

**By Senator Grall**

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A bill to be entitled

An act relating to patient access to records; amending s. 394.4615, F.S.; requiring mental health service providers to furnish clinical records in accordance with specified requirements and within a specified timeframe after receiving a written request for such records; providing construction; amending s. 395.3025, F.S.; revising provisions related to the release of patient records by hospitals and ambulatory surgical centers to conform to changes made by the act; requiring such providers to furnish patient records in accordance with specified requirements and within a specified timeframe after receiving a written request; providing construction; establishing that the Department of Health, rather than the Agency for Health Care Administration, has the authority to issue subpoenas for patient records from hospitals and ambulatory surgical centers in certain circumstances; amending s. 397.501, F.S.; requiring substance abuse service providers to furnish clinical records in accordance with specified requirements and within a specified timeframe after receiving a written request; providing construction; amending s. 400.145, F.S.; revising the timeframe within which a nursing home facility must provide access to, and copies of, resident records after receiving a request for such records; creating s. 408.833, F.S.; defining terms; requiring licensed providers to furnish and provide access to client records within specified timeframes

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30 after receiving a written request from a client or the  
31 client's legal representative; requiring providers to  
32 furnish the client's protected health information in  
33 the form and format chosen by the requester, if  
34 readily producible, or, if not readily producible, in  
35 another mutually agreeable readable form; providing  
36 exceptions for providers governed by other specified  
37 provisions; amending s. 456.057, F.S.; defining the  
38 terms "designated record set" and "legal  
39 representative"; requiring health care practitioners  
40 to furnish and provide access to patient records  
41 within specified timeframes after receiving a written  
42 request from a patient or the patient's legal  
43 representative; requiring health care practitioners to  
44 furnish records in the form and format chosen by the  
45 requester, if readily producible, or, if not readily  
46 producible, in another mutually agreeable readable  
47 form; amending ss. 316.1932, 316.1933, 395.4025,  
48 397.702, 429.294, 440.185, and 456.47, F.S.;  
49 conforming provisions to changes made by the act;  
50 providing an effective date.

51  
52 Be It Enacted by the Legislature of the State of Florida:

53  
54 Section 1. Present subsections (3) through (12) of section  
55 394.4615, Florida Statutes, are redesignated as subsections (4)  
56 through (13), respectively, a new subsection (3) is added to  
57 that section, and paragraphs (a), (b), and (c) of subsection (2)  
58 of that section are republished, to read:

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59           394.4615 Clinical records; confidentiality.—

60           (2) The clinical record shall be released when:

61           (a) The patient or the patient's guardian or legal  
62 custodian authorizes the release. The guardian, guardian  
63 advocate, or legal custodian shall be provided access to the  
64 appropriate clinical records of the patient. The patient or the  
65 patient's guardian, guardian advocate, or legal custodian may  
66 authorize the release of information and clinical records to  
67 appropriate persons to ensure the continuity of the patient's  
68 health care or mental health care. A receiving facility must  
69 document that, within 24 hours of admission, individuals  
70 admitted on a voluntary basis have been provided with the option  
71 to authorize the release of information from their clinical  
72 record to the individual's health care surrogate or proxy,  
73 attorney, representative, or other known emergency contact.

74           (b) The patient is represented by counsel and the records  
75 are needed by the patient's counsel for adequate representation.

76           (c) The court orders such release. In determining whether  
77 there is good cause for disclosure, the court shall weigh the  
78 need for the information to be disclosed against the possible  
79 harm of disclosure to the person to whom such information  
80 pertains.

81           (3) For requests made in writing and pursuant to paragraph  
82 (2) (a), paragraph (2) (b), or paragraph (2) (c), a service  
83 provider shall furnish the requested clinical records in  
84 accordance with all of the following requirements:

85           (a) As specified in 45 C.F.R. s. 164.524(a), the patient or  
86 his or her legal representative must be given the opportunity to  
87 inspect and obtain a copy of the patient's protected health

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88 information in a designated record set, as defined in and s.

89 408.833 and 45 C.F.R. s. 164.501.

90 (b) As specified in 45 C.F.R. s. 164.524(b) (2), the records  
91 must be furnished within 30 calendar days after the request is  
92 received.

93 (c) The protected health information must be provided in  
94 the form and format requested, if readily producible, including  
95 electronic form if maintained electronically; otherwise, it must  
96 be provided in a mutually agreeable readable form and format as  
97 required under 45 C.F.R. s. 164.524(c) (2).

98 (d) As provided in 45 C.F.R. s. 164.524(c) (4), the provider  
99 may impose a reasonable, cost-based fee that may only include  
100 coverage of the following costs:

101 1. Labor for copying the protected health information,  
102 whether in paper or electronic form.

