${\bf By}$ Senator Rodriguez

	39-00626C-22 2022768_
1	A bill to be entitled
2	An act relating to the Department of Health; amending
3	s. 381.0045, F.S.; revising the purpose of the
4	department's targeted outreach program for certain
5	pregnant women; requiring the department to encourage
6	high-risk pregnant women of unknown status to be
7	tested for sexually transmissible diseases; requiring
8	the department to provide specified information to
9	pregnant women who have human immunodeficiency virus
10	(HIV); requiring the department to link women with
11	mental health services when available; requiring the
12	department to educate pregnant women who have HIV on
13	certain information; requiring the department to
14	provide, for a specified purpose, continued oversight
15	of newborns exposed to HIV; amending s. 381.0303,
16	F.S.; removing the Children's Medical Services office
17	from parties required to coordinate in the development
18	of local emergency management plans for special needs
19	shelters; amending s. 381.986, F.S.; authorizing the
20	department to select samples of marijuana from medical
21	marijuana treatment center facilities for certain
22	testing; authorizing the department to select samples
23	of marijuana delivery devices from medical marijuana
24	treatment centers to determine whether the device is
25	safe for use; requiring medical marijuana treatment
26	centers to recall marijuana and marijuana delivery
27	devices, instead of just edibles, under certain
28	circumstances; exempting the department and its
29	employees from criminal provisions if they acquire,

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30	possess, test, transport, or lawfully dispose of
31	marijuana and marijuana delivery devices under certain
32	circumstances; amending s. 401.23, F.S.; revising
33	definitions; amending s. 401.25, F.S.; conforming a
34	provision to changes made by the act; amending s.
35	401.27, F.S.; revising certification and
36	recertification requirements for emergency medical
37	technicians and paramedics; amending s. 401.2701,
38	F.S.; revising requirements for emergency medical
39	services training programs; authorizing certain site
40	visits to be conducted either in person or through
41	electronic means; authorizing programs to substitute
42	certain simulated, remote videoconferencing options
43	for in-person training and related requirements;
44	specifying requirements for requests for department
45	approval of such options; providing for the renewal of
46	program certification; providing for initial and
47	ongoing department site visits of programs; revising
48	program application procedures; amending s. 401.272,
49	F.S.; revising functions paramedics and emergency
50	medical technicians may perform in nonemergency
51	environments; authorizing paramedics to administer
52	public health countermeasures in nonemergency
53	environments under certain circumstances; conforming
54	provisions to changes made by the act; amending s.
55	401.30, F.S.; revising recordkeeping requirements for
56	emergency medical services providers; authorizing
57	records to be in either written or electronic formats;
58	revising the list of individuals and entities that may

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59	receive limited disclosure of certain otherwise
60	confidential and exempt records; requiring the release
61	of such records to be in compliance with specified
62	provisions; amending s. 401.34, F.S.; deleting
63	provisions and fees related to an obsolete
64	examination; amending s. 401.425, F.S.; authorizing
65	emergency medical review committees to review the
66	performances of emergency medical technicians,
67	paramedics, and emergency medical services providers
68	to make recommendations for improvement; amending s.
69	401.435, F.S.; relabeling "first responder agencies"
70	as "emergency medical responder agencies"; revising
71	minimum standards for emergency medical first
72	responder training; amending s. 460.406, F.S.;
73	revising provisions related to chiropractic physician
74	licensing; amending s. 464.008, F.S.; deleting a
75	requirement that certain nursing program graduates
76	complete a specified preparatory course; amending s.
77	464.018, F.S.; revising grounds for disciplinary
78	action against licensed nurses; amending s. 467.003,
79	F.S.; revising and defining terms; amending s.
80	467.009, F.S.; revising provisions related to approved
81	midwifery programs; amending s. 467.011, F.S.;
82	revising requirements for licensure of midwives;
83	amending s. 467.0125, F.S.; revising requirements for
84	licensure by endorsement of midwives; revising
85	requirements for temporary certificates to practice
86	midwifery in this state; amending s. 467.205, F.S.;
87	revising provisions relating to approval, continued

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88	
89	and approval rescission of midwifery programs;
90	amending s. 468.803, F.S.; revising provisions related
91	to orthotist and prosthetist registration,
92	examination, and licensing; amending s. 483.824, F.S.;
93	revising educational requirements for clinical
94	laboratory directors; amending s. 490.003, F.S.;
95	defining the terms "doctoral degree from an American
96	Psychological Association accredited program" and
97	"doctoral degree in psychology"; amending ss. 490.005
98	and 490.0051, F.S.; revising education requirements
99	for psychologist licensure and provisional licensure,
100	respectively; amending s. 491.005, F.S.; revising
101	requirements for licensure of clinical social workers,
102	marriage and family therapists, and mental health
103	counselors; requiring that a licensed mental health
104	professional be accessible through certain means when
105	a registered intern provides clinical services through
106	telehealth; amending s. 766.314, F.S.; deleting
107	obsolete language and updating provisions to conform
108	to current law; revising the frequency with which the
109	department must submit certain reports to the Florida
110	Birth-Related Neurological Injury Compensation
111	Association; revising the content of such reports;
112	providing an effective date.
113	
114	Be It Enacted by the Legislature of the State of Florida:
115	
116	Section 1. Subsections (2) and (3) of section 381.0045,
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1	39-00626C-22 2022768
117	Florida Statutes, are amended to read:
118	381.0045 Targeted outreach for pregnant women
119	(2) It is the purpose of this section to establish a
120	targeted outreach program for high-risk pregnant women who may
121	not seek proper prenatal care, who suffer from substance abuse
122	or mental health problems, or who have acquired are infected
123	$rac{with}{}$ human immunodeficiency virus (HIV), and to provide these
124	women with links to <u>much-needed</u> much needed services and
125	information.
126	(3) The department shall:
127	(a) Conduct outreach programs through contracts with,
128	grants to, or other working relationships with persons or
129	entities where the target population is likely to be found.
130	(b) Provide outreach that is peer-based, culturally
131	sensitive, and performed in a nonjudgmental manner.
132	(c) Encourage high-risk pregnant women of unknown status to
133	be tested for HIV and other sexually transmissible diseases as
134	specified by department rule.
135	(d) Educate women not receiving prenatal care as to the
136	benefits of such care.
137	(e) Provide HIV-infected pregnant women <u>who have HIV</u> with
138	information on the need for antiretroviral medication for their
139	newborn, their medication options, and how they can access the
140	medication after their discharge from the hospital so they can
141	make an informed decision about the use of Zidovudine (AZT).
142	(f) Link women with substance abuse treatment and mental
143	health services, when available, and act as a liaison with
144	Healthy Start coalitions, children's medical services, Ryan
145	White-funded providers, and other services of the Department of
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I	39-00626C-22 2022768
146	Health.
147	(g) Educate pregnant women who have HIV on the importance
148	of engaging in and continuing HIV care.
149	(h) Provide continued oversight of any newborn exposed to
150	HIV to determine the newborn's final HIV status and ensure
151	continued linkage to care if the newborn is diagnosed with HIV
152	to HIV-exposed newborns.
153	Section 2. Paragraphs (a) and (c) of subsection (2) of
154	section 381.0303, Florida Statutes, are amended to read:
155	381.0303 Special needs shelters
156	(2) SPECIAL NEEDS SHELTER PLAN; STAFFING; STATE AGENCY
157	ASSISTANCE.—If funds have been appropriated to support disaster
158	coordinator positions in county health departments:
159	(a) The department shall assume lead responsibility for the
160	coordination of local medical and health care providers, the
161	American Red Cross, and other interested parties in developing a
162	plan for the staffing and medical management of special needs
163	shelters <u>and</u> . The local Children's Medical Services offices
164	shall assume lead responsibility for the coordination of local
165	medical and health care providers, the American Red Cross, and
166	other interested parties in developing a plan for the staffing
167	and medical management of pediatric special needs shelters.
168	Plans must conform to the local comprehensive emergency
169	management plan.
170	(c) The appropriate county health department , Children's
171	Medical Services office, and local emergency management agency
172	shall jointly decide who has responsibility for medical
173	supervision in each special needs shelter.

174

Section 3. Present paragraphs (e) through (h) of subsection

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     (14) of section 381.986, Florida Statutes, are redesignated as
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     paragraphs (f) through (i), respectively, a new paragraph (e) is
177
     added to that subsection, and paragraph (e) of subsection (8) of
178
     that section is amended, to read:
179
          381.986 Medical use of marijuana.-
180
          (8) MEDICAL MARIJUANA TREATMENT CENTERS.-
181
          (e) A licensed medical marijuana treatment center shall
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     cultivate, process, transport, and dispense marijuana for
     medical use. A licensed medical marijuana treatment center may
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184
     not contract for services directly related to the cultivation,
185
     processing, and dispensing of marijuana or marijuana delivery
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     devices, except that a medical marijuana treatment center
187
     licensed pursuant to subparagraph (a)1. may contract with a
188
     single entity for the cultivation, processing, transporting, and
189
     dispensing of marijuana and marijuana delivery devices. A
190
     licensed medical marijuana treatment center must, at all times,
191
     maintain compliance with the criteria demonstrated and
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     representations made in the initial application and the criteria
193
     established in this subsection. Upon request, the department may
194
     grant a medical marijuana treatment center a variance from the
195
     representations made in the initial application. Consideration
196
     of such a request shall be based upon the individual facts and
197
     circumstances surrounding the request. A variance may not be
198
     granted unless the requesting medical marijuana treatment center
199
     can demonstrate to the department that it has a proposed
200
     alternative to the specific representation made in its
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     application which fulfills the same or a similar purpose as the
202
     specific representation in a way that the department can
203
     reasonably determine will not be a lower standard than the
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204
     specific representation in the application. A variance may not
205
     be granted from the requirements in subparagraph 2. and
206
     subparagraphs (b)1. and 2.
207
          1. A licensed medical marijuana treatment center may
208
     transfer ownership to an individual or entity who meets the
209
     requirements of this section. A publicly traded corporation or
210
     publicly traded company that meets the requirements of this
211
     section is not precluded from ownership of a medical marijuana
     treatment center. To accommodate a change in ownership:
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213
          a. The licensed medical marijuana treatment center shall
214
     notify the department in writing at least 60 days before the
215
     anticipated date of the change of ownership.
216
          b. The individual or entity applying for initial licensure
217
     due to a change of ownership must submit an application that
218
     must be received by the department at least 60 days before the
219
     date of change of ownership.
220
          c. Upon receipt of an application for a license, the
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     department shall examine the application and, within 30 days
222
     after receipt, notify the applicant in writing of any apparent
223
     errors or omissions and request any additional information
224
     required.
225
          d. Requested information omitted from an application for
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     licensure must be filed with the department within 21 days after
227
     the department's request for omitted information or the
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     application shall be deemed incomplete and shall be withdrawn
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230 <u>e.</u> Within 30 days after the receipt of a complete
231 application, the department shall approve or deny the
232 application.

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from further consideration and the fees shall be forfeited.

