

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Committee on Fiscal Policy

BILL: SB 1600

INTRODUCER: Senator Collins

SUBJECT: Interstate Mobility

DATE: February 26, 2024

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Rossitto-Van Winkle	Brown	HP	Favorable
2.	Kraemer	Imhof	RI	Favorable
3.	Rossitto-Van Winkle	Yeatman	FP	Pre-meeting

I. Summary:

SB 1600 creates s. 455.2135, F.S., to require the regulatory boards in the Department of Professional Regulation (DBPR), or the DBPR itself when there is no regulatory board for a profession, and when endorsement based on years of licensure is not otherwise provided by law in the practice act for a profession, to allow licensure by endorsement for any individual who applies for licensure by endorsement if the applicant meets certain specified criteria. The bill does not apply to harbor pilots.

SB 1600 also creates s. 456.0145, F.S., which requires the Department of Health (DOH) to issue a license or certificate by endorsement within 15 days of receipt of all required documents for each of the 59 health care professions¹ regulated by the DOH when the applicant meets specific criteria. The DOH boards, or the DOH when there is no board, may continue processing applications for licensure by endorsement as authorized under the Florida Statutes (2023) until rules adopted by the boards, or the DOH, to implement the changes made by SB 1600 take effect or until six months after the bill's effective date, whichever occurs first.

The bill provides an effective date of July 1, 2024.

¹ Office of Program Analysis and Government Accountability, Department of Health, Medical Quality Assurance, *Who Regulates practitioners?* available at <https://oppaga.fl.gov/ProgramSummary/ProgramDetail?programNumber=5041#:~:text=Currently%2C%20the%20program%2C%20in%20conjunction%20with%2022%20boards,pharmacies%2C%20and%20resident%20and%20nonresident%20sterile%20compounding%20pharmacies.%29> (last visited Jan. 24, 2024).

II. Present Situation:

Department of Business and Professional Regulation

Chapter 455, F.S., applies to the regulation of professions by the DBPR.² The chapter also provides the procedural and administrative framework for its divisions and the professional boards within the DBPR.³ In this context, the term “profession” means any activity, occupation, profession, or vocation regulated by the DBPR in the Divisions of Certified Public Accounting, Professions, Real Estate, and Regulation.⁴ When a person is authorized to engage in a pertinent profession or occupation in Florida, the DBPR issues a “permit, registration, certificate, or license” to the licensee.

Organizational Structure of the DBPR

Section 20.165, F.S., establishes the organizational structure of the DBPR, which has the following 11 divisions:

- Administration;
- Alcoholic Beverages and Tobacco;
- Certified Public Accounting;
- Drugs, Devices, and Cosmetics;
- Florida Condominiums, Timeshares, and Mobile Homes;
- Hotels and Restaurants;
- Professions;
- Real Estate;
- Regulation;
- Technology; and
- Service Operations.

Permits, Registrations, Certificates, and Licenses Issued by the DBPR

The following boards and programs are established within the Division of Professions:

- Board of Architecture and Interior Design;⁵
- Florida Board of Auctioneers;⁶
- Barbers’ Board;⁷
- Florida Building Code Administrators and Inspectors Board;⁸
- Board of Construction Industry Licensing;⁹
- Board of Cosmetology;¹⁰

² Section 455.01(6), F.S.

³ See s. 455.203, F.S. The DBPR must also provide legal counsel for boards within the DBPR by contracting with the Department of Legal Affairs, by retaining private counsel, or by staff counsel of the DBPR. See s. 455.221(1), F.S.

⁴ Section 455.01(6), F.S.

⁵ See part I, ch. 481, F.S.

⁶ See part VI, ch. 468, F.S.

⁷ See ch. 476, F.S.

⁸ See part XII, ch. 468, F.S.

⁹ See part I, ch. 489, F.S.

¹⁰ See ch. 477, F.S.

- Electrical Contractors' Licensing Board;¹¹
- Board of Employee Leasing Companies;¹²
- Board of Landscape Architecture;¹³
- Board of Pilot Commissioners;¹⁴
- Florida Board of Professional Engineers;¹⁵
- Board of Professional Geologists;¹⁶
- Board of Veterinary Medicine;¹⁷
- Home inspection services licensing program;¹⁸ and
- Mold-related services licensing program.¹⁹

The following board and commission are established within the Division of Real Estate:

- Florida Real Estate Appraisal Board;²⁰ and
- Florida Real Estate Commission.²¹

The board of Accountancy is established within the Division of Certified Public Accounting.²²

The following additional professions are licensed and regulated within the DBPR, in various other divisions, for a total of 22²³ regulated professions throughout the DBPR:²⁴

- Asbestos contractors and consultants;
- Athletic agent;²⁵
- Community association managers;²⁶ and
- Talent agencies.²⁷

¹¹ See part II, ch. 489, F.S.

¹² See Part XI, ch. 468, F.S.

¹³ See Part II, ch. 481, F.S.

¹⁴ See ch. 310, F.S.

¹⁵ See ch. 471, F.S.

¹⁶ See ch. 492, F.S.

¹⁷ See ch. 474, F.S.

¹⁸ See part XV, ch. 468, F.S.

¹⁹ See part XVI, ch. 468, F.S.

²⁰ See part II, ch. 475, F.S.

²¹ See part I, ch. 475, F.S.

²² See ch. 473, F.S.

²³ See Department of Business and Professional Regulation, *Annual Report, Fiscal Year 2022-2023*, at pp. 18 and 87, available at <http://www.myfloridalicense.com/DBPR/os/documents/Division%20Annual%20Report%20FY%202022-23.pdf> (last visited Jan. 23, 2024).

²⁴ The Florida Athletic Commission is assigned to the DBPR for administrative and fiscal accountability purposes only; and The DBPR also administers the Child Labor Law and Farm Labor Contractor Registration Law. See s. 548.003(1), F.S., and parts I and III, ch. 450, F.S., respectively.

²⁵ See part IX, ch., 468 F.S.

²⁶ See s. 468.432, F.S.

²⁷ See part VII, ch. 468, F.S.