103 2. Supplies for creating the copy, including electronic  
104 media if the individual requested the electronic copy be  
105 provided on portable media.

106 3. Postage, if the copy or the summary under subparagraph  
107 4. is mailed.

108 4. Preparation of a summary or explanation of the protected  
109 health information, if agreed to in advance.

110 (e) The fees for electronic copies of protected health  
111 information are limited to \$6.50 per request, inclusive of  
112 labor, supplies, and postage costs in accordance with 45 C.F.R.  
113 s. 164.524(c) (4). Per-page fees are prohibited for electronic  
114 records and may apply when protected health information is  
115 maintained exclusively on paper and remains in that form, in  
116 which case the per-page fee may not exceed \$1 per page inclusive

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117 of labor, supplies, and postage costs. A fee may not be charged  
118 for accessing protected health information that is accessed  
119 through an electronic patient portal with view and download  
120 functionality. Covered entities shall inform the patient or the  
121 patient's legal representative in advance of the estimated fee  
122 and may provide a publicly available fee schedule. Fees may not  
123 be charged for administrative or outsourcing costs.

124

125 In accordance with 45 C.F.R. ss. 160.202 and 160.203, to the  
126 extent that this section provides greater rights for free access  
127 to patient records or imposes lower fees for gaining such access  
128 than those provided pursuant to federal laws or regulations,  
129 this section supersedes those federal laws and regulations, but  
130 only to that extent.

131 Section 2. Subsections (1), (2), and (3), paragraph (e) of  
132 subsection (4), paragraph (a) of subsection (7), and subsection  
133 (8) of section 395.3025, Florida Statutes, are amended to read:

134 395.3025 Patient and personnel records; copies;  
135 examination.—

136 (1) For requests made in writing, a licensed facility must  
137 furnish the requested patient records in accordance with all of  
138 the following requirements:

139 (a) As specified in 45 C.F.R. s. 164.524(a), the patient or  
140 his or her legal representative must be given the opportunity to  
141 inspect and obtain a copy of the patient's protected health  
142 information in a designated record set, as defined in s. 408.833  
143 and 45 C.F.R. s. 164.501.

144 (b) As specified in 45 C.F.R. s. 164.524(b)(2), the records  
145 must be furnished within 30 calendar days after the request is

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146 received.

147       (c) The protected health information must be provided in  
148 the form and format requested, if readily producible, including  
149 electronic form if maintained electronically; otherwise, it must  
150 be provided in a mutually agreeable readable form and format as  
151 required under 45 C.F.R. s. 164.524(c) (2).

152       (d) As provided in 45 C.F.R. s. 164.524(c) (4), the licensed  
153 facility may impose a reasonable, cost-based fee that may only  
154 include coverage of the following costs:

155       1. Labor for copying the protected health information,  
156 whether in paper or electronic form.

157       2. Supplies for creating the copy, including electronic  
158 media if the individual requested the electronic copy be  
159 provided on portable media.

160       3. Postage, if the copy or the summary under subparagraph  
161 4. is mailed.

162       4. Preparation of a summary or explanation of the protected  
163 health information, if agreed to in advance.

164       (e) The fees for electronic copies of protected health  
165 information are limited to \$6.50 per request, inclusive of  
166 labor, supplies, and postage costs in accordance with 45 C.F.R.  
167 s. 164.524(c) (4). Per-page fees are prohibited for electronic  
168 records and may apply when protected health information is  
169 maintained exclusively on paper and remains in that form, in  
170 which case the per-page fee may not exceed \$1 per page inclusive  
171 of labor, supplies, and postage costs. A fee may not be charged  
172 for accessing protected health information that is accessed  
173 through an electronic patient portal with view and download  
174 functionality. Licensed facilities shall inform the patient or

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175 the patient's legal representative in advance of the estimated  
176 fee and may provide a publicly available fee schedule. Licensed  
177 facilities may not charge fees for administrative or outsourcing  
178 costs.