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39-00626C-22 2022768 233 2. A medical marijuana treatment center, and any individual 234 or entity who directly or indirectly owns, controls, or holds 235 with power to vote 5 percent or more of the voting shares of a 236 medical marijuana treatment center, may not acquire direct or 237 indirect ownership or control of any voting shares or other form of ownership of any other medical marijuana treatment center. 238 239 3. A medical marijuana treatment center may not enter into 240 any form of profit-sharing arrangement with the property owner or lessor of any of its facilities where cultivation, 241 processing, storing, or dispensing of marijuana and marijuana 242 243 delivery devices occurs. 244 4. All employees of a medical marijuana treatment center 245 must be 21 years of age or older and have passed a background 246 screening pursuant to subsection (9). 247 5. Each medical marijuana treatment center must adopt and 248 enforce policies and procedures to ensure employees and 249 volunteers receive training on the legal requirements to 250 dispense marijuana to qualified patients. 251 6. When growing marijuana, a medical marijuana treatment 252 center: 253 a. May use pesticides determined by the department, after 254 consultation with the Department of Agriculture and Consumer 255 Services, to be safely applied to plants intended for human 256 consumption, but may not use pesticides designated as 257 restricted-use pesticides pursuant to s. 487.042. 258 b. Must grow marijuana within an enclosed structure and in 259 a room separate from any other plant. 260 c. Must inspect seeds and growing plants for plant pests 261 that endanger or threaten the horticultural and agricultural

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39-00626C-22 2022768 262 interests of the state in accordance with chapter 581 and any 263 rules adopted thereunder. 264 d. Must perform fumigation or treatment of plants, or 265 remove and destroy infested or infected plants, in accordance 266 with chapter 581 and any rules adopted thereunder. 267 7. Each medical marijuana treatment center must produce and 268 make available for purchase at least one low-THC cannabis 269 product. 270 8. A medical marijuana treatment center that produces 271 edibles must hold a permit to operate as a food establishment 272 pursuant to chapter 500, the Florida Food Safety Act, and must 273 comply with all the requirements for food establishments 274 pursuant to chapter 500 and any rules adopted thereunder. 275 Edibles may not contain more than 200 milligrams of 276 tetrahydrocannabinol, and a single serving portion of an edible 277 may not exceed 10 milligrams of tetrahydrocannabinol. Edibles 278 may have a potency variance of no greater than 15 percent. 279 Edibles may not be attractive to children; be manufactured in 280 the shape of humans, cartoons, or animals; be manufactured in a 281 form that bears any reasonable resemblance to products available 282 for consumption as commercially available candy; or contain any 283 color additives. To discourage consumption of edibles by 284 children, the department shall determine by rule any shapes, 285 forms, and ingredients allowed and prohibited for edibles. 286 Medical marijuana treatment centers may not begin processing or 287 dispensing edibles until after the effective date of the rule. 288 The department shall also adopt sanitation rules providing the 289 standards and requirements for the storage, display, or dispensing of edibles. 290

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1	39-00626C-22 2022768
291	9. Within 12 months after licensure, a medical marijuana
292	treatment center must demonstrate to the department that all of
293	its processing facilities have passed a Food Safety Good
294	Manufacturing Practices, such as Global Food Safety Initiative
295	or equivalent, inspection by a nationally accredited certifying
296	body. A medical marijuana treatment center must immediately stop
297	processing at any facility which fails to pass this inspection
298	until it demonstrates to the department that such facility has
299	met this requirement.
300	10. A medical marijuana treatment center that produces
301	prerolled marijuana cigarettes may not use wrapping paper made
302	with tobacco or hemp.
303	11. When processing marijuana, a medical marijuana
304	treatment center must:
305	a. Process the marijuana within an enclosed structure and
306	in a room separate from other plants or products.
307	b. Comply with department rules when processing marijuana
308	with hydrocarbon solvents or other solvents or gases exhibiting
309	potential toxicity to humans. The department shall determine by
310	rule the requirements for medical marijuana treatment centers to
311	use such solvents or gases exhibiting potential toxicity to
312	humans.
313	c. Comply with federal and state laws and regulations and
314	department rules for solid and liquid wastes. The department
315	shall determine by rule procedures for the storage, handling,
316	transportation, management, and disposal of solid and liquid
317	waste generated during marijuana production and processing. The
318	Department of Environmental Protection shall assist the
319	department in developing such rules.

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2022768 320 d. Test the processed marijuana using a medical marijuana 321 testing laboratory before it is dispensed. Results must be 322 verified and signed by two medical marijuana treatment center 323 employees. Before dispensing, the medical marijuana treatment 324 center must determine that the test results indicate that low-325 THC cannabis meets the definition of low-THC cannabis, the 326 concentration of tetrahydrocannabinol meets the potency 327 requirements of this section, the labeling of the concentration 328 of tetrahydrocannabinol and cannabidiol is accurate, and all 329 marijuana is safe for human consumption and free from 330 contaminants that are unsafe for human consumption. The 331 department shall determine by rule which contaminants must be 332 tested for and the maximum levels of each contaminant which are 333 safe for human consumption. The Department of Agriculture and 334 Consumer Services shall assist the department in developing the 335 testing requirements for contaminants that are unsafe for human 336 consumption in edibles. The department shall also determine by 337 rule the procedures for the treatment of marijuana that fails to 338 meet the testing requirements of this section, s. 381.988, or 339 department rule. The department may select samples of marijuana 340 a random sample from edibles available for purchase in a medical 341 marijuana treatment center dispensing facility which shall be 342 tested by the department to determine whether that the marijuana 343 edible meets the potency requirements of this section, is safe for human consumption, and is accurately labeled with the 344 345 labeling of the tetrahydrocannabinol and cannabidiol 346 concentration or to verify the result of marijuana testing 347 conducted by a marijuana testing laboratory. The department may 348 also select samples of marijuana delivery devices from a medical

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39-00626C-22 2022768 349 marijuana treatment center to determine whether the marijuana 350 delivery device is safe for use by qualified patients is 351 accurate. A medical marijuana treatment center may not require 352 payment from the department for the sample. A medical marijuana 353 treatment center must recall marijuana edibles, including all 354 marijuana and marijuana products edibles made from the same 355 batch of marijuana, that fails which fail to meet the potency 356 requirements of this section, that is which are unsafe for human 357 consumption, or for which the labeling of the 358 tetrahydrocannabinol and cannabidiol concentration is 359 inaccurate. A medical marijuana treatment center must also 360 recall all marijuana delivery devices determined to be unsafe 361 for use by qualified patients. The medical marijuana treatment 362 center must retain records of all testing and samples of each 363 homogenous batch of marijuana for at least 9 months. The medical 364 marijuana treatment center must contract with a marijuana 365 testing laboratory to perform audits on the medical marijuana 366 treatment center's standard operating procedures, testing 367 records, and samples and provide the results to the department 368 to confirm that the marijuana or low-THC cannabis meets the 369 requirements of this section and that the marijuana or low-THC 370 cannabis is safe for human consumption. A medical marijuana 371 treatment center shall reserve two processed samples from each 372 batch and retain such samples for at least 9 months for the 373 purpose of such audits. A medical marijuana treatment center may 374 use a laboratory that has not been certified by the department 375 under s. 381.988 until such time as at least one laboratory 376 holds the required certification, but in no event later than July 1, 2018. 377

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378	e. Package the marijuana in compliance with the United
379	States Poison Prevention Packaging Act of 1970, 15 U.S.C. ss.
380	1471 et seq.
381	f. Package the marijuana in a receptacle that has a firmly
382	affixed and legible label stating the following information:
383	(I) The marijuana or low-THC cannabis meets the
384	requirements of sub-subparagraph d.
385	(II) The name of the medical marijuana treatment center
386	from which the marijuana originates.
387	(III) The batch number and harvest number from which the
388	marijuana originates and the date dispensed.
389	(IV) The name of the physician who issued the physician
390	certification.
391	(V) The name of the patient.
392	(VI) The product name, if applicable, and dosage form,
393	including concentration of tetrahydrocannabinol and cannabidiol.
394	The product name may not contain wording commonly associated
395	with products marketed by or to children.
396	(VII) The recommended dose.
397	(VIII) A warning that it is illegal to transfer medical
398	marijuana to another person.
399	(IX) A marijuana universal symbol developed by the
400	department.
401	12. The medical marijuana treatment center shall include in
402	each package a patient package insert with information on the
403	specific product dispensed related to:
404	a. Clinical pharmacology.
405	b. Indications and use.
406	c. Dosage and administration.

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39-00626C-22 2022768 407 d. Dosage forms and strengths. 408 e. Contraindications. 409 f. Warnings and precautions. 410 q. Adverse reactions. 411 13. In addition to the packaging and labeling requirements 412 specified in subparagraphs 11. and 12., marijuana in a form for 413 smoking must be packaged in a sealed receptacle with a legible 414 and prominent warning to keep away from children and a warning 415 that states marijuana smoke contains carcinogens and may negatively affect health. Such receptacles for marijuana in a 416 417 form for smoking must be plain, opaque, and white without 418 depictions of the product or images other than the medical 419 marijuana treatment center's department-approved logo and the 420 marijuana universal symbol. 421 14. The department shall adopt rules to regulate the types, 422 appearance, and labeling of marijuana delivery devices dispensed 423 from a medical marijuana treatment center. The rules must 424 require marijuana delivery devices to have an appearance 425 consistent with medical use.

426 15. Each edible shall be individually sealed in plain, 427 opaque wrapping marked only with the marijuana universal symbol. 428 Where practical, each edible shall be marked with the marijuana 429 universal symbol. In addition to the packaging and labeling requirements in subparagraphs 11. and 12., edible receptacles 430 431 must be plain, opaque, and white without depictions of the 432 product or images other than the medical marijuana treatment 433 center's department-approved logo and the marijuana universal symbol. The receptacle must also include a list of all the 434 edible's ingredients, storage instructions, an expiration date, 435

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436
     a legible and prominent warning to keep away from children and
437
     pets, and a warning that the edible has not been produced or
438
     inspected pursuant to federal food safety laws.
439
          16. When dispensing marijuana or a marijuana delivery
440
     device, a medical marijuana treatment center:
          a. May dispense any active, valid order for low-THC
441
442
     cannabis, medical cannabis and cannabis delivery devices issued
     pursuant to former s. 381.986, Florida Statutes 2016, which was
443
     entered into the medical marijuana use registry before July 1,
444
445
     2017.
446
          b. May not dispense more than a 70-day supply of marijuana
     within any 70-day period to a qualified patient or caregiver.
447
448
     May not dispense more than one 35-day supply of marijuana in a
449
     form for smoking within any 35-day period to a qualified patient
450
     or caregiver. A 35-day supply of marijuana in a form for smoking
451
     may not exceed 2.5 ounces unless an exception to this amount is
452
     approved by the department pursuant to paragraph (4)(f).
453
          c. Must have the medical marijuana treatment center's
454
     employee who dispenses the marijuana or a marijuana delivery
455
     device enter into the medical marijuana use registry his or her
456
     name or unique employee identifier.
457
          d. Must verify that the qualified patient and the
458
     caregiver, if applicable, each have an active registration in
459
     the medical marijuana use registry and an active and valid
     medical marijuana use registry identification card, the amount
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461
     and type of marijuana dispensed matches the physician
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     certification in the medical marijuana use registry for that
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463 qualified patient, and the physician certification has not 464 already been filled.

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39-00626C-22 2022768 465 e. May not dispense marijuana to a qualified patient who is 466 younger than 18 years of age. If the qualified patient is 467 younger than 18 years of age, marijuana may only be dispensed to 468 the qualified patient's caregiver. 469 f. May not dispense or sell any other type of cannabis, 470 alcohol, or illicit drug-related product, including pipes or 471 wrapping papers made with tobacco or hemp, other than a 472 marijuana delivery device required for the medical use of 473 marijuana and which is specified in a physician certification. g. Must, upon dispensing the marijuana or marijuana 474 475 delivery device, record in the registry the date, time, 476 quantity, and form of marijuana dispensed; the type of marijuana 477 delivery device dispensed; and the name and medical marijuana 478 use registry identification number of the qualified patient or 479 caregiver to whom the marijuana delivery device was dispensed. 480 h. Must ensure that patient records are not visible to 481 anyone other than the qualified patient, his or her caregiver, 482 and authorized medical marijuana treatment center employees. 483 (14) EXCEPTIONS TO OTHER LAWS.-484 (e) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or 485 any other law, but subject to the requirements of this section, 486 the department, including an employee of the department acting 487 within the scope of his or her employment, may acquire, possess, 488 test, transport, and lawfully dispose of marijuana and marijuana 489 delivery devices as provided in this section, in s. 381.988, and 490 by department rule. 491 Section 4. Section 401.23, Florida Statutes, is amended to 492 read:

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

493

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494	(1) "Advanced life support" means assessment or treatment
495	by a person <u>certified</u> qualified under this part <u>to perform</u>
496	through the use of techniques such as endotracheal intubation,
497	the administration of drugs or intravenous fluids, telemetry,
498	cardiac monitoring, cardiac defibrillation, and other techniques
499	described <u>for the paramedic level</u> in the EMT-Paramedic National
500	Standard Curriculum or the United States Department of
501	Transportation's National EMS Education Standards and approved
502	by, pursuant to rules of the department rule.
503	(2) "Advanced life support service" means any emergency
504	medical <u>services provider that offers or provides</u> transport or
505	nontransport service which uses advanced life support
506	techniques.
507	(3) "Air ambulance" means any fixed-wing or rotary-wing
508	aircraft used for, or intended to be used by an emergency
509	medical services provider to provide, advanced life support
510	services and transportation of individuals receiving such
511	services for, air transportation of sick or injured persons
512	requiring or likely to require medical attention during
513	transport.
514	(4) "Air ambulance service" means any <u>emergency medical</u>
515	services provider that offers or provides advanced life support
516	from or onboard an air ambulance publicly or privately owned
517	service, licensed in accordance with the provisions of this
518	part, which operates air ambulances to transport persons
519	requiring or likely to require medical attention during
520	transport.

