By the Committees on Appropriations; and Health Policy; and Senators Young, Bean, and Rouson

	576-04401-17 2017876c2
1	A bill to be entitled
2	An act relating to health care practitioners; amending
3	s. 456.076, F.S.; revising provisions related to
4	impaired practitioner programs; providing definitions;
5	deleting a requirement that the Department of Health
6	designate approved programs by rule; deleting a
7	requirement authorizing the department to adopt by
8	rule the manner in which consultants work with the
9	department in intervention, in evaluating and treating
10	professionals, in providing and monitoring continued
11	care of impaired professionals, and in expelling
12	professionals from the program; authorizing, instead
13	of requiring, the department to retain one or more
14	consultants to operate its impaired practitioner
15	program; requiring the department to establish the
16	terms and conditions of the program by contract;
17	providing contract terms; requiring consultants to
18	establish the terms of monitoring impaired
19	practitioners; authorizing consultants to consider the
20	recommendations of certain persons in establishing the
21	terms of monitoring; authorizing consultants to modify
22	monitoring terms to protect the health, safety, and
23	welfare of the public; requiring consultants to assist
24	the department and licensure boards on matters
25	relating to impaired practitioners; making technical
26	changes; requiring the department to refer
27	practitioners to consultants under certain
28	circumstances; authorizing consultants to withhold
29	certain information about self-reporting participants

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30	from the department under certain circumstances to
31	encourage self-reporting; requiring consultants to
32	disclose all information relating to practitioners who
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 s. 456.0635, F.S.;
48	providing that, under certain circumstances, a board
49	or, if there is no board, the department, is not
50	required to refuse to admit certain candidates to an
51	examination, to issue a license, certificate, or
52	registration to certain applicants, or to renew a
53	license, certificate, or registration of certain
54	applicants if they have successfully completed a
55	pretrial diversion program; providing applicability;
56	amending ss. 456.072, 457.109, 458.331, 459.015,
57	460.413, 461.013, 462.14, 463.016, and 464.018, F.S.;
58	providing that an impaired practitioner may be

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59	reported to a consultant rather than the department
60	under certain circumstances; amending s. 464.204,
61	F.S.; conforming provisions to changes made by the
62	act; amending ss. 465.016, 466.028, 467.203, 468.217,
63	and 468.3101, F.S.; providing that an impaired
64	practitioner may be reported to a consultant rather
65	than the department under certain circumstances;
66	amending s. 474.221, F.S.; conforming provisions to
67	changes made by the act; amending s. 483.825, F.S.;
68	providing that certain persons may be reported to a
69	consultant rather than the department under certain
70	circumstances; creating s. 456.0495, F.S.; requiring
71	licensed midwives and health care providers to report
72	adverse incidents to the department within a certain
73	period; requiring the department to adopt rules
74	establishing guidelines for reporting specified
75	adverse incidents; providing an effective date.
76	
77	Be It Enacted by the Legislature of the State of Florida:
78	
79	Section 1. Section 456.076, Florida Statutes, is amended to
80	read:
81	456.076 Impaired practitioner programs Treatment programs
82	for impaired practitioners
83	(1) As used in this section, the term:
84	(a) "Consultant" means the individual or entity who
85	operates an approved impaired practitioner program pursuant to a
86	contract with the department and who is retained by the
87	department as provided in subsection (2).

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88	(b) "Evaluator" means a state-licensed or nationally
89	certified individual who has been approved by a consultant or
90	the department, who has completed an evaluator training program
91	established by the consultant, and who is therefore authorized
92	to evaluate practitioners as part of an impaired practitioner
93	program.
94	(c) "Impaired practitioner" means a practitioner with an
95	impairment.
96	(d) "Impaired practitioner program" means a program
97	established by the department by contract with one or more
98	consultants to serve impaired and potentially impaired
99	practitioners for the protection of the health, safety, and
100	welfare of the public.
101	(e) "Impairment" means a potentially impairing health
102	condition that is the result of the misuse or abuse of alcohol,
103	drugs, or both, or a mental or physical condition that could
104	affect a practitioner's ability to practice with skill and
105	safety.
106	(f) "Inability to progress" means a determination by a
107	consultant based on a participant's response to treatment and
108	prognosis that the participant is unable to safely practice
109	despite compliance with treatment requirements and his or her
110	participant contract.
111	(g) "Material noncompliance" means an act or omission by a
112	participant in violation of his or her participant contract as
113	determined by the department or consultant.
114	(h) "Participant" means a practitioner who is participating
115	in the impaired practitioner program by having entered into a
116	participant contract. A practitioner ceases to be a participant
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117	when the participant contract is successfully completed or is
118	terminated for any reason.
119	(i) "Participant contract" means a formal written document
120	outlining the requirements established by a consultant for a
121	participant to successfully complete the impaired practitioner
122	program, including the participant's monitoring plan.
123	(j) "Practitioner" means a person licensed, registered,
124	certified, or regulated by the department under part III of
125	chapter 401; chapter 457; chapter 458; chapter 459; chapter 460;
126	chapter 461; chapter 462; chapter 463; chapter 464; chapter 465;
127	chapter 466; chapter 467; part I, part II, part III, part V,
128	part X, part XIII, or part XIV of chapter 468; chapter 478;
129	chapter 480; part III or part IV of chapter 483; chapter 484;
130	chapter 486; chapter 490; or chapter 491; or an applicant for a
131	license, registration, or certification under the same laws.
132	(k) "Referral" means a practitioner who has been referred,
133	either as a self-referral or otherwise, or reported to a
134	consultant for impaired practitioner program services, but who
135	is not under a participant contract.
136	(1) "Treatment program" means a department- or consultant-
137	approved residential, intensive outpatient, partial
138	hospitalization or other program through which an impaired
139	practitioner is treated based on the impaired practitioner's
140	diagnosis and the treatment plan approved by the consultant.
141	(m) "Treatment provider" means a department- or consultant-
142	approved state-licensed or nationally certified individual who
143	provides treatment to an impaired practitioner based on the
144	practitioner's individual diagnosis and a treatment plan
145	approved by the consultant For professions that do not have

