

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

HB 17 — Podiatric Medicine

by Reps. Bell, Killebrew, and others (CS/SB 170 by Health Policy Committee and Senators Hooper and Gruters)

The bill modifies three aspects of podiatric medicine.

The bill amends s. 461.007, F.S., to require that a minimum of two continuing education (CE) hours related to the safe and effective prescribing of controlled substances must be added to the CE hours that the Board of Podiatric Medicine may require as a condition of podiatric physician licensure renewal.

The bill creates s. 461.0155, F.S., to specify that podiatric physicians, when supervising medical assistants, are governed by s. 458.3485, F.S.

Finally, the bill amends s. 624.27, F.S., to add podiatric physicians to the list of health care providers who are authorized to enter into direct health care agreements with patients for the provision of health care services, without such agreements being considered insurance.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 115-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/HB 183 — Office of Minority Health and Health Equity

by Professions and Public Health Subcommittee and Reps. Brown, Joseph, and others (CS/SB 404 by Health Policy Committee and Senator Rouson)

The bill creates s. 381.735, F.S., to assign duties and responsibilities to the Office of Minority Health and Health Equity (Office) within the Department of Health (DOH), which currently administers the Closing the Gap grant program. The bill requires the Office to develop and promote the statewide implementation of policies, programs, and practices that increase health equity in this state, including increased access to and quality of health care services for racial and ethnic minority populations. The bill also requires the Office to coordinate with agencies, organizations, and providers across the state to perform certain tasks, including gathering and analyzing data relating to health disparities.

The bill establishes that a representative from each county health department will serve as a liaison to the Office and that the Office will serve as a liaison to the federal Offices of Minority Health and Regional Health Operations. The bill requires the DOH to maintain specified information and data on its website that must be updated at least annually. The bill authorizes the DOH to adopt rules to implement the provisions of the bill.

The bill requires the Office to use all available resources and pursue opportunities for increased funding to implement its duties and responsibilities. The bill is projected to increase the DOH's workload and operational costs.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 38-0; House 117-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

HB 245 — Massage Therapy

by Reps. Chaney and others (CS/SB 352 by Health Policy Committee and Senator Rodriguez)

The bill replaces the term “massage” with “massage therapy” throughout ch. 480, F.S., and specifies that massage therapy is a therapeutic health care practice. The bill revises the legislative purpose for the necessity of regulating massage practice. Under current law, the Legislature had recognized the practice of massage as being potentially dangerous to the public. Under the bill, the Legislature recognizes that unregulated massage therapy poses a danger to the public.

The bill expands the scope of practice of massage therapy to include:

- Manipulation of the soft tissues of the human body to include use of the knee, whereas current law authorized the massage therapist to use only his or her hand, foot, arm, or elbow during the course of massage therapy treatment; and
- “Massage therapy assessments,” which the bill defines as the massage therapist’s determination of the course of a patient’s massage therapy treatment, for compensation.

Additionally, the bill provides an avenue for a massage therapist to bill health insurers and HMOs for massage-related services that are not applicable under current law.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 38-1; House 115-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/SB 262 — Dispensing Medicinal Drugs

by Military and Veterans Affairs, Space, and Domestic Security Committee and Senator Harrell

The bill amends s. 465.019, F.S., to authorize medicinal drugs to be dispensed by a hospital that operates a Class II or Class III institutional pharmacy to a patient of the hospital's emergency department or a hospital inpatient upon discharge if a prescriber treating the patient in the hospital determines that:

- The medicinal drug is warranted; and
- Community pharmacy services are not readily accessible to the patient, geographically or otherwise.

If prescribing and dispensing occurs, the bill requires that a supply of the drug must be dispensed that will last for the greater of up to 48 hours or through the end of the next business day, and that during a declared state of emergency, a 72-hour supply may be dispensed by a hospital located in an area affected by the emergency.

Any of these new circumstances that authorize the prescription of a controlled substance must comply with existing regulations and restrictions on the prescribing of a controlled substance.