521 (5) "Ambulance" or "emergency medical services vehicle"
522 means any privately or publicly owned land or water vehicle or

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39-00626C-22 2022768 523 air ambulance that is designed, constructed, reconstructed, 524 maintained, equipped, or operated for, and is used by for, or 525 intended to be used by an emergency medical services provider to 526 provide basic or advanced life support services for, land or 527 water transportation of sick or injured persons requiring or 528 likely to require medical attention during transport. 529 (6) "Ambulance driver" means any person who meets the 530 requirements of s. 401.281. 531 (7) "Basic life support" means the assessment or treatment 532 by a person certified qualified under this part to perform through the use of techniques described in the United States 533 534 Department of Transportation's EMT-Basic National Standard 535 Curriculum or the National EMS Education Standards of the United 536 States Department of Transportation and approved by the 537 department rule. The term includes the administration of oxygen 538 and other techniques that have been approved and are performed 539 under conditions specified by rules of the department. (8) "Basic life support service" means any emergency 540 541 medical services provider that offers or provides service which 542 uses only basic life support techniques. 543 (9) "Certification" means any authorization issued under 544 pursuant to this part to a person to provide basic life support 545 act as an emergency medical technician or to provide basic and 546 advanced life support as a paramedic. 547 (10) "Department" means the Department of Health. 548 (11) "Emergency medical technician" means a person who is 549 certified by the department under this part to provide perform

550 basic life support under medical direction in any of the

551 following settings: pursuant to this part

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552	(a) Local communities.
553	(b) Hospitals as defined in s. 395.002.
554	(c) Urgent care centers as defined in s. 395.002.
555	(d) Any other location specified by department rule.
556	(12) "Interfacility transfer" means the transportation by
557	ambulance of a patient between two facilities licensed under
558	chapter 393, chapter 395, chapter 400, or chapter 429 or other
559	facilities as specified by department rule, pursuant to this
560	 / 1
561	(13) "Licensee" means any basic life support service,
562	advanced life support service, or air ambulance service licensed
563	under pursuant to this part.
564	(14) "Medical direction" means <u>oral instruction direct</u>
565	supervision by a physician <u>in person or</u> through two-way voice
566	communication or, when such voice communication is unavailable,
567	through established standing orders, pursuant to rules of the
568	department.
569	(15) "Medical director" means a physician who is employed
570	or contracted by a licensee and who provides medical <u>direction</u>
571	supervision, including appropriate quality assurance but not
572	including administrative and managerial functions, for daily
573	operations and training <u>under</u> pursuant to this part.
574	(16) "Mutual aid agreement" means a written agreement
575	between two or more entities whereby the signing parties agree
576	to lend aid to one another under conditions specified in the
577	agreement and as <u>authorized</u> sanctioned by the governing body of
578	each affected county.
579	(17) "Paramedic" means a person who is certified by the
580	department <u>under this part</u> to <u>provide</u> perform basic and advanced

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581	life support under medical direction in any of the following
582	settings:
583	(a) Local communities.
584	(b) Hospitals as defined in s. 395.002.
585	(c) Urgent care centers as defined in s. 395.002.
586	(d) Any other location specified by department rule
587	pursuant to this part.
588	(18) "Permit" means any authorization issued <u>under</u> pursuant
589	to this part for a vehicle to be operated as a basic life
590	support or advanced life support transport vehicle or an
591	advanced life support nontransport vehicle providing basic or
592	advanced life support.
593	(19) "Physician" means a <u>person</u> practitioner who is
594	licensed <u>to practice medicine</u> under the provisions of chapter
595	458 or <u>osteopathic medicine under</u> chapter 459. For the purpose
596	of providing "medical direction" as defined in subsection (14)
597	for the treatment of patients immediately <u>before</u> prior to or
598	during transportation to a United States Department of Veterans
599	Affairs medical facility, "physician" also means a <u>person</u>
600	appointed to a physician position practitioner employed by the
601	Secretary of the United States Department of Veterans Affairs.
602	(20) "Registered nurse" means a <u>person</u> practitioner who is
603	licensed to practice professional nursing <u>under</u> pursuant to part
604	I of chapter 464.
605	(21) "Service location" means any permanent location in or
606	from which a licensee solicits, accepts, or conducts business
607	under this part.
608	(22) "Volunteer ambulance service" means a faith-based,
609	not-for-profit charitable corporation registered under chapter
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610	39-00626C-22 2022768
	617 which is licensed under this part as a basic life support
611	service or an advanced life support service; which is not a
612	parent, subsidiary, or affiliate of, or related to, any for-
613	profit entity; and which uses only unpaid volunteers to provide
614	basic life support services or advanced life support services
615	free of charge, is not operating for pecuniary profit or
616	financial gain, and does not distribute to or inure to the
617	benefit of its directors, volunteers, members, or officers any
618	part of its assets or income.
619	Section 5. Paragraph (d) of subsection (2) of section
620	401.25, Florida Statutes, is amended to read:
621	401.25 Licensure as a basic life support or an advanced
622	life support service
623	(2) The department shall issue a license for operation to
624	any applicant who complies with the following requirements:
625	(d) The applicant has obtained a certificate of public
626	convenience and necessity from each county in which the
627	applicant will operate. In issuing the certificate of public
628	convenience and necessity, the governing body of each county
629	shall consider the recommendations of municipalities within its
630	jurisdiction. An applicant that is an active emergency medical
631	first responder agency is exempt from this requirement if it:
632	1. Is a faith-based, not-for-profit charitable corporation
633	registered under chapter 617 which has been responding to
634	medical emergencies in this state for at least 10 consecutive
635	years.
636	2. Is not a parent, subsidiary, or affiliate of, or related
637	to, any for-profit entity.
638	3. Provides basic life support services or advanced life
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39-00626C-22 2022768 639 support services solely through at least 50 unpaid licensed 640 emergency medical technician or paramedic volunteers. 641 4. Is not operating for pecuniary profit or financial gain. 642 5. Does not distribute to or inure to the benefit of its 643 directors, members, or officers any part of its assets or 644 income. 645 6. Does not receive any government funding. However, the 646 volunteer ambulance service may receive funding from specialty license plate proceeds. 647 7. Has never had a license denied, revoked, or suspended. 648 649 8. Provides services free of charge. 650 9. As part of its application for licensure, provides to 651 the department a management plan that includes a training 652 program, dispatch protocols, a complaint management system, an 653 accident or injury handling system, a quality assurance program, 654 and proof of adequate insurance coverage to meet state or county 655 insurance requirements, whichever requirements are greater. 656 10. Provides a disclaimer on all written materials that the 657 volunteer ambulance service is not associated with the state's 658 911 system. 659 660 The exemption under this paragraph may be granted to no more 661 than four counties. This exemption notwithstanding, an applicant 662 is not exempted from and must comply with all other requirements 663 for licensure. An applicant must also take all reasonable 664 efforts to enter into a memorandum of understanding with the 665 emergency medical services licensee within whose jurisdiction 666 the applicant will provide services in order to facilitate 667 communications and coordinate emergency services for situations

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668
     beyond the scope of the applicant's capacity and for situations
669
     of advanced life support that are deemed priority 1 or priority
670
     2 emergencies.
671
          Section 6. Subsections (3), (4), and (5) of section 401.27,
672
     Florida Statutes, are amended to read:
673
          401.27 Personnel; standards and certification.-
674
          (3) Any person who desires to be certified or recertified
675
     as an emergency medical technician or paramedic must apply to
676
     the department under oath on forms provided by the department
677
     which shall contain such information as the department
678
     reasonably requires, which may include affirmative evidence of
     ability to comply with applicable laws and rules. The department
679
680
     shall determine whether the applicant meets the requirements
681
     specified in this section and in rules of the department and
682
     shall issue a certificate to any person who meets such
683
     requirements.
684
           (4) An applicant for certification or recertification as an
685
     emergency medical technician or paramedic must:
686
           (a) Have completed an appropriate training program as
687
     follows:
688
          1. For an emergency medical technician, an emergency
689
     medical technician training program approved by the department
690
     as equivalent to the most recent EMT-Basic National Standard
691
     Curriculum or the National EMS Education Standards of the United
692
     States Department of Transportation;
693
          2. For a paramedic, a paramedic training program approved
694
     by the department as equivalent to the most recent EMT-Paramedic
695
     National Standard Curriculum or the National EMS Education
696
     Standards of the United States Department of Transportation;
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697	(b) <u>Confirm</u> Certify under oath that he or she is not
698	addicted to alcohol or any controlled substance;
699	(c) <u>Confirm</u> Certify under oath that he or she is free from
700	any physical or mental defect or disease that might impair the
701	applicant's ability to perform his or her duties;
702	(d) Within 2 years after program completion have passed an
703	examination developed or required by the department;
704	(e)1. For an emergency medical technician, hold a current
705	American Heart Association cardiopulmonary resuscitation course
706	card or an American Red Cross cardiopulmonary resuscitation
707	course card or its equivalent as defined by department rule;
708	2. For a paramedic, hold a certificate of successful course
709	completion in advanced cardiac life support from the American
710	Heart Association or its equivalent as defined by department
711	rule;
712	(f) Submit <u>to the department the application</u> the
713	certification fee and the nonrefundable examination fee
714	prescribed in s. 401.34, and submit to the examination provider
715	the nonrefundable which examination fee will be required for
716	each examination administered to an applicant; and
717	(g) Submit a completed application to the department, which
718	application documents compliance with paragraphs (a), (b), (c),
719	(e), (f), and this paragraph, and, if applicable, paragraph (d).
720	The application must be submitted so as to be received by the
721	department at least 30 calendar days before the next regularly
722	scheduled examination for which the applicant desires to be
723	scheduled.
724	(5) The certification examination must be offered monthly.
725	The department shall issue an examination admission notice to

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726 the applicant advising him or her of the time and place of the 727 examination for which he or she is scheduled. Individuals 728 achieving a passing score on the certification examination may 729 be issued a temporary certificate with their examination grade 730 report. The department must issue an original certification 731 within 45 days after the examination. Examination questions and 732 answers are not subject to discovery but may be introduced into 733 evidence and considered only in camera in any administrative proceeding under chapter 120. If an administrative hearing is 734 735 held, the department shall provide challenged examination 736 questions and answers to the administrative law judge. The 737 department shall establish by rule the procedure by which an 738 applicant, and the applicant's attorney, may review examination 739 questions and answers in accordance with s. 119.071(1)(a).

740 Section 7. Section 401.2701, Florida Statutes, is amended 741 to read:

742

401.2701 Emergency medical services training programs.-

(1) Any private or public institution in Florida desiring
to conduct an approved program for the education of emergency
medical technicians and paramedics <u>must</u> shall:

(a) Submit a completed application on a form <u>adopted</u>
 747 provided by the department <u>rule</u>, which must include:

748 1. Evidence that the institution is in compliance with all 749 applicable requirements of the Department of Education.

2. Evidence of an affiliation agreement with a hospital
that has an emergency department staffed by at least one
physician and one registered nurse.

