FOR CONSIDERATION By the Committee on Judiciary

A bill to be entitled

590-02358A-13

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20137030

2 An act relating to medical negligence actions; 3 amending s. 456.057, F.S.; authorizing a health care 4 practitioner or provider who reasonably expects to be 5 deposed, to be called as a witness, or to receive 6 discovery requests to consult with an attorney on 7 certain matters; authorizing the disclosure of patient 8 information in connection with litigation under 9 certain circumstances; prohibiting a medical liability insurer from selecting an attorney for a health care 10 11 practitioner or provider; authorizing a medical 12 liability insurer to recommend an attorney to a health 13 care practitioner or provider under certain 14 circumstances; restricting the health care 15 practitioner's or provider's attorney from disclosing 16 information to the medical liability insurer under 17 certain circumstances; authorizing the health care 18 practitioner's or provider's attorney to represent the insurer or other insureds of the insurer in unrelated 19 matters; specifying exceptions to the limitations on 20 21 disclosures by the attorney to the insurer of the 22 practitioner or provider; amending s. 766.102, F.S.; 23 revising qualifications to give expert testimony on 24 the prevailing professional standard of care; deleting 25 provision regarding limitations of section; amending 26 s. 766.106, F.S.; providing that a prospective 27 defendant may conduct an ex parte interview with a 28 claimant's treating health care provider as a tool of 29 informal discovery; amending s. 766.1065, F.S.;

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30	revising the form for the authorization of release of
31	protected health information; providing for the
32	release of protected health information to certain
33	treating health care providers, insurers, and
34	attorneys; authorizing a treating health care
35	provider, insurer, or attorney to use protected health
36	information in connection with legal services relating
37	to a medical negligence claim; authorizing certain
38	individuals and entities to conduct ex parte
39	interviews with the claimant's health care providers;
40	amending s. 381.028, F.S.; conforming a cross-
41	reference to changes made by the act; providing an
42	effective date.
43	
44	Be It Enacted by the Legislature of the State of Florida:
45	
46	Section 1. Subsections (7) and (8) of section 456.057,
47	Florida Statutes, are amended, and present subsections (9)
48	through (21) of that section are renumbered as subsections (8)
49	through (20), respectively, to read:
50	456.057 Ownership and control of patient records; report or
51	copies of records to be furnished; disclosure of information
52	(7)(a) Except as otherwise provided in this section and in
53	s. 440.13(4)(c), such records may not be furnished to, and the
54	medical condition of a patient may not be discussed with, any
55	person other than the patient <u>,</u> or the patient's legal
56	<code>representative</code> or other health care <code>practitioners</code> and <code>providers</code>
57	involved in the <u>patient's</u> care or treatment of the patient ,
58	except upon written authorization $\underline{from}\ \mathtt{of}$ the patient. However,

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590-02358A-13 20137030 59 such records may be furnished without written authorization 60 under the following circumstances: 61 1. To any person, firm, or corporation that has procured or 62 furnished such care examination or treatment with the patient's 63 consent. 2. When compulsory physical examination is made pursuant to 64 65 Rule 1.360, Florida Rules of Civil Procedure, in which case copies of the medical records shall be furnished to both the 66 defendant and the plaintiff. 67 3. In any civil or criminal action, unless otherwise 68 69 prohibited by law, upon the issuance of a subpoena from a court of competent jurisdiction and proper notice to the patient or 70 71 the patient's legal representative by the party seeking such 72 records. 73 4. For statistical and scientific research, provided the 74 information is abstracted in such a way as to protect the 75 identity of the patient or provided written permission is 76 received from the patient or the patient's legal representative. 77 5. To a regional poison control center for purposes of 78 treating a poison episode under evaluation, case management of 79 poison cases, or compliance with data collection and reporting 80 requirements of s. 395.1027 and the professional organization 81 that certifies poison control centers in accordance with federal 82 law. (b) Absent a specific written release or authorization 83 84 permitting utilization of patient information for solicitation 85 or marketing the sale of goods or services, any use of that

86 information for those purposes is prohibited.