DBPR Licensure by Endorsement

Of the 22 professions that fall under ch. 455, F.S., sixteen of the professions currently have one or more licensure by endorsement provisions in their practice act. The following six professions do not have provisions for licensure by endorsement:

- Harbor pilots;
- Talent agents;
- Community association managers;
- Athletic agents;
- Employee leasing companies; and
- Real estate appraisers.

The following DBPR-regulated professions have endorsement provisions but do not specify the number of years of licensure that are required for endorsement:

- Auctioneers;
- Architecture and interior design;
- Real estate brokers, sales associates, and schools; and
- Cosmetology specialists.

Department of Health

One of the many enumerated missions of the DOH is to regulate health practitioners for the preservation of the health, safety, and welfare of the public.²⁸ The Division of Medical Quality Assurance (MQA), within the DOH, has general regulatory authority over health care practitioners.²⁹ The MQA works in conjunction with 22 regulatory boards and four councils to license and regulate 364 health care professions.³⁰ Each profession is regulated by an individual practice act and by ch. 456, F.S., which provides general regulatory and licensure authority for the MQA.

Regulation of Health Care Practitioners

The MQA is statutorily responsible for assisting the following boards and professions in the regulation of their health care practitioner members:³¹

- The Board of Acupuncture;³²
- The Board of Medicine;³³

²⁸ Section 20.43, F.S.

²⁹ Pursuant to s. 456.001(4), F.S., health care practitioners are defined to include acupuncturists, physicians, physician assistants, chiropractors, podiatrists, naturopaths, dentists, dental hygienists, optometrists, nurses, nursing assistants, pharmacists, midwives, speech language pathologists, nursing home administrators, occupational therapists, respiratory therapists, dietitians, athletic trainers, orthotists, prosthetists, electrologists, massage therapists, clinical laboratory personnel, medical physicists, genic counselors, dispensers of optical devices or hearing aids, physical therapists, psychologists, social workers, counselors, and psychotherapists, among others.

³⁰ Florida Department of Health, Division of Medical Quality Assurance, *Annual Report and Long-Range Plan, Fiscal Year 2022-2023*, at pg. 4, available at <https://www.floridahealth.gov/licensing-and-regulation/reports-and-publications/annual-reports.html> (last visited Jan. 23, 2024).

³¹ Section 456.001(4), F.S.

³² See ch. 457, F.S.

³³ See ch. 458, F.S.

- The Board of Osteopathic Medicine;³⁴
- The Board of Chiropractic Medicine;³⁵
- The Board of Podiatric Medicine;³⁶
- Naturopathy;³⁷
- The Board of Optometry;³⁸
- The Board of Nursing;³⁹
- Nursing assistants;⁴⁰
- The Board of Pharmacy;⁴¹
- The Board of Dentistry;⁴²
- Midwifery;⁴³
- The Board of Speech-Language Pathology and Audiology;⁴⁴
- The Board of Nursing Home Administrators;⁴⁵
- The Board of Occupational Therapy;⁴⁶
- Respiratory therapy, practices under the Board of Respiratory Care;⁴⁷
- Dietetics and nutritionists practice under the Board of Medicine;⁴⁸
- The Board of Athletic Training;⁴⁹
- The Board of Orthotists and Prosthetists;⁵⁰
- Electrolysis practices under the Board of Medicine;⁵¹
- The Board of Massage Therapy;⁵²
- The Board of Clinical Laboratory Personnel;⁵³
- Medical physicists;⁵⁴
- Genetic counselors;⁵⁵
- The Board of Opticianry;⁵⁶
- The Board of Hearing Aid Specialists;⁵⁷

³⁴ See ch. 459, F.S.

³⁵ See ch. 460, F.S.

³⁶ See ch. 461, F.S.

³⁷ See ch. 462, F.S.

³⁸ See ch. 463, F.S.

³⁹ See part I, ch. 464, F.S.

⁴⁰ See part II, Ch. 464, F.S.

⁴¹ See ch. 465, F.S.

⁴² See ch. 466, F.S.

⁴³ See ch. 467, F.S.

⁴⁴ See part I, ch. 468, F.S.

⁴⁵ See part II, ch. 468, F.S.

⁴⁶ See part III, ch. 468, F.S.

⁴⁷ See part V, ch. 468, F.S.

⁴⁸ See part X, ch. 468, F.S.

⁴⁹ See part XIII, ch. 468, F.S.

⁵⁰ See part XIV, ch. 468, F.S.

⁵¹ See ch. 478, F.S.

⁵² See ch. 480, F.S.

⁵³ See part I, ch. 483, F.S.

⁵⁴ See part II, ch. 483, F.S.

⁵⁵ See part III, ch. 483, F.S.

⁵⁶ See part I, ch. 484, F.S.

⁵⁷ See part II, ch. 484, F.S.

- The Board of Physical Therapy;⁵⁸
- The Board of Psychology;⁵⁹
- School psychologists;⁶⁰
- The Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling;⁶¹
- Radiation technologists;⁶²
- Emergency medical technicians;⁶³ and
- Paramedics.⁶⁴

The DOH and the health care practitioner boards have different roles in the regulatory system. Boards establish practice standards by rule, pursuant to specific legislative grants of statutory authority and directives. The DOH receives and investigates complaints about health care practitioners and prosecutes cases for disciplinary action against practitioners. The boards determine the course of action and any disciplinary action to be taken against a practitioner under the applicable practice act.⁶⁵ The DOH is then responsible for ensuring that the licensee complies with the terms and penalties imposed by the board. If a case is appealed, the DOH's attorneys defend the final actions of the boards before the appropriate appellate court.

For professions for which there is no board, the DOH determines the action and discipline to be taken against a health care practitioner and issues the final orders. Those professions include the following:

- Emergency medical technicians (EMTs);
- Paramedics;
- Genetic counselors ;
- Radiation technologists;
- Naturopathy; and
- Medical physicists.

The DOH rules and board rules apply to all statutory grounds for discipline against a health care practitioner. Under current law, the DOH has disciplinary authority for violations of a practice act only for practitioners that are not regulated by a board. The DOH does not have final disciplinary authority over practitioners for which there is a board.

