Bill No. CS/CS/HB 591, 2nd Eng.

	Bill No. CS/CS/HB 591, 2nd Eng.
	Amendment No
Ī	CHAMBER ACTION Senate . House
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11	Senator Silver moved the following amendment to amendment
12	(850612):
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14	Senate Amendment (with title amendment)
15	On page 140, between lines 14 and 15,
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17	insert:
18	Section 82. Sections 468.821 through 468.829, Florida
19	Statutes, are renumbered as sections 464.201 through 464.209,
20	respectively, designated as part II of chapter 464, Florida
21	Statutes, and amended to read:
22	$\frac{464.201}{468.821}$ DefinitionsAs used in this part,
23	the term:
24	(1) "Approved training program" means:
25	(a) A course of training conducted by a public sector
26	or private sector educational center licensed by the
27	Department of Education to implement the basic curriculum for
28	nursing assistants which is approved by the Department of
29	Education. Beginning October 1, 2000, the board shall assume
30	responsibility for approval of training programs under this
31	paragraph.
	6:24 PM 05/04/00 1 h0591c2c-3817t

(b) A training program operated under s. 400.141. 1 (2) "Board" means the Board of Nursing. 2 3 (3) "Certified nursing assistant" means a person 4 who meets the qualifications specified in this part and who is 5 certified by the board department as a certified nursing 6 assistant. 7 (4) "Department" means the Department of Health. (5) (4) "Registry" means the listing of certified 8 9 nursing assistants maintained by the board department. 10 464.202 468.822 Duties and powers of the board 11 department. -- The board department shall maintain, or contract 12 with or approve another entity to maintain, a state registry 13 of certified nursing assistants. The registry must consist of 14 the name of each certified nursing assistant in this state; other identifying information defined by board department 15 rule; certification status; the effective date of 16 certification; other information required by state or federal 17 law; information regarding any crime or any abuse, neglect, or 18 exploitation as provided under chapter 435; and any 19 disciplinary action taken against the certified nursing 20 21 assistant. The registry shall be accessible to the public, the certificateholder, employers, and other state agencies. The 22 board department shall adopt by rule testing procedures for 23 24 use in certifying nursing assistants and shall adopt rules regulating the practice of certified nursing assistants to 25 26 enforce this part. The board department may contract with or 27 approve another entity or organization to provide the 28 examination services, including the development and administration of examinations. The board shall require that 29

applications via the Internet, and may require the contract

the contract provider offer certified nursing assistant

provider to accept certified nursing assistant applications for processing via the Internet. The board shall require the contract provider to provide the preliminary results of the certified nursing examination on the date the test is administered. The provider shall pay all reasonable costs and expenses incurred by the board department in evaluating the provider's application and performance during the delivery of services, including examination services and procedures for maintaining the certified nursing assistant registry.

464.203 468.823 Certified nursing assistants; certification requirement.--

- (1) The <u>board</u> department shall issue a certificate to practice as a certified nursing assistant to any person who demonstrates a minimum competency to read and write and <u>successfully passes the required Level I or Level II screening pursuant to s. 400.215 and meets one of the following requirements:</u>
- (a) Has successfully completed an approved training program and achieved a minimum score, established by rule of the <u>board</u> <u>department</u>, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion approved by the <u>board</u> <u>department</u> and administered at a site and by personnel approved by the department.
- (b) Has achieved a minimum score, established by rule of the <u>board</u> <u>department</u>, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion, approved by the <u>board</u> <u>department</u> and administered at a site and by personnel approved by the department and:
 - 1. Has a high school diploma, or its equivalent; or

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- Is at least 18 years of age.
- (c) Is currently certified in another state; is listed on that state's certified nursing assistant registry; and has not been found to have committed abuse, neglect, or exploitation in that state; and has successfully completed a national nursing assistant evaluation in order to receive certification in that state.
- (d) Has completed the curriculum developed under the Enterprise Florida Jobs and Education Partnership Grant and achieved a minimum score, established by rule of the board, on the nursing assistant competency examination, which consists of a written portion and skills-demonstration portion, approved by the board and administered at a site and by personnel approved by the department.
- If an applicant fails to pass the nursing assistant competency examination in three attempts, the applicant is not eligible for reexamination unless the applicant completes an approved training program.
- (3) An oral examination shall be administered as a substitute for the written portion of the examination upon request. The oral examination shall be administered at a site and by personnel approved by the department.
- (4) The board department shall adopt rules to provide for the initial certification of certified nursing assistants.
- (5) A certified nursing assistant shall maintain a current address with the board department in accordance with s. 455.717.
- 464.204 468.824 Denial, suspension, or revocation of certification; disciplinary actions. --
- (1) The following acts constitute grounds for which 31 the board department may impose disciplinary sanctions as

specified in subsection (2):

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(a) Obtaining or attempting to obtain certification or an exemption, or possessing or attempting to possess certification or a letter of exemption, by bribery, misrepresentation, deceit, or through an error of the board department.

- (b) Intentionally violating any provision of this chapter, chapter 455, or the rules adopted by the board department.
- (2) When the board department finds any person guilty of any of the grounds set forth in subsection (1), it may enter an order imposing one or more of the following penalties:
- (a) Denial, suspension, or revocation of certification.
- (b) Imposition of an administrative fine not to exceed \$150 for each count or separate offense.
- (c) Imposition of probation or restriction of certification, including conditions such as corrective actions as retraining or compliance with an approved treatment program for impaired practitioners.
- The board department may, upon the request of a certificateholder, exempt the certificateholder from disqualification of certification or disqualification of employment in accordance with chapter 435 and issue a letter of exemption. After January 1, 2000, The board department must notify an applicant seeking an exemption from disqualification from certification or employment of its decision to approve or deny the request within 30 days after the date the board department receives all required documentation.

464.205 468.825 Availability of disciplinary records

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29 30 and proceedings. -- Pursuant to s. 455.621, any complaint or record maintained by the department of Health pursuant to the discipline of a certified nursing assistant and any proceeding held by the board department to discipline a certified nursing assistant shall remain open and available to the public.