The bill has an insignificant fiscal impact on the Department of Health that can be absorbed within existing resources.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 117-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/CS/SB 272 — Rare Disease Advisory Council

by Appropriations Committee; Health Policy Committee; and Senator Baxley

The bill creates s. 381.99, F.S., to establish the Rare Disease Advisory Council (Council) adjunct to the Department of Health (DOH). The Council is tasked with providing recommendations to improve the health outcomes of Floridians who have a rare disease, defined as a disease that affects fewer than 200,000 people in the United States. The bill establishes the membership of the Council, as well as the length of the members' terms. The bill requires that the Council first meet by October 1, 2021, and provide its recommendations to the Governor and the State Surgeon General by July 1 of each year beginning in 2022.

The Council is tasked with:

- Consulting with experts and soliciting public comment to develop recommendations on improving the treatment of rare diseases in Florida;
- Developing strategies for academic research institutions to facilitate continued research on rare diseases;
- Developing strategies for health care providers to be informed on how to recognize and treat patients with a rare disease; and
- Providing input and feedback to the DOH, the Medicaid program, and other state agencies on matters that affect people with a rare disease.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 39-0; House 117-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/SB 348 — Medicaid

by Health Policy Committee and Senator Rodriguez

The bill requires Florida Medicaid to reimburse for Medicare crossover claims for non-emergency ambulance services provided to persons enrolled in both Medicare and Medicaid. Under preexisting law, Medicaid pays for emergency transportation crossover claims but not for non-emergency transportation crossover claims.

The bill requires Florida Medicaid to pay all deductibles and coinsurance for Medicare-covered services provided to Medicare-eligible recipients by ambulances licensed pursuant to ch. 401, F.S., according to the corresponding procedure codes for such services.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 39-0; House 116-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

SB 388 — Injured Police Canines

by Senators Wright, Book, Garcia, and Taddeo

The bill authorizes an emergency service transport vehicle permit holder to transport a police canine injured in the line of duty to a veterinary clinic or similar facility if no person requires medical attention or transport at that time. The bill authorizes emergency medical technicians (EMTs) and paramedics to provide emergency medical care to an injured police canine at the scene of an emergency or while the canine is being transported.

The bill authorizes EMTs and paramedics to provide emergency care to a police canine injured in the line of duty, exempts EMTs and paramedics from the application of the veterinary practice act for the provision of such care, and provides civil and criminal immunity to EMTs and paramedics for such care that is provided in good faith.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 114-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/CS/HB 431 — Practice of Physician Assistants

by Health and Human Services Committee; Professions and Public Health Subcommittee; Rep. Rommel and others (CS/CS/SB 894 by Appropriations Committee; Health Policy Committee; and Senator Diaz)

The bill expands the scope of practice of physician assistants (PA) by allowing them to:

- Prescribe psychiatric mental health controlled substances to minors under certain circumstances;
- Procure certain medical equipment and devices;
- Supervise medical assistants; and
- Sign and certify documents that currently require a physician's signatures including, but not limited to, Baker Act commitments, do-not-resuscitate orders, school physicals, and death certificates. The bill specifies that a PA may not sign for medical marijuana certifications under s. 381.986, F.S., or workers compensation medical examinations required to determine maximum medical improvement under s. 440.02, F.S., and an impairment rating under s. 440.15, F.S.

Current law requires that an applicant for a PA license must provide a certificate of completion of a board approved PA program. The bill establishes new educational requirements for PA licensure, based on an applicant's year of graduation from an approved PA program, as follows:

- For an applicant who has graduated after December 31, 2020, he or she must have received a master's degree in accordance with the Accreditation Review Commission on Education for the Physician Assistant;
- For an applicant who graduated on or before December 31, 2020, he or she must have received a bachelor's or master's degree from an approved program;
- For an applicant who graduated before July 1, 1994, has graduated from an approved program of instruction in primary health care or surgery; and
- For an applicant who graduated before July 1, 1983, has received a certification as a PA from boards.

The bill further authorizes the board to grant a license to an applicant who does not meet the above specified educational requirements, but who has passed the Physician Assistant National Certifying Examination administered by the National Commission on Certification of Physician Assistants before 1986.

The bill also authorizes physician assistants to directly bill for and receive payments from public and private insurance companies for the services they deliver.