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	impaired practitioner programs provided for in their practice
147	acts, the department shall, by rule, designate approved impaired
148	practitioner programs under this section. The department may
149	adopt rules setting forth appropriate criteria for approval of
150	treatment providers. The rules may specify the manner in which
151	the consultant, retained as set forth in subsection (2), works
152	with the department in intervention, requirements for evaluating
153	and treating a professional, requirements for continued care of
154	impaired professionals by approved treatment providers,
155	continued monitoring by the consultant of the care provided by
156	approved treatment providers regarding the professionals under
157	their care, and requirements related to the consultant's
158	expulsion of professionals from the program.
159	(2) (a) The department <u>may</u> shall retain one or more impaired
160	practitioner consultants <u>to operate its impaired practitioner</u>
161	program. Each consultant who are each licensees under the
162	jurisdiction of the Division of Medical Quality Assurance within
163	the department and who must be:
164	(a) 1. A practitioner or recovered practitioner licensed
165	under chapter 458, chapter 459, or part I of chapter 464; or
166	(b) 2. An entity that employs:
167	<u>1.a.</u> A medical director who <u>is</u> must be a practitioner or
168	recovered practitioner licensed under chapter 458 or chapter
169	459; or
170	2.b. An executive director who is must be a registered
171	nurse or a recovered registered nurse licensed under part I of
172	chapter 464.
173	(3) The terms and conditions of the impaired practitioner
174	program must be established by the department by contract with a

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175	consultant for the protection of the health, safety, and welfare
176	of the public and must provide, at a minimum, that the
177	<pre>consultant:</pre>
178	(a) Accepts referrals;
179	(b) Arranges for the evaluation and treatment of impaired
180	practitioners by a treatment provider, when the consultant deems
181	the evaluation and treatment necessary;
182	(c) Monitors the recovery progress and status of impaired
183	practitioners to ensure that such practitioners are able to
184	practice their profession with skill and safety. Such monitoring
185	must continue until the consultant or department concludes that
186	monitoring by the consultant is no longer required for the
187	protection of the public or until the practitioner's
188	participation in the program is terminated for material
189	noncompliance or inability to progress; and
190	(d) Does not directly evaluate, treat, or otherwise provide
191	patient care to a practitioner in the operation of the impaired
192	practitioner program.
193	(4) The department shall specify, in its contract with each
194	consultant, the types of licenses, registrations, or
195	certifications of the practitioners to be served by that
196	consultant.
197	(5) A consultant shall enter into a participant contract
198	with an impaired practitioner and shall establish the terms of
199	monitoring and shall include the terms in a participant
200	contract. In establishing the terms of monitoring, the
201	consultant may consider the recommendations of one or more
202	approved evaluators, treatment programs, or treatment providers.
203	A consultant may modify the terms of monitoring if the

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204	consultant concludes, through the course of monitoring, that
205	extended, additional, or amended terms of monitoring are
206	required for the protection of the health, safety, and welfare
207	of the public.
208	<u>(6)</u> A An entity retained as an impaired practitioner
209	consultant under this section which employs a medical director
210	or an executive director is not required to be licensed as a
211	substance abuse provider or mental health treatment provider
212	under chapter 394, chapter 395, or chapter 397 for purposes of
213	providing services under this program.
214	(7) (c)1. Each The consultant shall assist the <u>department</u>
215	and licensure boards on matters of impaired practitioners,
216	including the determination of probable cause panel and the

216 <u>including the determination of probable cause panel and the</u> 217 department in carrying out the responsibilities of this section. 218 This includes working with department investigators to determine 219 whether a practitioner is, in fact, impaired, as specified in 220 <u>the consultant's contract</u> with the department.

221 2. The consultant may contract with a school or program to 222 provide services to a student enrolled for the purpose of 223 preparing for licensure as a health care practitioner as defined 224 in this chapter or as a veterinarian under chapter 474 if the 225 student is allegedly impaired as a result of the misuse or abuse 226 of alcohol or drugs, or both, or due to a mental or physical 227 condition. The department is not responsible for paying for the 228 care provided by approved treatment providers or a consultant. 229 (d) A medical school accredited by the Liaison Committee on 230 Medical Education or the Commission on Osteopathic College 231 Accreditation, or another school providing for the education of students enrolled in preparation for licensure as a health care 232

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576-04401-17 2017876c2 233 practitioner as defined in this chapter or a veterinarian under 234 chapter 474 which is governed by accreditation standards 235 requiring notice and the provision of due process procedures to 236 students, is not liable in any civil action for referring a 237 student to the consultant retained by the department or for 238 disciplinary actions that adversely affect the status of a 239 student when the disciplinary actions are instituted in 240 reasonable reliance on the recommendations, reports, or conclusions provided by such consultant, if the school, in 241 242 referring the student or taking disciplinary action, adheres to 243 the due process procedures adopted by the applicable 244 accreditation entities and if the school committed no 245 intentional fraud in carrying out the provisions of this 246 section. 247 (8) (3) Before issuing an approval of, or intent to deny, an

248 application for licensure, each board and profession within the 249 Division of Medical Quality Assurance may delegate to its chair 250 or other designee its authority to determine, before certifying 251 or declining to certify an application for licensure to the 252 department, that an applicant for licensure under its 253 jurisdiction may have an impairment be impaired as a result of 254 the misuse or abuse of alcohol or drugs, or both, or due to a 255 mental or physical condition that could affect the applicant's 256 ability to practice with skill and safety. Upon such 257 determination, the chair or other designee may refer the 258 applicant to the consultant to facilitate for an evaluation 259 before the board issues an approval of, certifies or intent to 260 deny, declines to certify his or her application to the 261 department. If the applicant agrees to be evaluated by the