⁵⁸ See ch. 486, F.S.

⁵⁹ See ch. 490, F.S.

⁶⁰ *Id.*

⁶¹ See ch. 491, F.S.

⁶² See part III, ch. 468, F.S.

⁶³ See part III, ch. 401, F.S.

⁶⁴ *Id.*

⁶⁵ Section 456.072(2), F.S.

Licensure of Health Care Practitioners

Licensure by examination is the most common pathway for individuals seeking initial licensure, particularly among health care professionals educated and trained in Florida. The requirements to qualify for licensure by examination are legislatively specified in each profession’s respective practice act and vary widely based on the profession. However, licensure by examination has some common elements for most health care professions, and those include the following:

- Completion of an approved or legislatively mandated educational training program;
- Completion of an approved or legislatively mandated licensure or certification examination with a passing score; and
- Submission of a legislatively mandated application, approved by the DOH, fingerprints for a criminal background check, and an application fee.

Licensure by Endorsement of Health Care Professionals

Licensure by endorsement is the most common alternative to licensure by examination in Florida. Licensure by endorsement is an expedited licensure process which allows a health care professional to become licensed in Florida based upon holding a substantially equivalent or similar health care professional license from another state. Currently, 20 health care professionals regulated by the DOH and the boards are legislatively authorize to offer licensure by endorsement. Seventeen are not. See lists below.

Health Care Professions with Licensure by Endorsement	Health Care Professions without Licensure by Endorsement
Acupuncturist	Anesthesiologist Assistant
Allopathic Physician (MD)	Athletic Trainer
Audiologist	Chiropractor
Certified Nursing Assistant (CNA)	Clinical Laboratory Personnel
Mental Health Professions	Dental Hygienist
Dietitian	Dentist
Electrologist	EMT/Paramedic
Licensed Practical Nurse (LPN)	Genetic Counselor
Massage Therapist	Hearing Aid Specialist
Midwifery	Medical Physicist
Nursing Home Administrator	Optometrist
Occupational Therapist	Optician
Pharmacist	Orthotist and Prosthetist
Physical Therapist/Physical Therapy Assist.	Osteopathic Physician (DO)
Physical Therapist Assistant	Physician Assistant
Psychologist/School Psychologist	Podiatrist
Radiation Technician	Registered Pharmacy Technician
Registered Nurse (RN/APRN)	
Respiratory Therapist	
Speech-Language Pathologist	

Even among the health care professions which allow licensure by endorsement, there is no universal set of requirements. Requirements to obtain licensure by endorsement vary widely by profession. For example, the Legislature has mandated in some professions that applicants seeking licensure by endorsement have graduated from a school or college approved by a specific governmental accrediting body, jurisdictional accrediting body, or private accrediting body; submit fingerprints for a background screening;⁶⁶ have a certain amount of prior practice experience;⁶⁷ have a specific proficiency in English; or pass a statutorily-specified national or regional examination and an examination on Florida laws and rules relevant to the applicant's profession.⁶⁸

Acupuncture Licensure by Endorsement

In s. 457.105(2)(c), F.S., the Legislature authorizes acupuncturists to obtain Florida licensure by endorsement if an applicant has successfully completed a board-approved national certification process and is actively licensed in a state that had examination requirements that were substantially equivalent to, or more stringent than, those of Florida. The Board of Acupuncture enacted Florida Administrative Code Rule 64B1-3.009, specifying that it would certify an applicant for licensure by endorsement under s. 457.105(2), F.S., upon proof of the following:

- An active certification in Oriental Medicine from the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM);
- An age of 21 or older;
- Good moral character;
- The ability to communicate in English;
- Having 60 hours of study in injection therapy, including:
 - History and development of acupuncture injection therapy;
 - Differential diagnosis;
 - Definitions, concepts, and pathophysiology;
 - The nature, function, channels entered, and contraindications of herbal, homeopathic, and nutritional injectables;
 - Diseases amenable to treatment with acupuncture injection therapy and the injectables appropriate to treat them;
 - Identification of appropriate points for treatment, including palpatory diagnosis;
 - A review of anatomy and referral zones;
 - Universal precautions including management of blood borne pathogens and biohazardous waste;
 - Procedures for injections, including preparing the injectables, contraindications and precautions;
 - Ten hours of clinical practice on a patient or patients; and
 - Administration techniques and equipment needed.
- That he or she has successfully complete 15 hours of supervised instruction in universal precautions and 20 hours of supervised instruction in Florida Statutes and Rules, including chs. 456 and 457, F.S., and the acupuncture administrative rules;

⁶⁶ Allopathic Physicians, Certified Nursing Assistants, Licensed Practice Nurses, Registered Nurses, and Massage Therapists.

⁶⁷ Allopathic Physicians, Mental Health Professionals, Licensed Practical Nurses, Registered Nurses, Nursing Home Administrators, Pharmacists, and Psychologists.

⁶⁸ Mental Health Professions, Licensed Practical Nurses, Registered Nurses, Nursing Home Administrators, Pharmacists, Psychologists, and Radiology Technicians.

- That he or she has completed an eight-hour program, or its equivalent, that incorporates the safe and beneficial use of laboratory testing and imaging findings in the practice of acupuncture and oriental medicine;
- That he or she has obtained professional liability insurance;⁶⁹ and
- That he or she has paid the fee for licensure by endorsement as established by the board.