3. Evidence of an affiliation agreement with a currentemergency medical services provider that is licensed in this

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755	state. Such agreement shall include, at a minimum, a commitment
756	by the provider to conduct the field experience portion of the
757	education program. Evidence of an affiliation agreement is not
758	required if the applicant is licensed by the department as an
759	advanced life support service.
760	4. Documentation verifying faculty, including:
761	a. A medical director who is a licensed physician meeting
762	the applicable requirements for emergency medical services
763	medical directors as outlined in this chapter and rules of the
764	department. The medical director shall have the duty and
765	responsibility of certifying that graduates have successfully
766	completed all phases of the education program and are proficient
767	in basic or advanced life support techniques, as applicable.
768	b. A program director responsible for the operation,
769	organization, periodic review, administration, development, and
770	approval of the program.
771	5. Documentation verifying that the curriculum:
772	a. Meets the most recent Emergency Medical Technician-Basic
773	National Standard Curriculum or the National EMS Education
774	Standards approved by the department for emergency medical
775	technician programs and Emergency Medical Technician-Paramedic
776	National Standard Curriculum or the National EMS Education
777	Standards approved by the department for paramedic programs.
778	b. Includes 2 hours of instruction on the trauma scorecard
779	methodologies for assessment of adult trauma patients and
780	pediatric trauma patients as specified by the department by
781	rule.
782	6. Evidence of sufficient medical and educational equipment
783	to meet emergency medical services training program needs.
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784	(b) Receive a scheduled <u>in-person or department-approved</u>
785	remote audio-visual site visit from the department to the
786	applicant's institution. Such site visit shall be conducted
787	within 30 days after the department's notification to the
788	institution that the application was accepted for onsite review.
789	During the site visit, the department must determine the
790	applicant's compliance with the following criteria:
791	1. Emergency medical technician programs must be a minimum
792	of $\underline{300}$ $\underline{110}$ hours, with at least 20 hours of supervised clinical
793	supervision, including 10 hours in a hospital emergency
794	department.
795	2. Paramedic programs must be available only to Florida-
796	certified emergency medical technicians or an emergency medical
797	technicians, active duty and reserve military-trained emergency
798	medical technicians, and emergency medical technician applicants
799	applicant who will obtain Florida certification <u>before</u> prior to
800	completion of phase one of the paramedic program. Paramedic
801	programs must be a minimum of $1,100$ 700 hours of didactic and
802	skills practice components, with the skills laboratory student-
803	to-instructor ratio not exceeding six to one. Paramedic programs
804	must provide a field internship experience aboard an advanced
805	life support permitted ambulance. However, a portion of the
806	field internship experience may be satisfied aboard an advanced
807	life support permitted vehicle other than an ambulance <u>or by</u>
808	supervised, remote live videoconferencing together with
809	simulated direct patient contact in a simulated advanced life
810	support ambulance as provided determined by rule of the
811	department <u>rule</u> .
812	(2) <u>A program may request department approval to substitute</u>

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813	simulation and remote, live videoconferencing for supervised in-
814	person clinical instruction and direct patient-contact skills
815	laboratory requirements. Requests must be made in writing and
816	include the following:
817	(a) The written approval of the training program medical
818	director.
819	(b) Documentation that all hospitals or emergency medical
820	services providers with whom the program has an existing
821	affiliation agreement have suspended in-person access for
822	purposes of supervised clinical instruction and direct patient-
823	contact field internships.
824	(c) The time period during which in-person access has been
825	suspended.
826	(d) Documentation of the design, development, and
827	implementation of simulation and videoconferencing training.
828	(e) Documentation of the inclusion of simulation and
829	videoconferencing within the curriculum, the efficacy of
830	simulation and videoconferencing, and student evaluations of
831	simulation, debriefing, and videoconferencing.
832	(3) After completion of the site visit, the department
833	shall prepare a report <u>that must</u> which shall be provided to the
834	institution. Upon completion of the report, <u>an</u> the application
835	from a program that meets the criteria in paragraph (1)(b) is
836	shall be deemed complete <u>,</u> and the provisions of s. 120.60
837	applies. An application from a program that does not meet the
838	criteria in paragraph (1)(b) is deemed incomplete, and
839	subsection (5) applies shall apply.
840	(4) (3) If the program is approved, the department must
841	issue the institution a 2-year certificate of approval as an

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842	emergency medical technician training program or a paramedic
843	training program. The department shall renew the certificate of
844	approval upon receipt of a written statement from the program
845	attesting that the training program continues to meet the
846	requirements of the Department of Education and remains
847	accredited by a national organization recognized by the
848	department. The department shall perform a site visit for all
849	initial nonaccredited programs. The department may periodically
850	and randomly perform in-person and remote telecommunication
851	inspection site visits to ensure compliance with this part and
852	department rules.
853	(5) If <u>an</u> the application is <u>deemed incomplete</u> denied , the
854	department must notify the applicant of any errors, omissions,
855	and areas of strength, areas needing improvement, and any
856	suggested means of <u>improving</u> improvement of the program. <u>The</u>
857	applicant must respond within 5 days after receiving the
858	department's notice either with a notice of intent to provide a
859	plan of correction or a request for the department to proceed
860	with a final determination on the application without a plan of
861	<u>correction.</u> A denial notification shall be provided to the
862	applicant so as to allow the applicant 5 days prior to the
863	expiration of the application processing time in s. 120.60 to
864	advise the department in writing of its intent to submit a plan
865	of correction. Such intent notification shall provide the time
866	for application processing in s. 120.60. The plan of correction
867	must be <u>received by</u> submitted to the department within 30 days
868	after the date of the applicant's notice of intent and must
869	specify the date by which the applicant intends to complete the
870	application of the notice. The department shall notify advise

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39-00626C-22 2022768 871 the applicant of its approval or denial of the plan of correction within 30 days after $\frac{1}{2}$ receipt. The denial of the 872 plan of correction or denial of the application may be reviewed 873 874 as provided in chapter 120. 875 (6) (4) Approved emergency medical services training 876 programs must maintain records and reports that must be made 877 available to the department, upon written request. Such records 878 must include student applications, records of attendance, 879 records of participation in hospital clinic and field training, 880 medical records, course objectives and outlines, class 881 schedules, learning objectives, lesson plans, number of 882 applicants, number of students accepted, admission requirements, description of qualifications, duties and responsibilities of 883 884 faculty, and correspondence. (7) (5) Each approved program must notify the department 885 886 within 30 days after any change in the professional or 887 employment status of faculty. Each approved program must require 888 its students to pass a comprehensive final written and practical 889 examination evaluating the skills described in the current 890 United States Department of Transportation EMT-Basic or EMT-891 Paramedic National Standard Curriculum or the National EMS 892 Education Standards and approved by the department. Each 893 approved program must issue a certificate of completion to 894 program graduates within 14 days after completion.

895 Section 8. Section 401.272, Florida Statutes, is amended to 896 read:

897 401.272 Emergency medical services community health care.898 (1) The purpose of this section is to encourage more
899 effective use utilization of the skills of emergency medical

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39-00626C-22 2022768 900 technicians and paramedics by enabling them to perform, in 901 partnership with local county health departments, specific 902 additional health care tasks that are consistent with the public health and welfare. 903 904 (2) Notwithstanding any other provision of law to the 905 contrary: 906 (a) Paramedics or emergency medical technicians may perform 907 health promotion and wellness activities and blood pressure 908 screenings in a nonemergency environment, within the scope of 909 their training, and under medical direction the direction of a 910 medical director. As used in this paragraph, the term "health 911 promotion and wellness" means the provision of public health 912 programs pertaining to the prevention of illness and injury. 913 (b) Paramedics may administer immunizations and other 914 public health countermeasures in a nonemergency environment, 915 within the scope of their training, and under medical the 916 direction of a medical director. There must be a written 917 agreement between the paramedic's medical director and the 918 department or the county health department located in each 919 county in which the paramedic administers immunizations or other 920 public health countermeasures. This agreement must establish the 921 protocols, policies, and procedures under which the paramedic 922 must operate. 923 (3) Each medical director under whose direction a paramedic 924 administers immunizations or other public health countermeasures

925 must verify and document that the paramedic has received 926 sufficient training and experience to administer <u>the</u> 927 immunizations <u>or other public health countermeasures</u>, as 928 applicable. The verification must be documented on forms

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39-00626C-22 2022768 929 developed by the department, and the completed forms must be 930 maintained at the service location of the licensee and made 931 available to the department upon request. 932 (4) The department may adopt and enforce all rules 933 necessary to enforce the provisions relating to a paramedic's 934 administration of immunizations and other public health 935 countermeasures and the performance of health promotion and 936 wellness activities and blood pressure screenings by a paramedic 937 or emergency medical technician in a nonemergency environment. 938 Section 9. Subsections (1), (2), and (4) of section 401.30, 939 Florida Statutes, are amended to read: 940 401.30 Records.-941 (1) Each licensee must maintain accurate records of 942 emergency calls on written or electronic forms that contain such 943 information as is required by the department. The written or 944 electronic These records must be available for inspection by the 945 department at any reasonable time, and paper or electronic 946 copies thereof must be furnished to the department upon request. 947 The department shall prescribe by rule the give each licensee 948 notice of what information such forms must contain. 949 (2) Each licensee must provide the receiving facility 950 hospital with a copy of an individual patient care record for 951 each patient who is transported to the receiving facility 952 hospital. The information contained in the patient care record 953 and the method and timeframe for providing the record shall be 954 prescribed by department rule of the department. 955 (4) Records of emergency calls which contain patient examination or treatment information are confidential and exempt 956

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from the provisions of s. 119.07(1) and may not be disclosed

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987	patient care records or data from patient care records must be
988	in accordance with s. 401.425 and chapter 405. This subsection
989	does not prohibit the department or a licensee from providing
990	information to any law enforcement agency or any other
991	regulatory agency responsible for the regulation or supervision
992	of emergency medical services and personnel.
993	Section 10. Subsections (4) through (7) of section 401.34,
994	Florida Statutes, are amended to read:
995	401.34 Fees
996	(4)(a) If a certificate, license, or permit issued under
997	this part is lost or destroyed, the person or entity to whom the
998	certificate, license, or permit was issued may, upon payment of
999	a fee to be set by the department not to exceed \$10, obtain a
1000	duplicate, or substitute thereof.
1001	(b) Upon surrender of the original emergency medical
1002	technician or paramedic certificate and receipt of a replacement
1003	fee to be set by the department not to exceed \$10, the
1004	department shall issue a replacement certificate to make a
1005	change in name.
1006	(5) The department may provide same-day grading of the
1007	examination for an applicant for emergency medical technician or
1008	paramedic certification.
1009	(6) The department may offer walk-in eligibility
1010	determination and examination to applicants for emergency
1011	medical technician or paramedic certification who pay to the
1012	department a nonrefundable fee to be set by the department not
1013	to exceed \$65. The fee is in addition to the certification fee
1014	and examination fee. The department must establish locations and
1015	times for eligibility determination and examination.
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1016	(7) The cost of emergency medical technician or paramedic
1017	certification examination review may not exceed \$50.
1018	Section 11. Subsection (5) of section 401.425, Florida
1019	Statutes, is amended, and subsection (8) is added to that
1020	section, to read:
1021	401.425 Emergency medical services quality assurance;
1022	immunity from liability
1023	(5) The records <u>or reports</u> obtained or produced by a
1024	committee providing quality assurance or quality improvement
1025	activities as described in subsections $(1)-(4)$ are exempt from
1026	the provisions of s. 119.07(1) and s. 24(a), Art. I of the State
1027	Constitution, and committee proceedings and meetings regarding
1028	quality assurance <u>or quality improvement</u> activities are exempt
1029	from the provisions of s. 286.011 and s. 24(b), Art. I of the
1030	State Constitution. The investigations, proceedings, and records
1031	of a committee providing quality assurance activities as
1032	described in subsections (1)-(4) <u>are</u> shall not be subject to
1033	discovery or introduction into evidence in any civil action or
1034	disciplinary proceeding by the department or employing agency
1035	arising out of matters <u>that</u> which are the subject of evaluation
1036	and review by the committee, and <u>a</u> no person who was in
1037	attendance at a meeting of such committee <u>may not</u> shall be
1038	permitted or required to testify in any such civil action or
1039	disciplinary proceeding as to any evidence or other matters
1040	produced or presented during the proceedings of such committee
1041	or as to any findings, recommendations, evaluations, opinions,
1042	or other actions of such committee or any members thereof.
1043	However, information, documents, or records provided to the
1044	committee from sources external to the committee are not immune

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1045	
1045	from discovery or use in any such civil action or disciplinary
1040	proceeding merely because they were presented during proceedings
	of such committee, nor <u>may</u> should any person who testifies
1048	before a committee or who is a member of such committee be
1049	prevented from testifying as to matters within the person's
1050	knowledge, but, such witness <u>may</u> shall not be asked about his or
1051	her testimony before a committee or information obtained from or
1052	opinions formed by him or her as a result of participating in
1053	activities conducted by a committee.
1054	(8) An emergency medical review committee may review the
1055	performance of an emergency medical technician, a paramedic, or
1056	an emergency medical services provider and make recommendations
1057	for performance improvement.
1058	Section 12. Section 401.435, Florida Statutes, is amended
1059	to read:
1060	401.435 Emergency medical First responder agencies and
1061	training
1062	(1) The department must adopt by rule the United States
1063	Department of Transportation National EMS Education Standards
1064	for the Emergency Medical <u>Responder level</u> Services: First
1065	Responder Training Course as the minimum standard for <u>emergency</u>
1066	medical first responder training. In addition, the department
1067	must adopt rules establishing minimum <u>emergency medical</u> first
1068	responder instructor qualifications. For purposes of this
1069	
	section, <u>an emergency medical</u> a first responder includes any
1070	section, <u>an emergency medical</u> a first responder includes any individual who receives training to render initial care to an
1070	individual who receives training to render initial care to an
1070 1071	individual who receives training to render initial care to an ill or injured person, other than an individual trained and

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1074 injured persons.