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576-04401-17 2017876c2 262 consultant, the department's deadline for approving or denying 263 the application pursuant to s. 120.60(1) is tolled until the 264 evaluation is completed and the result of the evaluation and 265 recommendation by the consultant is communicated to the board by 266 the consultant. If the applicant declines to be evaluated by the 267 consultant, the board shall issue an approval of, or intent to 268 deny, certify or decline to certify the applicant's application 269 to the department notwithstanding the lack of an evaluation and 270 recommendation by the consultant. 271 (9) (a) (4) (a) Except as provided in paragraph (b), when 272 Whenever the department receives a written or oral legally sufficient complaint alleging that a practitioner has an 273 274 impairment licensee under the jurisdiction of the Division of 275 Medical Quality Assurance within the department is impaired as a 276 result of the misuse or abuse of alcohol or drugs, or both, or 277 due to a mental or physical condition which could affect the 278 licensee's ability to practice with skill and safety, and no 279 complaint exists against the practitioner licensee other than 280 impairment exists, the department shall refer the practitioner 281 to the consultant, along with all information in the 282 department's possession relating to the impairment. The 283 impairment does reporting of such information shall not 284 constitute grounds for discipline pursuant to s. 456.072 or the 285 corresponding grounds for discipline within the applicable 286 practice act if the probable cause panel of the appropriate 287 board, or the department when there is no board, finds: 288 1. The practitioner licensee has acknowledged the 289 impairment; problem. 290 2. The practitioner becomes a participant licensee has

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291	voluntarily enrolled in an impaired practitioner program and
292	successfully completes a participant contract under terms
293	established by the consultant; appropriate, approved treatment
294	program.
295	3. The <u>practitioner</u> licensee has voluntarily withdrawn from
296	practice or <u>has</u> limited the scope of <u>his or her</u> practice <u>if</u> as
297	required by the consultant <u>;</u> , in each case, until such time as
298	the panel, or the department when there is no board, is
299	satisfied the licensee has successfully completed an approved
300	treatment program.
301	4. The practitioner licensee has provided to the
302	consultant, or has authorized the consultant to obtain, all
303	records and information relating to the impairment from any
304	source and all other medical records of the practitioner
305	requested by the consultant; and executed releases for medical
306	records, authorizing the release of all records of evaluations,
307	diagnoses, and treatment of the licensee, including records of
308	treatment for emotional or mental conditions, to the consultant.
309	The consultant shall make no copies or reports of records that
310	do not regard the issue of the licensee's impairment and his or
311	her participation in a treatment program.
312	5. The practitioner has authorized the consultant, in the
313	event of the practitioner's termination from the impaired
314	practitioner program, to report the termination to the
315	department and provide the department with copies of all
316	information in the consultant's possession relating to the
317	practitioner.
318	(b) For practitioners who are employed by governmental
319	entities and who are also certified by the department pursuant

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320	to part III of chapter 401, the department may not refer the
321	practitioner to the consultant if the practitioner is under a
322	referral by the practitioner's employer to an employee
323	assistance program through the governmental entity. If the
324	practitioner fails to satisfactorily complete the employee
325	assistance program or if his or her employment is terminated,
326	his or her employer must immediately notify the department,
327	which shall then refer the practitioner to the consultant as
328	required in paragraph (a). For purposes of this paragraph, the
329	term "governmental entity" has the same meaning as provided in
330	<u>s. 70.001(3)(c).</u>
331	(c) To encourage practitioners who are or may be impaired
332	to voluntarily self-refer to a consultant, the consultant may
333	not provide information to the department relating to a self-
334	referring participant if the consultant has no knowledge of a
335	pending department investigation, complaint, or disciplinary
336	action against the participant and if the participant is in
337	compliance and making progress with the terms of the impaired
338	practitioner program and contract, unless authorized by the
339	participant If, however, the department has not received a
340	legally sufficient complaint and the licensee agrees to withdraw
341	from practice until such time as the consultant determines the
342	licensee has satisfactorily completed an approved treatment
343	program or evaluation, the probable cause panel, or the
344	department when there is no board, shall not become involved in
345	the licensee's case.
346	(c) Inquiries related to impairment treatment programs
347	designed to provide information to the licensee and others and
348	which do not indicate that the licensee presents a danger to the

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576-04401-17 2017876c2 349 public shall not constitute a complaint within the meaning of s. 350 456.073 and shall be exempt from the provisions of this 351 subsection. 352 (d) Whenever the department receives a legally sufficient 353 complaint alleging that a licensee is impaired as described in 354 paragraph (a) and no complaint against the licensee other than 355 impairment exists, the department shall forward all information 356 in its possession regarding the impaired licensee to the 357 consultant. For the purposes of this section, a suspension from 358 hospital staff privileges due to the impairment does not constitute a complaint. 359 360 (e) The probable cause panel, or the department when there 361 is no board, shall work directly with the consultant, and all 362 information concerning a practitioner obtained from the 363 consultant by the panel, or the department when there is no 364 board, shall remain confidential and exempt from the provisions 365 of s. 119.07(1), subject to the provisions of subsections (6) 366 $\frac{\text{and}}{(7)}$. 367 (f) A finding of probable cause shall not be made as long

367 (1) A finding of probable cause shall not be made as fong 368 as the panel, or the department when there is no board, is 369 satisfied, based upon information it receives from the 370 consultant and the department, that the licensee is progressing 371 satisfactorily in an approved impaired practitioner program and 372 no other complaint against the licensee exists.

373 <u>(10)(5)</u> In any disciplinary action for a violation other 374 than impairment in which a <u>practitioner</u> licensee establishes the 375 violation for which the <u>practitioner</u> licensee is being 376 prosecuted was due to or connected with impairment and further 377 establishes the <u>practitioner</u> licensee is satisfactorily