Medical Licensure by Endorsement

The DOH must issue an allopathic medical license to an applicant for a license by endorsement, if he or she meets the following requirements set out in s. 458.313, F.S., which includes first meeting the qualifications for licensure set out in s. 458.311(1)(b) -(g), F.S., or s. 458.311(1)(b) -(e),(g) and (3), F.S., pertaining to licensure by examination. Section 458.311(1)(b) -(g), F.S., for licensure by examination, first requires the applicant to prove he or she:

- Is 21 year of age or older;
- Is of good moral character;
- Has not committed any act or offense in Florida or any other jurisdiction that would constitute the basis for disciplinary action;
- If a medical school graduate after October 1, 1992, that he or she must have completed the equivalent of two academic years of pre-professional, postsecondary education, as determined by rule of the board, which must include, courses in anatomy, biology, and chemistry prior to entering medical school;
- Meets one of the following medical education and post graduate training requirements:⁷⁰
 - Is a graduate of a U.S. allopathic medical school recognized and approved by the U.S. Office of Education (AMG); is competent in English and completed at least one year of approved residency; or
 - Is a graduate of an international allopathic medical school registered with the World Health Organization (WHO) that has been certified by the DOH under s. 458.314, F.S., as having met the standards required to be an accredited medical school in the U.S.; and
 - Has a valid Educational Commission for Foreign Medical Graduates (ECFMG) certificate; and
 - Has completed an approved residency of at least two years in one specialty area; or
 - Is a graduate of an international medical school that has not been certified by the DOH under s. 458.314, F.S., as having met the standards equal to an accredited U.S. medical schools; and
 - Has had his or her medical credentials evaluated by the ECFMG;
 - Holds an active, valid certificate issued by the ECFMG;
 - Has passed the examination utilized by the ECFMG; and
 - Has completed an approved residency or fellowship of at least two years in one specialty area.⁷¹

⁶⁹ See s. 456.048, F.S.

⁷⁰ Section 458.311(1)(f), F.S.

⁷¹ See s. 458.311(1)(f)3.c., F.S. To be acceptable, the fellowship experience and training must count toward regular or subspecialty certification by a board recognized and certified by the American Board of Medical Specialties.

The alternative first requirement for licensure by examination and by endorsement under s. 358.313, F. S., replaces the education and post-graduate training requirements of s. 458.311(1)(f), F.S., with those in s. 458.311(3), F.S., which exempts graduates of foreign medical schools from the need to present a certificate issued by the ECFMG, and from passing an ECFMG examination, if the graduate:

- Has received a bachelor's degree from an accredited U.S. college or university;
- Has studied at a medical school which is recognized by the WHO;
- Has completed all of the formal requirements of the foreign medical school, except the internship or social service requirements;
- Has passed part I of the National Board of Medical Examiners (NBME) examination or the ECFMG examination; and
- Has completed an academic year of supervised clinical training in a hospital affiliated with a medical school approved by the Council on Medical Education of the American Medical Association (CME-AMA) and upon completion has passed part II of the National Board of Medical Examiners examination or the Educational Commission for Foreign Medical Graduates examination equivalent.

Allopathic medical applicants for licensure by endorsement must also submit fingerprints for a criminal background screening and provide evidence of:

- A passing score on the FLEX, USMLE or NBME; and
- An active medical license in another jurisdiction for at least two of the immediately preceding four years; or
- Successful completion of either a board-approved postgraduate training program within two years preceding the filing of an application; or
- Passage of a board-approved clinical competency examination within the year preceding the filing of an application for licensure.

Nursing Licensure by Endorsement - CNA, LPN, RN, ARNP

The DOH must issue an professional (RN) or practical (LPN) nursing license to an applicant for a license by endorsement if he or she meets the following requirements set out in s. 464.009, F.S.:

- Hold a valid license to practice professional or practical nursing in another state or territory of the U.S. obtained by one of the following measures:
 - By completing an approved or accredited nursing education program⁷² and passing the State Board Test Pool Examination (SBTPE) or the NCLEX; or
 - By having actively practiced nursing in another state, jurisdiction, or territory of the U.S. for two of the preceding three years without any criminal history or having his or her license acted against by the licensing authority of any jurisdiction.
- Submit a set of fingerprints for a background screening; and
- Not be under investigation in another state, jurisdiction, or territory of the U.S. for an act which would constitute a violation of nurse practice act or ch. 456, F.S.

⁷² See s 464.008, F.S.

An RN or LPN holding an active multistate license in another state is not required to obtain a license by endorsement to practice in Florida.⁷³

The Legislature has also directed the Board of Nursing (BON) to issue certificates to certified nursing assistants (CNAs) by endorsement. Section 464.203, F.S., requires the BON to issue a certificate to practice as a CNA to any person who demonstrates the following:

- A minimum competency to read and write;
- Passage of the required background screening;⁷⁴
- A current CNA certification in another state, U.S. territory, or the District of Columbia;
- Registration on that jurisdiction's CNA registry; and
- The absence of any findings of abuse, neglect, or exploitation by the applicant in that jurisdiction.

An advanced practice registered nurses (APRN) may also obtain licensure by endorsement in Florida by submitting proof of all of the following to the DOH:⁷⁵

- A valid RN license from any U.S. jurisdiction or a multistate RN license;
- A master's degree or post-master's degree certification;
- A national advanced practice certification from an approved nursing specialty board;
- Malpractice insurance or exemption; and
- Fingerprints for back ground screening for initial licensure.

Pharmacist Licensure by Endorsement

Section 465.0075, F.S., requires the DOH to issue a license by endorsement to an applicant who remits an application fee and whom the Board of Pharmacy (BOP) certifies:

- Is 18 years of age or older;⁷⁶
- Has a degree from a school or college of pharmacy accredited by an agency recognized and approved by the U.S. Office of Education ;⁷⁷
- Has submitted proof that he or she has completed a BOP-approved internship program not to exceed 2,080 hours, all of which may be obtained prior to graduation;⁷⁸
- Has obtained a passing score on the National Association of Boards of Pharmacy (NABP) licensure examination or a similar nationally recognized examination, if the board certifies that the applicant has taken the required examination;
- Has submitted evidence of:
 - An active license to practice pharmacy, including practice in community or public health by persons employed by a governmental entity, in another jurisdiction for at least two of the immediately preceding five years, or
 - The completion of a board-approved postgraduate training or clinical competency examination within the year immediately preceding application; and

⁷³ See s. 464.0095, F.S.

⁷⁴ See s. 400.215, F.S.

⁷⁵ See s. 464.012, F.S.

⁷⁶ Sections 465.0075(1)(a) and 465.007(1)(b), F.S.

⁷⁷ *Id.*

⁷⁸ Sections 465.0075(1)(a) and 465.007(1)(c), F.S.

- Has obtained a passing score on the pharmacy jurisprudence portions of the licensure examination; and
- Is not under investigation in any jurisdiction for an act or offense that would constitute a violation of the pharmacy practice act or ch. 456, F.S.

