By Senator Young

18-00542-17

2017876___

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1	A bill to be entitled
2	An act relating to programs for impaired health care
3	practitioners; amending s. 456.076, F.S.; revising
4	provisions related to impaired practitioner programs;
5	providing 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 in intervention,
10	in evaluating and treating professionals, in providing
11	and monitoring continued care of impaired
12	professionals, and in expelling professionals from the
13	program; authorizing, instead of requiring, the
14	department to retain one or more consultants to
15	operate its impaired practitioner program; requiring
16	the department to establish the terms and conditions
17	of the program by contract; providing contract terms;
18	requiring consultants to establish the terms of
19	monitoring impaired practitioners; authorizing
20	consultants to consider the recommendations of certain
21	persons in establishing the terms of monitoring;
22	authorizing consultants to modify monitoring terms to
23	protect the health, safety, and welfare of the public;
24	requiring consultants to assist the department and
25	licensure boards on matters relating to impaired
26	practitioners; requiring the department to refer
27	practitioners to consultants under certain
28	circumstances; authorizing consultants to withhold
29	certain information about self-reporting participants
30	from the department under certain circumstances to
31	encourage self-reporting; requiring consultants to
32	disclose all information relating to practitioners who

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33	are terminated from the program for material
34	noncompliance; providing that all information obtained
35	by a consultant retains its confidential or exempt
36	status; providing that consultants, and certain agents
37	of consultants, may not be held liable financially or
38	have a cause of action for damages brought against
39	them for disclosing certain information or for any
40	other act or omission relating to the program;
41	authorizing consultants to contract with a school or
42	program to provide services to certain students;
43	amending s. 401.411, F.S.; providing that an impaired
44	practitioner may be reported to a consultant rather
45	than the department under certain circumstances;
46	amending s. 455.227, F.S.; conforming provisions to
47	changes made by the act; amending ss. 456.072,
48	457.109, 458.331, 459.015, 460.413, 461.013, 462.14,
49	463.016, and 464.018, F.S.; providing that an impaired
50	practitioner may be reported to a consultant rather
51	than the department under certain circumstances;
52	amending s. 464.204, F.S.; conforming provisions to
53	changes made by the act; amending ss. 465.016,
54	466.028, 467.203, 468.217, and 468.3101, F.S.;
55	providing that an impaired practitioner may be
56	reported to a consultant rather than the department
57	under certain circumstances; amending s. 474.221,
58	F.S.; conforming provisions to changes made by the
59	act; amending s. 483.825, F.S.; providing that certain
60	persons may be reported to a consultant rather than
61	the department under certain circumstances; providing

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SB 876

1	18-00542-17 2017876
62	an effective date.
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64	Be It Enacted by the Legislature of the State of Florida:
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66	Section 1. Section 456.076, Florida Statutes, is amended to
67	read:
68	456.076 Impaired practitioner programs Treatment programs
69	for impaired practitioners
70	(1) As used in this section, the term:
71	(a) "Consultant" means the individual or entity who
72	operates an approved impaired practitioner program pursuant to a
73	contract with the department and who is retained by the
74	department as provided in subsection (2).
75	(b) "Evaluator" means a state-licensed or nationally
76	certified individual who has been approved by a consultant or
77	the department, who has completed an evaluator training program
78	established by the consultant, and who is therefore authorized
79	to evaluate practitioners as part of an impaired practitioner
80	program.
81	(c) "Impaired practitioner" means a practitioner with an
82	impairment.
83	(d) "Impaired practitioner program" means a program
84	established by the department by contract with one or more
85	consultants to serve impaired and potentially impaired
86	practitioners for the protection of the health, safety, and
87	welfare of the public.
88	(e) "Impairment" means a potentially impairing health
89	condition that is the result of the misuse or abuse of alcohol,
90	drugs, or both or a mental or physical condition that could