87

(c) (8) Except in a medical negligence action or

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88	administrative proceeding when a health care practitioner or
89	provider is or reasonably expects to be named as a defendant,
90	Information disclosed to a health care practitioner by a patient
91	in the course of the care and treatment of such patient is
92	confidential and may be disclosed only to other health care
93	practitioners and providers involved in the care or treatment of
94	the patient, or if <u>allowed</u> permitted by written authorization
95	from the patient, or <u>if</u> compelled by subpoena at a deposition,
96	evidentiary hearing, or trial for which proper notice has been
97	given.
98	(d) Notwithstanding paragraphs (a)-(c), information
99	disclosed by a patient to a health care practitioner or provider
100	or records created by the practitioner or provider during the
101	course of care or treatment of the patient may be disclosed:
102	1. In a medical negligence action or administrative
103	proceeding if the health care practitioner or provider is or
104	reasonably expects to be named as a defendant;
105	2. Pursuant to s. 766.106(6)(b)5.;
106	3. As provided for in the authorization for release of
107	protected health information filed by the patient pursuant to s.
108	<u>766.1065; or</u>
109	4. To the health care practitioner's or provider's attorney
110	during a consultation if the health care practitioner or
111	provider reasonably expects to be deposed, to be called as a
112	witness, or to receive formal or informal discovery requests in
113	a medical negligence action, presuit investigation of medical
114	negligence, or administrative proceeding.
115	a. If the medical liability insurer of a health care
116	practitioner or provider described in this subparagraph

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117	represents a defendant or prospective defendant in a medical
118	negligence action:
119	(I) The insurer may not select an attorney for the
120	practitioner or the provider. However, the insurer may recommend
121	attorneys who do not represent a defendant or prospective
122	defendant in the matter.
123	(II) The attorney selected by the practitioner or the
124	provider may not, directly or indirectly, disclose to the
125	insurer any information relating to the representation of the
126	practitioner or the provider other than the categories of work
127	performed or the amount of time applicable to each category for
128	billing or reimbursement purposes. The attorney selected by the
129	practitioner or the provider may represent the insurer or other
130	insureds of the insurer in an unrelated matter.
131	b. The limitations in this subparagraph do not apply if the
132	attorney reasonably expects the practitioner or provider to be
133	named as a defendant and the practitioner or provider agrees
134	with the attorney's assessment, if the practitioner or provider
135	receives a presuit notice pursuant to chapter 766, or if the
136	practitioner or provider is named as a defendant.
137	Section 2. Paragraph (a) of subsection (5) and subsection
138	(14) of section 766.102, Florida Statutes, are amended to read:
139	766.102 Medical negligence; standards of recovery; expert
140	witness
141	(5) A person may not give expert testimony concerning the
142	prevailing professional standard of care unless the person is a
143	health care provider who holds an active and valid license and
144	conducts a complete review of the pertinent medical records and
145	meets the following criteria:

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146	
	(a) If the health care provider against whom or on whose
147	behalf the testimony is offered is a specialist, the expert
148	witness must:
149	1. Specialize in the same specialty as the health care
150	provider against whom or on whose behalf the testimony is
151	offered; or specialize in a similar specialty that includes the
152	evaluation, diagnosis, or treatment of the medical condition
153	that is the subject of the claim and have prior experience
154	treating similar patients; and
155	2. Have devoted professional time during the 3 years
156	immediately preceding the date of the occurrence that is the
157	basis for the action to:
158	a. The active clinical practice of, or consulting with
159	respect to, the same or similar specialty that includes the
160	evaluation, diagnosis, or treatment of the medical condition
161	that is the subject of the claim and have prior experience
162	treating similar patients;
163	b. Instruction of students in an accredited health
164	professional school or accredited residency or clinical research
165	program in the same or similar specialty; or
166	c. A clinical research program that is affiliated with an
167	accredited health professional school or accredited residency or
168	clinical research program in the same or similar specialty.
169	(14) This section does not limit the power of the trial
170	court to disqualify or qualify an expert witness on grounds
171	other than the qualifications in this section.
172	Section 3. Paragraph (b) of subsection (6) of section
173	766.106, Florida Statutes, is amended to read:
174	766.106 Notice before filing action for medical negligence;

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590-02358A-13 20137030 175 presuit screening period; offers for admission of liability and 176 for arbitration; informal discovery; review.-(6) INFORMAL DISCOVERY.-177 178 (b) Informal discovery may be used by a party to obtain 179 unsworn statements, the production of documents or things, and physical and mental examinations, as follows: 180 181 1. Unsworn statements. - Any party may require other parties 182 to appear for the taking of an unsworn statement. Such statements may be used only for the purpose of presuit screening 183 184 and are not discoverable or admissible in any civil action for 185 any purpose by any party. A party desiring to take the unsworn 186 statement of any party must give reasonable notice in writing to 187 all parties. The notice must state the time and place for taking 188 the statement and the name and address of the party to be 189 examined. Unless otherwise impractical, the examination of any 190 party must be done at the same time by all other parties. Any 191 party may be represented by counsel at the taking of an unsworn 192 statement. An unsworn statement may be recorded electronically, stenographically, or on videotape. The taking of unsworn 193 194 statements is subject to the provisions of the Florida Rules of 195 Civil Procedure and may be terminated for abuses. 196 2. Documents or things.-Any party may request discovery of 197 documents or things. The documents or things must be produced, 198 at the expense of the requesting party, within 20 days after the