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378	progressing through or has successfully completed an <i>impaired</i>
379	practitioner program approved treatment program pursuant to this
380	section, such information may be considered by the board, or the
381	department when there is no board, as a mitigating factor in
382	determining the appropriate penalty. This subsection does not
383	limit mitigating factors the board may consider.
384	(11)(a) (6)(a) Upon request by the consultant, and with the
385	authorization of the practitioner when required by law, an
386	approved <u>evaluator, treatment program, or</u> treatment provider
387	shall, upon request, disclose to the consultant all information
388	in its possession regarding <u>a referral or participant</u> the issue
389	of a licensee's impairment and participation in the treatment
390	program. All information obtained by the consultant and
391	department pursuant to this section is confidential and exempt
392	from the provisions of s. 119.07(1), subject to the provisions
393	of this subsection and subsection (7). Failure to provide such
394	information to the consultant is grounds for withdrawal of
395	approval of such <u>evaluator, treatment</u> program <u>,</u> or <u>treatment</u>
396	provider.
397	(b) When a referral or participant is terminated from the
398	impaired practitioner program for material noncompliance with a
399	participant contract, inability to progress, or any other reason
400	than completion, the consultant shall disclose If in the opinion
401	of the consultant, after consultation with the treatment
402	provider, an impaired licensee has not progressed satisfactorily
403	in a treatment program, all information regarding the issue of a
404	licensee's impairment and participation in a treatment program
405	in the consultant's possession <u>relating to the practitioner</u>
406	shall be disclosed to the department. Such disclosure shall

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407	constitute a complaint pursuant to the general provisions of s.
408	456.073. In addition, whenever the consultant concludes that
409	impairment affects a practitioner's licensee's practice and
410	constitutes an immediate, serious danger to the public health,
411	safety, or welfare, the consultant shall immediately communicate
412	such that conclusion shall be communicated to the department and
413	disclose all information in the consultant's possession relating
414	to the practitioner to the department State Surgeon General.
415	(12) All information obtained by the consultant pursuant to
416	this section is confidential and exempt from s. 119.07(1) and s.
417	24(a), Art. I of the State Constitution.
418	<u>(13)</u> A consultant, <u>or a director, officer, employee, or</u>
419	agent of a consultant, may not be held liable financially or may
420	not have a cause of action for damages brought against him or
421	her for making a disclosure pursuant to this section, for any
422	other action or omission relating to the impaired practitioner
423	program, or for the consequences of such disclosure or action or
424	omission, including, without limitation, action by the
425	department against a license, registration, or certification
426	licensee, or approved treatment provider who makes a disclosure
427	pursuant to this section is not subject to civil liability for
428	such disclosure or its consequences.
429	(14) The provisions of s. 766.101 apply to any consultant
430	and the consultant's directors, officers, employees, or agents
431	in regards to providing information relating to a participant to
432	a medical review committee if the participant authorizes such
433	<u>disclosure</u> officer, employee, or agent of the department or the
434	board and to any officer, employee, or agent of any entity with
435	which the department has contracted pursuant to this section.
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436	(15)(a) (8)(a) A consultant retained pursuant to this
437	section and subsection (2), a consultant's directors, officers,
438	and employees, or agents and those acting at the direction of
439	the consultant for the limited purpose of an emergency
440	intervention on behalf of a licensee or student as described in
441	subsection (2) when the consultant is unable to perform such
442	intervention shall be considered agents of the department for
443	purposes of s. 768.28 while acting within the scope of the
444	<code>consultant's</code> duties under the <code>contract</code> with the <code>department</code> $rac{ ext{if}}{ ext{if}}$
445	the contract complies with the requirements of this section. The
446	contract must require that:
447	1. The consultant indemnify the state for any liabilities
448	incurred up to the limits set out in chapter 768.
449	2. The consultant establish a quality assurance program to
450	monitor services delivered under the contract.
451	3. The consultant's quality assurance program, treatment,
452	and monitoring records be evaluated quarterly.
453	4. The consultant's quality assurance program be subject to
454	review and approval by the department.
455	5. The consultant operate under policies and procedures
456	approved by the department.
457	6. The consultant provide to the department for approval a
458	policy and procedure manual that comports with all statutes,
459	rules, and contract provisions approved by the department.
460	7. The department be entitled to review the records
461	relating to the consultant's performance under the contract for
462	the purpose of management audits, financial audits, or program
463	evaluation.
464	8. All performance measures and standards be subject to
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576-04401-17 2017876c2 465 verification and approval by the department. 466 9. The department be entitled to terminate the contract 467 with the consultant for noncompliance with the contract. 468 (b) In accordance with s. 284.385, the Department of 469 Financial Services shall defend any claim, suit, action, or 470 proceeding, including a claim, suit, action, or proceeding for 471 injunctive, affirmative, or declaratory relief, against the 472 consultant, or the consultant's directors, officers, or 473 employees, and agents brought as the result of any action or 474 omission relating to the impaired practitioner program or those acting at the direction of the consultant for the limited 475 476 purpose of an emergency intervention on behalf of a licensee or 477 student as described in subsection (2) when the consultant is 478 unable to perform such intervention, which claim, suit, action, 479 or proceeding is brought as a result of an act or omission by 480 any of the consultant's officers and employees and those acting 481 under the direction of the consultant for the limited purpose of 482 an emergency intervention on behalf of the licensee or student 483 when the consultant is unable to perform such intervention, if 484 the act or omission arises out of and is in the scope of the 485 consultant's duties under its contract with the department. 486 (16) (16) (c) If a the consultant retained by the department 487 pursuant to this section subsection (2) is also retained by 488 another any other state agency to operate an impaired 489 practitioner program for that agency, this section also applies to the consultant's operation of an impaired practitioner 490 491 program for that agency, and if the contract between such state 492 agency and the consultant complies with the requirements of this

493 section, the consultant, the consultant's officers and

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494	employees, and those acting under the direction of the
495	consultant for the limited purpose of an emergency intervention
496	on behalf of a licensee or student as described in subsection
497	(2) when the consultant is unable to perform such intervention
498	shall be considered agents of the state for the purposes of this
499	section while acting within the scope of and pursuant to
500	guidelines established in the contract between such state agency
501	and the consultant.
502	(17) (9) A An impaired practitioner consultant is the
503	official custodian of records relating to the referral of an
504	impaired licensee or applicant to that consultant and any other
505	interaction between the licensee or applicant and the
506	consultant. The consultant may disclose to <u>a referral or</u>
507	participant, or to the legal representative of the referral or
508	participant, the documents, records, or other information from
509	the consultant's file, including information received by the
510	consultant from other sources, and information on the terms
511	required for the referral's or participant's monitoring
512	contract, the referral's or participant's progress or inability
513	to progress, the referral's or participant's discharge or
514	termination, information supporting the conclusion of material
515	noncompliance, or any other information required by law the
516	impaired licensee or applicant or his or her designee any
517	information that is disclosed to or obtained by the consultant
518	or that is confidential under paragraph (6)(a), but only to the
519	extent that it is necessary to do so to carry out the
520	consultant's duties under this section. The department, and any
521	other entity that enters into a contract with the consultant to
522	receive the services of the consultant, has direct