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91	affect a practitioner's ability to practice with skill and
92	safety.
93	(f) "Inability to progress" means a determination by a
94	consultant based on a participant's response to treatment and
95	prognosis that the participant is unable to safely practice
96	despite compliance with treatment requirements and his or her
97	participant contract.
98	(g) "Material noncompliance" means an act or omission by a
99	participant in violation of his or her participant contract as
100	determined by the department or consultant.
101	(h) "Participant" means a practitioner who is participating
102	in the impaired practitioner program by having entered into a
103	participant contract. A practitioner ceases to be a participant
104	when the participant contract is successfully completed or is
105	terminated for any reason.
106	(i) "Participant contract" means a formal written document
107	outlining the requirements established by a consultant for a
108	participant to successfully complete the impaired practitioner
109	program, including the participant's monitoring plan.
110	(j) "Practitioner" means a person licensed, registered,
111	certified, or regulated by the department under part III of
112	chapter 401; chapters 457 through 467; part I, part II, part
113	III, part V, part X, part XIII, or part XIV of chapter 468;
114	chapter 478; chapter 480; part III or part IV of chapter 483;
115	chapter 484; chapter 486; chapter 490; or chapter 491; or an
116	applicant under the same laws.
117	(k) "Referral" means a practitioner who has been referred
118	to a consultant for impaired practitioner program services,
119	either as a self-referral or otherwise, but who is not under a
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2017876 18-00542-17 120 participant contract. 121 (1) "Treatment program" means a department- or consultant-122 approved residential, intensive outpatient, partial 123 hospitalization, or other program through which an impaired 124 practitioner is treated based on the impaired practitioner's 125 diagnosis and the treatment plan approved by the consultant. 126 (m) "Treatment provider" means a department- or consultant-127 approved state-licensed or nationally certified individual who 128 provides treatment to an impaired practitioner based on the 129 practitioner's individual diagnosis and a treatment plan 130 approved by the consultant For professions that do not have 131 impaired practitioner programs provided for in their practice acts, the department shall, by rule, designate approved impaired 132 133 practitioner programs under this section. The department may 134 adopt rules setting forth appropriate criteria for approval of 135 treatment providers. The rules may specify the manner in which 136 the consultant, retained as set forth in subsection (2), works 137 with the department in intervention, requirements for evaluating 138 and treating a professional, requirements for continued care of 139 impaired professionals by approved treatment providers, 140 continued monitoring by the consultant of the care provided by 141 approved treatment providers regarding the professionals under 142 their care, and requirements related to the consultant's 143 expulsion of professionals from the program. (2) (a) The department may shall retain one or more impaired 144 145 practitioner consultants to operate its impaired practitioner 146 program. Each consultant who are each licensees under the 147 jurisdiction of the Division of Medical Quality Assurance within

148 the department and who must be:

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149	<u>(a)</u> 1. A practitioner or recovered practitioner licensed
150	under chapter 458, chapter 459, or part I of chapter 464; or
151	(b) 2. An entity that employs:
152	<u>1.a.</u> A medical director who <u>is</u> must be a practitioner or
153	recovered practitioner licensed under chapter 458 or chapter
154	459; or
155	2.b. An executive director who is must be a registered
156	nurse or a recovered registered nurse licensed under part I of
157	chapter 464.
158	(3) The terms and conditions of the impaired practitioner
159	program must be established by the department by contract with
160	each consultant for the protection of the health, safety, and
161	welfare of the public and must provide, at a minimum, for each
162	consultant to accept referrals of practitioners who have or are
163	suspected of having an impairment, arrange for the evaluation
164	and treatment of such practitioners as recommended by the
165	consultant, and monitor the recovery progress and status of
166	impaired practitioners to ensure that such practitioners are
167	able to practice the profession in which they are licensed with
168	skill and safety until such time as the consultant or department
169	concludes that monitoring by the consultant is no longer
170	required for the protection of the public or the practitioner's
171	participation in the program is terminated for material
172	noncompliance or inability to progress.
173	(4) The department shall specify, in its contract with each
174	consultant, the types of licenses, registrations, or
175	certifications of the practitioners to be served by that
176	consultant.
177	(5) A consultant shall establish the terms of monitoring of
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178	an impaired practitioner and shall include the terms in a
179	participant contract. In establishing the terms of monitoring,
180	the consultant may consider the recommendations of one or more
181	approved evaluators, treatment programs, or treatment providers.
182	A consultant may modify the terms of monitoring if the
183	consultant concludes, through the course of monitoring, that
184	extended, additional, or amended terms of monitoring are
185	required for the protection of the health, safety, and welfare
186	of the public.
187	(6) A consultant may not evaluate, treat, or otherwise
188	provide direct patient care to practitioners in the operation of
189	the impaired practitioner program.
190	(7) (b) A An entity retained as an impaired practitioner
191	consultant under this section which employs a medical director
192	or an executive director is not required to be licensed as a
193	substance abuse provider or mental health treatment provider
194	under chapter 394, chapter 395, or chapter 397 for purposes of
195	providing services under this program.
196	(8) (c)1. Each The consultant shall assist the <u>department</u>
197	and licensure boards on matters of impaired practitioners,
198	including the determination of probable cause panel and the
199	department in carrying out the responsibilities of this section.
200	This includes working with department investigators to determine
201	whether a practitioner is, in fact, impaired, as specified in
202	the consultant's contract with the department.
203	2. The consultant may contract with a school or program to
204	provide services to a student enrolled for the purpose of
205	preparing for licensure as a health care practitioner as defined
206	in this chapter or as a veterinarian under chapter 474 if the

