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By the Committee on Health Policy; and Senator Bean

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A bill to be entitled

An act relating to acute care at-home patients in nonemergent community settings; amending s. 401.272, F.S.; revising a legislative purpose regarding emergency medical services community health care; authorizing certified paramedics to perform basic life support services, advanced life support services, and additional health care services to acute care at-home patients in nonemergent community settings under certain circumstances; providing that a physician or medical director who supervises or directs the provision of such services by a paramedic is liable for any act or omission during the provision of such services; requiring supervising physicians and medical directors to verify and document that paramedics providing such services under their supervision or direction are sufficiently trained and experienced to do so; revising the Department of Health's rulemaking authority to conform to changes made by the act; amending s. 465.019, F.S.; specifying that Class III institutional pharmacies may dispense, distribute, compound, and fill prescriptions for medicinal drugs for inpatients and acute care at-home patients in nonemergent community settings; authorizing hospitals to dispense medicinal drugs to certain patients without first securing a community pharmacy permit under certain circumstances; amending ss. 14.33, 252.515, 395.1027, 401.23, and 401.245, F.S.; making technical changes; providing an effective date.

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Be It Enacted by the Legislature of the State of Florida:

Section 1. Section 401.272, Florida Statutes, is amended to read:

401.272 Emergency medical services community health care.

- (1) The purpose of this section is to encourage more effective <u>use utilization</u> of the skills of emergency medical technicians and paramedics <u>in nonemergent community settings</u> by enabling them to perform, in partnership with local county health departments <u>and hospitals as defined in s. 395.002(13)</u>, specific additional health care tasks that are consistent with the public health and welfare.
- (2) Notwithstanding any other provision of law to the contrary:
- (a) <u>Certified</u> paramedics or emergency medical technicians may perform health promotion and wellness activities and blood pressure screenings in a nonemergency environment, within the scope of their training, and under <u>the supervision of a physician or</u> the direction of a medical director. As used in this paragraph, the term "health promotion and wellness" means the provision of public health programs pertaining to the prevention of illness and injury.
- (b) <u>Certified</u> paramedics may administer immunizations in a nonemergency environment, within the scope of their training, and under <u>the supervision of a physician or</u> the direction of a medical director. There must be a written agreement between the paramedic's <u>supervising physician or</u> medical director and the county health department located in each county in which the

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paramedic administers immunizations. This agreement must establish the protocols, policies, and procedures under which the paramedic must operate.

- (c) Certified paramedics may provide basic life support services, advanced life support services, and additional health care services to acute care at-home patients in a nonemergent community setting as specified in the paramedic's formal supervisory relationship with a physician or standing orders as described in s. 401.265, s. 458.348, or s. 459.025. Each physician who supervises or provides medical direction to a paramedic who administers basic life support services, advanced life support services, or additional health care services to acute care at-home patients in a nonemergent community setting pursuant to a formal supervisory relationship or standing orders is liable for any act or omission of the paramedic acting under the physician's supervision or medical direction when performing such services.
- (3) Each physician or medical director under whose supervision or direction a paramedic administers immunizations or provides basic life support services, advanced life support services, or additional health care services to acute care athome patients in a nonemergency community setting must verify and document that the paramedic has received sufficient training and experience to administer immunizations or provide basic life support services, advanced life support services, or additional health care services to acute care athome patients in a nonemergency community setting, as applicable. The verification must be documented on forms developed by the department, and the completed forms must be maintained at the service location of

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the licensee and made available to the department upon request.

(4) The department may adopt and enforce all rules necessary to enforce the provisions relating to <u>paramedics and emergency medical technicians practicing in a nonemergent community setting under subsection (2) a paramedic's administration of immunizations and the performance of health promotion and wellness activities and blood pressure screenings by a paramedic or emergency medical technician in a nonemergency environment.</u>

Section 2. Paragraph (d) of subsection (2) and paragraph (a) of subsection (4) of section 465.019, Florida Statutes, are amended to read:

465.019 Institutional pharmacies; permits.-

- (2) The following classes of institutional pharmacies are established:
- (d)1. "Class III institutional pharmacies" are those institutional pharmacies, including central distribution facilities, affiliated with a hospital which that provide the same services that are authorized by a Class II institutional pharmacy permit. Class III institutional pharmacies may also:
- a. Dispense, distribute, compound, and fill prescriptions for medicinal drugs for inpatient treatment or for acute care at-home patients in a nonemergent community setting.
 - b. Prepare prepackaged drug products.
- c. Conduct other pharmaceutical services for the affiliated hospital and for entities under common control that are each permitted under this chapter to possess medicinal drugs.
- d. Provide the services in sub-subparagraphs a.-c. to an entity under common control which holds an active health care

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clinic establishment permit as required under s. 499.01(2)(r).