Current law limits the number of physician assistants a physician can supervise to four. The bill expands the number of PAs that a physician can supervise to 10.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 38-2; House 111-1

This summary is provided for information only and does not represent the opinion of any Senator, Senate Officer, or Senate Office.
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THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/CS/HB 485 — Personal Care Attendants

by Health and Human Services Committee; Finance and Facilities Subcommittee; Reps. Garrison; Rayner and others (CS/CS/SB 1132 by Appropriations Committee; Health Policy Committee; and Senator Bean)

The bill establishes in law a personal care attendant (PCA) program for nursing homes. The bill authorizes a nursing home to hire PCAs who are participating in the training program developed by the Agency for Health Care Administration (AHCA) in accordance with federal requirements for nurse aide training. Each PCA may only work for a single nursing home for a period of four consecutive months before becoming a certified nursing assistant. During the four month period, the nursing home may count the hours worked by the PCA as CNA hours for the purposes of staffing requirements; however, the bill specifies that a PCA may not perform any task that requires clinical assessment, interpretation, or judgement.

Prior to having direct contact with a resident, the PCA must complete 16 hours of required education developed by the AHCA. The bill specifies what topics, at a minimum, must be covered by such education and allows the AHCA to add to the content areas covered. The bill requires the AHCA to develop the PCA training program and adopt rules to implement the provisions of the bill.

The bill specifies that should the Governor's Executive Order 20-52 (related to COVID-19) be terminated before the AHCA adopts rules to implement the PCA program that the current PCA program, which is authorized on an emergency basis, be allowed to continue until the adoption of such rules.

If approved by the Governor, these provisions take effect upon becoming law.

Vote: Senate 32-7; House 106-11

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

SB 530 — Nonopioid Alternatives

by Senator Perry

The bill amends s. 456.44, F.S., to allow a specific educational pamphlet, which must be provided to health care patients or their representatives under certain circumstances, to be provided electronically or in printed form, instead of only in printed form as required under current law. The pamphlet contains information on the use of nonopioid alternatives for the treatment of pain and must be provided when a patient will receive anesthesia or will be prescribed certain opioid medications.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 108-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/CS/SB 716 — Consent for Pelvic Examinations

by Judiciary Committee; Health Policy Committee; and Senator Book

The bill amends, narrows, and simplifies the definition of “pelvic examination.” It amends current law requiring written consent for all pelvic examinations performed by health care practitioners and trainees, to requiring written consent for health care practitioners and trainees to performing pelvic examinations on anesthetized or unconscious patients. The bill further requires verbal consent, in addition to written consent, if the patient is conscious. The bill provides exceptions to the need to obtain consent as follows:

- The bill maintains current law exception for court orders.
- The bill modifies the current law exception allowing a pelvic examination without consent to avert a serious risk of imminent, substantial and irreversible physical impairment of a major bodily function, to permit a pelvic examination without consent when it is necessary to provide emergency services and care.
- The bill adds three new exceptions, thereby allowing an examination without consent when:
 - o A patient has emergency medical conditions;
 - o Administered as part of a child protective investigation; or
 - o The examination is administered pursuant to a criminal investigation alleging certain offenses related to child abuse and neglect.

The bill further provides that a single written consent for a pelvic examination may authorize multiple health care practitioners or students to perform a pelvic examination on a pregnant woman having contractions in a hospital.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 116-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/CS/SB 768 — Administration of Vaccines

by Rules Committee; Children, Families, and Elder Affairs Committee; and Senator Baxley

The bill expands the types of vaccines that pharmacists and pharmacy interns may administer to adults within the framework of an established protocol with a supervising physician licensed under ch. 458 or 459, F.S.

The bill authorizes pharmacists and pharmacy interns who are certified by the Board of Pharmacy (BOP) and have completed specified educational and other requirements, to administer to adults any immunization or vaccine that is:

- Listed in the federal Centers for Disease Control and Prevention’s (CDC) Adult Immunization Schedule, as of April 30, 2021;
- Recommended by the CDC for international travel, as of April 30, 2021; or
- Licensed for use in the United States, or authorized for emergency use, by the federal Food and Drug Administration (FDA), as of April 30, 2021.

The BOP may authorize additional immunizations and vaccines that may be administered to adults by certified pharmacists and pharmacy interns as they are added to the lists of approved immunizations and vaccines as denoted in the paragraph above.