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207	student is allegedly impaired as a result of the misuse or abuse
208	of alcohol or drugs, or both, or due to a mental or physical
209	condition. The department is not responsible for paying for the
210	care provided by approved treatment providers or a consultant.
211	(d) A medical school accredited by the Liaison Committee on
212	Medical Education or the Commission on Osteopathic College
213	Accreditation, or another school providing for the education of
214	students enrolled in preparation for licensure as a health care
215	practitioner as defined in this chapter or a veterinarian under
216	chapter 474 which is governed by accreditation standards
217	requiring notice and the provision of due process procedures to
218	students, is not liable in any civil action for referring a
219	student to the consultant retained by the department or for
220	disciplinary actions that adversely affect the status of a
221	student when the disciplinary actions are instituted in
222	reasonable reliance on the recommendations, reports, or
223	conclusions provided by such consultant, if the school, in
224	referring the student or taking disciplinary action, adheres to
225	the due process procedures adopted by the applicable
226	accreditation entities and if the school committed no
227	intentional fraud in carrying out the provisions of this
228	section.
229	(9) (3) Before certifying or declining to certify an
230	application for licensure to the department, each board and
231	profession within the Division of Medical Quality Assurance may
232	delegate to its chair or other designee its authority to
233	determine, before certifying or declining to certify an

234 application for licensure to the department, that an applicant 235 for licensure under its jurisdiction may <u>have an impairment</u> be

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18-00542-17 2017876 236 impaired as a result of the misuse or abuse of alcohol or drugs, 237 or both, or due to a mental or physical condition that could 238 affect the applicant's ability to practice with skill and 239 safety. Upon such determination, the chair or other designee may 240 refer the applicant to the consultant to facilitate for an evaluation before the board certifies or declines to certify his 241 242 or her application to the department. If the applicant agrees to 243 be evaluated by the consultant, the department's deadline for approving or denying the application pursuant to s. 120.60(1) is 244 tolled until the evaluation is completed and the result of the 245 246 evaluation and recommendation by the consultant is communicated 247 to the board by the consultant. If the applicant declines to be 248 evaluated by the consultant, the board shall certify or decline 249 to certify the applicant's application to the department 250 notwithstanding the lack of an evaluation and recommendation by 251 the consultant. 252 (10) (4) (a) When Whenever the department receives a written 253 or oral legally sufficient complaint alleging that a 254 practitioner has an impairment licensee under the jurisdiction 255 of the Division of Medical Quality Assurance within the

256 department is impaired as a result of the misuse or abuse of 257 alcohol or drugs, or both, or due to a mental or physical 258 condition which could affect the licensee's ability to practice 259 with skill and safety, and no complaint exists against the 260 practitioner licensee other than impairment exists, the 261 department shall refer the practitioner to the consultant, along 262 with all information in the department's possession relating to 263 the impairment. The impairment does reporting of such 264 information shall not constitute grounds for discipline pursuant

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265	to s. 456.072 or the corresponding grounds for discipline within
266	the applicable practice act if the probable cause panel of the
267	appropriate board, or the department when there is no board,
268	finds:
269	1. The <u>practitioner</u> licensee has acknowledged the
270	impairment problem .
271	2. The practitioner becomes a participant licensee has
272	voluntarily enrolled in an impaired practitioner program and
273	successfully completes a participant contract under terms
274	established by the consultant appropriate, approved treatment
275	program.
276	3. The <u>practitioner</u> licensee has voluntarily withdrawn from
277	practice or <u>has</u> limited the scope of <u>his or her</u> practice <u>if</u> as
278	required by the consultant, in each case, until such time as the
279	panel, or the department when there is no board, is satisfied
280	the licensee has successfully completed an approved treatment
281	program.
282	4. The <u>practitioner</u> licensee has <u>provided to the</u>
283	consultant, or has authorized the consultant to obtain, all
284	records and information relating to the impairment from any
285	source and all other medical records of the practitioner
286	requested by the consultant executed releases for medical
287	records, authorizing the release of all records of evaluations,
288	diagnoses, and treatment of the licensee, including records of
289	treatment for emotional or mental conditions, to the consultant.
290	The consultant shall make no copies or reports of records that
291	do not regard the issue of the licensee's impairment and his or
292	her participation in a treatment program.
293	5. The practitioner has authorized the consultant, in the