464.206 468.826 Exemption from liability.--If an employer terminates or denies employment to a certified nursing assistant whose certification is inactive as shown on the certified nursing assistant registry or whose name appears on the central abuse registry and tracking system of the Department of Children and Family Services or on a criminal screening report of the Department of Law Enforcement, the employer is not civilly liable for such termination and a cause of action may not be brought against the employer for damages, regardless of whether the employee has filed for an exemption from the board department under s. 464.204(3) 468.824(1). There may not be any monetary liability on the part of, and a cause of action for damages may not arise against, any licensed facility, its governing board or members thereof, medical staff, disciplinary board, agents, investigators, witnesses, employees, or any other person for any action taken in good faith without intentional fraud in carrying out this section.

464.207 468.827 Penalties.--It is a misdemeanor of the first degree, punishable as provided under s. 775.082 or s. 775.083, for any person, knowingly or intentionally, to fail to disclose, by false statement, misrepresentation, impersonation, or other fraudulent means, in any application for voluntary or paid employment or certification licensure regulated under this part, a material fact used in making a 31 determination as to such person's qualifications to be an

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employee or certificateholder licensee.

464.208 468.828 Background screening information; rulemaking authority.--

- (1) The Agency for Health Care Administration shall allow the board department to electronically access its background screening database and records, and the Department of Children and Family Services shall allow the board department to electronically access its central abuse registry and tracking system under chapter 415.
- (2) An employer, or an agent thereof, may not use criminal records, juvenile records, or information obtained from the central abuse hotline under chapter 415 relating to vulnerable adults for any purpose other than determining if the person meets the requirements of this part. Such records and information obtained by the board department shall remain confidential and exempt from s. 119.07(1).
- (3) If the requirements of the Omnibus Budget Reconciliation Act of 1987, as amended, for the certification of nursing assistants are in conflict with this part, the federal requirements shall prevail for those facilities certified to provide care under Title XVIII (Medicare) or Title XIX (Medicaid) of the Social Security Act.
- (4) The board department shall adopt rules to administer this part.
- 464.209 468.829 Certified nursing assistant registry.--
- (1) By October 1, 1999, and by October 1 of every year thereafter, each employer of certified nursing assistants shall submit to the board Department of Health a list of the names and social security numbers of each person employed by 31 | the employer as a certified nursing assistant in a

nursing-related occupation for a minimum of 8 hours for
monetary compensation during the preceding 24 months.
Employers may submit such information electronically through
the department's Internet site.

- (2) The <u>board</u> <u>department</u> shall update the certified nursing assistant registry upon receipt of the lists of certified nursing assistants, and shall complete the first of such updates by <u>December 31, 1999</u>.
- (3) Each certified nursing assistant whose name is not reported to the <u>board</u> department under subsection (1) on October 1, 1999, shall be assigned an inactive certification on January 1, 2000. A certified nursing assistant may remove such an inactive certification by submitting documentation to the <u>board</u> department that he or she was employed for a minimum of 8 hours for monetary compensation as a certified nursing assistant in a nursing-related occupation during the preceding 24 months.
- (4) This section is repealed October 2, 2001.

 Section 83. Section 464.2085, Florida Statutes, is created to read:
- 464.2085 Council on Certified Nursing Assistants.--The Council on Certified Nursing Assistants is created within the department, under the Board of Nursing.
- (1) The council shall consist of five members appointed as follows:
- (a) The chairperson of the Board of Nursing shall appoint two members who are registered nurses. One of the members must currently supervise a certified nursing assistant in a licensed nursing home.
- (b) The chairperson of the Board of Nursing shall appoint one member who is a licensed practical nurse who is

currently working in a licensed nursing home. 1 2 (c) The secretary of the department or his or her designee shall appoint two certified nursing assistants 3 4 currently certified under this chapter, at least one of whom 5 is currently working in a licensed nursing home. 6 (2) The council shall: 7 (a) Recommend to the department policies and procedures for the certification of nursing assistants. 8 (b) Develop all rules regulating the education, 9 10 training, and certification process for nursing assistants certified under this chapter. The Board of Nursing shall 11 12 consider adopting a proposed rule developed by the council at 13 the regularly scheduled meeting immediately following the submission of the proposed rule by the council. 14 15 (c) Make recommendations to the board regarding all 16 matters relating to the certification of nursing assistants. 17 (d) Address concerns and problems of certified nursing 18 assistants in order to improve safety in the practice of certified nursing assistants. 19 Section 84. Paragraph (g) of subsection (3) of section 20 21 20.43, Florida Statutes, is amended to read: 20.43 Department of Health.--There is created a 22 23 Department of Health. 24 (3) The following divisions of the Department of Health are established: 25 26 (g) Division of Medical Quality Assurance, which is 27 responsible for the following boards and professions 28 established within the division: 29 1. Nursing assistants, as provided under s. 400.211. 30 1.2. Health care services pools, as provided under s.

31 402.48.

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1 2.3. The Board of Acupuncture, created under chapter 2 457. 3 3.4. The Board of Medicine, created under chapter 458. 4 4.5. The Board of Osteopathic Medicine, created under 5 chapter 459. 6 5.6. The Board of Chiropractic Medicine, created under 7 chapter 460. 8 6.7. The Board of Podiatric Medicine, created under 9 chapter 461. 10 7.8. Naturopathy, as provided under chapter 462. 11 8.9. The Board of Optometry, created under chapter 12 463. 13 9.10. The Board of Nursing, created under part I of 14 chapter 464. 15 10. Nursing assistants, as provided under part II of 16 chapter 464. 17 11. The Board of Pharmacy, created under chapter 465. 12. The Board of Dentistry, created under chapter 466. 18 13. Midwifery, as provided under chapter 467. 19 20 The Board of Speech-Language Pathology and 21 Audiology, created under part I of chapter 468. The Board of Nursing Home Administrators, created 22 23 under part II of chapter 468. 24 The Board of Occupational Therapy, created under 25 part III of chapter 468. 26 17. Respiratory therapy, as provided under part V of 27 chapter 468. 18. Dietetics and nutrition practice, as provided 28 29 under part X of chapter 468. 30 19. The Board of Athletic Training, created under part

31 XIII of chapter 468.

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- 20. The Board of Orthotists and Prosthetists, created under part XIV of chapter 468.
 - 21. Electrolysis, as provided under chapter 478.
- 22. The Board of Massage Therapy, created under chapter 480.
- 23. The Board of Clinical Laboratory Personnel, created under part III of chapter 483.
- 24. Medical physicists, as provided under part IV of chapter 483.
- 25. The Board of Opticianry, created under part I of chapter 484.
- 26. The Board of Hearing Aid Specialists, created under part II of chapter 484.
 - 27. The Board of Physical Therapy Practice, created under chapter 486.
 - 28. The Board of Psychology, created under chapter 490.
- 29. School psychologists, as provided under chapter 19 490.
 - 30. The Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling, created under chapter 491.