Additionally, the bill authorizes pharmacists who are certified to administer vaccines and immunizations to adults to also administer influenza vaccines to children seven years of age or older.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 29-11; House 112-4

THE FLORIDA SENATE
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Committee on Health Policy

CS/CS/CS/HB 805 — Volunteer Ambulance Services

by Health and Human Services Committee; Local Administration and Veterans Affairs Subcommittee; Professions and Public Health Subcommittee; and Reps. Caruso, McClure, and others (CS/SB 1084 by Health Policy Committee and Senators Pizzo, Book, and Rodriguez)

The bill authorizes vehicles of certain not-for-profit faith-based volunteer ambulance services (“volunteer ambulance services,”) as authorized by the chief of police of an incorporated city or any sheriff of any county, to display red lights and operate emergency lights and sirens while responding to an emergency. The bill also authorizes privately owned vehicles belonging to medical staff physicians and technicians of volunteer ambulance services to use red lights on privately owned vehicles and to disregard specified traffic laws and ordinances while responding to an emergency. Under the bill any emergency medical technician, doctor, or paramedic who is using his or her personal vehicle with a red light to respond to an emergency call must have completed a 16-hour emergency vehicle operator course.

The bill provides a legislative finding that is in the public interest to foster the development of emergency medical services that address religious sensitivities and recognizes the value of augmenting existing county and municipal emergency medical services with those provided by volunteer service organizations.

Under current law, to be licensed as a basic or advanced life support service by the Department of Health, an applicant must obtain a certificate of public convenience and necessity (COPCN) from each county in which it will operate. The bill exempts certain not-for-profit faith-based volunteer first responder agencies who have been operating in this state for at least 10 years, and which provide advanced or basic life support services solely through at least 50 unpaid licensed emergency medical technician or paramedic volunteers, from COPCN requirements. To be exempt from the COPCN requirements, the volunteer ambulance service must also provide services free of charge, not receive government funding (excluding specialty license plate proceeds), provide a disclaimer on all written materials that the volunteer ambulance service is not associated with the state’s 911 system, and meet other requirements as outlined in the bill. The COPCN exemption created in the bill may be granted to no more than four counties.

The bill requires an applicant to take all reasonable efforts to enter into a memorandum of understanding with the emergency medical services licensee within whose jurisdiction the applicant will provide services in order to facilitate communications and coordinate emergency services for situations beyond the scope of the applicant's capacity and for situations of advanced life support that are deemed priority 1 or priority 2 emergencies.

The bill prohibits county and municipal governments from limiting, prohibiting, or preventing volunteer ambulance services from responding to emergencies or providing emergency medical services or transport; and from requiring volunteer ambulance services to obtain a license or certificate or pay a fee.

Under the bill, an emergency medical services provider or fire rescue services provider operated by a county, municipality, or special district is responsible for the care and transport of an unresponsive patient if a volunteer ambulance service arrives at the scene of an emergency simultaneously with such a provider and a person authorized to consent to the medical treatment of the unresponsive patient is not present.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 98-12

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/HB 833 — Unlawful Use of DNA

by Judiciary Committee and Rep. Tomkow and others (CS/SB 1140 by Rules Committee and Senators Rodrigues and Garcia)

The bill establishes the “Protecting DNA Privacy Act.” The bill establishes four new crimes related to the unlawful use of deoxyribose nucleic acid (DNA). The bill provides that:

- It is a first degree misdemeanor for a person to willfully, and without express consent, collect or retain another person’s DNA sample with the intent to perform DNA analysis.
- It is a third degree felony for a person to willfully, and without express consent, submit another person’s DNA sample for DNA analysis or to conduct or procure the conducting of another person’s DNA analysis.
- It is a third degree felony for a person to willfully, and without express consent, disclose another person’s DNA analysis results to a third party except that a person who discloses another person’s DNA analysis that were previously voluntarily disclosed by the person whose DNA was analyzed, or such person’s legal guardian or authorized representative, does not commit the crime.
- It is a second degree felony for a person to willfully, and without express consent, sell or otherwise transfer another person’s DNA sample or the results of another person’s DNA analysis to a third party, regardless of whether the DNA sample was originally collected, retained, or analyzed with express consent.

The bill specifies that each instance of the above crimes constitutes a separate violation which entails a separate penalty. The bill amends s. 760.40, F.S., which is the current law governing DNA privacy, to define the terms “express consent,” “exclusive property,” and “DNA sample” and to conform to the changes made by the bill. The definitions established in s. 760.40, F.S., also apply to the newly created s. 817.5655, F.S.