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294	event of the practitioner's termination from the impaired
295	practitioner program, to report the termination to the
296	department and provide the department with copies of all
297	information in the consultant's possession relating to the
298	practitioner.
299	(b) To encourage practitioners who are or may be impaired
300	to voluntarily self-report to a consultant, the consultant may
301	not provide information to the department relating to a self-
302	reporting participant if there is no pending department
303	investigation, complaint, or disciplinary action against the
304	participant and if the participant is in compliance with the
305	terms of the impaired practitioner program and any participant
306	contract, unless authorized by the participant If, however, the
307	department has not received a legally sufficient complaint and
308	the licensee agrees to withdraw from practice until such time as
309	the consultant determines the licensee has satisfactorily
310	completed an approved treatment program or evaluation, the
311	probable cause panel, or the department when there is no board,
312	shall not become involved in the licensee's case.
313	(c) Inquiries related to impairment treatment programs
314	designed to provide information to the licensee and others and
315	which do not indicate that the licensee presents a danger to the
316	public shall not constitute a complaint within the meaning of s.
317	456.073 and shall be exempt from the provisions of this
318	subsection.
319	(d) Whenever the department receives a legally sufficient
320	complaint alleging that a licensee is impaired as described in
321	paragraph (a) and no complaint against the licensee other than
322	impairment exists, the department shall forward all information
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18-00542-17 2017876 323 in its possession regarding the impaired licensee to the 324 consultant. For the purposes of this section, a suspension from 325 hospital staff privileges due to the impairment does not 326 constitute a complaint. 327 (e) The probable cause panel, or the department when there 328 is no board, shall work directly with the consultant, and all 329 information concerning a practitioner obtained from the 330 consultant by the panel, or the department when there is no 331 board, shall remain confidential and exempt from the provisions 332 of s. 119.07(1), subject to the provisions of subsections (6) 333 $\frac{\text{and}}{(7)}$. 334 (f) A finding of probable cause shall not be made as long 335 as the panel, or the department when there is no board, is 336 satisfied, based upon information it receives from the 337 consultant and the department, that the licensee is progressing 338 satisfactorily in an approved impaired practitioner program and 339 no other complaint against the licensee exists. 340 (11) (5) In any disciplinary action for a violation other 341 than impairment in which a practitioner licensee establishes the 342 violation for which the practitioner licensee is being 343 prosecuted was due to or connected with impairment and further 344 establishes the practitioner licensee is satisfactorily 345 progressing through or has successfully completed an approved 346 treatment program pursuant to this section, such information may be considered by the board, or the department when there is no 347 348 board, as a mitigating factor in determining the appropriate 349 penalty. This subsection does not limit mitigating factors the 350 board may consider.

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(12) (6) (a) Upon request by the consultant, and with the

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352	authorization of the practitioner when required by law, an
353	approved evaluator, treatment program, or treatment provider
354	shall , upon request, disclose to the consultant all information
355	in its possession regarding <u>a referral or participant</u> the issue
356	of a licensee's impairment and participation in the treatment
357	program. All information obtained by the consultant and
358	department pursuant to this section is confidential and exempt
359	from the provisions of s. 119.07(1), subject to the provisions
360	of this subsection and subsection (7). Failure to provide such
361	information to the consultant is grounds for withdrawal of
362	approval of such <u>evaluator, treatment</u> program <u>,</u> or <u>treatment</u>
363	provider.
364	(b) When a referral or participant is terminated from the
365	impaired practitioner program for material noncompliance with a
366	participant contract, inability to progress, or any other
367	reason, the consultant shall disclose all information in the
368	consultant's possession relating to the practitioner to the
369	department If in the opinion of the consultant, after
370	consultation with the treatment provider, an impaired licensee
371	has not progressed satisfactorily in a treatment program, all
372	information regarding the issue of a licensee's impairment and
373	participation in a treatment program in the consultant's
374	possession shall be disclosed to the department . Such disclosure
375	shall constitute a complaint pursuant to the general provisions
376	of s. 456.073. In addition, whenever the consultant concludes
377	that impairment affects a <u>practitioner's</u> licensee's practice and
378	constitutes an immediate, serious danger to the public health,
379	safety, or welfare, the consultant shall immediately communicate
380	such that conclusion shall be communicated to the department and

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disclose all information in the consultant's possession relating
to the practitioner to the department State Surgeon General.
(13) All confidential or exempt information obtained by the
consultant pursuant to this section retains its confidential or
exempt status when held by the consultant.
(14) (7) An action for damages may not be brought against a
consultant, <u>or a director, an officer, an employee, or an agent</u>
of a consultant, and such person may not be held liable
financially for making a disclosure pursuant to this section or
for the consequences of such disclosure, or for any other action
or omission or the consequences of such action or omission
relating to the impaired practitioner program, including,
without limitation, action by the department against a license,
registration, or certification licensee, or approved treatment
provider who makes a disclosure pursuant to this section is not
subject to civil liability for such disclosure or its
consequences.
(15) The provisions of s. 766.101 apply to any consultant,
or a director, an officer, an employee, or an agent of a
consultant, in regard to providing information relating to a
participant to a medical review committee if the participant
authorized such disclosure officer, employee, or agent of the
department or the board and to any officer, employee, or agent
of any entity with which the department has contracted pursuant
to this section.
(8)(a) A consultant retained pursuant to subsection (2), a
consultant's officers and employees, and those acting at the
direction of the consultant for the limited purpose of an
emergency intervention on behalf of a licensee or student as