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523	administrative control over the consultant to the extent
524	necessary to receive disclosures from the consultant as allowed
525	by federal law. If a <u>consultant discloses information to the</u>
526	department in accordance with this part, a referral or
527	participant, or his or her legal representative, may obtain a
528	complete copy of the consultant's file from the consultant or
529	disciplinary proceeding is pending, an impaired licensee may
530	obtain such information from the department under s. 456.073.
531	(18) (a) The consultant may contract with a school or
532	program to provide impaired practitioner program services to a
533	student enrolled for the purpose of preparing for licensure as a
534	health care practitioner as defined in this chapter or as a
535	veterinarian under chapter 474 if the student has or is
536	suspected of having an impairment. The department is not
537	responsible for paying for the care provided by approved
538	treatment providers or approved treatment programs or for the
539	services provided by a consultant to a student.
540	(b) A medical school accredited by the Liaison Committee on
541	Medical Education or the Commission on Osteopathic College
542	Accreditation, or another school providing for the education of
543	students enrolled in preparation for licensure as a health care
544	practitioner as defined in this chapter, or a veterinarian under
545	chapter 474, which is governed by accreditation standards
546	requiring notice and the provision of due process procedures to
547	students, is not liable in any civil action for referring a
548	student to the consultant retained by the department or for
549	disciplinary actions that adversely affect the status of a
550	student when the disciplinary actions are instituted in
551	reasonable reliance on the recommendations, reports, or
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552	conclusions provided by such consultant, if the school, in
553	referring the student or taking disciplinary action, adheres to
554	the due process procedures adopted by the applicable
555	accreditation entities and if the school committed no
556	intentional fraud in carrying out the provisions of this
557	section.
558	Section 2. Paragraph (1) of subsection (1) of section
559	401.411, Florida Statutes, is amended to read:
560	401.411 Disciplinary action; penalties
561	(1) The department may deny, suspend, or revoke a license,
562	certificate, or permit or may reprimand or fine any licensee,
563	certificateholder, or other person operating under this part for
564	any of the following grounds:
565	(l) The failure to report to the department any person
566	known to be in violation of this part. However, a professional
567	known to be operating under this part without reasonable skill
568	and without regard for the safety of the public by reason of
569	illness, drunkenness, or the use of drugs, narcotics, chemicals,
570	or any other type of material, or as a result of a mental or
571	physical condition, may be reported to a consultant operating an
572	impaired practitioner program as described in s. 456.076 rather
573	than to the department.
574	Section 3. Paragraph (u) of subsection (1) of section
575	455.227, Florida Statutes, is amended to read:
576	455.227 Grounds for discipline; penalties; enforcement
577	(1) The following acts shall constitute grounds for which
578	the disciplinary actions specified in subsection (2) may be
579	taken:
580	(u) Termination from <u>an impaired practitioner program</u> a
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581	treatment program for impaired practitioners as described in s.
582	456.076 for failure to comply, without good cause, with the
583	terms of the monitoring or <u>participant</u> treatment contract
584	entered into by the licensee or failing to successfully complete
585	a drug or alcohol treatment program.
586	Section 4. Subsections (2) and (3) of section 456.0635,
587	Florida Statutes, are amended to read:
588	456.0635 Health care fraud; disqualification for license,
589	certificate, or registration
590	(2) Each board within the jurisdiction of the department,
591	or the department if there is no board, shall refuse to admit a
592	candidate to any examination and refuse to issue a license,
593	certificate, or registration to any applicant if the candidate
594	or applicant or any principal, officer, agent, managing
595	employee, or affiliated person of the <u>candidate or</u> applicant:
596	(a) Has been convicted of, or entered a plea of guilty or
597	nolo contendere to, regardless of adjudication, a felony under
598	chapter 409, chapter 817, or chapter 893, or a similar felony
599	offense committed in another state or jurisdiction, unless the
600	candidate or applicant has successfully completed a <u>pretrial</u>
601	diversion or drug court program for that felony and provides
602	proof that the plea has been withdrawn or the charges have been
603	dismissed. Any such conviction or plea shall exclude the
604	applicant or candidate from licensure, examination,
605	certification, or registration unless the sentence and any
606	subsequent period of probation for such conviction or plea
607	ended:
$c \cap o$	

608 1. For felonies of the first or second degree, more than 15609 years before the date of application.

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576-04401-17 2017876c2 610 2. For felonies of the third degree, more than 10 years 611 before the date of application, except for felonies of the third degree under s. 893.13(6)(a). 612 3. For felonies of the third degree under s. 893.13(6)(a), 613 614 more than 5 years before the date of application; 615 (b) Has been convicted of, or entered a plea of quilty or 616 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 617 sentence and any subsequent period of probation for such 618 619 conviction or plea ended more than 15 years before the date of 620 the application; 621 (c) Has been terminated for cause from the Florida Medicaid program pursuant to s. 409.913, unless the candidate or 622 623 applicant has been in good standing with the Florida Medicaid 624 program for the most recent 5 years; 625 (d) Has been terminated for cause, pursuant to the appeals 626 procedures established by the state, from any other state 627 Medicaid program, unless the candidate or applicant has been in 628 good standing with a state Medicaid program for the most recent 629 5 years and the termination occurred at least 20 years before 630 the date of the application; or 631 (e) Is currently listed on the United States Department of Health and Human Services Office of Inspector General's List of 632 633 Excluded Individuals and Entities. 634 635 This subsection does not apply to an applicant for initial 636 licensure, certification, or registration who was arrested for 637 or charged with a felony specified in paragraph (a) or paragraph 638 (b) before July 1, 2009.