- The department may contract with the Agency for Health Care
 Administration who shall provide consumer complaint,
- investigative, and prosecutorial services required by the
 Division of Medical Quality Assurance, councils, or boards, as
 appropriate.
- 29 Section 85. Subsection (38) of section 39.01, Florida 30 Statutes, is amended to read:
- 39.01 Definitions.--When used in this chapter, unless

the context otherwise requires:

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(38) "Licensed health care professional" means a physician licensed under chapter 458, an osteopathic physician licensed under chapter 459, a nurse licensed under part I of chapter 464, a physician assistant licensed under chapter 458 or chapter 459, or a dentist licensed under chapter 466.

Section 86. Paragraph (b) of subsection (1) of section 39.304, Florida Statutes, is amended to read:

39.304 Photographs, medical examinations, X rays, and medical treatment of abused, abandoned, or neglected child.-(1)

(b) If the areas of trauma visible on a child indicate a need for a medical examination, or if the child verbally complains or otherwise exhibits distress as a result of injury through suspected child abuse, abandonment, or neglect, or is alleged to have been sexually abused, the person required to investigate may cause the child to be referred for diagnosis to a licensed physician or an emergency department in a hospital without the consent of the child's parents or legal custodian. Such examination may be performed by any licensed physician or an advanced registered nurse practitioner licensed pursuant to part I of chapter 464. Any licensed physician, or advanced registered nurse practitioner licensed pursuant to part I of chapter 464, who has reasonable cause to suspect that an injury was the result of child abuse, abandonment, or neglect may authorize a radiological examination to be performed on the child without the consent of the child's parent or legal custodian.

Section 87. Paragraph (c) of subsection (6) of section 110.131, Florida Statutes, is amended to read:

110.131 Other-personal-services temporary

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employment.--

(6)

(c) Notwithstanding the provisions of this section, the agency head or his or her designee may extend the other-personal-services employment of a health care practitioner licensed pursuant to chapter 458, chapter 459, chapter 460, chapter 461, chapter 463, part I of chapter 464, chapter 466, chapter 468, chapter 483, chapter 486, or chapter 490 beyond 2,080 hours and may employ such practitioner on an hourly or other basis.

Section 88. Subsection (1) of section 232.46, Florida Statutes, is amended to read:

232.46 Administration of medication by school district personnel.--

- (1) Notwithstanding the provisions of the Nurse Practice Act, <u>part I of</u> chapter 464, school district personnel shall be authorized to assist students in the administration of prescription medication when the following conditions have been met:
- (a) Each district school board shall include in its approved school health services plan a procedure to provide training, by a registered nurse, a licensed practical nurse, a physician licensed pursuant to chapter 458 or chapter 459, or a physician assistant licensed pursuant to chapter 458 or chapter 459, to the school personnel designated by the principal to assist students in the administration of prescribed medication. Such training may be provided in collaboration with other school districts, through contract with an education consortium, or by any other arrangement consistent with the intent of this section.
 - (b) Each district school board shall adopt policies

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29 30 and procedures governing the administration of prescription medication by school district personnel. The policies and procedures shall include, but not be limited to, the following provisions:

- 1. For each prescribed medication, the student's parent or guardian shall provide to the school principal a written statement which shall grant to the principal or the principal's designee permission to assist in the administration of such medication and which shall explain the necessity for such medication to be provided during the school day, including any occasion when the student is away from school property on official school business. The school principal or the principal's trained designee shall assist the student in the administration of such medication.
- Each prescribed medication to be administered by school district personnel shall be received, counted, and stored in its original container. When the medication is not in use, it shall be stored in its original container in a secure fashion under lock and key in a location designated by the principal.

Section 89. Subsection (6) of section 240.4075, Florida Statutes, is amended to read:

240.4075 Nursing Student Loan Forgiveness Program. --

In addition to licensing fees imposed under part I of chapter 464, there is hereby levied and imposed an additional fee of \$5, which fee shall be paid upon licensure or renewal of nursing licensure. Revenues collected from the fee imposed in this subsection shall be deposited in the Nursing Student Loan Forgiveness Trust Fund of the Department of Education and will be used solely for the purpose of 31 carrying out the provisions of this section and s. 240.4076.

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29 30 Up to 50 percent of the revenues appropriated to implement this subsection may be used for the nursing scholarship program established pursuant to s. 240.4076.

Section 90. Paragraph (b) of subsection (1) of section 246.081, Florida Statutes, is amended to read:

246.081 License, certificate of exemption, or authorization required; exceptions. --

- (1) The following colleges are not under the jurisdiction of the board and are not required to obtain a license, a certificate of exemption, permission to operate, or an authorization from the board:
- (b) Any college, school, or course licensed or approved for establishment and operation under part I of chapter 464, chapter 466, or chapter 475, or any other chapter of the Florida Statutes, requiring licensing or approval as defined in ss. 246.011-246.151.

Section 91. Subsection (2) of section 310.102, Florida Statutes, is amended to read:

310.102 Treatment programs for impaired pilots and deputy pilots. --

(2) The department shall retain one or more impaired practitioner consultants as recommended by the committee. A consultant shall be a licensee under the jurisdiction of the Division of Medical Quality Assurance within the Department of Health, and at least one consultant must be a practitioner licensed under chapter 458, chapter 459, or part I of chapter 464. The consultant shall assist the probable cause panel and department in carrying out the responsibilities of this section. This shall include working with department investigators to determine whether a pilot or deputy pilot is, 31 in fact, impaired.

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Section 92. Subsection (7) of section 381.0302, Florida Statutes, is amended to read:

381.0302 Florida Health Services Corps.--

(7) The financial penalty for noncompliance with participation requirements for persons who have received financial payments under subsection (5) or subsection (6) shall be determined in the same manner as in the National Health Services Corps scholarship program. In addition, noncompliance with participation requirements shall also result in ineligibility for professional licensure or renewal of licensure under chapter 458, chapter 459, chapter 460, part I of chapter 464, chapter 465, or chapter 466. For a participant who is unable to participate for reasons of disability, the penalty is the actual amount of financial assistance provided to the participant. Financial penalties shall be deposited in the Florida Health Services Corps Trust Fund and shall be used to provide additional scholarship and financial assistance.