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410	described in subsection (2) when the consultant is unable to
411	perform such intervention shall be considered agents of the
412	department for purposes of s. 768.28 while acting within the
413	scope of the consultant's duties under the contract with the
414	department if the contract complies with the requirements of
415	this section. The contract must require that:
416	1. The consultant indemnify the state for any liabilities
417	incurred up to the limits set out in chapter 768.
418	2. The consultant establish a quality assurance program to
419	monitor services delivered under the contract.
420	3. The consultant's quality assurance program, treatment,
421	and monitoring records be evaluated quarterly.
422	4. The consultant's quality assurance program be subject to
423	review and approval by the department.
424	5. The consultant operate under policies and procedures
425	approved by the department.
426	6. The consultant provide to the department for approval a
427	policy and procedure manual that comports with all statutes,
428	rules, and contract provisions approved by the department.
429	7. The department be entitled to review the records
430	relating to the consultant's performance under the contract for
431	the purpose of management audits, financial audits, or program
432	evaluation.
433	8. All performance measures and standards be subject to
434	verification and approval by the department.
435	9. The department be entitled to terminate the contract
436	with the consultant for noncompliance with the contract.
437	(16)(b) In accordance with s. 284.385, the Department of
438	Financial Services shall defend any claim, suit, action, or
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439	proceeding, including a claim, suit, action, or proceeding for
440	injunctive, affirmative, or declaratory relief, against the
441	consultant, <u>or</u> the consultant's <u>directors,</u> officers <u>,</u> or
442	employees, and agents brought as the result of any action or
443	omission relating to the impaired practitioner program or those
444	acting at the direction of the consultant for the limited
445	purpose of an emergency intervention on behalf of a licensee or
446	student as described in subsection (2) when the consultant is
447	unable to perform such intervention, which claim, suit, action,
448	or proceeding is brought as a result of an act or omission by
449	any of the consultant's officers and employees and those acting
450	under the direction of the consultant for the limited purpose of
451	an emergency intervention on behalf of the licensee or student
452	when the consultant is unable to perform such intervention, if
453	the act or omission arises out of and is in the scope of the
454	consultant's duties under its contract with the department.
455	(17) (c) If a the consultant retained by the department
456	pursuant to this section subsection (2) is <u>also</u> retained by
457	another any other state agency to operate an impaired
458	practitioner program for that agency, this section also applies
459	to the consultant's operation of an impaired practitioner
460	program for that agency, and if the contract between such state
461	agency and the consultant complies with the requirements of this
462	section, the consultant, the consultant's officers and
463	employees, and those acting under the direction of the
464	consultant for the limited purpose of an emergency intervention
465	on behalf of a licensee or student as described in subsection
466	(2) when the consultant is unable to perform such intervention
467	shall be considered agents of the state for the purposes of this

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18-00542-17 2017876 468 section while acting within the scope of and pursuant to quidelines established in the contract between such state agency 469 470 and the consultant. 471 (18) (9) A An impaired practitioner consultant is the 472 official custodian of records relating to the referral of an 473 impaired licensee or applicant to that consultant and any other 474 interaction between the licensee or applicant and the 475 consultant. The consultant may disclose to a referral or 476 participant documents, records, or other information from the 477 consultant's file on the referral or participant the impaired 478 licensee or applicant or his or her designee any information 479 that is disclosed to or obtained by the consultant or that is confidential under paragraph (6)(a), but only to the extent that 480 481 it is necessary to do so to carry out the consultant's duties under the impaired practitioner program and this section, or as 482 483 otherwise required by law. The department, and any other entity 484 that enters into a contract with the consultant to receive the 485 services of the consultant, has direct administrative control 486 over the consultant to the extent necessary to receive 487 disclosures from the consultant as allowed by federal law. If a 488 disciplinary proceeding is pending, a referral or participant 489 may obtain a complete copy of the consultant's file from the 490 department as provided by an impaired licensee may obtain such 491 information from the department under s. 456.073. 492 (19) (a) The consultant may contract with a school or 493 program to provide impaired practitioner program services to a 494 student enrolled for the purpose of preparing for licensure as a 495 health care practitioner as defined in this chapter or as a 496 veterinarian under chapter 474 if the student has or is

