By Senator Gruters

23-01383A-19 20191348

A bill to be entitled

An act relating to the Health Innovation Commission; creating s. 381.995, F.S.; creating the Health Innovation Commission within the Agency for Health Care Administration; specifying the purpose of the commission; providing for membership, meetings, and duties of the commission; providing requirements for proposals for innovative improvements to the health care delivery system and requests for exemptions from specified laws or rules; requiring the commission to review such proposals with the assistance of relevant state agencies, if needed; requiring the commission to provide its findings and decision to the applicant within a specified timeframe; providing limitations on such exemptions; requiring the agency to submit an annual report of the commission's activities to the Governor and Legislature by a specified date; providing rulemaking authority; providing an effective date.

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

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Section 1. Section 381.995, Florida Statutes, is created to read:

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381.995 Health Innovation Commission.

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(1) The Health Innovation Commission, a commission as defined in s. 20.03(10), is created within the Agency for Health Care Administration for the purpose of facilitating the

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implementation of innovative ideas to increase efficiency,

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reduce costs, and improve patient outcomes in the health care delivery system. The commission is assigned to the agency for administrative, staffing, and fiscal accountability purposes, but it shall otherwise function independently of the control and direction of the agency.

- (2) (a) The commission shall convene no later than December 1, 2019, and shall be composed of 11 members who have experience in the health care delivery system, including health care industry representatives, health care practitioners, and consumers. Three members shall be appointed by the Governor, three members shall be appointed by the President of the Senate, and three members shall be appointed by the Speaker of the House of Representatives. The Secretary of Health Care Administration and the State Surgeon General shall serve as ex officio nonvoting members. The Governor shall appoint the chair of the commission.
- (b) Members shall serve without compensation and are not entitled to reimbursement for per diem or travel expenses.
- (c) The commission shall meet at least quarterly or upon the call of the chair and as often as necessary to carry out its duties and responsibilities. The commission may use any method of telecommunications to conduct its meetings.
- (3) (a) The commission shall solicit proposals for innovative improvements to the health care delivery system which would require an exemption from one of the following provisions of law or rule to effectively or efficiently implement the proposal:
 - 1. The requirements of s. 408.036, and any related rules.
 - 2. The licensure restrictions in s. 395.003(8), and any

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related rules.

 $\underline{\text{3. The time limitations in s. 395.002(3), and any related}}$ rules.

- $\underline{\text{4. The practice restrictions in s. 465.003(13), and any}}$ related rules.
- 5. The licensure restrictions in s. 456.065, or any similar restrictions in a practice act for a health care practitioner as defined in s. 456.001, and any related rules, if the person holds an active and unencumbered license to practice such health care profession in another state.
- 6. The supervisory protocol requirements in s. 464.003(2) or s. 464.012(3), and any related rules.
- (b) A proposal must offer a solution to an existing problem in the health care delivery system that would increase efficiency, reduce costs, or improve patient outcomes. Based on such a proposal, the commission may grant an exemption from a law or rule in accordance with this section.
- (4) (a) A person may submit a proposal to the commission for review in a form created by commission rule. Such a proposal must, at a minimum:
- 1. Identify an existing problem in the health care delivery system, including inefficiency, high costs, or poor patient outcomes;
- 2. Propose a specific alternative or innovative health care delivery or payment model to solve the problem that the applicant will be able to implement, and describe the necessary changes to current practice required to effectively implement the solution;
 - 3. Demonstrate, using real data or prior experience, how

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and to what extent the proposed solution will promote efficiency in the health care delivery system, improve patient outcomes, or reduce health care costs to the consumer, industry, or government; and

- 4. Identify specific barriers to the implementation of the proposed solution in current law or rule, request that the commission grant an exemption from such law or rule, and demonstrate the impact such exemption would have on patient health and safety.
- (b) Upon receipt of a proposal, the commission shall perform a preliminary review of the proposal and may call upon relevant state agencies for professional assistance as needed to perform the review. The state agencies shall provide such assistance in a timely manner, which may include, but is not limited to:
- 1. Providing background information on the issue, including, but not limited to, relevant policies, laws, rules, and data;
- 2. Identifying what agency action, if any, would be required to implement the proposed solution; and
- 3. Assessing whether the proposed solution would achieve the purpose of this section, and if not, recommending any way in which the proposed solution could be amended to do so.
- (c) Based on its full review of the proposal and any information provided by the relevant state agencies, the commission shall adopt written findings that include a statement of the relevant facts and the rationale for granting or denying the request for an exemption. The commission shall provide a copy of its written findings and decision to the applicant

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- (d) The commission may only grant an exemption from a law or rule to the extent necessary to implement the proposal. The commission may impose conditions on the grant, but only to the extent necessary to achieve the purpose of this section. The commission may not grant an exemption from a law or rule if doing so would violate federal law or jeopardize public health and safety or if the law or rule is required by the Federal Government for implementation or retention of any federally approved or delegated program, except as authorized by such program or if approved by the appropriate agency of the Federal Government. The commission shall only grant a request for an exemption from a law or rule if it determines there is compelling evidence to show that:
- 1. The proposal is likely to achieve the purpose of this section;
- 2. An exemption from the specified law or rule is necessary for the effective implementation of the proposal; and
- 3. The potential benefits of the proposal outweigh any potential harm to the public health and safety that may result from such exemption.
- (e) If the commission grants a request for an exemption from a law or rule, it must file a copy of its written findings and decision with the relevant state agencies within 30 days after finalizing its decision.
- (5) By November 1 of each year, the agency shall submit a report of the commission's activities to the Governor, the President of the Senate, and the Speaker of the House of Representatives. The report shall include, at a minimum:

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(a) Summaries of the proposals reviewed by the commission during the previous fiscal year, including background information, an explanation of the proposed solutions, a fiscal analysis, any barriers to implementing the proposed solutions in existing law or rule at the time during which the proposals were submitted, and a copy of the commission's written findings and decisions; and

- (b) A list of any provisions of law or rule from which the commission granted exemptions within the previous fiscal year.
- (6) The commission may adopt rules necessary to implement this section.
 - Section 2. This act shall take effect July 1, 2019.