An applicant licensed in another state for a period in excess of two years from the date of application for licensure by endorsement must also submit a total of at least 30 hours of BOP approved continuing education (CE) for the two years immediately preceding application.

Section 465.0075, F.S., requires the DOH to issue a non-U.S. pharmacist graduate a license by endorsement who remits an application fee and whom the BOP certifies:

- Is 18 years of age or older;
- Has a BS or BA from a four-year undergraduate pharmacy program from a school or college of pharmacy located outside the U.S.;
- Has demonstrated proficiency in English by passing both the Test of English as a Foreign Language (TOEFL) and the Test of Spoken English (TSE);
- Has passed the Foreign Pharmacy Graduate Equivalency Examination (FPGEE) that is approved by BOP rule;
- Has completed a minimum of 500 hours in a supervised, BOP-approved work activity program within Florida under the supervision of a pharmacist licensed by the DOH;
- Has submitted proof that he or she has completed a BOP-approved internship program not to exceed 2,080 hours, all of which may be obtained prior to graduation;⁷⁹
- Has obtained a passing score on the National Association of Boards of Pharmacy (NABP) licensure examination or a similar nationally recognized examination, if the board certifies that the applicant has taken the required examination;
- Has submitted evidence of:
 - An active license to practice pharmacy, including practice in community or public health by persons employed by a governmental entity, in another jurisdiction for at least two of the immediately preceding five years, or
 - The completion of a board-approved postgraduate training or clinical competency examination within the year immediately preceding application; and
 - Has obtained a passing score on the pharmacy jurisprudence portions of the licensure examination; and
- Is not under investigation in any jurisdiction for an act or offense that would constitute a violation of the pharmacy practice act or ch. 456, F.S.

Midwifery Licensure by Endorsement

Midwifery is the practice of a midwife supervising normal labor and childbirth and the practice of rendering prenatal and postpartum care.⁸⁰ Midwives are not physicians or certified nurse midwives but must be 21 years of age and licensed under ch. 467, F.S.⁸¹

⁷⁹ Sections 465.0075(1)(a) and 465.007(1)(c), F.S.

⁸⁰ Section 467.003(8), F.S.

⁸¹ Section 467.003, (7), F.S.

Section 467.0125, F.S., requires the DOH to issue a license to a midwife by endorsement to any applicants who demonstrates to the DOH that he or she:

- Holds an active, unencumbered license to practice midwifery in another state, jurisdiction, or territory, provided the licensing requirements of that state, jurisdiction, or territory at the time the license was issued were substantially equivalent to or exceeded those established under the midwifery practice act and rules adopted hereunder;
- Has successfully completed a pre-licensure course conducted by an accredited and approved midwifery program;
- Submits an application for licensure on a DOH-approved form; and
- Pays the application fee.

Speech and Language Pathologist and Audiologist Licensure by Endorsement

Section 468.1185, F.S., requires the DOH to issue a license by endorsement to a speech and language pathologist or audiologist applicant when the Board of Speech and Language Pathology and Audiology certifies that the applicant is qualified after he or she demonstrates:

- One of the following:
 - A valid license or certificate in another state or territory of the U.S. to practice the profession for which the application for licensure is made, if the criteria for issuance of such license were substantially equivalent to or more stringent than the licensure criteria which existed in this state at the time the license was issued; or
 - Holds a valid certificate of clinical competence from the American Speech-Language and Hearing Association; or
 - Is board certified in audiology by the American Board of Audiology; and
- That he or she is not under investigation in any jurisdiction for an act or offense that would constitute a violation of the speech and language pathology and audiology practice act or ch. 456, F.S.

Nursing Home Administrators Licensure by Endorsement

Section 468.1705, F.S., requires the DOH to issue a license by endorsement for a nursing home administrator who applies to the DOH, paid the applicable fee; and

- Meets one of the following requirements:
 - Holds a valid, active license to practice nursing home administration in another U.S. state, provided that the current requirements for licensure in that state are substantially equivalent to, or more stringent than, current requirements in this state; or
 - Meets the qualifications for licensure in s. 468.1695, F.S.; and
- Has completed a national examination which is substantially equivalent to, or more stringent than, the examination given by the DOH;
- Has passed an examination on the laws and rules of Florida governing the administration of nursing homes;
- Has worked as a fully-licensed nursing home administrator for two of the last five years immediately preceding the application; and
- Is not under investigation in this or another state for any act which would constitute a violation of the nursing home administrators practice act or ch. 456, F.S.

A temporary license may be issued one time only to an applicant who has filed an application for licensure by endorsement, has paid the fee for the next laws and rules examination offered, and who meets the following requirements:

- Has filed an application for a temporary license and paid an application fee;
- Has taken, or applied to take, the licensure examination;⁸²
- Has worked as a fully licensed nursing home administrator for two of the last five year period immediately preceding application for a temporary license.

Occupational Therapy Licensure by Endorsement

In s. 468.213, F.S., the Legislature authorizes the Board of Occupational Therapy to waive the examination requirements for licensure and grant a license without examination in two situations:

- To any person who presents proof of a current certification as an occupational therapist or occupational therapy assistant by a national certifying organization if the board determines the requirements for such certification to be equivalent to the requirements for licensure in the practice act; and
- To any person who presents proof of a current license as an occupational therapist or occupational therapy assistant in another state, the District of Columbia, or any territory or jurisdiction of the U.S., or foreign national jurisdiction which required standards for licensure equivalent to the requirements for licensure in the practice act as determined by the board.

Radiation Technicians Licensure by Endorsement

Section 468.3065, F.S., authorizes the DOH to issue a certificate by endorsement to practice as a radiologist assistant to an applicant who, upon applying to the DOH and remitting an application fee, demonstrates to the DOH that he or she holds a current certificate or registration as a radiologist assistant granted by the American Registry of Radiologic Technologists.