179

180 In accordance with 45 C.F.R. ss. 160.202 and 160.203, to the  
181 extent that this section provides greater rights for free access  
182 to patient records or imposes lower fees for gaining such access  
183 than those provided pursuant to federal laws or regulations,  
184 this section supersedes those federal laws and regulations, but  
185 only to that extent Any licensed facility shall, upon written  
186 ~~request, and only after discharge of the patient, furnish, in a~~  
187 ~~timely manner, without delays for legal review, to any person~~  
188 ~~admitted therein for care and treatment or treated thereat, or~~  
189 ~~to any such person's guardian, curator, or personal~~  
190 ~~representative, or in the absence of one of those persons, to~~  
191 ~~the next of kin of a decedent or the parent of a minor, or to~~  
192 ~~anyone designated by such person in writing, a true and correct~~  
193 ~~copy of all patient records, including X rays, and insurance~~  
194 ~~information concerning such person, which records are in the~~  
195 ~~possession of the licensed facility, provided the person~~  
196 ~~requesting such records agrees to pay a charge.~~ The exclusive  
197 charge for copies of patient records may include sales tax and  
198 actual postage, and, except for nonpaper records that are  
199 subject to a charge not to exceed \$6.50 ~~\$2~~, may not exceed \$1  
200 per page. A fee of up to \$1 may be charged for each year of  
201 records requested. These charges shall apply to all records  
202 furnished, whether directly from the facility or from a copy  
203 service providing these services on behalf of the facility.

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204 However, a patient whose records are copied or searched for the  
205 purpose of continuing to receive medical care is not required to  
206 pay a charge for copying or for the search. ~~The licensed~~  
207 ~~facility shall further allow any such person to examine the~~  
208 ~~original records in its possession, or microforms or other~~  
209 ~~suitable reproductions of the records, upon such reasonable~~  
210 ~~terms as shall be imposed to assure that the records will not be~~  
211 ~~damaged, destroyed, or altered.~~

212 (2) ~~This section does not apply to records maintained at~~  
213 ~~any licensed facility the primary function of which is to~~  
214 ~~provide psychiatric care to its patients, or to records of~~  
215 ~~treatment for any mental or emotional condition at any other~~  
216 ~~licensed facility which are governed by the provisions of s.~~  
217 ~~394.4615.~~

218 (3) ~~This section does not apply to records of substance~~  
219 ~~abuse impaired persons, which are governed by s. 397.501.~~

220 (4) Patient records are confidential and must not be  
221 disclosed without the consent of the patient or his or her legal  
222 representative, but appropriate disclosure may be made without  
223 such consent to:

224 (e) The Department of Health agency upon subpoena issued  
225 pursuant to s. 456.071, but the records obtained thereby must be  
226 used solely for the purpose of the department agency and the  
227 appropriate professional board in its investigation,  
228 prosecution, and appeal of disciplinary proceedings. If the  
229 department agency requests copies of the records, the facility  
230 may not shall charge ~~no~~ more than its actual copying costs,  
231 including reasonable staff time. The records must be sealed and  
232 must not be available to the public pursuant to s. 119.07(1) or

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233 any other statute providing access to records, nor may they be  
234 available to the public as part of the record of investigation  
235 for and prosecution in disciplinary proceedings made available  
236 to the public by the department agency or the appropriate  
237 regulatory board. However, the department agency must make  
238 available, upon written request by a practitioner against whom  
239 probable cause has been found, any such records that form the  
240 basis of the determination of probable cause.

241 (5) ~~(a)~~ (a) If the content of any record of patient  
242 treatment is provided under this section, the recipient, ~~if~~  
~~other than the patient or the patient's representative,~~ may use  
243 such information only for the purpose provided and may not  
244 further disclose any information to any other person or entity,  
245 unless expressly permitted by the written consent of the  
246 patient. A general authorization for the release of medical  
247 information is not sufficient for this purpose. The content of  
248 such patient treatment record is confidential and exempt from  
249 the provisions of s. 119.07(1) and s. 24(a), Art. I of the State  
250 Constitution.

252 (6) ~~(8)~~ Patient records at hospitals and ambulatory surgical  
253 centers are exempt from disclosure under s. 119.07(1), except as  
254 provided by subsections (2) and (3) ~~(1)-(5)~~.

255 Section 3. Present subsections (8), (9), and (10) of  
256 section 397.501, Florida Statutes, are redesignated as  
257 subsections (9), (10), and (11), respectively, a new subsection  
258 (8) is added to that section, and paragraph (d) of subsection  
259 (7) of that section is republished, to read:

260 397.501 Rights of individuals.—Individuals receiving  
261 substance abuse services from any service provider are

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262 guaranteed protection of the rights specified in this section,  
263 unless otherwise expressly provided, and service providers must  
264 ensure the protection of such rights.

265 (7) RIGHT TO CONFIDENTIALITY OF INDIVIDUAL RECORDS.—

266 (d) Any answer to a request for a disclosure of individual  
267 records which is not permissible under this section or under the  
268 appropriate federal regulations must be made in a way that will  
269 not affirmatively reveal that an identified individual has been,  
270 or is being diagnosed or treated for substance abuse. The  
271 regulations do not restrict a disclosure that an identified  
272 individual is not and has never received services.