1075 (2) Each emergency medical first responder agency must take 1076 all reasonable efforts to enter into a memorandum of 1077 understanding with the emergency medical services licensee 1078 within whose territory the agency operates in order to 1079 coordinate emergency services at an emergency scene. The 1080 department must provide a model memorandum of understanding for 1081 this purpose. The memorandum of understanding must should 1082 include dispatch protocols, the roles and responsibilities of 1083 emergency medical first responder personnel at an emergency 1084 scene, and the documentation required for patient care rendered. 1085 For purposes of this section, the term "emergency medical first 1086 responder agency" includes a law enforcement agency, a fire 1087 service agency not licensed under this part, a lifequard agency, 1088 and a volunteer organization that renders, as part of its 1089 routine functions, on-scene patient care before emergency 1090 medical technicians or paramedics arrive.

1091 Section 13. Subsection (1) of section 460.406, Florida 1092 Statutes, is amended to read:

1093

460.406 Licensure by examination.-

1094 (1) Any person desiring to be licensed as a chiropractic 1095 physician must apply to the department to take the licensure 1096 examination. There shall be an application fee set by the board 1097 not to exceed \$100 which shall be nonrefundable. There shall 1098 also be an examination fee not to exceed \$500 plus the actual 1099 per applicant cost to the department for purchase of portions of 1100 the examination from the National Board of Chiropractic 1101 Examiners or a similar national organization, which may be 1102 refundable if the applicant is found ineligible to take the

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39-00626C-22 2022768 1103 examination. The department shall examine each applicant whom 1104 who the board certifies has met all of the following criteria: 1105 (a) Completed the application form and remitted the appropriate fee. 1106 1107 (b) Submitted proof satisfactory to the department that he 1108 or she is not less than 18 years of age. 1109 (c) Submitted proof satisfactory to the department that he or she is a graduate of a chiropractic college which is 1110 accredited by or has status with the Council on Chiropractic 1111 1112 Education or its predecessor agency. However, any applicant who 1113 is a graduate of a chiropractic college that was initially accredited by the Council on Chiropractic Education in 1995, who 1114 1115 graduated from such college within the 4 years immediately 1116 preceding such accreditation, and who is otherwise qualified is 1117 shall be eligible to take the examination. An No application for a license to practice chiropractic medicine may not shall be 1118 1119 denied solely because the applicant is a graduate of a 1120 chiropractic college that subscribes to one philosophy of 1121 chiropractic medicine as distinguished from another. 1122 (d)1. For an applicant who has matriculated in a chiropractic college before prior to July 2, 1990, completed at

1123 1124 least 2 years of residence college work, consisting of a minimum 1125 of one-half the work acceptable for a bachelor's degree granted 1126 on the basis of a 4-year period of study, in a college or university accredited by an institutional accrediting agency 1127 1128 recognized and approved by the United States Department of 1129 Education. However, before prior to being certified by the board to sit for the examination, each applicant who has matriculated 1130 1131 in a chiropractic college after July 1, 1990, must shall have

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39-00626C-22 2022768 been granted a bachelor's degree, based upon 4 academic years of 1132 1133 study, by a college or university accredited by an institutional 1134 a regional accrediting agency that which is a member of the Commission on Recognition of Postsecondary Accreditation. 1135 1136 2. Effective July 1, 2000, completed, before prior to 1137 matriculation in a chiropractic college, at least 3 years of 1138 residence college work, consisting of a minimum of 90 semester hours leading to a bachelor's degree in a liberal arts college 1139 1140 or university accredited by an institutional accrediting agency 1141 recognized and approved by the United States Department of 1142 Education. However, before prior to being certified by the board 1143 to sit for the examination, each applicant who has matriculated 1144 in a chiropractic college after July 1, 2000, must shall have been granted a bachelor's degree from an institution holding 1145 1146 accreditation for that degree from an institutional a regional 1147 accrediting agency that which is recognized by the United States 1148 Department of Education. The applicant's chiropractic degree 1149 must consist of credits earned in the chiropractic program and 1150 may not include academic credit for courses from the bachelor's 1151 degree.

(e) Successfully completed the National Board of Chiropractic Examiners certification examination in parts I, II, III, and IV, and the physiotherapy examination of the National Board of Chiropractic Examiners, with a score approved by the board.

(f) Submitted to the department a set of fingerprints on a form and under procedures specified by the department, along with payment in an amount equal to the costs incurred by the Department of Health for the criminal background check of the

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1161	applicant.
1162	
1163	The board may require an applicant who graduated from an
1164	institution accredited by the Council on Chiropractic Education
1165	more than 10 years before the date of application to the board
1166	to take the National Board of Chiropractic Examiners Special
1167	Purposes Examination for Chiropractic, or its equivalent, as
1168	determined by the board. The board shall establish by rule a
1169	passing score.
1170	Section 14. Subsection (4) of section 464.008, Florida
1171	Statutes, is amended to read:
1172	464.008 Licensure by examination
1173	(4) If an applicant who graduates from an approved program
1174	does not take the licensure examination within 6 months after
1175	graduation, he or she must enroll in and successfully complete a
1176	board-approved licensure examination preparatory course. The
1177	applicant is responsible for all costs associated with the
1178	course and may not use state or federal financial aid for such
1179	costs. The board shall by rule establish guidelines for
1180	licensure examination preparatory courses.
1181	Section 15. Paragraph (e) of subsection (1) of section
1182	464.018, Florida Statutes, is amended to read:
1183	464.018 Disciplinary actions
1184	(1) The following acts constitute grounds for denial of a
1185	license or disciplinary action, as specified in ss. 456.072(2)
1186	and 464.0095:
1187	(e) Having been found guilty of , regardless of
1188	adjudication, or entered a plea of nolo contendere or guilty to,
1189	regardless of adjudication, any offense prohibited under s.

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1190	435.04 or similar statute of another jurisdiction; or having
1191	committed an act which constitutes domestic violence as defined
1192	in s. 741.28.
1193	Section 16. Present subsections (13) and (14) of section
1194	467.003, Florida Statutes, are redesignated as subsections (14)
1195	and (15), respectively, a new subsection (13) is added to that
1196	section, and subsections (1) and (12) of that section are
1197	amended, to read:
1198	467.003 Definitions.—As used in this chapter, unless the
1199	context otherwise requires:
1200	(1) "Approved <u>midwifery</u> program" means a midwifery school
1201	or a midwifery training program which is approved by the
1202	department pursuant to s. 467.205.
1203	(12) "Preceptor" means a physician licensed under chapter
1204	458 or chapter 459, a licensed midwife <u>licensed under this</u>
1205	chapter, or a certified nurse midwife licensed under chapter
1206	$\underline{464}_{ au}$ who has a minimum of 3 years' professional experience, and
1207	who directs, teaches, supervises, and evaluates the learning
1208	experiences of <u>a</u> the student midwife <u>as part of an approved</u>
1209	midwifery program.
1210	(13) "Prelicensure course" means a course of study, offered
1211	by an approved midwifery program and approved by the department,
1212	which an applicant for licensure must complete before a license
1213	may be issued and which provides instruction in the laws and
1214	rules of this state and demonstrates the student's competency to
1215	practice midwifery under this chapter.
1216	Section 17. Section 467.009, Florida Statutes, is amended
1217	to read:
1218	467.009 Approved midwifery programs; education and training
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1219	requirements
1220	(1) The department shall adopt standards for <u>approved</u>
1221	midwifery programs which must include, but need not be limited
1222	to, standards for all of the following:
1223	<u>(a)</u> . The standards shall encompass Clinical and classroom
1224	instruction in all aspects of prenatal, intrapartal, and
1225	postpartal care, including <u>all of the following:</u>
1226	<u>1.</u> Obstetrics <u>.</u> ;
1227	<u>2.</u> Neonatal pediatrics <u>.</u> +
1228	<u>3.</u> Basic sciences <u>.</u> +
1229	<u>4.</u> Female reproductive anatomy and physiology. \div
1230	<u>5.</u> Behavioral sciences <u>.</u> +
1231	<u>6.</u> Childbirth education <u>.</u> +
1232	7. Community care.+
1233	<u>8.</u> Epidemiology <u>.</u> ;
1234	<u>9.</u> Genetics <u>.</u>
1235	<u>10.</u> Embryology <u>.</u> +
1236	<u>11.</u> Neonatology <u>.</u> ;
1237	<u>12.</u> Applied pharmacology <u>.</u> +
1238	13. The medical and legal aspects of midwifery. \cdot
1239	14. Gynecology and women's health.+
1240	<u>15.</u> Family planning <u>.</u> +
1241	<u>16.</u> Nutrition during pregnancy and lactation. $+$
1242	<u>17.</u> Breastfeeding <u>.</u> ; and
1243	18. Basic nursing skills ; and any other instruction
1244	determined by the department and council to be necessary.
1245	(b) The standards shall incorporate the Core competencies <u>,</u>
1246	incorporating those established by the American College of Nurse
1247	Midwives and the Midwives Alliance of North America, including
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1248	knowledge, skills, and professional behavior in <u>all of</u> the
1249	following areas:
1250	1. Primary management, collaborative management, referral,
1251	and medical consultation.+
1252	2. Antepartal, intrapartal, postpartal, and neonatal care. \div
1253	3. Family planning and gynecological care.+
1254	<u>4.</u> Common complications.; and
1255	5. Professional responsibilities.
1256	(c) Noncurricular The standards shall include noncurriculum
1257	matters under this section, including, but not limited to,
1258	staffing and teacher qualifications.
1259	(2) An approved midwifery program <u>must offer</u> shall include
1260	a course of study and clinical training for a minimum of 3 years
1261	which incorporates all of the standards, curriculum guidelines,
1262	and educational objectives provided in this section and the
1263	rules adopted hereunder.
1264	(3) An approved midwifery program may reduce If the
1265	applicant is a registered nurse or a licensed practical nurse or
1266	has previous nursing or midwifery education, the required period
1267	of training may be reduced to the extent of the <u>student's</u>
1268	applicant's qualifications as a registered nurse or licensed
1269	practical nurse or based on prior completion of equivalent
1270	nursing or midwifery education, as determined under rules
1271	adopted by the department <u>rule</u> . In no case shall the training be
1272	reduced to a period of less than 2 years.
1273	(4) (3) An approved midwifery program may accept students
1274	who To be accepted into an approved midwifery program, an
1275	applicant shall have <u>both</u> :
1276	(a) A high school diploma or its equivalent.