Section 468.3065, F.S. also authorizes the DOH to issue a certificate by endorsement to practice radiologic technology to an applicant who, upon applying to the DOH and remitting a fee, demonstrates to the DOH that he or she holds a current certificate, license, or registration to practice radiologic technology, provided that the requirements for such certificate, license, or registration are deemed by the DOH to be substantially equivalent to those established under Section 468.3065, F.S., and rules adopted pursuant thereto.

Finally, the DOH may issue a certificate by endorsement to practice radiologic technology to an applicant who, upon applying to the DOH, remits an appropriate fee and demonstrates to the DOH that he or she holds a current certificate, license, or registration to practice radiologic technology, provided that the requirements for such certificate, license, or registration are deemed by the DOH to be substantially equivalent to those established under the practice act and rules adopted under the radiation technicians practice act.

⁸² See ss. 468.1695(1), and 468.1705(4), F.S.

Respiratory Therapy Licensure by Endorsement

Section 468.358, F.S., authorizes the DOH to grant licenses by endorsement to certified respiratory therapists and registered respiratory therapists if credentialed by the National Board for Respiratory Care or a board-approved equivalent credential acceptable to the board. Licensure by this mechanism requires verification under oath and satisfactory evidence establishing that the credential is held.

Section 468.358, F.S., also authorizes the DOH to grant licenses by endorsement to individuals who have been granted licensure, certification, registration, or other authority, by whatever name known, to deliver respiratory care services in another state or country. Those persons may petition the board for consideration for licensure, and upon verification under oath and submission of evidence of licensure, certification, registration, or other authority acceptable to the board, may be granted licensure by endorsement.

Dietetics and Nutrition Licensure by Endorsement

Section 468.513, F.S., requires the DOH to issue a license by endorsement to practice dietetics and nutrition to any applicant that the Board of Medicine certifies is qualified, upon receipt of a completed application, the appropriate fee, and satisfactory evidence that he or she:

- Is a registered dietitian; or
- Holds a valid license to practice dietetics or nutrition issued by another state, district, or territory of the U.S., if the criteria for issuance of such license are determined by the board to be substantially equivalent to or more stringent than those of Florida; and
- Is not under investigation in any jurisdiction for an act or offense that would constitute a violation of the dietician and nutritionist practice act or ch. 456, F.S.

Electrologist Licensure by Endorsement

Section 478.47, F.S., requires the DOH to issue a license by endorsement to an electrologist applicant who submits an application, the required application fees and who holds an active license or other authority to practice electrology in a jurisdiction whose licensure requirements are determined by the Board of Medicine to be equivalent to the requirements for licensure in Florida.

Massage Therapy Licensure by Endorsement

The Legislature created the Board of Massage Therapy (BMT) within the DOH.⁸³ The BMT developed Florida Administrative Code Rule 64B7-25.004, *Endorsements*,⁸⁴ to require the DOH to issue a massage therapy license by endorsement to all applicants who satisfy the following criteria:

- Pay the initial license application fee;⁸⁵

⁸³ Section 480.035, F.S.

⁸⁴ See Fla. Admin. Code R. 64B7-25.004, *Endorsements*, lists Rulemaking Authority as ss. 456.013(2), 480.035(7), 480.041(4)(c), F.S. There is no longer a s. 480.041(4)(c), F.S.

⁸⁵ Fla. Admin. Code R. 64B7-27.100 (2023).

- Submit a completed application;⁸⁶
- Demonstrate a current license to practiced massage therapy in another state; and
- Demonstrate that the license was required to meet education standards or apprenticeship training substantially similar to, equivalent to, or more stringent than those required for licensure by chs. 456 and 480, F.S., and applicable Florida administrative code rules; and
- Demonstrate that the out-of-state license was issued upon:
 - The satisfactory completion of an examination comparable to the examination approved by the BMT; or
 - Present a certification to the BMT of successful completion of an approved examination for licensure subsequent to the issuance of the out-of-state license;
- Have no outstanding or unresolved complaints in any jurisdiction where licensure is held; and,
- Complete a 10-hour course of Florida Laws and Rules CE offered by a BMT-approved massage therapy school or BMT-approved continuing education provider.

Physical Therapy Practice by Endorsement

In s. 486.081, F.S., the Legislature has authorized the Board of Physical Therapy (BPT) to issue through the DOH a physical therapy (PT) license without examination to any applicant who presents evidence of the following:

- Having passed the American Registry Examination prior to 1971; or
- Having passed an examination in PT before a similar examining board of another state, the District of Columbia, a territory, or a foreign country, if the standards for licensure in physical therapy in such other state, district, territory, or foreign country are determined by the BPT to be as high as those of Florida.

In s. 486.107, F.S., the Legislature has authorized the BPT to issue through the DOH a license for a physical therapy assistant (PTA) without examination to any applicant who presents evidence to the BPT, under oath, of a license in another state, the District of Columbia, or a territory, if the standards for registering as a PTA or licensing of a PTA, in the other state are determined by the BPT to be as high as those of Florida.

Psychologist or School Psychologist Licensure by Endorsement

In s. 490.006, F.S., the Legislature requires the DOH to issue a license to a person as a psychologist or school psychologist who applies to the DOH, pays the appropriate application fee, and demonstrates to the Board of Psychology, or in the case of the school psychologist, to the DOH, that the applicant:

- Is a diplomate with the American Board of Professional Psychology, Inc.; or
- Possesses a doctoral degree in psychology and has at least 10 years of experience as a licensed psychologist in any jurisdiction or territory of the U.S. within the 25 years preceding the date of application;
- Has passed that portion of the psychology or school psychology licensure examinations pertaining to the laws and rules related to the practice of psychology or school psychology in Florida; and

⁸⁶ Fla. Admin. Code R. 64B7-25.001.

- Is not under investigation in any jurisdiction for an act or offense that would constitute a violation of the psychological services practice act or ch. 456, F.S.

A person licensed as a psychologist in another state who is practicing pursuant to the Psychology Interjurisdictional Compact under s. 490.0075, F.S., and only within the scope provided therein, is exempt from the licensure by endorsement requirements of s. 490.006, F.S.