Section 93. Subsection (1) of section 384.30, Florida Statutes, is amended to read:

384.30 Minors' consent to treatment.--

(1) The department and its authorized representatives, each physician licensed to practice medicine under the provisions of chapter 458 or chapter 459, each health care professional licensed under the provisions of part I of chapter 464 who is acting pursuant to the scope of his or her license, and each public or private hospital, clinic, or other health facility may examine and provide treatment for sexually transmissible diseases to any minor, if the physician, health care professional, or facility is qualified to provide such 31 | treatment. The consent of the parents or guardians of a minor

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29 30 is not a prerequisite for an examination or treatment. Section 94. Section 384.31, Florida Statutes, is amended to read:

384.31 Serological testing of pregnant women; duty of the attendant.--

- (1) Every person, including every physician licensed under chapter 458 or chapter 459 or midwife licensed under part I of chapter 464 or chapter 467, attending a pregnant woman for conditions relating to pregnancy during the period of gestation and delivery shall take or cause to be taken a sample of venous blood at a time or times specified by the department. Each sample of blood shall be tested by a laboratory approved for such purposes under part I of chapter 483 for sexually transmissible diseases as required by rule of the department.
- (2) At the time the venous blood sample is taken, testing for human immunodeficiency virus (HIV) infection shall be offered to each pregnant woman. The prevailing professional standard of care in this state requires each health care provider and midwife who attends a pregnant woman to counsel the woman to be tested for human immunodeficiency virus (HIV). Counseling shall include a discussion of the availability of treatment if the pregnant woman tests HIV positive. If a pregnant woman objects to HIV testing, reasonable steps shall be taken to obtain a written statement of such objection, signed by the patient, which shall be placed in the patient's medical record. Every person, including every physician licensed under chapter 458 or chapter 459 or midwife licensed under part I of chapter 464 or chapter 467, who attends a pregnant woman who has been offered and objects to HIV testing 31 | shall be immune from liability arising out of or related to

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29 30 the contracting of HIV infection or acquired immune deficiency syndrome (AIDS) by the child from the mother.

Section 95. Subsection (23) of section 394.455, Florida Statutes, is amended to read:

394.455 Definitions.--As used in this part, unless the context clearly requires otherwise, the term:

(23) "Psychiatric nurse" means a registered nurse licensed under part I of chapter 464 who has a master's degree or a doctorate in psychiatric nursing and 2 years of post-master's clinical experience under the supervision of a physician.

Section 96. Paragraphs (a) and (b) of subsection (2) and subsection (4) of section 395.0191, Florida Statutes, are amended to read:

395.0191 Staff membership and clinical privileges.--

- (2)(a) Each licensed facility shall establish rules and procedures for consideration of an application for clinical privileges submitted by an advanced registered nurse practitioner licensed and certified under part I of chapter 464, in accordance with the provisions of this section. No licensed facility shall deny such application solely because the applicant is licensed under part I of chapter 464 or because the applicant is not a participant in the Florida Birth-Related Neurological Injury Compensation Plan.
- (b) An advanced registered nurse practitioner who is certified as a registered nurse anesthetist licensed under part I of chapter 464 shall administer anesthesia under the onsite medical direction of a professional licensed under chapter 458, chapter 459, or chapter 466, and in accordance with an established protocol approved by the medical staff. 31 | The medical direction shall specifically address the needs of

the individual patient.

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(4) Nothing herein shall restrict in any way the authority of the medical staff of a licensed facility to review for approval or disapproval all applications for appointment and reappointment to all categories of staff and to make recommendations on each applicant to the governing board, including the delineation of privileges to be granted in each case. In making such recommendations and in the delineation of privileges, each applicant shall be considered individually pursuant to criteria for a doctor licensed under chapter 458, chapter 459, chapter 461, or chapter 466, or for an advanced registered nurse practitioner licensed and certified under part I of chapter 464, or for a psychologist licensed under chapter 490, as applicable. The applicant's eligibility for staff membership or clinical privileges shall be determined by the applicant's background, experience, health, training, and demonstrated competency; the applicant's adherence to applicable professional ethics; the applicant's reputation; and the applicant's ability to work with others and by such other elements as determined by the governing board, consistent with this part.

Section 97. Subsection (11) of section 400.021, Florida Statutes, is amended to read:

400.021 Definitions.--When used in this part, unless the context otherwise requires, the term:

(11) "Nursing home facility" means any facility which provides nursing services as defined in part I of chapter 464 and which is licensed according to this part.

Section 98. Section 400.211, Florida Statutes, is amended to read:

400.211 Persons employed as nursing assistants;

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certification requirement. --

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To serve as a nursing assistant in any nursing home, a person must be certified as a nursing assistant under part II XV of chapter 464 468, unless the person is except a registered nurse or practical nurse licensed in accordance with part I of chapter 464 or an applicant for such licensure who is permitted to practice nursing in accordance with rules adopted by the Board of Nursing pursuant to part I of chapter 464, to serve as a nursing assistant in any nursing home.

- (2) The following categories of persons who are not certified as nursing assistants under this part II of chapter 464 may be employed by a nursing facility for a period of 4 months:
- (a) Persons who are enrolled in, or have completed, a state-approved nursing assistant program; or
- (b) Persons who have been positively verified by a state approved test site as actively certified and on the registry in another state with no findings of abuse, but who have not completed the written examination required under this section.; or
- (c) Persons who have preliminarily passed the state's certification exam.

The certification requirement must be met within 4 months after of initial employment as a nursing assistant in a licensed nursing facility.

(3) Nursing homes shall require persons seeking employment as a certified nursing assistant to submit an employment history to the facility. The facility shall verify the employment history unless, through diligent efforts, such 31 verification is not possible. There shall be no monetary

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liability on the part of, and no cause of action for damages shall arise against, a former employer who reasonably and in good faith communicates his or her honest opinion about a former employee's job performance.

Section 99. Paragraph (b) of subsection (4) of section 400.215, Florida Statutes, is amended to read:

400.215 Personnel screening requirement.--

(4)

regulatory board within the Department of Health, or that department itself when there is no board, may grant an exemption from disqualification to an employee or prospective employee who is subject to this section and who has received a professional license or certification from the Department of Health or a regulatory board within that department.

Section 100. Paragraph (c) is added to subsection (3) of section 400.23, Florida Statutes, to read:

400.23 Rules; evaluation and deficiencies; licensure status.--

(3)

(c) Licensed practical nurses licensed under chapter

464 who are providing nursing services in nursing home

facilities under this part may supervise the activities of

other licensed practical nurses, certified nursing assistants,

and other unlicensed personnel providing services in such

facilities in accordance with rules adopted by the Board of

Nursing.