at the expense of the requesting party, within 20 days after the date of receipt of the request. A party is required to produce discoverable documents or things within that party's possession or control. Medical records shall be produced as provided in s. 766.204.

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3. Physical and mental examinations.-A prospective

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20137030 590-02358A-13 204 defendant may require an injured claimant to appear for 205 examination by an appropriate health care provider. The 206 prospective defendant shall give reasonable notice in writing to 207 all parties as to the time and place for examination. Unless 208 otherwise impractical, a claimant is required to submit to only one examination on behalf of all potential defendants. The 209 210 practicality of a single examination must be determined by the 211 nature of the claimant's condition, as it relates to the liability of each prospective defendant. Such examination report 212 213 is available to the parties and their attorneys upon payment of 214 the reasonable cost of reproduction and may be used only for the 215 purpose of presuit screening. Otherwise, such examination report 216 is confidential and exempt from the provisions of s. 119.07(1) 217 and s. 24(a), Art. I of the State Constitution.

4. Written questions.—Any party may request answers to
written questions, the number of which may not exceed 30,
including subparts. A response must be made within 20 days after
receipt of the questions.

5. Ex parte interviews of treating health care providers.—A prospective defendant or his or her legal representative may interview the claimant's treating health care providers without notice to, or the presence of, the claimant or the claimant's legal representative.

227 <u>6.5.</u> Unsworn statements of treating health care providers.-228 A prospective defendant or his or her legal representative may 229 also take unsworn statements of the claimant's treating health 230 care providers. The statements must be limited to those areas 231 that are potentially relevant to the claim of personal injury or 232 wrongful death. Subject to the procedural requirements of

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233	subparagraph 1., a prospective defendant may take unsworn
234	statements from a claimant's treating physicians. Reasonable
235	notice and opportunity to be heard must be given to the claimant
236	or the claimant's legal representative before taking unsworn
237	statements. The claimant or claimant's legal representative has
238	the right to attend the taking of such unsworn statements.
239	Section 4. Subsection (3) of section 766.1065, Florida
240	Statutes, is amended to read:
241	766.1065 Authorization for release of protected health
242	information
243	(3) The authorization required by this section shall be in
244	the following form and shall be construed in accordance with the
245	"Standards for Privacy of Individually Identifiable Health
246	Information" in 45 C.F.R. parts 160 and 164:
247	
248	AUTHORIZATION FOR RELEASE OF
249	PROTECTED HEALTH INFORMATION
250	
251	A. I, (Name of patient or authorized
252	representative) [hereinafter "Patient"], authorize
253	that (Name of health care provider to whom the
254	presuit notice is directed) and his/her/its
255	insurer(s), self-insurer(s), and attorney(s), and the
256	designated treating health care provider(s) listed
257	below and his/her/its insurer(s), self-insurer(s), and
258	attorney(s) may obtain and disclose (within the
259	parameters set out below) the protected health
260	information described below for the following specific
261	purposes:

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262	1. Facilitating the investigation and evaluation
263	of the medical negligence claim described in the
264	accompanying presuit notice; or
265	2. Defending against any litigation arising out
266	of the medical negligence claim made on the basis of
267	the accompanying presuit notice; or-
268	3. Obtaining legal advice or representation
269	arising out of the medical negligence claim described
270	in the accompanying presuit notice.
271	B. The health information obtained, used, or
272	disclosed extends to, and includes, the verbal <u>health</u>
273	information as well as the written health information
274	and is described as follows:
275	1. The health information in the custody of the
276	following health care providers who have examined,
277	evaluated, or treated the Patient in connection with
278	injuries complained of after the alleged act of
279	negligence: (List the name and current address of all
280	health care providers). This authorization extends to
281	any additional health care providers that may in the
282	future evaluate, examine, or treat the Patient for the
283	injuries complained of.
284	2. The health information in the custody of the
285	following health care providers who have examined,
286	evaluated, or treated the Patient during a period
287	commencing 2 years before the incident that is the
288	basis of the accompanying presuit notice.
289	
290	(List the name and current address of such health care