Clinical Social Work, Marriage & Family Therapy, and Mental Health Counseling Licensure by Endorsement

In s. 491.006, F.S., the Legislature requires the DOH to issue licenses or certificates, as appropriate, to a person applying for licensure by endorsement as a clinical social worker, marriage and family therapist, or mental health counselor who remits the appropriate fee and demonstrates to the Board of Clinical Social Work, Marriage & Family Therapy, and Mental Health Counseling that he or she:

- Has knowledge of the laws and rules governing the practice of clinical social work, marriage and family therapy, and mental health counseling;
- Holds an active license to practice and has actively practiced the licensed profession in another state for three of the last five years immediately preceding licensure;
- Has passed:
 - A substantially equivalent licensing examination in another state; or
 - Has passed the licensure examination in Florida in the profession for which the applicant is applying; and
- Holds a license in good standing;
- Is not under investigation for an act that would constitute a violation of the clinical, counseling, and psychotherapy services practice act or ch. 456, F.S.; and
- Has not been found to have committed any act that would constitute a violation of the clinical, counseling, and psychotherapy services practice act or ch. 456, F.S.

III. Effect of Proposed Changes:

Licensure by Endorsement - DBPR-Regulated Professions

SB 1600 creates s. 455.2135, F.S., to require the regulatory boards in the DBPR, or the DBPR itself when there is no regulatory board for a profession, when endorsement based on years of licensure is not otherwise provided by law in the practice act of a profession, to allow licensure by endorsement for any individual who applies if he or she meets the following criteria:

- Holds a valid, current license to practice the profession issued by another state or territory of the U.S. for at least five years before the date of application and be applying for the same or similar Florida license;
- Submits an application either:
 - When the license in another state or territory is active; or
 - Within two years after such license was last active;
- Has passed the recognized national licensing exam, if the exam is established as a requirement for licensure in the profession;
- Has no pending disciplinary actions and all sanctions for any prior disciplinary actions have been satisfied;

- Shows proof of compliance with any federal regulation, training, or certification, if the board or the DBPR requires such proof, regarding licensure in the profession;
- Has completed Florida-specific continuing education courses or passed a jurisprudential examination specific to the state laws and rules for the applicable profession as established by the board or the DBPR; and
- Has complied with any insurance or bonding requirements as required for the profession.

SB 1600 further provides that if the ch. 455, F.S., professional practice act for a profession requires the submission of fingerprints, the applicant must submit and pay for a complete set of fingerprints to the Department of Law Enforcement (FDLE) for a statewide criminal history check. The FDLE must forward the fingerprints to the Federal Bureau of Investigation for a national criminal history check. The DBPR must review the results of the criminal history checks according to the level II screening standards in s. 435.04, F.S., and determine whether the applicant meets the licensure requirements. The boards are not required to make such a review.

Section 455.2135, F.S., exempts harbor pilots licensed under ch. 310, F.S., from these requirements.

Licensure by Endorsement - DOH-Regulated Professions

SB 1600 creates s. 456.0145, F.S., the MOBILE Act, which requires the DOH to issue a license or certificate by endorsement within 15 days of receipt of all required documents for any of the health care professions regulated by the DOH when the applicant meets all of the following specific criteria:

- Submits a completed application;
- Holds an active, unencumbered license issued by another state, the District of Columbia, or a possession or territory of the U.S. in a profession with a similar “scope of practice,” as determined by the board or the DOH, as applicable. Section 456.0145(2)(a)2., F.S., defines the term “scope of practice” as the full spectrum of functions, procedures, actions, and services that a health care practitioner is deemed competent and authorized to perform under a Florida license; and delegates to the boards, or the DOH where there is no board, to determine what that means for each of the 364 professions licensed by the DOH;
- Has obtained:
 - A passing score on a national licensure examination or holds a national certification recognized by the board, or the DOH if there is no board, as applicable to the profession for which the applicant is seeking licensure; or
 - If the profession applied for does not require a national examination or national certification and the applicable board, or the DOH, if there is no board, determines that the jurisdiction in which the applicant currently holds an active, unencumbered license:
 - Meets established minimum education requirements; and
 - The work experience, and clinical supervision requirements are substantially similar to the requirements for licensure in that profession in Florida;
- Has actively practiced the profession for at least three years during the four year period immediately preceding the application submission;
- Attests that he or she is not, at the time of application submission, the subject of a disciplinary proceeding in a jurisdiction in which he or she holds a license or by the U.S.

Department of Defense for reasons related to the practice of the profession for which he or she is applying;

- Has not had professional disciplinary action taken against him or her in the seven years preceding the application submission application;
- Meets the financial responsibility requirements of s. 456.048, F.S., or the applicable practice act; and
- Submits a set of fingerprints for a background check pursuant to s. 456.0135, F.S., or the applicable practice act.

The bill requires the DOH to verify the information above submitted by the applicant using the National Practitioner Data Bank.⁸⁷

The bill defines a person as ineligible for a license under s. 456.0145, F.S., if he or she:

- Has a complaint, an allegation, or an investigation pending before a licensing entity in another state, the District of Columbia, or a possession or territory of the U.S.;
- Has been convicted of or pled nolo contendere to, regardless of adjudication, any felony or misdemeanor related to the practice of a health care profession;
- Has had a health care provider license revoked or suspended by another state, the District of Columbia, or a possession or territory of the U.S. or has voluntarily surrendered any license;
- Has been reported to the National Practitioner Data Bank, unless the applicant has successfully appealed to have his or her name removed; or
- Has previously failed the Florida examination required to receive a license to practice the profession for which the applicant is seeking a license.

The bill authorizes the board, or the DOH where there is no board, under s. 456.0145, F.S., to revoke a license upon finding that the licensee provided false or misleading material information or intentionally omitted material information in an application.

The bill authorizes the board, or the DOH where there is no board, to require an applicant to successfully complete a state jurisprudential examination on laws and rules for the applicable profession, if the applicable practice act requires such examination.

The bill requires the DOH to submit an annual report by December 31 to the Governor, the President of the Senate, and the Speaker of the House of Representatives which provides all of the following information for the previous fiscal year, by profession and in total:

- The number of applications for licensure received under the MOBILE Act;
- The number of licenses issued under the MOBILE Act; and
- The number of applications submitted under the MOBILE Act which were denied and the reason for such denials.