Section 101. Subsections (12) and (14) of section 400.402, Florida Statutes, are amended to read:

400.402 Definitions.--When used in this part, the term:

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- (12) "Extended congregate care" means acts beyond those authorized in subsection (17) that may be performed pursuant to part I of chapter 464 by persons licensed thereunder while carrying out their professional duties, and other supportive services which may be specified by rule. purpose of such services is to enable residents to age in place in a residential environment despite mental or physical limitations that might otherwise disqualify them from residency in a facility licensed under this part.
- (14) "Limited nursing services" means acts that may be performed pursuant to part I of chapter 464 by persons licensed thereunder while carrying out their professional duties but limited to those acts which the department specifies by rule. Acts which may be specified by rule as allowable limited nursing services shall be for persons who meet the admission criteria established by the department for assisted living facilities and shall not be complex enough to require 24-hour nursing supervision and may include such services as the application and care of routine dressings, and care of casts, braces, and splints.

Section 102. Paragraphs (a) and (b) of subsection (3) of section 400.407, Florida Statutes, are amended to read: 400.407 License required; fee, display.--

(3) Any license granted by the agency must state the maximum resident capacity of the facility, the type of care for which the license is granted, the date the license is issued, the expiration date of the license, and any other information deemed necessary by the agency. Licenses shall be issued for one or more of the following categories of care: standard, extended congregate care, limited nursing services, 31 or limited mental health.

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- (a) A standard license shall be issued to facilities providing one or more of the services identified in s. 400.402. Such facilities may also employ or contract with a person licensed under <u>part I of</u> chapter 464 to administer medications and perform other tasks as specified in s. 400.4255.
- (b) An extended congregate care license shall be issued to facilities providing, directly or through contract, services beyond those authorized in paragraph (a), including acts performed pursuant to part I of chapter 464 by persons licensed thereunder, and supportive services defined by rule to persons who otherwise would be disqualified from continued residence in a facility licensed under this part.
- In order for extended congregate care services to be provided in a facility licensed under this part, the agency must first determine that all requirements established in law and rule are met and must specifically designate, on the facility's license, that such services may be provided and whether the designation applies to all or part of a facility. Such designation may be made at the time of initial licensure or biennial relicensure, or upon request in writing by a licensee under this part. Notification of approval or denial of such request shall be made within 90 days after receipt of such request and all necessary documentation. Existing facilities qualifying to provide extended congregate care services must have maintained a standard license and may not have been subject to administrative sanctions during the previous 2 years, or since initial licensure if the facility has been licensed for less than 2 years, for any of the following reasons:
 - a. A class I or class II violation;

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- Three or more repeat or recurring class III violations of identical or similar resident care standards as specified in rule from which a pattern of noncompliance is found by the agency;
- Three or more class III violations that were not corrected in accordance with the corrective action plan approved by the agency;
- d. Violation of resident care standards resulting in a requirement to employ the services of a consultant pharmacist or consultant dietitian;
- Denial, suspension, or revocation of a license for another facility under this part in which the applicant for an extended congregate care license has at least 25 percent ownership interest; or
- Imposition of a moratorium on admissions or initiation of injunctive proceedings.
- Facilities that are licensed to provide extended congregate care services shall maintain a written progress report on each person who receives such services, which report describes the type, amount, duration, scope, and outcome of services that are rendered and the general status of the resident's health. A registered nurse, or appropriate designee, representing the agency shall visit such facilities at least two times a year to monitor residents who are receiving extended congregate care services and to determine if the facility is in compliance with this part and with rules that relate to extended congregate care. One of these visits may be in conjunction with the regular biennial survey. monitoring visits may be provided through contractual arrangements with appropriate community agencies. A 31 | registered nurse shall serve as part of the team that

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biennially inspects such facility. The agency may waive one of the required yearly monitoring visits for a facility that has been licensed for at least 24 months to provide extended congregate care services, if, during the biennial inspection, the registered nurse determines that extended congregate care services are being provided appropriately, and if the facility has no class I or class II violations and no uncorrected class III violations. Before such decision is made, the agency shall consult with the long-term care ombudsman council for the area in which the facility is located to determine if any complaints have been made and substantiated about the quality of services or care. The agency may not waive one of the required yearly monitoring visits if complaints have been made and substantiated.

- 3. Facilities that are licensed to provide extended congregate care services shall:
- a. Demonstrate the capability to meet unanticipated resident service needs.
- b. Offer a physical environment that promotes a homelike setting, provides for resident privacy, promotes resident independence, and allows sufficient congregate space as defined by rule.
- c. Have sufficient staff available, taking into account the physical plant and firesafety features of the building, to assist with the evacuation of residents in an emergency, as necessary.
- Adopt and follow policies and procedures that maximize resident independence, dignity, choice, and decisionmaking to permit residents to age in place to the extent possible, so that moves due to changes in functional 31 status are minimized or avoided.

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- Allow residents or, if applicable, a resident's representative, designee, surrogate, guardian, or attorney in fact to make a variety of personal choices, participate in developing service plans, and share responsibility in decisionmaking.
 - f. Implement the concept of managed risk.
- Provide, either directly or through contract, the services of a person licensed pursuant to part I of chapter 464.
- In addition to the training mandated in s. 400.452, provide specialized training as defined by rule for facility staff.
- Facilities licensed to provide extended congregate care services are exempt from the criteria for continued residency as set forth in rules adopted under s. 400.441. Facilities so licensed shall adopt their own requirements within guidelines for continued residency set forth by the department in rule. However, such facilities may not serve residents who require 24-hour nursing supervision. Facilities licensed to provide extended congregate care services shall provide each resident with a written copy of facility policies governing admission and retention.
- The primary purpose of extended congregate care services is to allow residents, as they become more impaired, the option of remaining in a familiar setting from which they would otherwise be disqualified for continued residency. A facility licensed to provide extended congregate care services may also admit an individual who exceeds the admission criteria for a facility with a standard license, if the individual is determined appropriate for admission to the 31 | extended congregate care facility.