273 (8) RIGHT TO ACCESS INDIVIDUAL RECORDS.—

274 (a) For requests made in writing, a service provider must  
275 furnish the requested clinical records of an individual in  
276 accordance with all of the following requirements:

277 1. As specified in 45 C.F.R. s. 164.524(a), the individual  
278 or his or her legal representative must be given the opportunity  
279 to inspect and obtain a copy of the individual's protected  
280 health information in a designated record set, as defined in s.  
281 408.833 and 45 C.F.R. s. 164.501.

282 2. As specified in 45 C.F.R. s. 164.524(b) (2), the records  
283 must be furnished within 30 calendar days after the request is  
284 received.

285 3. The protected health information must be provided in the  
286 form and format requested, if readily producible, including  
287 electronic form if maintained electronically; otherwise, it must  
288 be provided in a mutually agreeable readable form and format as  
289 required under 45 C.F.R. s. 164.524(c) (2).

290 4. As provided in 45 C.F.R. s. 164.524(c) (4), the service

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291 provider may impose a reasonable, cost-based fee that may only  
292 include coverage of the following costs:

293 a. Labor for copying the protected health information,  
294 whether in paper or electronic form.

295 b. Supplies for creating the copy, including electronic  
296 media if the individual requested the electronic copy be  
297 provided on portable media.

298 c. Postage, if the copy or the summary under sub-  
299 subparagraph d. is mailed.

300 d. Preparation of a summary or explanation of the protected  
301 health information, if agreed to in advance.

302 5. The fees for electronic copies of protected health  
303 information are limited to \$6.50 per request, inclusive of  
304 labor, supplies, and postage costs in accordance with 45 C.F.R.  
305 s. 164.524(c)(4). Per-page fees are prohibited for electronic  
306 records and may apply when protected health information is  
307 maintained exclusively on paper and remains in that form, in  
308 which case the per-page fee may not exceed \$1 per page inclusive  
309 of labor, supplies, and postage costs. A fee may not be charged  
310 for accessing protected health information that is accessed  
311 through an electronic patient portal with view and download  
312 functionality. Service providers shall inform the individual or  
313 the individual's legal representative in advance of the  
314 estimated fee being imposed and may provide a publicly available  
315 fee schedule. Service providers may not charge fees for  
316 administrative or outsourcing costs.

317 (b) Within 10 business days after receiving such a written  
318 request, a service provider must provide access to examine the  
319 original records in its possession, or microforms or other

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320 suitable reproductions of the records, in accordance with  
321 subsection (7). The service provider may impose any reasonable  
322 terms necessary to ensure that the records will not be damaged,  
323 destroyed, or altered.

324 (c) In accordance with 45 C.F.R. ss. 160.202 and 160.203,  
325 to the extent that this subsection provides greater rights for  
326 free access to clinical records or imposes lower fees for  
327 gaining such access than those provided pursuant to federal laws  
328 or regulations, the provisions of this subsection supersede  
329 those federal laws and regulations, but only to that extent.

330 Section 4. Subsection (1) of section 400.145, Florida  
331 Statutes, is amended to read:

332 400.145 Copies of records of care and treatment of  
333 resident.—

334 (1) Upon receipt of a written request that complies with  
335 the federal Health Insurance Portability and Accountability Act  
336 of 1996 (HIPAA) and this section, a nursing home facility shall  
337 furnish to a competent resident, or to a representative of that  
338 resident who is authorized to make requests for the resident's  
339 records under HIPAA or subsection (2), copies of the resident's  
340 paper and electronic records that are in possession of the  
341 facility. Such records must include any medical records and  
342 records concerning the care and treatment of the resident  
343 performed by the facility, except for progress notes and  
344 consultation report sections of a psychiatric nature. The  
345 facility shall provide a resident with access to the requested  
346 records within 24 hours, excluding weekends and holidays, and  
347 provide copies of the requested records within 2 business 14  
348 working days after receipt of a request relating to a current

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349 resident or within 30 business working days after receipt of a  
350 request relating to a former resident.

351 Section 5. Section 408.833, Florida Statutes, is created to  
352 read:

353 408.833 Client access to medical records.—

354 (1) As used in this section, the term:

355 (a) "Client" has the same meaning as provided in s.

356 408.803.

357 (b) "Designated record set," consistent with 45 C.F.R. s.

358 164.501, means a group of records, maintained by or for a  
359 provider, which includes any of the following:

360 1. Medical and billing records for a patient.

361 2. Enrollment, payment, claims adjudication, and case or  
362 medical management record systems.

363 3. Any other record used, in whole or in part, by or for  
364 the provider to make decisions about a patient's care, coverage,  
365 or benefits, regardless of whether such records have, in fact,  
366 been used to make such decisions about the particular patient  
367 requesting access to the records.