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291	providers, if applicable.)
292	
293	C. This authorization does not apply to the
294	following list of health care providers possessing
295	health care information about the Patient because the
296	Patient certifies that such health care information is
297	not potentially relevant to the claim of personal
298	injury or wrongful death that is the basis of the
299	accompanying presuit notice.
300	
301	(List the name of each health care provider to whom
302	this authorization does not apply and the inclusive
303	dates of examination, evaluation, or treatment to be
304	withheld from disclosure. If none, specify "none.")
305	
306	D. The persons or class of persons to whom the
307	Patient authorizes such health information to be
308	disclosed or by whom such health information is to be
309	used:
310	1. Any health care provider providing care or
311	treatment for the Patient.
312	2. Any liability insurer or self-insurer
313	providing liability insurance coverage, self-
314	insurance, or defense to any health care provider to
315	whom presuit notice is given, or to any health care
316	provider listed in subsections B.12. above,
317	regarding the care and treatment of the Patient.
318	3. Any consulting or testifying expert employed
319	by or on behalf of (name of health care provider to

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320	whom presuit notice was given) and his/her/its
321	<pre>insurer(s), self-insurer(s), or attorney(s) regarding</pre>
322	the matter of the presuit notice accompanying this
323	authorization.
324	4. Any attorney (including <u>his/her</u> secretarial,
325	clerical, or paralegal staff) employed by or on behalf
326	of (name of health care provider to whom presuit
327	notice was given) or employed by or on behalf of any
328	health care provider(s) listed in subsections B.12.
329	above, regarding the matter of the presuit notice
330	accompanying this authorization or the care and
331	treatment of the Patient.
332	5. Any trier of the law or facts relating to any
333	suit filed seeking damages arising out of the medical
334	care or treatment of the Patient.
335	E. This authorization expressly allows the
336	persons or class of persons listed in subsections
337	D.24. above to interview the health care providers
338	listed in subsections B.12. above, without notice to
339	or the presence of the Patient or the Patient's
340	attorney.
341	F.E. This authorization expires upon resolution
342	of the claim or at the conclusion of any litigation
343	instituted in connection with the matter of the
344	presuit notice accompanying this authorization,
345	whichever occurs first.
346	G.F. The Patient understands that, without
347	exception, the Patient has the right to revoke this
348	authorization in writing. The Patient further

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349	understands that the consequence of any such
350	revocation is that the presuit notice under s.
351	766.106(2), Florida Statutes, is deemed retroactively
352	void from the date of issuance, and any tolling effect
353	that the presuit notice may have had on any applicable
354	statute-of-limitations period is retroactively
355	rendered void.
356	H.G. The Patient understands that signing this
357	authorization is not a condition for continued
358	treatment, payment, enrollment, or eligibility for
359	health plan benefits.
360	I.H. The Patient understands that information
361	used or disclosed under this authorization may be
362	subject to additional disclosure by the recipient and
363	may not be protected by federal HIPAA privacy
364	regulations.
365	
366	Signature of Patient/Representative:
367	Date:
368	Name of Patient/Representative:
369	Description of Representative's Authority:
370	Section 5. Paragraph (c) of subsection (7) of section
371	381.028, Florida Statutes, is amended to read:
372	381.028 Adverse medical incidents
373	(7) PRODUCTION OF RECORDS
374	(c)1. Fees charged by a health care facility for copies of
375	records requested by a patient under s. 25, Art. X of the State
376	Constitution may not exceed the reasonable and actual cost of
377	complying with the request, including a reasonable charge for

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590-02358A-13 20137030 378 the staff time necessary to search for records and prevent the 379 disclosure of the identity of any patient involved in the 380 adverse medical incident through redaction or other means as 381 required by the Health Insurance Portability and Accountability 382 Act of 1996 or its implementing regulations. The health care 383 facility may require payment, in full or in part, before acting 384 on the records request. 385 2. Fees charged by a health care provider for copies of 386 records requested by a patient under s. 25, Art. X of the State 387 Constitution may not exceed the amount established under s. 388 456.057(17) s. 456.057(18), which may include a reasonable 389 charge for the staff time necessary to prevent the disclosure of

the identity of any patient involved in the adverse medical incident through redaction or other means as required by the Health Insurance Portability and Accountability Act of 1996 or its implementing regulations. The health care provider may require payment, in full or in part, before acting on the records request.

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Section 6. This act shall take effect July 1, 2013.

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