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- Before admission of an individual to a facility licensed to provide extended congregate care services, the individual must undergo a medical examination as provided in s. 400.426(4) and the facility must develop a preliminary service plan for the individual.
- 7. When a facility can no longer provide or arrange for services in accordance with the resident's service plan and needs and the facility's policy, the facility shall make arrangements for relocating the person in accordance with s. 400.428(1)(k).
- 8. Failure to provide extended congregate care services may result in denial of extended congregate care license renewal.
- 9. No later than January 1 of each year, the department, in consultation with the agency, shall prepare and submit to the Governor, the President of the Senate, the Speaker of the House of Representatives, and the chairs of appropriate legislative committees, a report on the status of, and recommendations related to, extended congregate care services. The status report must include, but need not be limited to, the following information:
- a. A description of the facilities licensed to provide such services, including total number of beds licensed under this part.
- The number and characteristics of residents b. receiving such services.
- The types of services rendered that could not be provided through a standard license.
- d. An analysis of deficiencies cited during biennial inspections.
 - The number of residents who required extended

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29 30 congregate care services at admission and the source of admission.

- f. Recommendations for statutory or regulatory changes.
- The availability of extended congregate care to state clients residing in facilities licensed under this part and in need of additional services, and recommendations for appropriations to subsidize extended congregate care services for such persons.
- h. Such other information as the department considers appropriate.

Section 103. Paragraphs (a) and (c) of subsection (1) and subsection (2) of section 400.4255, Florida Statutes, are amended to read:

400.4255 Use of personnel; emergency care.--

(1)(a) Persons under contract to the facility, facility staff, or volunteers, who are licensed according to part I of chapter 464, or those persons exempt under s. 464.022(1), and others as defined by rule, may administer medications to residents, take residents' vital signs, manage individual weekly pill organizers for residents who self-administer medication, give prepackaged enemas ordered by a physician, observe residents, document observations on the appropriate resident's record, report observations to the resident's physician, and contract or allow residents or a resident's representative, designee, surrogate, guardian, or attorney in fact to contract with a third party, provided residents meet the criteria for appropriate placement as defined in s. 400.426. Nursing assistants certified pursuant to part II of chapter 464 s. 400.211 may take residents' vital 31 | signs as directed by a licensed nurse or physician.

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- (c) In an emergency situation, licensed personnel may carry out their professional duties pursuant to part I of chapter 464 until emergency medical personnel assume responsibility for care.
- (2) In facilities licensed to provide extended congregate care, persons under contract to the facility, facility staff, or volunteers, who are licensed according to part I of chapter 464, or those persons exempt under s. 464.022(1), or those persons certified as nursing assistants pursuant to part II of chapter 464 s. 400.211, may also perform all duties within the scope of their license or certification, as approved by the facility administrator and pursuant to this part.

Section 104. Subsection (3) of section 400.426, Florida Statutes, is amended to read:

400.426 Appropriateness of placements; examinations of residents.--

(3) Persons licensed under part I of chapter 464 who are employed by or under contract with a facility shall, on a routine basis or at least monthly, perform a nursing assessment of the residents for whom they are providing nursing services ordered by a physician, except administration of medication, and shall document such assessment, including any substantial changes in a resident's status which may necessitate relocation to a nursing home, hospital, or specialized health care facility. Such records shall be maintained in the facility for inspection by the agency and shall be forwarded to the resident's case manager, if applicable.

Section 105. Subsections (3) and (21) of section 31 400.462, Florida Statutes, are amended to read:

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400.462 Definitions.--As used in this part, the term: (3) "Certified nursing assistant" means any person who has been issued a certificate under part II of chapter 464 s.400.211. The licensed home health agency or licensed nurse registry shall ensure that the certified nursing assistant employed by or under contract with the home health agency or licensed nurse registry is adequately trained to perform the tasks of a home health aide in the home setting.

(21) "Skilled care" means nursing services or therapeutic services delivered by a health care professional who is licensed under part I of chapter 464; part I, part III, or part V of chapter 468; or chapter 486 and who is employed by or under contract with a licensed home health agency or is referred by a licensed nurse registry.

Section 106. Paragraph (c) of subsection (6) of section 400.464, Florida Statutes, is amended to read:

400.464 Home health agencies to be licensed; expiration of license; exemptions; unlawful acts; penalties .--

- (6) The following are exempt from the licensure requirements of this part:
- (c) A health care professional, whether or not incorporated, who is licensed under chapter 457; chapter 458; chapter 459; part I of chapter 464; chapter 467; part I, part III, part V, or part X of chapter 468; chapter 480; chapter 486; chapter 490; or chapter 491; and who is acting alone within the scope of his or her professional license to provide care to patients in their homes.

Section 107. Paragraph (a) of subsection (10), subsection (11), and paragraph (a) of subsection (15) of section 400.506, Florida Statutes, are amended to read:

400.506 Licensure of nurse registries; requirements;

penalties .--

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(10)(a) A nurse registry may refer for contract in private residences registered nurses and licensed practical nurses registered and licensed under part I of chapter 464, certified nursing assistants certified under part II of chapter 464 s. 400.211, home health aides who present documented proof of successful completion of the training required by rule of the agency, and companions or homemakers for the purposes of providing those services authorized under s. 400.509(1). Each person referred by a nurse registry must provide current documentation that he or she is free from communicable diseases.

- (11) A person who is referred by a nurse registry for contract in private residences and who is not a nurse licensed under part I of chapter 464 may perform only those services or care to clients that the person has been certified to perform or trained to perform as required by law or rules of the Agency for Health Care Administration or the Department of Business and Professional Regulation. Providing services beyond the scope authorized under this subsection constitutes the unauthorized practice of medicine or a violation of the Nurse Practice Act and is punishable as provided under chapter 458, chapter 459, or part I of chapter 464.
- (15) All persons referred for contract in private residences by a nurse registry must comply with the following requirements for a plan of treatment:
- (a) When, in accordance with the privileges and restrictions imposed upon a nurse under part I of chapter 464, the delivery of care to a patient is under the direction or supervision of a physician or when a physician is responsible 31 | for the medical care of the patient, a medical plan of

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treatment must be established for each patient receiving care or treatment provided by a licensed nurse in the home. The original medical plan of treatment must be timely signed by the physician and reviewed by him or her in consultation with the licensed nurse at least every 2 months. Any additional order or change in orders must be obtained from the physician and reduced to writing and timely signed by the physician. The delivery of care under a medical plan of treatment must be substantiated by the appropriate nursing notes or documentation made by the nurse in compliance with nursing practices established under part I of chapter 464.