The bill provides exceptions to the crimes established in the bill for:

- Criminal investigations and prosecutions;
- Complying with a subpoena, summons, or other lawful court order;
- Complying with federal law;
- The medical diagnosis and treatment of a patient under certain circumstances;
- The newborn screening program established in s. 383.14, F.S.;
- Determining paternity under ss. 409.256 or 742.12(1), F.S.;
- Performing any activity authorized in s. 943.325, F.S., pertaining to the criminal DNA database; and
- Conducting research pursuant to specified federal requirements.

The bill specifies that its provisions only apply to DNA samples collected in Florida and only to the use, retention, maintenance, and disclosure of DNA samples or analysis results after the bill’s effective date.

If approved by the Governor, these provisions take effect October 1, 2021.

Vote: Senate 22-18; House 85-28

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/HB 905 — Program of All-Inclusive Care for the Elderly

by Health and Human Services Committee and Reps. Roach, Rommel, and others (CS/CS/SB 1242 by Appropriations Committee; Health Policy Committee; and Senator Book)

The bill codifies the Program of All-Inclusive Care for the Elderly (PACE) in s. 430.84, F.S., by establishing a statutory process for the review, approval, and oversight of future and current PACE organizations. The bill authorizes the Agency for Health Care Administration (AHCA), in consultation with the Department of Elder Affairs (DOEA), to approve entities that have submitted the required application and data to the federal Centers for Medicare and Medicaid Services (CMS) as PACE organizations pursuant to federal regulations. The bill requires all PACE organizations to meet specific quality and performance standards established by the federal CMS and the AHCA. The bill authorizes a PACE organization that has received funding for slots in a given geographic area to use the funding and slots to provide services in an authorized contiguous geographic area, upon approval from AHCA. The bill directs the AHCA to provide oversight and monitoring of Florida's PACE program and organizations.

The bill also exempts all PACE organizations from the requirements of ch. 641, F.S., which regulates health maintenance organizations, prepaid health clinics, and other health care service programs.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 116-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/HB 1057 — Agency for Health Care Administration

by Finance and Facilities Subcommittee and Rep. Garrison (CS/SB 1292 by Health Policy and Senator Bean)

The bill:

- Eliminates the requirement that the Agency for Health Care Administration (AHCA) submit a report to the Legislature by January 1 of each year on the operation of the Pharmaceutical Expense Assistance Program.
- Updates provisions setting reimbursement rates for providers of prescribed drugs. Under the bill, a provider of prescribed drugs will be reimbursed in an amount not to exceed the lesser of:
 - o The actual acquisition cost based on the federal CMS National Average Drug Acquisition Cost pricing files plus a professional dispensing fee;
 - o The wholesale acquisition cost plus a professional dispensing fee;
 - o The state maximum allowable cost plus a professional dispensing fee; or
 - o The usual and customary charge billed by the provider.
- Deletes obsolete language relating to the Medicaid payment of professional dispensing fees. Effective April 1, 2017, federal CMS implemented the use of the term “professional dispensing fee” and mandated that certain criteria be met in setting the dispensing fee. In response, the AHCA updated the Medicaid state plan with a new professional dispensing fee that does not conform to s. 409.908(14)(b) and (c), F.S.
- Deletes a provision requiring the AHCA to ensure that any therapeutic class of drugs, including drugs that have been removed from distribution to the public by their manufacturer or by the federal Food and Drug Administration (FDA) or that have been required to carry a black box warning label by the federal FDA because of safety concerns, is reviewed by the Medicaid Pharmaceutical and Therapeutics Committee at its next regularly scheduled meeting. If drugs covered by Florida Medicaid are removed from distribution for safety reasons or because of an FDA-mandated black box warning, the AHCA does not wait for the quarterly committee meetings or for its recommendations because the safety of enrollees could be at stake.
- Corrects a provision in current law to reflect that the AHCA is responsible for Medicaid fair hearings in which preferred drug formulary decisions are appealed, rather than the Department of Children and Families.
- Clarifies that AHCA must timely respond to requests for “prior authorizations” associated with prescribed drugs under the Medicaid fee for service (FFS) program, rather than responding to requests for “prior consultations.”
- Deletes outdated provisions requiring the AHCA to expand home delivery of pharmacy products. The FFS and managed care plans currently provide for mail order delivery of drugs.
- Deletes an obsolete provision limiting the doses of sexual or erectile dysfunction drugs, as Florida Medicaid does not cover such drugs based on a federal prohibition. In 2005, federal law was amended to prohibit Medicaid federal financial participation for drugs

used for the treatment of sexual or erectile dysfunction, unless such drugs were approved by the federal Food and Drug Administration to treat a different condition.