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1277	(b) Taken three college-level credits each of math and
1278	English or demonstrated competencies in communication and
1279	computation.
1280	(5) (4) As part of its course of study, an approved
1281	midwifery program must require clinical training that includes
1282	all of the following:
1283	(a) A student midwife, during training, shall undertake,
1284	under the supervision of a preceptor, The care of 50 women in
1285	each of the prenatal, intrapartal, and postpartal periods <u>under</u>
1286	the supervision of a preceptor., but The same women need not be
1287	seen through all three periods.
1288	(b) (5) Observation of The student midwife shall observe an
1289	additional 25 women in the intrapartal period before qualifying
1290	for a license.
1291	(6) <u>Clinical</u> The training required under this section <u>must</u>
1292	include all of the following:
1293	(a) shall include Training in either hospitals or
1294	alternative birth settings, or both <u>.</u>
1295	(b) A requirement that students demonstrate competency in
1296	the assessment of and differentiation, with particular emphasis
1297	on learning the ability to differentiate between low-risk
1298	pregnancies and high-risk pregnancies.
1299	(7) A hospital or birthing center receiving public funds
1300	shall be required to provide student midwives access to observe
1301	labor, delivery, and postpartal procedures, provided the woman
1302	in labor has given informed consent. The Department of Health
1303	shall assist in facilitating access to hospital training for
1304	approved midwifery programs.
1305	(8) (7) The Department of Education shall adopt curricular

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1306	frameworks for midwifery programs offered by conducted within
1307	public educational institutions <u>under</u> pursuant to this section.
1308	(8) Nonpublic educational institutions that conduct
1309	approved midwifery programs shall be accredited by a member of
1310	the Commission on Recognition of Postsecondary Accreditation and
1311	shall be licensed by the Commission for Independent Education.
1312	Section 18. Section 467.011, Florida Statutes, is amended
1313	to read:
1314	467.011 Licensed midwives; qualifications; examination
1315	Licensure by examination
1316	(1) The department shall administer an examination to test
1317	the proficiency of applicants in the core competencies required
1318	to practice midwifery as specified in s. 467.009.
1319	(2) The department shall develop, publish, and make
1320	available to interested parties at a reasonable cost a
1321	bibliography and guide for the examination.
1322	(3) The department shall issue a license to practice
1323	midwifery to an applicant who meets all of the following
1324	<u>criteria:</u>
1325	(1) Demonstrates that he or she has graduated from one of
1326	the following:
1327	<u>(a)</u> An approved midwifery program <u>.</u>
1328	(b) A medical or midwifery program offered in another
1329	state, jurisdiction, territory, or country whose graduation
1330	requirements were equivalent to or exceeded those required by s.
1331	467.009 and the rules adopted thereunder at the time of
1332	graduation.
1333	(2) Demonstrates that he or she has and successfully
1334	completed a prelicensure course offered by an approved midwifery

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1335	program. Students graduating from an approved midwifery program
1336	may meet this requirement by showing that the content
1337	requirements for the prelicensure course were covered as part of
1338	their course of study.
1339	(3) Submits an application for licensure on a form approved
1340	by the department and pays the appropriate fee.
1341	(4) Demonstrates that he or she has received a passing
1342	score on an the examination specified by the department, upon
1343	payment of the required licensure fee.
1344	Section 19. Section 467.0125, Florida Statutes, is amended
1345	to read:
1346	467.0125 Licensed midwives; qualifications; Licensure by
1347	endorsement; temporary certificates
1348	(1) The department shall issue a license by endorsement to
1349	practice midwifery to an applicant who, upon applying to the
1350	department, demonstrates to the department that she or he \underline{meets}
1351	all of the following criteria:
1352	(a) 1. Holds a valid certificate or diploma from a foreign
1353	institution of medicine or midwifery or from a midwifery program
1354	offered in another state, bearing the seal of the institution or
1355	otherwise authenticated, which renders the individual eligible
1356	to practice midwifery in the country or state in which it was
1357	issued, provided the requirements therefor are deemed by the
1358	department to be substantially equivalent to, or to exceed,
1359	those established under this chapter and rules adopted under
1360	this chapter, and submits therewith a certified translation of
1361	the foreign certificate or diploma; or
1362	2. Holds an active, unencumbered a valid certificate or
1363	license to practice midwifery in another state, jurisdiction, or
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1364	territory issued by that state, provided the licensing
1365	requirements of that state, jurisdiction, or territory at the
1366	time the license was issued were therefor are deemed by the
1367	$rac{department to be}{}$ substantially equivalent to $_{m r}$ or $\underline{exceeded}$ $rac{to}{}$
1368	$rac{exceed_{r}}{r}$ those established under this chapter and <u>the</u> rules
1369	adopted <u>hereunder</u> under this chapter.
1370	(b) Has <u>successfully</u> completed a 4-month prelicensure
1371	course conducted by an approved <u>midwifery</u> program and has
1372	submitted documentation to the department of successful
1373	completion.
1374	(c) Submits an application for licensure on a form approved
1375	by the department and pays the appropriate fee Has successfully
1376	passed the licensed midwifery examination.
1377	(2) The department may issue a temporary certificate to
1378	practice in areas of critical need to <u>an applicant</u> any midwife
1379	who is qualifying for <u>a midwifery license</u> licensure by
1380	endorsement under subsection (1) and who meets all of the
1381	following criteria, with the following restrictions:
1382	(a) Submits an application for a temporary certificate on a
1383	form approved by the department and pays the appropriate fee,
1384	which may not exceed \$50 and is in addition to the fee required
1385	for licensure by endorsement under subsection (1).
1386	(b) Specifies on the application that he or she will The
1387	Department of Health shall determine the areas of critical need,
1388	and the midwife so certified shall practice only in one or more
1389	of the following locations:
1390	1. A county health department.
1391	2. A correctional facility.
1392	3. A United States Department of Veterans Affairs clinic.
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1393	4. A community health center funded by s. 329, s. 330, or
1394	s. 340 of the Public Health Service Act.
1395	5. Any other agency or institution that is approved by the
1396	State Surgeon General and provides health care to meet the needs
1397	of an underserved population in this state.
1398	(c) Will practice only those specific areas, under the
1399	supervision auspices of a physician licensed under pursuant to
1400	chapter 458 or chapter 459, a certified nurse midwife licensed
1401	<u>under</u> pursuant to part I of chapter 464, or a midwife licensed
1402	under this chapter $_{m{ au}}$ who has a minimum of 3 years' professional
1403	experience.
1404	(3) The department may issue a temporary certificate under
1405	this section with the following restrictions:
1406	(a) A requirement that a temporary certificateholder
1407	practice only in areas of critical need. The State Surgeon
1408	General shall determine the areas of critical need, which Such
1409	areas shall include, but <u>are</u> not be limited to, health
1410	professional shortage areas designated by the United States
1411	Department of Health and Human Services.
1412	(b) <u>A requirement that if a temporary certificateholder's</u>
1413	practice area ceases to be an area of critical need, within 30
1414	days after such change the certificateholder must either:
1415	1. Report a new practice area of critical need to the
1416	department; or
1417	2. Voluntarily relinquish the temporary certificate.
1418	(4) The department shall review a temporary
1419	certificateholder's practice at least annually to determine
1420	whether the certificateholder is meeting the requirements of
1421	subsections (2) and (3) and the rules adopted thereunder. If the

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1422	department determines that a certificateholder is not meeting
1423	these requirements, the department must revoke the temporary
1424	certificate.
1425	(5) A temporary certificate issued under this section is
1426	shall be valid only as long as an area for which it is issued
1427	remains an area of critical need, but no longer than 2 years $_{m au}$
1428	and <u>is</u> shall not be renewable.
1429	(c) The department may administer an abbreviated oral
1430	examination to determine the midwife's competency, but no
1431	written regular examination shall be necessary.
1432	(d) The department shall not issue a temporary certificate
1433	to any midwife who is under investigation in another state for
1434	an act which would constitute a violation of this chapter until
1435	such time as the investigation is complete, at which time the
1436	provisions of this section shall apply.
1437	(e) The department shall review the practice under a
1438	temporary certificate at least annually to ascertain that the
1439	minimum requirements of the midwifery rules promulgated under
1440	this chapter are being met. If it is determined that the minimum
1441	requirements are not being met, the department shall immediately
1442	revoke the temporary certificate.
1443	(f) The fee for a temporary certificate shall not exceed
1444	\$50 and shall be in addition to the fee required for licensure.
1445	Section 20. Section 467.205, Florida Statutes, is amended
1446	to read:
1447	467.205 Approval of midwifery programs
1448	(1) The department must approve an accredited or state-
1449	licensed public or private institution seeking to provide
1450	midwifery education and training as an approved midwifery

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1451	program in this state if the institution meets all of the
1452	following criteria:
1453	(a) Submits an application for approval on a form approved
1454	by the department.
1455	(b) Demonstrates to the department's satisfaction that the
1456	proposed midwifery program complies with s. 467.009 and the
1457	rules adopted thereunder.
1458	(c) For a private institution, demonstrates its
1459	accreditation by a member of the Council for Higher Education
1460	Accreditation or an accrediting agency approved by the United
1461	States Department of Education and its licensing or provisional
1462	licensing by the Commission for Independent Education An
1463	organization desiring to conduct an approved program for the
1464	education of midwives shall apply to the department and submit
1465	such evidence as may be required to show that it complies with
1466	s. 467.009 and with the rules of the department. Any accredited
1467	or state-licensed institution of higher learning, public or
1468	private, may provide midwifery education and training.
1469	(2) The department shall adopt rules regarding educational
1470	objectives, faculty qualifications, curriculum guidelines,
1471	administrative procedures, and other training requirements as
1472	are necessary to ensure that approved programs graduate midwives
1473	competent to practice under this chapter.
1474	(3) The department shall survey each organization applying
1475	for approval. If the department is satisfied that the program
1476	meets the requirements of s. 467.009 and rules adopted pursuant
1477	to that section, it shall approve the program.
1478	(2)-(4) The department shall, at least once every 3 years,
1479	certify whether each approved midwifery program is currently

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1480	compliant, and has maintained compliance, complies with the
1481	requirements of standards developed under s. 467.009 <u>and the</u>
1482	rules adopted thereunder.
1483	(3) (5) If the department finds that an approved <u>midwifery</u>
1484	program is not in compliance with the requirements of s. 467.009
1485	or the rules adopted thereunder, or has lost its accreditation
1486	status, the department must provide its finding to the program
1487	in writing and no longer meets the required standards, it may
1488	place the program on probationary status for a specified period
1489	of time, which may not exceed 3 years until such time as the
1490	standards are restored.
1491	(4) If a program on probationary status does not come into
1492	compliance with the requirements of s. 467.009 or the rules
1493	adopted thereunder, or regain its accreditation status, as
1494	applicable, within the period specified by the department fails
1495	to correct these conditions within a specified period of time,
1496	the department may rescind the program's approval.
1497	(5) A Any program <u>that has</u> having its approval rescinded
1498	has shall have the right to reapply for approval.
1499	(6) The department may grant provisional approval of a new
1500	program seeking accreditation status, for a period not to exceed
1501	5 years, provided that all other requirements of this section
1502	are met.
1503	(7) The department may rescind provisional approval of a
1504	program that fails to meet the requirements of s. 467.009, this
1505	section, or the rules adopted thereunder, in accordance with
1506	procedures provided in subsections (3) and (4) may be granted
1507	pending the licensure results of the first graduating class.
1508	Section 21. Subsections (2), (3), and (4) and paragraphs

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1509
      (a) and (b) of subsection (5) of section 468.803, Florida
1510
      Statutes, are amended to read:
1511
           468.803 License, registration, and examination
1512
      requirements.-
1513
            (2) An applicant for registration, examination, or
1514
      licensure must apply to the department on a form prescribed by
1515
      the board for consideration of board approval. Each initial
1516
      applicant shall submit a set of fingerprints to the department
1517
      in accordance with on a form and under procedures specified by
1518
      the department, along with payment in an amount equal to the
1519
      costs incurred by the department for state and national criminal
1520
      history checks of the applicant. The department shall submit the
1521
      fingerprints provided by an applicant to the Department of Law
1522
      Enforcement for a statewide criminal history check, and the
1523
      Department of Law Enforcement shall forward the fingerprints to
1524
      the Federal Bureau of Investigation for a national criminal
1525
      history check of the applicant. The board shall screen the
1526
      results to determine if an applicant meets licensure
1527
      requirements. The board shall consider for examination,
1528
      registration, or licensure each applicant whom who the board
1529
      verifies:
1530
            (a) Has submitted the completed application and completed
1531
      the fingerprinting requirements fingerprint forms and has paid
1532
      the applicable application fee, not to exceed $500, and the cost
1533
      of the state and national criminal history checks. The
1534
      application fee is and cost of the criminal history checks shall
1535
      be nonrefundable;
1536
            (b) Is of good moral character;
1537
            (c) Is 18 years of age or older; and
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(a) A Bachelor of Science or higher-level postgraduate
degree in orthotics and prosthetics from <u>an</u> a regionally
accredited college or university recognized by the Commission on
Accreditation of Allied Health Education Programs.

