

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 Judiciary

BILL: SB 514

INTRODUCER: Senator Harrell

SUBJECT: Medical Malpractice Review Committees

DATE: March 3, 2025

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Collazo	Cibula	JU	Pre-meeting
2.			CF	
3.			RC	

I. Summary:

SB 514 adds managing entities and employees of a managing entity to the list of state agencies, health care providers, and health care professionals that are authorized to participate in a medical review committee. A managing entity is a corporation under contract with the Department of Children and Families to manage the daily operational delivery of behavioral health services, which include mental health services and substance abuse services.

Participants in medical review committees are generally immune from liability for their actions in evaluating the quality and costs of previously provided health care services. Likewise, information relating to the proceedings, including witness testimony before a committee, is not discoverable or admissible in civil or administrative actions.

Accordingly, by allowing managing entities and their employees to participate in medical review committees, the bill grants them the same confidentiality protections and liability protections that apply to other medical review committees authorized by existing law.

The bill takes effect July 1, 2025.

II. Present Situation:

Medical Review Committees

Generally

A “medical review committee” is a committee of certain health care providers, organizations, or institutions that is formed to evaluate and improve the quality of health care rendered by providers of health service. A medical review committee determines whether:

- Health services rendered were professionally indicated or were performed in compliance with the applicable standard of care; or

- The cost of the health care rendered was considered reasonable by the providers of professional health services in the area.¹

Any of the following entities may establish a medical review committee:

- A hospital, an ambulatory surgical center, or a health maintenance organization.
- A physician-hospital organization, a provider-sponsored organization, or an integrated delivery system.
- A state or local professional society of health care providers.
- The medical staff of a licensed hospital or nursing home, provided the medical staff operates pursuant to written bylaws that have been approved by the governing board of the hospital or nursing home.
- The Department of Corrections or the Correctional Medical Authority or its employees, agents, or consultants.
- A professional service corporation or a corporation formed and operated for the practice of medicine, which has at least 25 health care providers who routinely provide health care services directly to patients.
- The Department of Children and Families, which includes employees, agents, or consultants to the department as deemed necessary to provide peer review, utilization review, and mortality review of treatment services.
- A mental health treatment facility or community mental health center, provided the quality assurance program operates pursuant to guidelines approved by the governing board of the agency.
- A substance abuse treatment and education prevention program, provided the quality assurance program operates pursuant to guidelines approved by the governing board of the agency.
- A peer review or utilization review committee.
- The Department of Health, a county health department, a healthy start coalition, or a certified rural health network, when reviewing quality of care, or employees of these entities when reviewing mortality records.
- A continuous quality improvement committee of a licensed pharmacy.²

Immunity from Liability

There is no monetary liability on the part of, and no cause of action for damages arising against, any of the following for any act or proceeding undertaken or performed within the scope of the functions of any medical review committee (provided the committee member or health care provider acts without intentional fraud):

- Any member of a duly appointed medical review committee.
- Any health care provider furnishing any information³ to such committee.

¹ Section 766.101(1)(a)1.a.-l., F.S. It also includes a committee of an insurer, self-insurer, or joint underwriting association of medical malpractice insurance, or other persons conducting review under s. 706.106, F.S. Section 766.101(1)(a)2., F.S.

² Section 766.101(1)(a)1.a.-l., F.S.

³ Information concerning the prescribing of Schedule II substances is included. See s. 766.101(3)(a), F.S. (referencing s. 893.03(2), F.S., which lists Schedule II substances).

- Any person, including any person acting as a witness, incident reporter to, or investigator for, a medical review committee.⁴

The medical review committee statute does not confer immunity from liability upon any professional society, hospital, or health professional while performing services other than as a member of a medical review committee; or upon any person, including any person acting as a witness, incident reporter to, or investigator for a medical review committee, for any act or proceeding undertaken or performed outside the scope of the functions of such committee.⁵

Each member of, or health care professional consultant to, any committee, board, group, commission, or other entity is immune from civil liability for any act, decision, omission, or statement done or made in performance of his or her duties while serving as a member of, or consultant to, such entity. To qualify, the entity must be established and operated for purposes of quality improvement review, evaluation, and planning in a state-licensed health care facility;⁶ it must function primarily to review, evaluate, or make recommendations relating to any of the following:

- The duration of patient stays in health care facilities.
- The professional services furnished with respect to the medical, dental, psychological, podiatric, chiropractic, or optometric necessity for such services.
- The purpose of promoting the most efficient use of available health care facilities and services.
- The adequacy or quality of professional services.
- The competency and qualifications for professional staff privileges.
- The reasonableness or appropriateness of charges made by, or on behalf of, health care facilities.
- Patient safety, including entering into contracts with patient safety organizations.⁷

The entity must also be:

- Established in accordance with state law;
- Established in accordance with the requirements of an applicable accrediting organization whose standards incorporate regulations that are comparable to those required by this state;
- Established and duly constituted by one or more public or licensed private hospitals or behavioral health agencies; or
- Established by a governmental agency.⁸

Moreover, to qualify for the statute's immunity protections, the act, decision, omission, or statement may not be made or done in bad faith or with malicious intent.⁹

⁴ Section 766.101(3)(a), F.S.

⁵ Section 766.101(4), F.S.

⁶ Section 766.1015(1), F.S.

⁷ *Id.*

⁸ Section 766.1015(2), F.S.

⁹ *Id.*

III. Effect of Proposed Changes:

The bill expands the definition of “medical review committee” to permit not only the establishment of such committees by the Department of Children and Families, as is already permitted under existing law,¹⁰ but also the establishment of medical review committees by a “managing entity.”

A “managing entity” is a corporation selected by and under contract with the department to manage the daily operational delivery of behavioral health services through a coordinated system of care.¹¹

The bill also provides that the committee created by the managing entity may include employees or agents of, or consultants to, the department or the managing entity and any other persons the department or the managing entity deems necessary to provide peer review, utilization review, or mortality review of treatment services provided pursuant to state law.¹²

By expanding the definition of “medical review committee” in this way, the bill extends the immunity protections that currently apply to medical review committees to committees established by managing entities as well.

Likewise, the restrictions on discovery and the admissibility of evidence relating to the other medical review committees authorized by existing law apply to the medical review committees authorized by the bill. Under these specific restrictions, the investigations, proceedings, and records of a medical review committee, arising out of the matters which are the subject of evaluation and review by such committee, are not subject to discovery or introduction into evidence in any civil or administrative action against a managing entity.

The bill takes effect July 1, 2025.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

¹⁰ Section 766.101(1)(a)1.g., F.S.

¹¹ Section 394.9082(2), F.S.

¹² Specifically, chs. 394 (mental health), 397 (substance abuse services), and 916 (mentally ill and intellectually disabled defendants), F.S.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Any managing entity under contract with the Department of Children and Families may incur increased costs associated with the appointing and funding of a medical review committee, if the department does not assume those costs directly.

C. Government Sector Impact:

The Department of Children and Families may save costs associated with the appointing and funding of a medical review committee, if a managing entity under contract with the department assumes those costs instead.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends section 766.101 of the Florida Statutes.

IX. Additional Information:

A. Committee Substitute – Statement of Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.