- 2. A Class III institutional pharmacy shall maintain policies and procedures addressing:
- a. The consultant pharmacist responsible for pharmaceutical services.
- b. Safe practices for the preparation, dispensing, prepackaging, distribution, and transportation of medicinal drugs and prepackaged drug products.
- c. Recordkeeping to monitor the movement, distribution, and transportation of medicinal drugs and prepackaged drug products.
- d. Recordkeeping of pharmacy staff responsible for each step in the preparation, dispensing, prepackaging, transportation, and distribution of medicinal drugs and prepackaged drug products.
- e. Medicinal drugs and prepackaged drug products that may not be safely distributed among Class III institutional pharmacies.
- (4) (a) Medicinal drugs shall be dispensed in an institutional pharmacy to outpatients only when that institution has secured a community pharmacy permit from the department. However, medicinal drugs may be dispensed by a hospital that has not secured a community pharmacy permit but operates a Class II or Class III institutional pharmacy may dispense medicinal drugs to a patient of the hospital's emergency department, an acute care at-home patient in a nonemergent community setting, or a hospital inpatient upon discharge if a prescriber, as defined in s. 465.025(1), treating the patient in such hospital determines that the medicinal drug is warranted and that community pharmacy services are not readily accessible, geographically or

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otherwise, to the patient. Such prescribing and dispensing must be for a supply of the drug that will last for the greater of the following:

1. Up to 48 hours; or

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2. Through the end of the next business day.

Section 3. Subsection (1) of section 14.33, Florida
Statutes, is amended to read:

- 14.33 Medal of Heroism.-
- (1) The Governor may award a Medal of Heroism of appropriate design, with ribbons and appurtenances, to a law enforcement, correctional, or correctional probation officer, as defined in s. 943.10(14); a firefighter, as defined in s. 112.191(1)(b); an emergency medical technician, as defined in s. 401.23 s. 401.23(11); or a paramedic, as defined in s. 401.23 s. 401.23(17). A recipient must have distinguished himself or herself conspicuously by gallantry and intrepidity, must have risked his or her life deliberately above and beyond the call of duty while performing duty in his or her respective position, and must have engaged in hazardous or perilous activities to preserve lives with the knowledge that such activities might result in great personal harm.

Section 4. Paragraph (a) of subsection (3) of section 252.515, Florida Statutes, is amended to read:

252.515 Postdisaster Relief Assistance Act; immunity from civil liability.—

- (3) As used in this section, the term:
- (a) "Emergency first responder" means:
- 1. A physician licensed under chapter 458.
- 2. An osteopathic physician licensed under chapter 459.

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- 3. A chiropractic physician licensed under chapter 460.
- 4. A podiatric physician licensed under chapter 461.
- 5. A dentist licensed under chapter 466.
- 6. An advanced practice registered nurse licensed under s. 464.012.
- 7. A physician assistant licensed under s. 458.347 or s. 459.022.
- 8. A worker employed by a public or private hospital in the state.
 - 9. A paramedic as defined in s. $401.23 \cdot \frac{401.23(17)}{1.00}$.
 - 10. An emergency medical technician as defined in s. 401.23 s. 401.23(11).
 - 11. A firefighter as defined in s. 633.102.
 - 12. A law enforcement officer as defined in s. 943.10.
 - 13. A member of the Florida National Guard.
 - 14. Any other personnel designated as emergency personnel by the Governor pursuant to a declared emergency.
 - Section 5. Subsection (5) of section 395.1027, Florida Statutes, is amended to read:
 - 395.1027 Regional poison control centers.-
 - (5) By October 1, 1999, each regional poison control center shall develop a prehospital emergency dispatch protocol with each licensee <u>as</u> defined <u>in s. 401.23 by s. 401.23(13)</u> in the geographic area covered by the regional poison control center. The prehospital emergency dispatch protocol shall be developed by each licensee's medical director in conjunction with the designated regional poison control center responsible for the geographic area in which the licensee operates. The protocol shall define toxic substances and describe the procedure by

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which the designated regional poison control center may be consulted by the licensee. If a call is transferred to the designated regional poison control center in accordance with the protocol established under this section and s. 401.268, the designated regional poison control center shall assume responsibility and liability for the call.

Section 6. Subsection (19) of section 401.23, Florida Statutes, is amended to read:

401.23 Definitions.—As used in this part, the term:

(19) "Physician" means a practitioner who is licensed under the provisions of chapter 458 or chapter 459. For the purpose of providing "medical direction" as defined in this section subsection (14) for the treatment of patients immediately before prior to or during transportation to a United States Department of Veterans Affairs medical facility, "physician" also means a practitioner employed by the United States Department of Veterans Affairs.

Section 7. Paragraph (b) of subsection (2) of section 401.245, Florida Statutes, is amended to read:

401.245 Emergency Medical Services Advisory Council.

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(b) Representation on the Emergency Medical Services Advisory Council shall include: two licensed physicians who are "medical directors" as defined in s. 401.23 s. 401.23(15) or whose medical practice is closely related to emergency medical services; two emergency medical service administrators, one of whom is employed by a fire service; two certified paramedics, one of whom is employed by a fire service; two certified emergency medical technicians, one of whom is employed by a fire

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service; one emergency medical services educator; one emergency nurse; one hospital administrator; one representative of air ambulance services; one representative of a commercial ambulance operator; and two laypersons who are in no way connected with emergency medical services, one of whom is a representative of the elderly. Ex officio members of the advisory council from state agencies shall include, but are shall not be limited to, representatives from the Department of Education, the Department of Management Services, the State Fire Marshal, the Department of Highway Safety and Motor Vehicles, the Department of Transportation, and the Division of Emergency Management.

Section 8. This act shall take effect July 1, 2022.

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