(b) A minimum of a bachelor's degree from <u>an</u> institutionally <u>a regionally</u> accredited college or university

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1567
      and a certificate in orthotics or prosthetics from a program
1568
      recognized by the Commission on Accreditation of Allied Health
1569
      Education Programs, or its equivalent, as determined by the
1570
      board.
1571
            (c) A minimum of a bachelor's degree from an
1572
      institutionally a regionally accredited college or university
1573
      and a dual certificate in both orthotics and prosthetics from
1574
      programs recognized by the Commission on Accreditation of Allied
1575
      Health Education Programs, or its equivalent, as determined by
1576
      the board.
1577
            (4) The department may develop and administer a state
1578
      examination for an orthotist or a prosthetist license, or the
1579
      board may approve the existing examination of a national
1580
      standards organization. The examination must be predicated on a
      minimum of a baccalaureate-level education and formalized
1581
1582
      specialized training in the appropriate field. Each examination
1583
      must demonstrate a minimum level of competence in basic
1584
      scientific knowledge, written problem solving, and practical
1585
      clinical patient management. The board shall require an
1586
      examination fee not to exceed the actual cost to the board in
1587
      developing, administering, and approving the examination, which
1588
      fee must be paid by the applicant. To be considered by the board
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1589 1590 1591

(a) For an examination in orthotics:

for examination, the applicant must have:

1. A Bachelor of Science or higher-level postgraduate 1592 degree in orthotics and prosthetics from an institutionally a 1593 regionally accredited college or university recognized by the 1594 Commission on Accreditation of Allied Health Education Programs 1595 or, at a minimum, a bachelor's degree from an institutionally a

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1596	regionally accredited college or university and a certificate in
1597	orthotics from a program recognized by the Commission on
1598	Accreditation of Allied Health Education Programs, or its
1599	equivalent, as determined by the board; and
1600	2. An approved orthotics internship of 1 year of qualified
1601	experience, as determined by the board, or an orthotic residency
1602	or dual residency program recognized by the board.
1603	(b) For an examination in prosthetics:
1604	1. A Bachelor of Science or higher-level postgraduate
1605	degree in orthotics and prosthetics from <u>an institutionally</u> a
1606	regionally accredited college or university recognized by the
1607	Commission on Accreditation of Allied Health Education Programs
1608	or, at a minimum, a bachelor's degree from <u>an institutionally</u> a
1609	regionally accredited college or university and a certificate in
1610	prosthetics from a program recognized by the Commission on
1611	Accreditation of Allied Health Education Programs, or its
1612	equivalent, as determined by the board; and
1613	2. An approved prosthetics internship of 1 year of
1614	qualified experience, as determined by the board, or a
1615	prosthetic residency or dual residency program recognized by the
1616	board.
1617	(5) In addition to the requirements in subsection (2), to
1618	be licensed as:
1619	(a) An orthotist, the applicant must pay a license fee not
1620	to exceed \$500 and must have:
1621	1. A Bachelor of Science or higher-level postgraduate
1622	degree in orthotics and prosthetics from <u>an institutionally</u> a
1623	regionally accredited college or university recognized by the
1624	Commission on Accreditation of Allied Health Education Programs,
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1625	or a bachelor's degree from an institutionally accredited
1626	$\underline{\operatorname{college}}$ or university and $\overline{\operatorname{with}}$ a certificate in orthotics from a
1627	program recognized by the Commission on Accreditation of Allied
1628	Health Education Programs, or its equivalent, as determined by
1629	the board;
1630	2. An <u>approved</u> appropriate internship of 1 year of
1631	qualified experience, as determined by the board, or a residency
1632	program recognized by the board;
1633	3. Completed the mandatory courses; and
1634	4. Passed the state orthotics examination or the board-
1635	approved orthotics examination.
1636	(b) A prosthetist, the applicant must pay a license fee not
1637	to exceed \$500 and must have:
1638	1. A Bachelor of Science or higher-level postgraduate
1639	degree in orthotics and prosthetics from <u>an institutionally</u> a
1640	regionally accredited college or university recognized by the
1641	Commission on Accreditation of Allied Health Education Programs,
1642	or a bachelor's degree from an institutionally accredited
1643	$\underline{\operatorname{college}}$ or university and $\overline{\operatorname{with}}$ a certificate in prosthetics from
1644	a program recognized by the Commission on Accreditation of
1645	Allied Health Education Programs, or its equivalent, as
1646	determined by the board;
1647	2. An internship of 1 year of qualified experience, as
1648	determined by the board, or a residency program recognized by
1649	the board;
1650	3. Completed the mandatory courses; and
1651	4. Passed the state prosthetics examination or the board-
1652	approved prosthetics examination.
1653	Section 22. Section 483.824, Florida Statutes, is amended
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1654	to read:
1655	483.824 Qualifications of clinical laboratory director.—A
1656	clinical laboratory director must have 4 years of clinical
1657	laboratory experience with 2 years of experience in the
1658	specialty to be directed or be nationally board certified in the
1659	specialty to be directed, and must meet one of the following
1660	requirements:
1661	(1) Be a physician licensed under chapter 458 or chapter
1662	459;
1663	(2) Hold an earned doctoral degree in a chemical, physical,
1664	or biological science from <u>an</u> a regionally accredited
1665	institution and maintain national certification requirements
1666	equal to those required by the federal Health Care Financing
1667	Administration; or
1668	(3) For the subspecialty of oral pathology, be a physician
1669	licensed under chapter 458 or chapter 459 or a dentist licensed
1670	under chapter 466.
1671	Section 23. Subsection (3) of section 490.003, Florida
1672	Statutes, is amended to read:
1673	490.003 DefinitionsAs used in this chapter:
1674	(3)(a) "Doctoral degree from an American Psychological
1675	Association accredited program" means Effective July 1, 1999,
1676	"doctoral-level psychological education" and "doctoral degree in
1677	psychology" mean a Psy.D., an Ed.D. in psychology, or a Ph.D. in
1678	psychology from a psychology program at an educational
1679	institution that, at the time the applicant was enrolled and
1680	graduated:
1681	1.(a) Had institutional accreditation from an agency
1682	recognized and approved by the United States Department of

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1683	Education or was recognized as a member in good standing with
1684	the Association of Universities and Colleges of Canada; and
1685	2.(b) Had programmatic accreditation from the American
1686	Psychological Association.
1687	(b) "Doctoral degree in psychology" means a Psy.D., an
1688	Ed.D. in psychology, or a Ph.D. in psychology from a psychology
1689	program at an educational institution that, at the time the
1690	applicant was enrolled and graduated, had institutional
1691	accreditation from an agency recognized and approved by the
1692	United States Department of Education or was recognized as a
1693	member in good standing with the Association of Universities and
1694	Colleges of Canada.
1695	Section 24. Subsection (1) of section 490.005, Florida
1696	Statutes, is amended to read:
1697	490.005 Licensure by examination
1698	(1) Any person desiring to be licensed as a psychologist
1699	shall apply to the department to take the licensure examination.
1700	The department shall license each applicant whom who the board
1701	certifies has met all of the following requirements:
1702	(a) Completed the application form and remitted a
1703	nonrefundable application fee not to exceed \$500 and an
1704	examination fee set by the board sufficient to cover the actual
1705	per applicant cost to the department for development, purchase,
1706	and administration of the examination, but not to exceed \$500.
1707	(b) Submitted proof satisfactory to the board that the
1708	applicant has received:
1709	1. A doctoral degree from an American Psychological
1710	Association accredited program Doctoral-level psychological
1711	education; or
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1712 2. The equivalent of a doctoral degree from an American 1713 Psychological Association accredited program doctoral-level psychological education, as defined in s. 490.003(3), from a 1714 1715 program at a school or university located outside the United 1716 States of America which was officially recognized by the 1717 government of the country in which it is located as an 1718 institution or program to train students to practice 1719 professional psychology. The applicant has the burden of 1720 establishing that this requirement has been met. 1721 (c) Had at least 2 years or 4,000 hours of experience in 1722 the field of psychology in association with or under the 1723 supervision of a licensed psychologist meeting the academic and 1724 experience requirements of this chapter or the equivalent as 1725 determined by the board. The experience requirement may be met 1726 by work performed on or off the premises of the supervising 1727 psychologist if the off-premises work is not the independent, 1728 private practice rendering of psychological services that does 1729 not have a psychologist as a member of the group actually 1730 rendering psychological services on the premises. 1731 (d) Passed the examination. However, an applicant who has 1732 obtained a passing score, as established by the board by rule, 1733 on the psychology licensure examination designated by the board 1734 as the national licensure examination need only pass the Florida 1735 law and rules portion of the examination.

1736 Section 25. Subsection (1) of section 490.0051, Florida 1737 Statutes, is amended to read:

1738

490.0051 Provisional licensure; requirements.-

1739 (1) The department shall issue a provisional psychology1740 license to each applicant who the board certifies has:

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1741	(a) Completed the application form and remitted a
1742	nonrefundable application fee not to exceed \$250, as set by
1743	board rule.
1744	(b) Earned a doctoral degree from an American Psychological
1745	Association accredited program in psychology as defined in s.
1746	490.003(3) .
1747	(c) Met any additional requirements established by board
1748	rule.
1749	Section 26. Subsections (1), (3), and (4) of section
1750	491.005, Florida Statutes, are amended to read:
1751	491.005 Licensure by examination
1752	(1) CLINICAL SOCIAL WORKUpon verification of
1753	documentation and payment of a fee not to exceed \$200, as set by
1754	board rule, plus the actual per applicant cost to the department
1755	for purchase of the examination from the American Association of
1756	State Social Worker's Boards or a similar national organization,
1757	the department shall issue a license as a clinical social worker
1758	to an applicant whom who the board certifies has met all of the
1759	following criteria:
1760	(a) Has Submitted an application and paid the appropriate
1761	fee.
1762	(b)1. Has Received a doctoral degree in social work from a
1763	graduate school of social work which at the time the applicant
1764	graduated was accredited by an accrediting agency recognized by
1765	the United States Department of Education or has received a
1766	master's degree in social work from a graduate school of social
1767	work which at the time the applicant graduated:
1768	a. Was accredited by the Council on Social Work Education;
1769	b. Was accredited by the Canadian Association of Schools of

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1771 c. Has been determined to have been a program equivalent to 1772 programs approved by the Council on Social Work Education by the 1773 Foreign Equivalency Determination Service of the Council on 1774 Social Work Education. An applicant who graduated from a program 1775 at a university or college outside of the United States or 1776 Canada must present documentation of the equivalency 1777 determination from the council in order to qualify. 1778 2. The applicant's graduate program must have emphasized 1779 direct clinical patient or client health care services, 1780 including, but not limited to, coursework in clinical social 1781 work, psychiatric social work, medical social work, social 1782 casework, psychotherapy, or group therapy. The applicant's 1783 graduate program must have included all of the following 1784 coursework: 1785 a. A supervised field placement which was part of the 1786 applicant's advanced concentration in direct practice, during 1787 which the applicant provided clinical services directly to 1788 clients. 1789 b. Completion of 24 semester hours or 32 quarter hours in 1790 theory of human behavior and practice methods as courses in 1791 clinically oriented services, including a minimum of one course 1792 in psychopathology, and no more than one course in research, taken in a school of social work accredited or approved pursuant 1793

1795 3. If the course title which appears on the applicant's 1796 transcript does not clearly identify the content of the 1797 coursework, the applicant shall be required to provide 1798 additional documentation, including, but not limited to, a

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39-00626C-22 1770 Social Work; or

1794

to subparagraph 1.