368 (c) "Legal representative" means any of the following:

369 1. A legally recognized guardian of the client.

370 2. A court-appointed representative of the client.

371 3. A person designated by the client or by a court of  
372 competent jurisdiction to receive copies of the client's medical  
373 records, care and treatment records, or interdisciplinary  
374 records.

375 4. An attorney who has been designated by a client to  
376 receive copies of the client's medical records, care and  
377 treatment records, or interdisciplinary records.

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378        (d) "Provider" means any of the entities listed in s.

379        408.802.

380        (2) (a) Within 30 calendar days after receiving a written  
381 request from a client or a client's legal representative, a  
382 provider shall furnish a true and correct copy of the requested  
383 records within the designated record set which are in the  
384 provider's possession.

385        (b) Within 30 calendar days after receiving a written  
386 request from a client or a client's legal representative, a  
387 provider shall furnish a true and correct copy of additional  
388 requested records, including medical records, care and treatment  
389 records, and interdisciplinary records, as applicable, which are  
390 in the provider's possession.

391        (c) Within 10 business days after receiving a request from  
392 a client or a client's legal representative, a provider shall  
393 provide access to examine the original records in the provider's  
394 possession, or microforms or other suitable reproductions of the  
395 records. A provider may impose any reasonable terms necessary to  
396 ensure that the records will not be damaged, destroyed, or  
397 altered.

398        (3) The protected health information must be provided in  
399 the form and format requested by the client or client's legal  
400 representative if the requested records are readily producible  
401 in that form and format. If the requested records are not  
402 readily producible in the requested form or format, the provider  
403 must produce the records in a mutually agreeable readable form  
404 as specified in 45 C.F.R. s. 164.524(c) (2).

405        (4) This section does not apply to:

406        (a) Records maintained at a licensed facility as defined in

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407 s. 395.002, the primary function of which is to provide  
408 psychiatric care to its patients, or to records of treatment for  
409 any mental or emotional condition at any other licensed facility  
410 which are governed by s. 394.4615;

411 (b) Records of substance abuse impaired persons which are  
412 governed by s. 397.501; or

413 (c) Records of a resident of a nursing home facility which  
414 are governed by s. 400.145.

415 Section 6. Subsection (6) of section 456.057, Florida  
416 Statutes, is amended to read:

417 456.057 Ownership and control of patient records; report or  
418 copies of records to be furnished; disclosure of information.—

419 (6) (a) As used in this subsection, the term:

420 1. "Designated record set," consistent with 45 C.F.R. s.  
421 164.501, means a group of records, maintained by or for the  
422 health care practitioner, which includes any of the following:

423 a. Medical and billing records for a patient.

424 b. Enrollment, payment, claims adjudication, and case or  
425 medical management record systems.

426 c. Any other record used, in whole or in part, by or for  
427 the provider to make decisions about a patient's care, coverage,  
428 or benefits, regardless of whether such records have, in fact,  
429 been used to make such decisions about the particular patient  
430 requesting access to the records.

431 2. "Legal representative" means any of the following:

432 a. A legally recognized guardian of the patient.

433 b. A court-appointed representative of the patient.

434 c. A person designated by the patient or by a court of  
435 competent jurisdiction to receive copies of the patient's

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436 medical records, care and treatment records, or  
437 interdisciplinary records.

438 d. An attorney who has been designated by a patient to  
439 receive copies of the patient's medical records, care and  
440 treatment records, or interdisciplinary records.

441 (b) 1. Within 30 calendar days after receiving a written Any  
442 health care practitioner licensed by the department or a board  
443 within the department who makes a physical or mental examination  
444 of, or administers treatment or dispenses legend drugs to, any  
445 person shall, upon request from a patient of such person or the  
446 patient's person's legal representative, a health care  
447 practitioner shall furnish a true and correct copy of the  
448 requested records within the designated record set which are in  
449 the practitioner's possession.

450 2. Within 30 calendar days after receiving a written  
451 request from a patient or a patient's legal representative, a  
452 health care practitioner shall furnish a true and correct copy  
453 of additional requested records, including medical records, care  
454 and treatment records, and interdisciplinary records, as  
455 applicable, which are in the practitioner's possession.

456 3. Within 10 business days after receiving a request from a  
457 patient or a patient's legal representative, a health care  
458 practitioner shall provide access to examine the original  
459 records in the practitioner's possession, or microforms or other  
460 suitable reproductions of the records. A health care  
461 practitioner may impose any reasonable terms necessary to ensure  
462 that the records will not be damaged, destroyed, or altered.