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497	suspected of having an impairment. The department is not
498	responsible for paying for the care provided by approved
499	treatment providers or approved treatment programs or for the
500	services provided by a consultant to a student.
501	(b) A medical school accredited by the Liaison Committee on
502	Medical Education or the Commission on Osteopathic College
503	Accreditation, or another school providing for the education of
504	students enrolled in preparation for licensure as a health care
505	practitioner as defined in this chapter, or a veterinarian under
506	chapter 474, which is governed by accreditation standards
507	requiring notice and the provision of due process procedures to
508	students, is not liable in any civil action for referring a
509	student to the consultant retained by the department or for
510	disciplinary actions that adversely affect the status of a
511	student when the disciplinary actions are instituted in
512	reasonable reliance on the recommendations, reports, or
513	conclusions provided by such consultant, if the school, in
514	referring the student or taking disciplinary action, adheres to
515	the due process procedures adopted by the applicable
516	accreditation entities and if the school committed no
517	intentional fraud in carrying out the provisions of this
518	section.
519	Section 2. Paragraph (1) of subsection (1) of section
520	401.411, Florida Statutes, is amended to read:
521	401.411 Disciplinary action; penalties
522	(1) The department may deny, suspend, or revoke a license,
523	certificate, or permit or may reprimand or fine any licensee,
524	certificateholder, or other person operating under this part for
525	any of the following grounds:
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526	(1) The failure to report to the department any person
527	known to be in violation of this part. However, a professional
528	known to be operating under this part without reasonable skill
529	and without regard for the safety of the public by reason of
530	illness, drunkenness, or the use of drugs, narcotics, chemicals,
531	or any other type of material, or as a result of a mental or
532	physical condition, may be reported to a consultant operating an
533	impaired practitioner program as described in s. 456.076 rather
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535	than to the department.
	Section 3. Paragraph (u) of subsection (1) of section
536	455.227, Florida Statutes, is amended to read:
537	455.227 Grounds for discipline; penalties; enforcement
538	(1) The following acts shall constitute grounds for which
539	the disciplinary actions specified in subsection (2) may be
540	taken:
541	(u) Termination from <u>an impaired practitioner program</u> a
542	treatment program for impaired practitioners as described in s.
543	456.076 for failure to comply, without good cause, with the
544	terms of the monitoring or <u>participant</u> treatment contract
545	entered into by the licensee or failing to successfully complete
546	a drug or alcohol treatment program.
547	Section 4. Paragraphs (i) and (hh) of subsection (1) of
548	section 456.072, Florida Statutes, are amended to read:
549	456.072 Grounds for discipline; penalties; enforcement
550	(1) The following acts shall constitute grounds for which
551	the disciplinary actions specified in subsection (2) may be
552	taken:
553	(i) Except as provided in s. 465.016, failing to report to
554	the department any person who the licensee knows is in violation
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18-00542-17 2017876 555 of this chapter, the chapter regulating the alleged violator, or 556 the rules of the department or the board. However, a person who 557 the licensee knows is unable to practice with reasonable skill 558 and safety to patients by reason of illness or use of alcohol, 559 drugs, narcotics, chemicals, or any other type of material, or 560 as a result of a mental or physical condition, may be reported 561 to a consultant operating an impaired practitioner program as 562 described in s. 456.076 rather than to the department. 563 (hh) Being terminated from an impaired practitioner program 564 that a treatment program for impaired practitioners, which is overseen by a an impaired practitioner consultant as described 565 566 in s. 456.076, for failure to comply, without good cause, with 567 the terms of the monitoring or participant treatment contract 568 entered into by the licensee, or for not successfully completing 569 any drug treatment or alcohol treatment program. 570 Section 5. Paragraph (f) of subsection (1) of section 571 457.109, Florida Statutes, is amended to read: 572 457.109 Disciplinary actions; grounds; action by the 573 board.-574 (1) The following acts constitute grounds for denial of a 575 license or disciplinary action, as specified in s. 456.072(2): 576 (f) Failing to report to the department any person who the 577 licensee knows is in violation of this chapter or of the rules 578 of the department. However, a person who the licensee knows is 579 unable to practice acupuncture with reasonable skill and safety 580 to patients by reason of illness or use of alcohol, drugs, 581 narcotics, chemicals, or any other type of material, or as a 582 result of a mental or physical condition, may be reported to a 583 consultant operating an impaired practitioner program as

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584	described in s. 456.076 rather than to the department.
585	Section 6. Paragraph (e) of subsection (1) of section
586	458.331, Florida Statutes, is amended to read:
587	458.331 Grounds for disciplinary action; action by the
588	board and department
589	(1) The following acts constitute grounds for denial of a
590	license or disciplinary action, as specified in s. 456.072(2):
591	(e) Failing to report to the department any person who the
592	licensee knows is in violation of this chapter or of the rules
593	of the department or the board. However, a person who the
594	licensee knows is unable to practice medicine with reasonable
595	skill and safety to patients by reason of illness or use of
596	alcohol, drugs, narcotics, chemicals, or any other type of
597	material, or as a result of a mental or physical condition, may
598	be reported to a consultant operating an impaired practitioner
599	program as described in s. 456.076 rather than to the department
600	A treatment provider approved pursuant to s. 456.076 shall
601	provide the department or consultant with information in
602	accordance with the requirements of s. 456.076(4), (5), (6),
603	(7), and (9).
604	Section 7. Paragraph (e) of subsection (1) of section
605	459.015, Florida Statutes, is amended to read:
606	459.015 Grounds for disciplinary action; action by the
607	board and department
608	(1) The following acts constitute grounds for denial of a
609	license or disciplinary action, as specified in s. 456.072(2):
610	(e) Failing to report to the department or the department's
611	impaired professional consultant any person who the licensee or
612	certificateholder knows is in violation of this chapter or of
1	