The bill requires each applicable board, or the DOH if there is no board, to adopt rules to implement s. 456.0145, F.S., within six months after its effective date, including rules relating to

⁸⁷ The National Practitioner Data Bank is an Internet-based repository of reports containing information on medical malpractice payments and certain adverse actions related to health care practitioners, providers, and suppliers. Established by Congress in 1986, it is a workforce tool that prevents practitioners from moving state to state without disclosure or discovery of previous damaging performance.

legislative intent provided under s. 456.025(1), F.S.,⁸⁸ and the requirements of s. 456.025(3), F.S.⁸⁹

Health Care Professions with Licensure by Endorsement Under Current Law

The bill amends current law for licensure by endorsement in various practice acts to conform to provisions found in the MOBILE Act and to retain statutory guidance for the maximum amounts of related application fees.

The bill provides an effective date of July 1, 2024.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

Some portions of SB 1600 may represent an unconstitutional delegation of legislative authority to the boards, or the agencies where there is no board, under Article II, Section 3, of the Florida Constitution. The bill gives the boards, and agencies when there is no board, the right to exercise broad discretion as to what constitutes a similar scope of practice between licensed professions in Florida versus other states. However, the exercise of such discretion is conditioned upon the existence of eligibility requirements and licensing in the same or similar profession. Under current law, many boards and the agencies evaluate whether licensing and examination standards for a profession are

⁸⁸ Section 456.025(1), F.S., provides, in part, that “It is the intent of the Legislature that all costs of regulating health care professions and practitioners shall be borne solely by licensees and licensure applicants. It is also the intent of the Legislature that fees should be reasonable and not serve as a barrier to licensure.”

⁸⁹ Section 456.025(3), F.S., requires, in part, that “Each board within the jurisdiction of the department, or the department when there is no board, shall determine by rule the amount of license fees for the profession it regulates, based upon long-range estimates prepared by the department of the revenue required to implement laws relating to the regulation of professions by the department and the board. Each board, or the department if there is no board, shall ensure that license fees are adequate to cover all anticipated costs and to maintain a reasonable cash balance, as determined by rule of the agency, with advice of the applicable board.”

substantially similar to those in Florida.⁹⁰ See *Askew v. Cross Key Waterways*, 372 So. 2d 913, 918-918 (Fla. 1978) (*rehearing den. Feb. 15, 1979*) (“[w]hen legislation is so lacking in guidelines that neither the agency nor the courts can determine whether the agency is carrying out the intent of the legislature in its conduct, then, in fact, the agency becomes the lawgiver rather than the administrator of the law”).

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Individuals seeking to work in Florida may be eligible under the additional pathways created by the bill to obtain a license to work in specified professions in Florida.

C. Government Sector Impact:

No analysis by the Department of Business and Professional Regulation of the impact of the bill on its operations, revenue, and expenditures has been provided as of the date of this analysis.

According to the Florida Department of Law Enforcement (FDLE), although SB 1600 does not require additional programming of the department’s Biometric Identification System (BIS), if the population targeted in the bill were to submit fingerprints for a state and national criminal history record check and the FDLE were to retain the fingerprints, the bill, along with other bills requiring background screening that are currently being considered by the Legislature, would add to the workload on the FDLE’s BIS. The FDLE is currently in the process of migrating the current system to the new generation of BIS. With the capacity limitations of the current system, this could cause undue strain.⁹¹

The FDLE also indicates that SB 1600 does not appear to create the need for additional full-time equivalent positions or other resources; however, the bill, along with other bills requiring background screening that are currently being considered by the Legislature, could rise to the level of requiring additional staffing and other resources.⁹²

The bill will have a significant negative fiscal impact on the Department of Health (DOH) that cannot be absorbed within current resources. To implement the provisions of the bill, the DOH estimates the need for nine full-time equivalent (FTE) positions and \$1,346,032 in the following categories:

⁹⁰ See e.g., s. 455.213(14), F.S., relating to reciprocal licensing agreements, and s. 456.47, F.S., relating to registration of out-of-state telehealth providers.

⁹¹ Florida Department of Law Enforcement, *2024 FDLE Legislative Bill Analysis: SB 1600*, Jan. 19, 2024 (on file with the Senate Committee on Regulated Industries).

⁹² *Id.*

Category	Amount	Recurring/Nonrecurring	Purpose
Salaries and Benefits	\$972,813	Recurring	9 FTE <ul style="list-style-type: none"> • Application Processing (3 FTE) • Complaint processing, investigations, and prosecutions (4 FTE) • Contract management, and technology updates (2 FTE)
Expense	\$188,289	\$128,358 Recurring/ \$59,931 Nonrecurring	Expenses related to FTE Queries to the Natl. Practitioner Database
Contracted Services	\$181,692	Recurring	Staff augmentation to perform data gathering and annual report production
Human Resources	\$3,238	Recurring	Human resources assessment

VI. Technical Deficiencies:

None.

VII. Related Issues:

Regarding lines 93-98 and 102-106, the FDLE indicates a need for the bill to ensure compliance with federal law and the U.S. Department of Justice (DOJ)-established criteria for the submission of fingerprints to the FBI’s Criminal Justice Information Services Division for a national criminal history background check. The department points out that access to FBI criminal history record information is not allowed unless all criteria specified within Public Law 92-544 are satisfied. Such compliance already exists for the current law requirements for submission of fingerprints to the DBPR and the DOH for review as part of licensing under the various practice acts, and is applicable to the additional licensing pathways described in the bill.⁹³

VIII. Statutes Affected:

This bill creates the following sections of the Florida Statutes: 455.2135 and 456.0145.

The bill substantially amends the following sections of the Florida Statutes: 457.105, 458.313, 464.009, 465.0075, 467.0125, 468.1185, 468.1705, 468.213, 468.3065, 468.358, 468.513, 478.47, 480.041, 484.007, 486.031, 486.081, 486.102, 486.107, 490.006, and 491.006.

⁹³ *Id.*

IX. Additional Information:

A. **Committee Substitute – Statement of Substantial Changes:**
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

B. **Amendments:**

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.