463 4. The protected health information must be provided in the  
464 form and format requested by the patient or legal representative

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465 if the requested records are readily producible in that form and  
466 format. If the requested records are not readily producible in  
467 the requested form or format, the practitioner must produce the  
468 records in a mutually agreeable readable form as specified in 45  
469 C.F.R. s. 164.524(c) (2), in a timely manner, without delays for  
470 legal review, copies of all reports and records relating to such  
471 examination or treatment, including X rays and insurance  
472 information.

473

474 However, when a patient's psychiatric, chapter 490  
475 psychological, or chapter 491 psychotherapeutic records are  
476 requested by the patient or the patient's legal representative,  
477 the health care practitioner may provide a report of examination  
478 and treatment in lieu of copies of records. Upon a patient's  
479 written request, complete copies of the patient's psychiatric  
480 records shall be provided directly to a subsequent treating  
481 psychiatrist. The furnishing of such report or copies may shall  
482 not be conditioned upon payment of a fee for services rendered.

483 Section 7. Paragraph (f) of subsection (1) of section  
484 316.1932, Florida Statutes, is amended to read:

485 316.1932 Tests for alcohol, chemical substances, or  
486 controlled substances; implied consent; refusal.—

487 (1)

488 (f)1. The tests determining the weight of alcohol in the  
489 defendant's blood or breath shall be administered at the request  
490 of a law enforcement officer substantially in accordance with  
491 rules of the Department of Law Enforcement. Such rules must  
492 specify precisely the test or tests that are approved by the  
493 Department of Law Enforcement for reliability of result and ease

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494 of administration, and must provide an approved method of  
495 administration which must be followed in all such tests given  
496 under this section. However, the failure of a law enforcement  
497 officer to request the withdrawal of blood does not affect the  
498 admissibility of a test of blood withdrawn for medical purposes.

499       2.a. Only a physician, certified paramedic, registered  
500 nurse, licensed practical nurse, other personnel authorized by a  
501 hospital to draw blood, or duly licensed clinical laboratory  
502 director, supervisor, technologist, or technician, acting at the  
503 request of a law enforcement officer, may withdraw blood for the  
504 purpose of determining its alcoholic content or the presence of  
505 chemical substances or controlled substances therein. However,  
506 the failure of a law enforcement officer to request the  
507 withdrawal of blood does not affect the admissibility of a test  
508 of blood withdrawn for medical purposes.

509       b. Notwithstanding any provision of law pertaining to the  
510 confidentiality of hospital records or other medical records, if  
511 a health care provider, who is providing medical care in a  
512 health care facility to a person injured in a motor vehicle  
513 crash, becomes aware, as a result of any blood test performed in  
514 the course of that medical treatment, that the person's blood-  
515 alcohol level meets or exceeds the blood-alcohol level specified  
516 in s. 316.193(1)(b), the health care provider may notify any law  
517 enforcement officer or law enforcement agency. Any such notice  
518 must be given within a reasonable time after the health care  
519 provider receives the test result. Any such notice shall be used  
520 only for the purpose of providing the law enforcement officer  
521 with reasonable cause to request the withdrawal of a blood  
522 sample pursuant to this section.

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523       c. The notice shall consist only of the name of the person  
524 being treated, the name of the person who drew the blood, the  
525 blood-alcohol level indicated by the test, and the date and time  
526 of the administration of the test.

527       d. Nothing contained in s. 395.3025(2) ~~s. 395.3025(4)~~, s.  
528 456.057, or any applicable practice act affects the authority to  
529 provide notice under this section, and the health care provider  
530 is not considered to have breached any duty owed to the person  
531 under s. 395.3025(2) ~~s. 395.3025(4)~~, s. 456.057, or any  
532 applicable practice act by providing notice or failing to  
533 provide notice. It shall not be a breach of any ethical, moral,  
534 or legal duty for a health care provider to provide notice or  
535 fail to provide notice.

536       e. A civil, criminal, or administrative action may not be  
537 brought against any person or health care provider participating  
538 in good faith in the provision of notice or failure to provide  
539 notice as provided in this section. Any person or health care  
540 provider participating in the provision of notice or failure to  
541 provide notice as provided in this section shall be immune from  
542 any civil or criminal liability and from any professional  
543 disciplinary action with respect to the provision of notice or  
544 failure to provide notice under this section. Any such  
545 participant has the same immunity with respect to participating  
546 in any judicial proceedings resulting from the notice or failure  
547 to provide notice.