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39-00626C-22 2022768 1799 syllabus or catalog description published for the course. 1800 (c) Has Had at least 2 years of clinical social work 1801 experience, which took place subsequent to completion of a 1802 graduate degree in social work at an institution meeting the 1803 accreditation requirements of this section, under the 1804 supervision of a licensed clinical social worker or the 1805 equivalent who is a qualified supervisor as determined by the 1806 board. An individual who intends to practice in Florida to 1807 satisfy clinical experience requirements must register pursuant 1808 to s. 491.0045 before commencing practice. If the applicant's 1809 graduate program was not a program which emphasized direct 1810 clinical patient or client health care services as described in 1811 subparagraph (b)2., the supervised experience requirement must 1812 take place after the applicant has completed a minimum of 15 1813 semester hours or 22 quarter hours of the coursework required. A 1814 doctoral internship may be applied toward the clinical social 1815 work experience requirement. A licensed mental health 1816 professional must be on the premises when clinical services are 1817 provided by a registered intern in a private practice setting. 1818 When a registered intern provides clinical services through 1819 telehealth, a licensed mental health professional must be 1820 accessible by telephone or electronic means. 1821

1821(d) Has Passed a theory and practice examination designated1822by board ruleprovided by the department for this purpose.

(e) Has Demonstrated, in a manner designated by rule of the board, knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling.

1827

(3) MARRIAGE AND FAMILY THERAPY.-Upon verification of

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1828	documentation and payment of a fee not to exceed \$200, as set by
1829	board rule, plus the actual cost of the purchase of the
1830	examination from the Association of Marital and Family Therapy
1831	Regulatory Board, or similar national organization, the
1832	department shall issue a license as a marriage and family
1833	therapist to an applicant whom who the board certifies has met
1834	all of the following criteria:
1835	(a) Has Submitted an application and paid the appropriate
1836	fee.
1837	(b) 1. Obtained one of the following:
1838	<u>a.</u> Has A minimum of a master's degree with major emphasis
1839	in marriage and family therapy or a closely related field from a
1840	program accredited by the Commission on Accreditation for
1841	Marriage and Family Therapy Education or from a Florida
1842	university program accredited by the Council for Accreditation
1843	of Counseling and Related Educational Programs.
1844	b. A minimum of a master's degree with an emphasis in
1845	marriage and family therapy with a degree conferred date before
1846	July 1, 2027, from an institutionally accredited college or
1847	university that is not yet accredited by the Commission on
1848	Accreditation for Marriage and Family Therapy Education or the
1849	Council for Accreditation of Counseling and Related Educational
1850	Programs.
1851	2. Completed and graduate courses approved by the Board of
1852	Clinical Social Work, Marriage and Family Therapy, and Mental
1853	Health Counseling.
1854	
1855	If the course title that appears on the applicant's transcript
1856	does not clearly identify the content of the coursework, the
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1915	provided by a registered intern in a private practice setting.
1916	When a registered intern provides clinical services through
1917	telehealth, a licensed mental health professional must be
1918	accessible by telephone or other electronic means.
1919	(d) Has Passed a theory and practice examination <u>designated</u>
1920	by board rule provided by the department.
1921	(e) Has Demonstrated, in a manner designated by board rule,
1922	knowledge of the laws and rules governing the practice of
1923	clinical social work, marriage and family therapy, and mental
1924	health counseling.
1925	
1926	For the purposes of dual licensure, the department shall license
1927	as a marriage and family therapist any person who meets the
1928	requirements of s. 491.0057. Fees for dual licensure may not
1929	exceed those stated in this subsection.
1930	(4) MENTAL HEALTH COUNSELINGUpon verification of
1931	documentation and payment of a fee not to exceed \$200, as set by
1932	board rule, plus the actual per applicant cost of purchase of
1933	the examination from the National Board for Certified Counselors
1934	or its successor organization, the department shall issue a
1935	license as a mental health counselor to an applicant whom who
1936	the board certifies has met all of the following criteria:
1937	(a) Has Submitted an application and paid the appropriate
1938	fee.
1939	(b)1. <u>Obtained</u> Has a minimum of an earned master's degree
1940	from a mental health counseling program accredited by the
1941	Council for the Accreditation of Counseling and Related
1942	Educational Programs which consists of at least 60 semester
1943	hours or 80 quarter hours of clinical and didactic instruction,

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39-00626C-22 2022768 1944 including a course in human sexuality and a course in substance 1945 abuse. If the master's degree is earned from a program related 1946 to the practice of mental health counseling which is not 1947 accredited by the Council for the Accreditation of Counseling 1948 and Related Educational Programs, then the coursework and 1949 practicum, internship, or fieldwork must consist of at least 60 1950 semester hours or 80 quarter hours and meet all of the following 1951 requirements:

1952 a. Thirty-three semester hours or 44 quarter hours of 1953 graduate coursework, which must include a minimum of 3 semester 1954 hours or 4 quarter hours of graduate-level coursework in each of 1955 the following 11 content areas: counseling theories and 1956 practice; human growth and development; diagnosis and treatment 1957 of psychopathology; human sexuality; group theories and 1958 practice; individual evaluation and assessment; career and 1959 lifestyle assessment; research and program evaluation; social 1960 and cultural foundations; substance abuse; and legal, ethical, 1961 and professional standards issues in the practice of mental 1962 health counseling. Courses in research, thesis or dissertation 1963 work, practicums, internships, or fieldwork may not be applied 1964 toward this requirement.

b. A minimum of 3 semester hours or 4 quarter hours of graduate-level coursework addressing diagnostic processes, including differential diagnosis and the use of the current diagnostic tools, such as the current edition of the American Psychiatric Association's Diagnostic and Statistical Manual of Mental Disorders. The graduate program must have emphasized the common core curricular experience.

1972

c. The equivalent, as determined by the board, of at least

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1973	700 hours of university-sponsored supervised clinical practicum,
1974	internship, or field experience that includes at least 280 hours
1975	of direct client services, as required in the accrediting
1976	standards of the Council for Accreditation of Counseling and
1977	Related Educational Programs for mental health counseling
1978	programs. This experience may not be used to satisfy the post-
1979	master's clinical experience requirement.
1980	2. Has Provided additional documentation if a course title
1981	that appears on the applicant's transcript does not clearly
1982	identify the content of the coursework. The documentation must
1983	include, but is not limited to, a syllabus or catalog
1984	description published for the course.
1985	
1986	Education and training in mental health counseling must have
1987	been received in an institution of higher education that, at the
1988	time the applicant graduated, was fully accredited by <u>an</u>
1989	institutional a regional accrediting body recognized by the
1990	Council for Higher Education Accreditation or its successor
1991	organization or publicly recognized as a member in good standing
1992	with the Association of Universities and Colleges of Canada, or
1993	an institution of higher education located outside the United
1994	States and Canada which, at the time the applicant was enrolled
1995	and at the time the applicant graduated, maintained a standard
1996	of training substantially equivalent to the standards of
1997	training of those institutions in the United States which are
1998	accredited by <u>an institutional</u> a regional accrediting body
1999	recognized by the Council for Higher Education Accreditation or
2000	its successor organization. Such foreign education and training
2001	must have been received in an institution or program of higher
I	

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2002 education officially recognized by the government of the country 2003 in which it is located as an institution or program to train 2004 students to practice as mental health counselors. The applicant 2005 has the burden of establishing that the requirements of this 2006 provision have been met, and the board shall require 2007 documentation, such as an evaluation by a foreign equivalency 2008 determination service, as evidence that the applicant's graduate 2009 degree program and education were equivalent to an accredited 2010 program in this country. Beginning July 1, 2025, an applicant 2011 must have a master's degree from a program that is accredited by 2012 the Council for Accreditation of Counseling and Related 2013 Educational Programs which consists of at least 60 semester 2014 hours or 80 quarter hours to apply for licensure under this 2015 paragraph.

2016 (c) Has Had at least 2 years of clinical experience in 2017 mental health counseling, which must be at the post-master's 2018 level under the supervision of a licensed mental health 2019 counselor or the equivalent who is a qualified supervisor as 2020 determined by the board. An individual who intends to practice 2021 in Florida to satisfy the clinical experience requirements must 2022 register pursuant to s. 491.0045 before commencing practice. If 2023 a graduate has a master's degree with a major related to the 2024 practice of mental health counseling which did not include all 2025 the coursework required under sub-subparagraphs (b)1.a. and b., 2026 credit for the post-master's level clinical experience may not 2027 commence until the applicant has completed a minimum of seven of 2028 the courses required under sub-subparagraphs (b)1.a. and b., as 2029 determined by the board, one of which must be a course in 2030 psychopathology or abnormal psychology. A doctoral internship

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2031	may be applied toward the clinical experience requirement. A
2032	licensed mental health professional must be on the premises when
2033	clinical services are provided by a registered intern in a
2034	private practice setting. When a registered intern provides
2035	clinical services through telehealth, a licensed mental health
2036	professional must be accessible by telephone or other electronic
2037	means.
2038	(d) Has Passed a theory and practice examination designated
2039	by department rule provided by the department for this purpose.
2040	(e) Has Demonstrated, in a manner designated by board rule,
2041	knowledge of the laws and rules governing the practice of
2042	clinical social work, marriage and family therapy, and mental
2043	health counseling.
2044	Section 27. Subsection (6) and paragraph (c) of subsection
2045	(9) of section 766.314, Florida Statutes, are amended to read:
2046	766.314 Assessments; plan of operation
2047	(6)(a) The association shall make all assessments required
2048	by this section, except initial assessments of physicians
2049	licensed on or after October 1, 1988, which assessments will be
2050	made by the Department of <u>Health</u> Business and Professional
2051	Regulation, and except assessments of casualty insurers pursuant
2052	to subparagraph (5)(c)1., which assessments will be made by the
2053	Office of Insurance Regulation. Beginning October 1, 1989, for
2054	any physician licensed between October 1 and December 31 of any
2055	year, the Department of Business and Professional Regulation
2056	shall make the initial assessment plus the assessment for the
2057	following calendar year. The Department of <u>Health</u> Business and
2058	Professional Regulation shall provide the association, <u>in an</u>
2059	electronic format, with a monthly report such frequency as

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2060	determined to be necessary, a listing, in a computer-readable
2061	form, of the names and <u>license numbers</u> addresses of all
2062	physicians licensed under chapter 458 or chapter 459.
2063	(b)1. The association may enforce collection of assessments
2064	required to be paid pursuant to ss. 766.301-766.316 by suit
2065	filed in county court. The association <u>is</u> shall be entitled to
2066	an award of attorney's fees, costs, and interest upon the entry
2067	of a judgment against a physician for failure to pay such
2068	assessment, with such interest accruing until paid.
2069	Notwithstanding the provisions of chapters 47 and 48, the
2070	association may file such suit in either Leon County or the
2071	county of the residence of the defendant.
2072	2. The Department of <u>Health</u> Business and Professional
2073	Regulation, upon notification by the association that an
2074	assessment has not been paid and that there is an unsatisfied
2075	judgment against a physician, shall <u>refuse to</u> not renew any
2076	license <u>issued</u> to practice for such physician <u>under</u> issued
2077	pursuant to chapter 458 or chapter 459 until <u>the association</u>
2078	notifies the Department of Health that such time as the judgment
2079	is satisfied in full.
2080	(c) The Agency for Health Care Administration shall, upon

notification by the association that an assessment has not been timely paid, enforce collection of such assessments required to be paid by hospitals pursuant to ss. 766.301-766.316. Failure of a hospital to pay such assessment is grounds for disciplinary action pursuant to s. 395.1065 notwithstanding any provision of law to the contrary.

2087

(9)

2088

(c) If In the event the total of all current estimates

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2089	equals 80 percent of the funds on hand and the funds that will
2090	become available to the association within the next 12 months
2091	from all sources described in subsections (4) and (5) and
2092	paragraph (7)(a), the association <u>may</u> shall not accept any new
2093	claims without express authority from the Legislature. Nothing
2094	in this section precludes herein shall preclude the association
2095	from accepting any claim if the injury occurred 18 months or
2096	more <u>before</u> prior to the effective date of this suspension.
2097	Within 30 days <u>after</u> of the effective date of this suspension,
2098	the association shall notify the Governor, the Speaker of the
2099	House of Representatives, the President of the Senate, the
2100	Office of Insurance Regulation, the Agency for Health Care
2101	Administration, <u>and</u> the Department of Health , and the Department
2102	of Business and Professional Regulation of this suspension.
2103	Section 28. This act shall take effect July 1, 2022.

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