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          (3) The department shall refuse to renew a license,
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     certificate, or registration of any applicant if the applicant
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     or any principal, officer, agent, managing employee, or
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     affiliated person of the applicant:
643
           (a) Has been convicted of, or entered a plea of guilty or
644
     nolo contendere to, regardless of adjudication, a felony under
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     chapter 409, chapter 817, or chapter 893, or a similar felony
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     offense committed in another state or jurisdiction, unless the
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     applicant is currently enrolled in a pretrial diversion or drug
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     court program that allows the withdrawal of the plea for that
     felony upon successful completion of that program. Any such
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650
     conviction or plea excludes the applicant from licensure renewal
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     unless the sentence and any subsequent period of probation for
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     such conviction or plea ended:
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          1. For felonies of the first or second degree, more than 15
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     years before the date of application.
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          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 third
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     degree under s. 893.13(6)(a).
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          3. For felonies of the third degree under s. 893.13(6)(a),
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     more than 5 years before the date of application.
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           (b) Has been convicted of, or entered a plea of guilty or
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     nolo contendere to, regardless of adjudication, a felony under
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     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
663
664
     for such conviction or plea ended more than 15 years before the
665
     date of the application.
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(c) Has been terminated for cause from the Florida Medicaidprogram pursuant to s. 409.913, unless the applicant has been in

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576-04401-17 2017876c2 668 good standing with the Florida Medicaid program for the most recent 5 years. 669 (d) Has been terminated for cause, pursuant to the appeals 670 671 procedures established by the state, from any other state 672 Medicaid program, unless the applicant has been in good standing 673 with a state Medicaid program for the most recent 5 years and 674 the termination occurred at least 20 years before the date of 675 the application. 676 (e) Is currently listed on the United States Department of 677 Health and Human Services Office of Inspector General's List of 678 Excluded Individuals and Entities. 679 680 This subsection does not apply to an applicant for renewal of 681 licensure, certification, or registration who was arrested for 682 or charged with a felony specified in paragraph (a) or paragraph 683 (b) before July 1, 2009. 684 Section 5. Paragraphs (i) and (hh) of subsection (1) of 685 section 456.072, Florida Statutes, are amended to read: 686 456.072 Grounds for discipline; penalties; enforcement.-687 (1) The following acts shall constitute grounds for which 688 the disciplinary actions specified in subsection (2) may be 689 taken: 690 (i) Except as provided in s. 465.016, failing to report to 691 the department any person who the licensee knows is in violation 692 of this chapter, the chapter regulating the alleged violator, or the rules of the department or the board. However, a person who 693 694 the licensee knows is unable to practice with reasonable skill and safety to patients by reason of illness or use of alcohol, 695 drugs, narcotics, chemicals, or any other type of material, or 696

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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.
700	(hh) Being terminated from an impaired practitioner program
701	that a treatment program for impaired practitioners, which is
702	overseen by <u>a</u> an impaired practitioner consultant as described
703	in s. 456.076, for failure to comply, without good cause, with
704	the terms of the monitoring or participant treatment contract
705	entered into by the licensee, or for not successfully completing
706	any drug treatment or alcohol treatment program.
707	Section 6. Paragraph (f) of subsection (1) of section
708	457.109, Florida Statutes, is amended to read:
709	457.109 Disciplinary actions; grounds; action by the
710	board
711	(1) The following acts constitute grounds for denial of a
712	license or disciplinary action, as specified in s. 456.072(2):
713	(f) Failing to report to the department any person who the
714	licensee knows is in violation of this chapter or of the rules
715	of the department. However, a person who the licensee knows is
716	unable to practice acupuncture with reasonable skill and safety
717	to patients by reason of illness or use of alcohol, drugs,
718	narcotics, chemicals, or any other type of material, or as a
719	result of a mental or physical condition, may be reported to a
720	consultant operating an impaired practitioner program as
721	described in s. 456.076 rather than to the department.
722	Section 7. Paragraph (e) of subsection (1) of section
723	458.331, Florida Statutes, is amended to read:
724	458.331 Grounds for disciplinary action; action by the
725	board and department

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726	(1) The following acts constitute grounds for denial of a
727	license or disciplinary action, as specified in s. 456.072(2):
728	(e) Failing to report to the department any person who the
729	licensee knows is in violation of this chapter or of the rules
730	of the department or the board. <u>However, a person who the</u>
731	licensee knows is unable to practice medicine with reasonable
732	skill and safety to patients by reason of illness or use of
733	alcohol, drugs, narcotics, chemicals, or any other type of
734	material, or as a result of a mental or physical condition, may
735	be reported to a consultant operating an impaired practitioner
736	program as described in s. 456.076 rather than to the department
737	A treatment provider approved pursuant to s. 456.076 shall
738	provide the department or consultant with information in
739	accordance with the requirements of s. 456.076(4), (5), (6),
740	(7), and (9).
741	Section 8. Paragraph (e) of subsection (1) of section
742	459.015, Florida Statutes, is amended to read:
743	459.015 Grounds for disciplinary action; action by the
744	board and department
745	(1) The following acts constitute grounds for denial of a
746	license or disciplinary action, as specified in s. 456.072(2):
747	(e) Failing to report to the department or the department's
748	impaired professional consultant any person who the licensee or
749	certificateholder knows is in violation of this chapter or of
750	the rules of the department or the board. <u>However, a person who</u>
751	the licensee knows is unable to practice osteopathic medicine
752	with reasonable skill and safety to patients by reason of
753	illness or use of alcohol, drugs, narcotics, chemicals, or any
754	other type of material, or as a result of a mental or physical