548       3. The person tested may, at his or her own expense, have a  
549 physician, registered nurse, other personnel authorized by a  
550 hospital to draw blood, or duly licensed clinical laboratory  
551 director, supervisor, technologist, or technician, or other

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552 person of his or her own choosing administer an independent test  
553 in addition to the test administered at the direction of the law  
554 enforcement officer for the purpose of determining the amount of  
555 alcohol in the person's blood or breath or the presence of  
556 chemical substances or controlled substances at the time  
557 alleged, as shown by chemical analysis of his or her blood or  
558 urine, or by chemical or physical test of his or her breath. The  
559 failure or inability to obtain an independent test by a person  
560 does not preclude the admissibility in evidence of the test  
561 taken at the direction of the law enforcement officer. The law  
562 enforcement officer shall not interfere with the person's  
563 opportunity to obtain the independent test and shall provide the  
564 person with timely telephone access to secure the test, but the  
565 burden is on the person to arrange and secure the test at the  
566 person's own expense.

567 4. Upon the request of the person tested, full information  
568 concerning the results of the test taken at the direction of the  
569 law enforcement officer shall be made available to the person or  
570 his or her attorney. Full information is limited to the  
571 following:

572 a. The type of test administered and the procedures  
573 followed.

574 b. The time of the collection of the blood or breath sample  
575 analyzed.

576 c. The numerical results of the test indicating the alcohol  
577 content of the blood and breath.

578 d. The type and status of any permit issued by the  
579 Department of Law Enforcement which was held by the person who  
580 performed the test.

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581       e. If the test was administered by means of a breath  
582 testing instrument, the date of performance of the most recent  
583 required inspection of such instrument.

584  
585 Full information does not include manuals, schematics, or  
586 software of the instrument used to test the person or any other  
587 material that is not in the actual possession of the state.  
588 Additionally, full information does not include information in  
589 the possession of the manufacturer of the test instrument.

590       5. A hospital, clinical laboratory, medical clinic, or  
591 similar medical institution or physician, certified paramedic,  
592 registered nurse, licensed practical nurse, other personnel  
593 authorized by a hospital to draw blood, or duly licensed  
594 clinical laboratory director, supervisor, technologist, or  
595 technician, or other person assisting a law enforcement officer  
596 does not incur any civil or criminal liability as a result of  
597 the withdrawal or analysis of a blood or urine specimen, or the  
598 chemical or physical test of a person's breath pursuant to  
599 accepted medical standards when requested by a law enforcement  
600 officer, regardless of whether or not the subject resisted  
601 administration of the test.

602       Section 8. Paragraph (a) of subsection (2) of section  
603 316.1933, Florida Statutes, is amended to read:

604       316.1933 Blood test for impairment or intoxication in cases  
605 of death or serious bodily injury; right to use reasonable  
606 force.—

607       (2) (a) Only a physician, certified paramedic, registered  
608 nurse, licensed practical nurse, other personnel authorized by a  
609 hospital to draw blood, or duly licensed clinical laboratory

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610 director, supervisor, technologist, or technician, acting at the  
611 request of a law enforcement officer, may withdraw blood for the  
612 purpose of determining the alcoholic content thereof or the  
613 presence of chemical substances or controlled substances  
614 therein. However, the failure of a law enforcement officer to  
615 request the withdrawal of blood shall not affect the  
616 admissibility of a test of blood withdrawn for medical purposes.

617 1. Notwithstanding any provision of law pertaining to the  
618 confidentiality of hospital records or other medical records, if  
619 a health care provider, who is providing medical care in a  
620 health care facility to a person injured in a motor vehicle  
621 crash, becomes aware, as a result of any blood test performed in  
622 the course of that medical treatment, that the person's blood-  
623 alcohol level meets or exceeds the blood-alcohol level specified  
624 in s. 316.193(1)(b), the health care provider may notify any law  
625 enforcement officer or law enforcement agency. Any such notice  
626 must be given within a reasonable time after the health care  
627 provider receives the test result. Any such notice shall be used  
628 only for the purpose of providing the law enforcement officer  
629 with reasonable cause to request the withdrawal of a blood  
630 sample pursuant to this section.

631 2. The notice shall consist only of the name of the person  
632 being treated, the name of the person who drew the blood, the  
633 blood-alcohol level indicated by the test, and the date and time  
634 of the administration of the test.

635 3. Nothing contained in s. 395.3025(2) ~~s. 395.3025(4)~~, s.  
636 456.057, or any applicable practice act affects the authority to  
637 provide notice under this section, and the health care provider  
638 is not considered to have breached any duty owed to the person

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639 under s. 395.3025(2) ~~s. 395.3025(4)~~, s. 456.057, or any  
640 applicable practice act by providing notice or failing to  
641 provide notice. It shall not be a breach of any ethical, moral,  
642 or legal duty for a health care provider to provide notice or  
643 fail to provide notice.

