otherwise expressly provided in this
969	act, this act shall take effect upon becoming a law.

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