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755	condition, may be reported to a consultant operating an impaired
756	practitioner program as described in s. 456.076 rather than to
757	the department A treatment provider, approved pursuant to s.
758	456.076, shall provide the department or consultant with
759	information in accordance with the requirements of s.
760	456.076(4), (5), (6), (7), and (9).
761	Section 9. Paragraph (g) of subsection (1) of section
762	460.413, Florida Statutes, is amended to read:
763	460.413 Grounds for disciplinary action; action by board or
764	department
765	(1) The following acts constitute grounds for denial of a
766	license or disciplinary action, as specified in s. 456.072(2):
767	(g) Failing to report to the department any person who the
768	licensee knows is in violation of this chapter or of the rules
769	of the department or the board. <u>However, a person who the</u>
770	licensee knows is unable to practice chiropractic medicine with
771	reasonable skill and safety to patients by reason of illness or
772	use of alcohol, drugs, narcotics, chemicals, or any other type
773	of material, or as a result of a mental or physical condition,
774	may be reported to a consultant operating an impaired
775	practitioner program as described in s. 456.076 rather than to
776	the department.
777	Section 10. Paragraph (f) of subsection (1) of section
778	461.013, Florida Statutes, is amended to read:
779	461.013 Grounds for disciplinary action; action by the
780	board; investigations by department
781	(1) The following acts constitute grounds for denial of a
782	license or disciplinary action, as specified in s. 456.072(2):
783	(f) Failing to report to the department any person who the
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784	licensee knows is in violation of this chapter or of the rules
785	of the department or the board. However, a person who the
786	licensee knows is unable to practice podiatric medicine with
787	reasonable skill and safety to patients by reason of illness or
788	use of alcohol, drugs, narcotics, chemicals, or any other type
789	of material, or as a result of a mental or physical condition,
790	may be reported to a consultant operating an impaired
791	practitioner program as described in s. 456.076 rather than to
792	the department.
793	Section 11. Paragraph (f) of subsection (1) of section
794	462.14, Florida Statutes, is amended to read:
795	462.14 Grounds for disciplinary action; action by the
796	department
797	(1) The following acts constitute grounds for denial of a
798	license or disciplinary action, as specified in s. 456.072(2):
799	(f) Failing to report to the department any person who the
800	licensee knows is in violation of this chapter or of the rules
801	of the department. However, a person who the licensee knows is
802	unable to practice naturopathic medicine with reasonable skill
803	and safety to patients by reason of illness or use of alcohol,
804	drugs, narcotics, chemicals, or any other type of material, or
805	as a result of a mental or physical condition, may be reported
806	to a consultant operating an impaired practitioner program as
807	described in s. 456.076 rather than to the department.
808	Section 12. Paragraph (1) of subsection (1) of section
809	463.016, Florida Statutes, is amended to read:
810	463.016 Grounds for disciplinary action; action by the
811	board
812	(1) The following acts constitute grounds for denial of a
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576-04401-17 2017876c2 813 license or disciplinary action, as specified in s. 456.072(2): 814 (1) Willfully failing to report any person who the licensee 815 knows is in violation of this chapter or of rules of the 816 department or the board. However, a person who the licensee 817 knows is unable to practice optometry with reasonable skill and 818 safety to patients by reason of illness or use of alcohol, 819 drugs, narcotics, chemicals, or any other type of material, or 820 as a result of a mental or physical condition, may be reported 821 to a consultant operating an impaired practitioner program as 822 described in s. 456.076 rather than to the department. 82.3 Section 13. Paragraph (k) of subsection (1) of section 824 464.018, Florida Statutes, is amended to read: 825 464.018 Disciplinary actions.-826 (1) The following acts constitute grounds for denial of a 827 license or disciplinary action, as specified in s. 456.072(2): 828 (k) Failing to report to the department any person who the 829 licensee knows is in violation of this part or of the rules of 830 the department or the board. However, a person who the licensee 831 knows is unable to practice nursing with reasonable skill and 832 safety to patients by reason of illness or use of alcohol, 833 drugs, narcotics, chemicals, or any other type of material, or 834 as a result of a mental or physical condition, may be reported 835 to a consultant operating an impaired practitioner program as described in s. 456.076 rather than to the department; however, 836 837 if the licensee verifies that such person is actively participating in a board-approved program for the treatment of a 838 839 physical or mental condition, the licensee is required to report 840 such person only to an impaired professionals consultant. Section 14. Paragraph (c) of subsection (2) of section 841

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842	464.204, Florida Statutes, is amended to read:
843	464.204 Denial, suspension, or revocation of certification;
844	disciplinary actions
845	(2) When the board finds any person guilty of any of the
846	grounds set forth in subsection (1), it may enter an order
847	imposing one or more of the following penalties:
848	(c) Imposition of probation or restriction of
849	certification, including conditions such as corrective actions
850	as retraining or compliance with the department's impaired
851	practitioner program operated by a consultant as described in s.
852	456.076 an approved treatment program for impaired
853	practitioners.
854	Section 15. Paragraph (o) of subsection (1) of section
855	465.016, Florida Statutes, is amended to read:
856	465.016 Disciplinary actions
857	(1) The following acts constitute grounds for denial of a
858	license or disciplinary action, as specified in s. 456.072(2):
859	(o) Failing to report to the department any licensee under
860	chapter 458 or under chapter 459 who the pharmacist knows has
861	violated the grounds for disciplinary action set out in the law
862	under which that person is licensed and who provides health care
863	services in a facility licensed under chapter 395, or a health
864	maintenance organization certificated under part I of chapter
865	641, in which the pharmacist also provides services. <u>However, a</u>
866	person who the licensee knows is unable to practice medicine or
867	osteopathic medicine with reasonable skill and safety to
868	patients by reason of illness or use of alcohol, drugs,
869	narcotics, chemicals, or any other type of material, or as a
870	result of a mental or physical condition, may be reported to a

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871	consultant operating an impaired practitioner program as
872	described in s. 456.076 rather than to the department.
873	Section 16. Paragraph (f) of subsection (1) of section
874	466.028, Florida Statutes, is amended to read:
875	466.028 Grounds for disciplinary action; action by the
876	board
877	(1) The following acts constitute grounds for denial of a
878	license or disciplinary action, as specified in s. 456.072(2):
879	(f) Failing to report to the department any person who the
880	licensee knows, or has reason to believe, is clearly in
881	violation of this chapter or of the rules of the department or
882	the board. However, a person who the licensee knows, or has
883	reason to believe, is clearly unable to practice her or his
884	profession with reasonable skill and safety to patients by
885	reason of illness or use of alcohol, drugs, narcotics,
886	chemicals, or any other type of material, or as a result of a
887	mental or physical condition, may be reported to a consultant
888	operating an impaired practitioner program as described in s.
889	456.076 rather than to the department.
890	Section 17. Paragraph (h) of subsection (1) of section
891	467.203, Florida Statutes, is amended to read:
892	467.203 Disciplinary actions; penalties
893	(1) The following acts constitute grounds for denial of a
894	license or disciplinary action, as specified in s. 456.072(2):
895	(h) Failing to report to the department any person who the
896	licensee knows is in violation of this chapter or of the rules
897	of the department. However, a person who the licensee knows is
898	unable to practice midwifery with reasonable skill and safety to
899	patients by reason of illness or use of alcohol, drugs,