644 4. A civil, criminal, or administrative action may not be  
645 brought against any person or health care provider participating  
646 in good faith in the provision of notice or failure to provide  
647 notice as provided in this section. Any person or health care  
648 provider participating in the provision of notice or failure to  
649 provide notice as provided in this section shall be immune from  
650 any civil or criminal liability and from any professional  
651 disciplinary action with respect to the provision of notice or  
652 failure to provide notice under this section. Any such  
653 participant has the same immunity with respect to participating  
654 in any judicial proceedings resulting from the notice or failure  
655 to provide notice.

656 Section 9. Subsection (13) of section 395.4025, Florida  
657 Statutes, is amended to read:

658 395.4025 Trauma centers; selection; quality assurance;  
659 records.—

660 (13) Patient care, transport, or treatment records or  
661 reports, or patient care quality assurance proceedings, records,  
662 or reports obtained or made pursuant to this section, s.  
663 395.3025(2)(f) ~~s. 395.3025(4)(f)~~, s. 395.401, s. 395.4015, s.  
664 395.402, s. 395.403, s. 395.404, s. 395.4045, s. 395.405, s.  
665 395.50, or s. 395.51 must be held confidential by the department  
666 or its agent and are exempt from the provisions of s. 119.07(1).  
667 Patient care quality assurance proceedings, records, or reports

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668 obtained or made pursuant to these sections are not subject to  
669 discovery or introduction into evidence in any civil or  
670 administrative action.

671 Section 10. Paragraph (c) of subsection (2) of section  
672 397.702, Florida Statutes, is amended to read:

673 397.702 Authorization of local ordinances for treatment of  
674 habitual abusers in licensed secure facilities.—

675 (2) Ordinances for the treatment of habitual abusers must  
676 provide:

677 (c) That the court with jurisdiction to make the  
678 determination authorized by this section shall hear the petition  
679 on an emergency basis as soon as practicable but not later than  
680 10 days after the date the petition was filed. If the  
681 allegations of the petition indicate that the respondent has  
682 requested the appointment of an attorney, or otherwise indicate  
683 the absence of any competent person to speak at the hearing on  
684 behalf of the respondent, the court shall immediately appoint an  
685 attorney to represent the respondent pursuant to s. 397.501(9)  
686 ~~s. 397.501(8)~~, and shall provide notice of the hearing to the  
687 attorney. When the court sets a hearing date the petitioner  
688 shall provide notice of the hearing and a copy of the petition  
689 to all of the persons named in the petition pursuant to  
690 subparagraph (b)2., and to such other persons as may be ordered  
691 by the court to receive notice.

692 Section 11. Subsection (1) of section 429.294, Florida  
693 Statutes, is amended to read:

694 429.294 Availability of facility records for investigation  
695 of resident's rights violations and defenses; penalty.—

696 (1) Failure to provide complete copies of a resident's

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697 records, including, but not limited to, all medical records and  
698 the resident's chart, within the control or possession of the  
699 facility in accordance with s. 408.833 ~~s. 400.145~~, shall  
700 constitute evidence of failure of that party to comply with good  
701 faith discovery requirements and shall waive the good faith  
702 certificate and presuit notice requirements under this part by  
703 the requesting party.

704 Section 12. Subsection (4) of section 440.185, Florida  
705 Statutes, is amended to read:

706 440.185 Notice of injury or death; reports; penalties for  
707 violations.—

708 (4) Additional reports with respect to such injury and of  
709 the condition of such employee, including copies of medical  
710 reports, funeral expenses, and wage statements, shall be filed  
711 by the employer or carrier to the department at such times and  
712 in such manner as the department may prescribe by rule. In  
713 carrying out its responsibilities under this chapter, the  
714 department or agency may by rule provide for the obtaining of  
715 any medical records relating to medical treatment provided  
716 pursuant to this chapter, notwithstanding ss. 90.503 and  
717 395.3025(2) ~~the provisions of ss. 90.503 and 395.3025(4)~~.

718 Section 13. Subsection (3) of section 456.47, Florida  
719 Statutes, is amended to read:

720 456.47 Use of telehealth to provide services.—

721 (3) RECORDS.—A telehealth provider shall document in the  
722 patient's medical record the health care services rendered using  
723 telehealth according to the same standard as used for in-person  
724 services. Medical records, including video, audio, electronic,  
725 or other records generated as a result of providing such

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726 services, are confidential pursuant to ss. 395.3025(2) and  
727 456.057 ~~ss. 395.3025(4)~~ and ~~456.057~~.

728 Section 14. This act shall take effect January 1, 2027.