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613	the rules of the department or the board. <u>However, a person who</u>
614	the licensee knows is unable to practice osteopathic medicine
615	with reasonable skill and safety to patients by reason of
616	illness or use of alcohol, drugs, narcotics, chemicals, or any
617	other type of material, or as a result of a mental or physical
618	condition, may be reported to a consultant operating an impaired
619	practitioner program as described in s. 456.076 rather than to
620	the department A treatment provider, approved pursuant to s.
621	456.076, shall provide the department or consultant with
622	information in accordance with the requirements of s.
623	456.076(4), (5) , (6) , (7) , and (9) .
624	Section 8. Paragraph (g) of subsection (1) of section
625	460.413, Florida Statutes, is amended to read:
626	460.413 Grounds for disciplinary action; action by board or
627	department
628	(1) The following acts constitute grounds for denial of a
629	license or disciplinary action, as specified in s. 456.072(2):
630	(g) Failing to report to the department any person who the
631	licensee knows is in violation of this chapter or of the rules
632	of the department or the board. However, a person who the
633	licensee knows is unable to practice chiropractic medicine with
634	reasonable skill and safety to patients by reason of illness or
635	use of alcohol, drugs, narcotics, chemicals, or any other type
636	of material, or as a result of a mental or physical condition,
637	may be reported to a consultant operating an impaired
638	practitioner program as described in s. 456.076 rather than to
639	the department.
640	Section 9. Paragraph (f) of subsection (1) of section
641	461.013, Florida Statutes, is amended to read:

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642	461.013 Grounds for disciplinary action; action by the
643	board; investigations by department
644	(1) The following acts constitute grounds for denial of a
645	license or disciplinary action, as specified in s. 456.072(2):
646	(f) Failing to report to the department any person who the
647	licensee knows is in violation of this chapter or of the rules
648	of the department or the board. However, a person who the
649	licensee knows is unable to practice podiatric medicine with
650	reasonable skill and safety to patients by reason of illness or
651	use of alcohol, drugs, narcotics, chemicals, or any other type
652	of material, or as a result of a mental or physical condition,
653	may be reported to a consultant operating an impaired
654	practitioner program as described in s. 456.076 rather than to
655	the department.
656	Section 10. Paragraph (f) of subsection (1) of section
657	462.14, Florida Statutes, is amended to read:
658	462.14 Grounds for disciplinary action; action by the
659	department
660	(1) The following acts constitute grounds for denial of a
661	license or disciplinary action, as specified in s. 456.072(2):
662	(f) Failing to report to the department any person who the
663	licensee knows is in violation of this chapter or of the rules
664	of the department. However, a person who the licensee knows is
665	unable to practice naturopathic medicine with reasonable skill
666	and safety to patients by reason of illness or use of alcohol,
667	drugs, narcotics, chemicals, or any other type of material, or
668	as a result of a mental or physical condition, may be reported
669	to a consultant operating an impaired practitioner program as
670	described in s. 456.076 rather than to the department.

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18-00542-17 2017876 671 Section 11. Paragraph (1) of subsection (1) of section 672 463.016, Florida Statutes, is amended to read: 673 463.016 Grounds for disciplinary action; action by the 674 board.-675 (1) The following acts constitute grounds for denial of a 676 license or disciplinary action, as specified in s. 456.072(2): 677 (1) Willfully failing to report any person who the licensee 678 knows is in violation of this chapter or of rules of the 679 department or the board. However, a person who the licensee 680 knows is unable to practice optometry with reasonable skill and 681 safety to patients by reason of illness or use of alcohol, 682 drugs, narcotics, chemicals, or any other type of material, or 683 as a result of a mental or physical condition, may be reported 684 to a consultant operating an impaired practitioner program as described in s. 456.076 rather than to the department. 685 686 Section 12. Paragraph (k) of subsection (1) of section 687 464.018, Florida Statutes, is amended to read: 688 464.018 Disciplinary actions.-689 (1) The following acts constitute grounds for denial of a 690 license or disciplinary action, as specified in s. 456.072(2): 691 (k) Failing to report to the department any person who the 692 licensee knows is in violation of this part or of the rules of 693 the department or the board. However, a person who the licensee 694 knows is unable to practice nursing with reasonable skill and 695 safety to patients by reason of illness or use of alcohol, 696 drugs, narcotics, chemicals, or any other type of material, or 697 as a result of a mental or physical condition, may be reported 698 to a consultant operating an impaired practitioner program as 699 described in s. 456.076 rather than to the department; however,