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900 <u>narcotics, chemicals, or any other type of material, or as a 901 <u>result of a mental or physical condition, may be reported to</u> 902 <u>consultant operating an impaired practitioner program as</u> 903 <u>described in s. 456.076 rather than to the department.</u> 904 Section 18. Paragraph (f) of subsection (1) of section 905 468.217, Florida Statutes, is amended to read:</u>	
902 <u>consultant operating an impaired practitioner program as</u> 903 <u>described in s. 456.076 rather than to the department.</u> 904 Section 18. Paragraph (f) of subsection (1) of section	<u>o a</u>
903described in s. 456.076 rather than to the department.904Section 18. Paragraph (f) of subsection (1) of section	
904 Section 18. Paragraph (f) of subsection (1) of section	
905 468.217, Florida Statutes, is amended to read:	
906 468.217 Denial of or refusal to renew license; suspens.	ion
907 and revocation of license and other disciplinary measures	
908 (1) The following acts constitute grounds for denial of	fa
909 license or disciplinary action, as specified in s. 456.072(2	2):
910 (f) Failing to report to the department any person who	the
911 licensee knows is in violation of this part or of the rules	of
912 the department or of the board. <u>However</u> , a person who the	
913 licensee knows is unable to practice occupational therapy w	ith
914 reasonable skill and safety to patients by reason of illness	s or
915 use of alcohol, drugs, narcotics, chemicals, or any other t	ype
916 of material, or as a result of a mental or physical condition	on,
917 may be reported to a consultant operating an impaired	
918 practitioner program as described in s. 456.076 rather than	to
919 the department.	
920 Section 19. Paragraph (n) of subsection (1) of section	
921 468.3101, Florida Statutes, is amended to read:	
922 468.3101 Disciplinary grounds and actions	
923 (1) The department may make or require to be made any	
924 investigations, inspections, evaluations, and tests, and re-	quire
925 the submission of any documents and statements, which it	
926 considers necessary to determine whether a violation of this	S
927 part has occurred. The following acts shall be grounds for	
928 disciplinary action as set forth in this section:	

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929	(n) Being terminated from an impaired practitioner program
930	operated by a consultant as described in s. 456.076 for failure
931	to comply, without good cause, with the terms of monitoring or a
932	participant contract entered into by the licensee, or for not
933	successfully completing a drug treatment or alcohol treatment
934	program Failing to comply with the recommendations of the
935	department's impaired practitioner program for treatment,
936	evaluation, or monitoring. A letter from the director of the
937	impaired practitioner program that the certificateholder is not
938	in compliance shall be considered conclusive proof under this
939	part.
940	Section 20. Section 474.221, Florida Statutes, is amended
941	to read:
942	474.221 Impaired practitioner provisions; applicability
943	Notwithstanding the transfer of the Division of Medical Quality
944	Assurance to the Department of Health or any other provision of
945	law to the contrary, veterinarians licensed under this chapter
946	shall be governed by the treatment of impaired practitioner
947	program provisions of s. 456.076 as if they were under the
948	jurisdiction of the Division of Medical Quality Assurance,
949	except that for veterinarians the Department of Business and
950	Professional Regulation shall, at its option, exercise any of
951	the powers granted to the Department of Health by that section,
952	and "board" shall mean board as defined in this chapter.
953	Section 21. Paragraph (o) of subsection (1) of section
954	483.825, Florida Statutes, is amended to read:
955	483.825 Grounds for disciplinary action
956	(1) The following acts constitute grounds for denial of a

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license or disciplinary action, as specified in s. 456.072(2):

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958	(o) Failing to report to the department a person or other
959	licensee who the licensee knows is in violation of this chapter
960	or the rules of the department or board adopted hereunder.
961	However, a person or other licensee who the licensee knows is
962	unable to perform or report on clinical laboratory examinations
963	with reasonable skill and safety to patients by reason of
964	illness or use of alcohol, drugs, narcotics, chemicals, or any
965	other type of material, or as a result of a mental or physical
966	condition, may be reported to a consultant operating an impaired
967	practitioner program as described in s. 456.076 rather than to
968	the department.
969	Section 22. Section 456.0495, Florida Statutes, is created
970	to read:
971	456.0495 Reporting adverse incidents occurring in out-of-
972	hospital births
973	(1) A midwife licensed under chapter 467 or health care
974	provider, as applicable, shall report any adverse incident, as
975	defined by department rule, occurring as a result of an
976	attempted or completed, planned birthing center or out-of-
977	hospital birth, along with a medical summary of events, to the
978	department within 15 days after the adverse incident occurs.
979	(2) The department shall adopt rules establishing
980	guidelines for reporting adverse incidents, including, but not
981	limited to:
982	(a) Maternal deaths that occur during delivery or within 42
983	days after delivery.
984	(b) Transfers of maternal patients to a hospital intensive
985	care unit.
986	(c) Maternal patients who experience hemorrhagic shock or
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987	who require a transfusion of more than 4 units of blood or blood
988	products.
989	(d) Fetal or infant deaths, including stillbirths,
990	associated with obstetrical deliveries.
991	(e) Transfers of infants to a neonatal intensive care unit
992	due to a traumatic physical or neurological birth injury,
993	including any degree of a brachial plexus injury.
994	(f) Transfers of infants to a neonatal intensive care unit
995	within the first 72 hours after birth if the infant remains in
996	such unit for more than 72 hours.
997	Section 23. This act shall take effect upon becoming a law.

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