Section 108. Subsection (1) of section 400.512, Florida Statutes, is amended to read:

400.512 Screening of home health agency personnel; nurse registry personnel; and companions and homemakers.—The agency shall require employment or contractor screening as provided in chapter 435, using the level 1 standards for screening set forth in that chapter, for home health agency personnel; persons referred for employment by nurse registries; and persons employed by companion or homemaker services registered under s. 400.509.

- (1)(a) The Agency for Health Care Administration may, upon request, grant exemptions from disqualification from employment or contracting under this section as provided in s. 435.07, except for health care practitioners licensed by the Department of Health or a regulatory board within that department.
- (b) The appropriate regulatory board within the

 Department of Health, or that department itself when there is

 no board, may, upon request of the licensed health care

 practitioner, grant exemptions from disqualification from

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employment or contracting under this section as provided in s.
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           Section 109. Subsections (2) and (3) of section
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   400.6105, Florida Statutes, are amended to read:
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           400.6105 Staffing and personnel.--
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           (2) Each hospice shall employ a full-time registered
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   nurse licensed pursuant to part I of chapter 464 who shall
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   coordinate the implementation of the plan of care for each
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   patient.
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           (3) A hospice shall employ a hospice care team or
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   teams who shall participate in the establishment and ongoing
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   review of the patient's plan of care, and be responsible for
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   and supervise the delivery of hospice care and services to the
   patient. The team shall, at a minimum, consist of a physician
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   licensed pursuant to chapter 458 or chapter 459, a nurse
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   licensed pursuant to part I of chapter 464, a social worker,
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   and a pastoral or other counselor. The composition of the team
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   may vary for each patient and, over time, for the same patient
   to ensure that all the patient's needs and preferences are
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   met.
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           Section 110. Subsection (20) of section 401.23,
   Florida Statutes, is amended to read:
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           401.23 Definitions.--As used in this part, the term:
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           (20) "Registered nurse" means a practitioner who is
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   licensed to practice professional nursing pursuant to part I
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   of chapter 464.
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           Section 111. Paragraph (c) of subsection (1) of
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   section 401.252, Florida Statutes, is amended to read:
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(1) A licensed basic or advanced life support

31 | ambulance service may conduct interfacility transfers in a

401.252 Interfacility transfer.--

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permitted ambulance, using a registered nurse in place of an emergency medical technician or paramedic, if:

(c) The registered nurse operates within the scope of part I of chapter 464.

Section 112. Subsection (11) of section 408.706, Florida Statutes, is amended to read:

408.706 Community health purchasing alliances; accountable health partnerships.--

(11) The ability to recruit and retain alliance district health care providers in its provider network. For provider networks initially formed in an alliance district after July 1, 1993, an accountable health partnership shall make offers as to provider participation in its provider network to relevant alliance district health care providers for at least 60 percent of the available provider positions. A provider who is made an offer may participate in an accountable health partnership as long as the provider abides by the terms and conditions of the provider network contract, provides services at a rate or price equal to the rate or price negotiated by the accountable health partnership, and meets all of the accountable health partnership's qualifications for participation in its provider networks including, but not limited to, network adequacy criteria. For purposes of this subsection, "alliance district health care provider" means a health care provider who is licensed under chapter 458, chapter 459, chapter 460, chapter 461, part I of chapter 464, or chapter 465 who has practiced in Florida for more than 1 year within the alliance district served by the accountable health partnership.

31 section 409.908, Florida Statutes, is amended to read:

Section 113. Paragraph (d) of subsection (12) of

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409.908 Reimbursement of Medicaid providers. -- Subject to specific appropriations, the agency shall reimburse Medicaid providers, in accordance with state and federal law, according to methodologies set forth in the rules of the agency and in policy manuals and handbooks incorporated by reference therein. These methodologies may include fee schedules, reimbursement methods based on cost reporting, negotiated fees, competitive bidding pursuant to s. 287.057, and other mechanisms the agency considers efficient and effective for purchasing services or goods on behalf of recipients. Payment for Medicaid compensable services made on behalf of Medicaid eligible persons is subject to the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216. Further, nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or making any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act, provided the adjustment is consistent with legislative intent.

(12)

(d) Notwithstanding paragraph (b), reimbursement fees to physicians for providing total obstetrical services to Medicaid recipients, which include prenatal, delivery, and postpartum care, shall be at least \$1,500 per delivery for a pregnant woman with low medical risk and at least \$2,000 per delivery for a pregnant woman with high medical risk. However, reimbursement to physicians working in Regional Perinatal Intensive Care Centers designated pursuant to chapter 383, for 31 services to certain pregnant Medicaid recipients with a high

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29 30 medical risk, may be made according to obstetrical care and neonatal care groupings and rates established by the agency. Nurse midwives licensed under part I of chapter 464 or midwives licensed under chapter 467 shall be reimbursed at no less than 80 percent of the low medical risk fee. The agency shall by rule determine, for the purpose of this paragraph, what constitutes a high or low medical risk pregnant woman and shall not pay more based solely on the fact that a caesarean section was performed, rather than a vaginal delivery. The agency shall by rule determine a prorated payment for obstetrical services in cases where only part of the total prenatal, delivery, or postpartum care was performed. The Department of Health shall adopt rules for appropriate insurance coverage for midwives licensed under chapter 467. Prior to the issuance and renewal of an active license, or reactivation of an inactive license for midwives licensed under chapter 467, such licensees shall submit proof of coverage with each application.

Section 114. Subsection (1) of section 415.1085, Florida Statutes, is amended to read:

415.1085 Photographs, medical examinations, and X rays of abused or neglected aged persons or disabled adults .--

(1) Any person authorized by law to investigate cases of alleged abuse or neglect of an aged person or disabled adult may take or cause to be taken photographs of the areas of trauma visible on the aged person or disabled adult who is the subject of a report, and photographs of the surrounding environment, with the consent of the subject or guardian or guardians. If the areas of trauma visible on the aged person or disabled adult indicate a need for medical examination, or 31 | if the aged person or disabled adult verbally complains or

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29 30 otherwise exhibits distress as a result of injury through suspected adult abuse, neglect, or exploitation, or is alleged to have been sexually abused, the department may, with the consent of the subject or guardian or guardians, cause the aged person or disabled adult to be referred to a licensed physician or any emergency department in a hospital or health care facility for medical examinations and X rays, if deemed necessary by the examining physician. Such examinations may be performed by an advanced registered nurse practitioner licensed pursuant to part I of chapter 464. examinations performed and X rays taken pursuant to this section shall be paid for by third-party reimbursement, if available, or by the subject or his or her guardian, if they are determined to be financially able to pay; or, if neither is available, the department shall pay the costs within available emergency services funds.