- Eliminates the requirement that the AHCA report quarterly to the Governor, the President of the Senate, and the Speaker of the House of Representatives on the progress made on implementing s. 409.912(5), F.S., relating to Medicaid prescribed drug spending and its effect on expenditures.
- Repeals s. 409.91213, F.S., to eliminate the requirement that the AHCA submit a quarterly progress report and an annual report relating to the 1115 Managed Medical Assistance waiver to the Governor, the President of the Senate, the Speaker of the House of Representatives, the Minority Leader of the Senate, the Minority Leader of the House of Representatives, and the Office of Program Policy Analysis and Government Accountability.
- Creates an exception to the requirement that determinations of medical necessity must be made by a licensed physician employed by or under contract with the AHCA. The exception enables doctoral-level, board-certified behavior analysts to make determinations of medical necessity for behavior analysis services in addition to licensed physicians. The bill also requires a determination of medical necessity to be based on information available at the time the goods or services are requested, rather than when they are provided. This change will bring Florida law into line with federal regulations.
- Repeals s. 765.53, F.S., to dissolve the Organ Transplant Advisory Council.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 118-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/HB 1157 — Freestanding Emergency Departments

by Health and Human Services Committee and Rep Koster and others (CS/SB 1976 by Appropriations Committee and Senator Brodeur)

The bill defines the term “hospital-based off-campus emergency department” (HBOCED) and amends current law to draw a stronger distinction between HBOCEDs and urgent care centers (UCC). The bill restricts an HBOCED from holding itself out as a UCC and requires that a HBOCED clearly identify itself as an emergency department (ED) and post signage in conspicuous areas that specified that the HBOCED is an ED and not a UCC. The bill also includes similar identity transparency requirements for all HBOCED advertising.

The bill requires the Agency for Health Care Administration (AHCA) to publish the following information on its website, which must be updated at least annually:

- A description of the differences between an HBOCED and a UCC;
- At least two examples illustrating the cost differences between non-emergent care provided in a hospital ED setting and a UCC;
- An interactive tool for consumers to locate local urgent care centers; and
- Steps to take in the event of a true emergency.

Hospitals must post a link to the information provided by AHCA on a prominent location on their websites.

The bill also requires a health insurer to post on its website at least two examples illustrating the impact on insured and insurer paid amounts of inappropriate utilization of nonemergent services and care in a hospital ED setting, compared to a UCC and an interactive tool to locate in-network and out-of-network UCCs.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 39-1; House 118-0

THE FLORIDA SENATE
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Committee on Health Policy

CS/HB 1381 — Maternal Health Outcomes

by Professions and Public Health Subcommittee and Rep. Brown and others (CS/SB 1540 by Health Policy Committee and Senator Gibson)

The bill authorizes Closing the Gap grants to be awarded to projects that aim to decrease racial and ethnic disparities in severe maternal morbidity rates and other maternal health outcomes. The bill requires the Department of Health (DOH) to coordinate with existing community-based maternal health programs.

The bill creates telehealth minority maternity care pilot programs in Duval and Orange counties to use telehealth to expand capacity for positive maternal health outcomes in racial and ethnic minority populations. The bill provides detailed requirements for the pilot programs, including specifying services that the programs must provide, or coordinate with prenatal home visiting services to provide to eligible pregnant women. The bill authorizes the DOH to adopt rules to implement the pilot programs.