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700	if the licensee verifies that such person is actively
701	participating in a board-approved program for the treatment of a
702	physical or mental condition, the licensee is required to report
703	such person only to an impaired professionals consultant.
704	Section 13. Paragraph (c) of subsection (2) of section
705	464.204, Florida Statutes, is amended to read:
706	464.204 Denial, suspension, or revocation of certification;
707	disciplinary actions
708	(2) When the board finds any person guilty of any of the
709	grounds set forth in subsection (1), it may enter an order
710	imposing one or more of the following penalties:
711	(c) Imposition of probation or restriction of
712	certification, including conditions such as corrective actions
713	as retraining or compliance with the department's impaired
714	practitioner program operated by a consultant as described in s.
715	456.076 an approved treatment program for impaired
716	practitioners.
717	Section 14. Paragraph (o) of subsection (1) of section
718	465.016, Florida Statutes, is amended to read:
719	465.016 Disciplinary actions
720	(1) The following acts constitute grounds for denial of a
721	license or disciplinary action, as specified in s. 456.072(2):
722	(o) Failing to report to the department any licensee under
723	chapter 458 or under chapter 459 who the pharmacist knows has
724	violated the grounds for disciplinary action set out in the law
725	under which that person is licensed and who provides health care
726	services in a facility licensed under chapter 395, or a health
727	maintenance organization certificated under part I of chapter
728	641, in which the pharmacist also provides services. <u>However, a</u>

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729	person who the licensee knows is unable to practice medicine or
730	osteopathic medicine with reasonable skill and safety to
731	patients by reason of illness or use of alcohol, drugs,
732	narcotics, chemicals, or any other type of material, or as a
733	result of a mental or physical condition, may be reported to a
734	consultant operating an impaired practitioner program as
735	described in s. 456.076 rather than to the department.
736	Section 15. Paragraph (f) of subsection (1) of section
737	466.028, Florida Statutes, is amended to read:
738	466.028 Grounds for disciplinary action; action by the
739	board
740	(1) The following acts constitute grounds for denial of a
741	license or disciplinary action, as specified in s. 456.072(2):
742	(f) Failing to report to the department any person who the
743	licensee knows, or has reason to believe, is clearly in
744	violation of this chapter or of the rules of the department or
745	the board. However, a person who the licensee knows, or has
746	reason to believe, is clearly unable to practice her or his
747	profession with reasonable skill and safety to patients by
748	reason of illness or use of alcohol, drugs, narcotics,
749	chemicals, or any other type of material, or as a result of a
750	mental or physical condition, may be reported to a consultant
751	operating an impaired practitioner program as described in s.
752	456.076 rather than to the department.
753	Section 16. Paragraph (h) of subsection (1) of section
754	467.203, Florida Statutes, is amended to read:
755	467.203 Disciplinary actions; penalties
756	(1) The following acts constitute grounds for denial of a
757	license or disciplinary action, as specified in s. 456.072(2):
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787	investigations, inspections, evaluations, and tests, and require
788	the submission of any documents and statements, which it
789	considers necessary to determine whether a violation of this
790	part has occurred. The following acts shall be grounds for
791	disciplinary action as set forth in this section:
792	(n) Being terminated from an impaired practitioner program
793	operated by a consultant as described in s. 456.076 for failure
794	to comply, without good cause, with the terms of monitoring or a
795	participant contract entered into by the licensee, or for not
796	successfully completing a drug treatment or alcohol treatment
797	program Failing to comply with the recommendations of the
798	department's impaired practitioner program for treatment,
799	evaluation, or monitoring. A letter from the director of the
800	impaired practitioner program that the certificateholder is not
801	in compliance shall be considered conclusive proof under this
802	part.
803	Section 19. Section 474.221, Florida Statutes, is amended
804	to read:
805	474.221 Impaired practitioner provisions; applicability
806	Notwithstanding the transfer of the Division of Medical Quality
807	Assurance to the Department of Health or any other provision of
808	law to the contrary, veterinarians licensed under this chapter
809	shall be governed by the treatment of impaired practitioner
810	program provisions of s. 456.076 as if they were under the
811	jurisdiction of the Division of Medical Quality Assurance,
812	except that for veterinarians the Department of Business and
813	Professional Regulation shall, at its option, exercise any of
814	the powers granted to the Department of Health by that section,
815	and "board" shall mean board as defined in this chapter.

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816	Section 20. Paragraph (o) of subsection (1) of section
817	483.825, Florida Statutes, is amended to read:
818	483.825 Grounds for disciplinary action
819	(1) The following acts constitute grounds for denial of a
820	license or disciplinary action, as specified in s. 456.072(2):
821	(o) Failing to report to the department a person or other
822	licensee who the licensee knows is in violation of this chapter
823	or the rules of the department or board adopted hereunder.
824	However, a person or other licensee who the licensee knows is
825	unable to perform or report on clinical laboratory examinations
826	with reasonable skill and safety to patients by reason of
827	illness or use of alcohol, drugs, narcotics, chemicals, or any
828	other type of material, or as a result of a mental or physical
829	condition, may be reported to a consultant operating an impaired
830	practitioner program as described in s. 456.076 rather than to
831	the department.
832	Section 21. This act shall take effect upon becoming a law.