The bill requires the DOH to use funds appropriated by the Legislature for the Closing the Gap grant program to fund the pilot programs. The bill also requires the DOH's Division of Community Health Promotion and its Office of Minority Health and Health Equity to work together to apply for available federal funds to assist in the implementation of the bill.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 117-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/SB 1770 — Genetic Counseling

by Health Policy Committee and Senator Jones

The bill creates a new licensed and regulated profession, genetic counseling, within the Department of Health (DOH) in ch. 483, Part III, F.S., and authorizes the new practice act to be cited as the “Genetic Counseling Workforce Act.” The bill provides:

- Legislative intent and findings to establish a new profession and definitions for:
 - o Genetic counselor; and
 - o Scope of practice of genetic counseling.
- Requirements for initial licensure, renewal, and continuing education;
- Grounds for disciplinary action and penalties; and
- Exemptions from genetic counseling regulation for:
 - o Commissioned medical officers of the United States Armed Forces or Public Health Service while on active duty; and
 - o Health care practitioners as defined in s. 456.001, F.S., other than genetic counselors, who are practicing within the scope of their education, training, and licensure.

The bill includes a “conscience clause” allowing a genetic counselor to refuse to participate in counseling that conflicts with his or her deeply held moral or religious beliefs. The license of a genetic counselor may not be contingent upon participation in such counseling. A genetic counselor’s refusal to participate in counseling that conflicts with his or her deeply held moral or religious beliefs may also not form the basis for any claim of damages or for any disciplinary action against a genetic counselor, provided:

- The genetic counselor informs the patient that he or she will not participate in such counseling; and
- Offers to direct the patient to the online health care practitioner license verification database maintained by the DOH.

The bill amends s. 456.001, F.S., to include genetic counselors in the definition of a health care practitioner and makes a technical change to s. 20.43, F.S. Genetic Counselors are regulated by the DOH under the department’s general regulatory authority established in s. 20.43, F.S.

The bill appropriates \$41,535 in recurring and \$4,429 in nonrecurring funds from the Medical Quality Assurance Trust Fund for the purpose of implementing the act.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 36-4; House 116-1

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

CS/SB 1934 — Health Care Practitioner Discipline

by Rules Committee and Senators Book and Taddeo

The bill creates s. 456.074(5), F.S., to specify offenses that require the Department of Health (DOH) to issue an Emergency Suspension Order (ESO) against any health care practitioner who is arrested for such offenses. The bill requires the DOH to issue an ESO if a health care practitioner is arrested for committing or attempting, soliciting, or conspiring to commit any one of the listed criminal offenses involving a child, an individual with mental or physical disabilities, or the elderly, or a similar offense in another jurisdiction.

The bill also amends s. 456.072, F.S., to expand the list of offenses that are grounds for disciplinary action against the license of a health care practitioner regulated by the DOH, to include:

- Being convicted, found guilty, pleading guilty, or pleading nolo contendere, regardless of adjudication, to any of the crimes listed in s. 456.074(5), F.S.; or
- Attempting, soliciting, or conspiring to commit an act that would constitute a crime listed in s. 456.074(5), F.S., or similar crime in another jurisdiction.

The bill amends s. 456.074(1), F.S., to add homicide to list of offenses that require the DOH to issue an ESO and broadens the application to any health care practitioner, instead of those currently listed in statute, if he or she pleads guilty to, is convicted or found guilty of, or who pleads nolo contendere regardless of adjudication.

If approved by the Governor, these provisions take effect July 1, 2021.

Vote: Senate 40-0; House 116-0

THE FLORIDA SENATE
2021 SUMMARY OF LEGISLATION PASSED
Committee on Health Policy

HB 7001 — OGSR/Nurse Licensure Compact

by Government Operations Subcommittee and Reps. Garrison and others (SB 7000 by Health Policy Committee)

The bill amends s. 464.0096, F.S., to save from repeal the following public records and meeting exemptions relating to the Nurse License Compact (NLC):

- The personal identifying information of a registered nurse or licensed practical nurse who holds a multistate license under the NLC, other than the nurse's name, licensure status, or license number, which is held by the Department of Health or the Board of Nursing and was received from the NLC's Coordinated Licensure Information System;
- The recordings, minutes, and records generated during an exempt meeting of the Interstate Commission of Nurse Licensure Compact Administrators (Commission); and
- A public meeting, or portion of a meeting, of the Commission at which matters specifically exempt from disclosure under the State Constitution, or under federal or state statute, are discussed.

The public record and meeting exemptions in s. 464.0096, F.S., stand repealed on October 2, 2021, unless reviewed and reenacted by the Legislature. This bill removes the scheduled repeal of these exemptions.

If approved by the Governor, these provisions take effect October 1, 2021.

Vote: Senate 39-0; House 115-0