Section 115. Paragraph (a) of subsection (1) of section 455.597 Florida Statutes, is amended to read:

455.597 Requirement for instruction on domestic violence. --

(1)(a) The appropriate board shall require each person licensed or certified under chapter 458, chapter 459, part I of chapter 464, chapter 466, chapter 467, chapter 490, or chapter 491 to complete a 1-hour continuing education course, approved by the board, on domestic violence, as defined in s. 741.28, as part of biennial relicensure or recertification. The course shall consist of information on the number of patients in that professional's practice who are likely to be victims of domestic violence and the number who are likely to be perpetrators of domestic violence, screening procedures for 31 determining whether a patient has any history of being either

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a victim or a perpetrator of domestic violence, and instruction on how to provide such patients with information on, or how to refer such patients to, resources in the local community, such as domestic violence centers and other advocacy groups, that provide legal aid, shelter, victim counseling, batterer counseling, or child protection services.

Section 116. Subsection (1) of section 455.604, Florida Statutes, is amended to read:

455.604 Requirement for instruction for certain licensees on human immunodeficiency virus and acquired immune deficiency syndrome.--

(1) The appropriate board shall require each person licensed or certified under chapter 457; chapter 458; chapter 459; chapter 460; chapter 461; chapter 463; part I of chapter 464; chapter 465; chapter 466; part II, part III, part V, or part X of chapter 468; or chapter 486 to complete a continuing educational course, approved by the board, on human immunodeficiency virus and acquired immune deficiency syndrome as part of biennial relicensure or recertification. The course shall consist of education on the modes of transmission, infection control procedures, clinical management, and prevention of human immunodeficiency virus and acquired immune deficiency syndrome. Such course shall include information on current Florida law on acquired immune deficiency syndrome and its impact on testing, confidentiality of test results, treatment of patients, and any protocols and procedures applicable to human immunodeficiency virus counseling and testing, reporting, the offering of HIV testing to pregnant women, and partner notification issues pursuant to ss. 381.004 and 384.25.

Section 117. Paragraph (a) of subsection (2) of

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section 455.667, Florida Statutes, is amended to read: 455.667 Ownership and control of patient records; report or copies of records to be furnished .--

- (2) As used in this section, the terms "records owner, " "health care practitioner, " and "health care practitioner's employer" do not include any of the following persons or entities; furthermore, the following persons or entities are not authorized to acquire or own medical records, but are authorized under the confidentiality and disclosure requirements of this section to maintain those documents required by the part or chapter under which they are licensed or regulated:
- (a) Certified nursing assistants regulated under part II of chapter 464 s. 400.211.

Section 118. Section 455.677, Florida Statutes, is amended to read:

455.677 Disposition of records of deceased practitioners or practitioners relocating or terminating practice. -- Each board created under the provisions of chapter 457, chapter 458, chapter 459, chapter 460, chapter 461, chapter 463, part I of chapter 464, chapter 465, chapter 466, part I of chapter 484, chapter 486, chapter 490, or chapter 491, and the department under the provisions of chapter 462, shall provide by rule for the disposition, under that chapter, of the medical records or records of a psychological nature of practitioners which are in existence at the time the practitioner dies, terminates practice, or relocates and is no longer available to patients and which records pertain to the practitioner's patients. The rules shall provide that the records be retained for at least 2 years after the 31 | practitioner's death, termination of practice, or relocation.

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29 30 In the case of the death of the practitioner, the rules shall provide for the disposition of such records by the estate of the practitioner.

Section 119. Paragraph (b) of subsection (2) of section 455.694, Florida Statutes, is amended to read:

455.694 Financial responsibility requirements for certain health care practitioners. --

- (2) The board or department may grant exemptions upon application by practitioners meeting any of the following criteria:
- Any person whose license or certification has become inactive under chapter 457, chapter 460, chapter 461, part I of chapter 464, chapter 466, or chapter 467 and who is not practicing in this state. Any person applying for reactivation of a license must show either that such licensee maintained tail insurance coverage which provided liability coverage for incidents that occurred on or after October 1, 1993, or the initial date of licensure in this state, whichever is later, and incidents that occurred before the date on which the license became inactive; or such licensee must submit an affidavit stating that such licensee has no unsatisfied medical malpractice judgments or settlements at the time of application for reactivation.

Section 120. Subsection (2) of section 455.707, Florida Statutes, is amended to read:

455.707 Treatment programs for impaired practitioners.--

(2) The department shall retain one or more impaired practitioner consultants as recommended by the committee. consultant shall be a licensee or recovered licensee under the 31 | jurisdiction of the Division of Medical Quality Assurance

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within the department, and at least one consultant must be a practitioner or recovered practitioner licensed under chapter 458, chapter 459, or <u>part I of</u> chapter 464. The consultant shall assist the probable cause panel and department in carrying out the responsibilities of this section. This shall include working with department investigators to determine whether a practitioner is, in fact, impaired.

Section 121. Subsection (2) of section 458.348, Florida Statutes, is amended to read:

458.348 Formal supervisory relationships, standing orders, and established protocols; notice; standards.--

(2) ESTABLISHMENT OF STANDARDS BY JOINT COMMITTEE. -- The joint committee created by s. 464.003(3)(c) shall determine minimum standards for the content of established protocols pursuant to which an advanced registered nurse practitioner may perform medical acts identified and approved by the joint committee pursuant to s. 464.003(3)(c) or acts set forth in s. 464.012(3) and (4) and shall determine minimum standards for supervision of such acts by the physician, unless the joint committee determines that any act set forth in s. 464.012(3) or (4) is not a medical act. standards shall be based on risk to the patient and acceptable standards of medical care and shall take into account the special problems of medically underserved areas. The standards developed by the joint committee shall be adopted as rules by the Board of Nursing and the Board of Medicine for purposes of carrying out their responsibilities pursuant to part I of chapter 464 and this chapter, respectively, but neither board shall have disciplinary powers over the licensees of the other board.

Section 122. Section 464.001, Florida Statutes, is

amended to read:

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464.001 Short title. -- This part may be cited chapter shall be known as the "Nurse Practice Act."

Section 123. Section 464.002, Florida Statutes, is amended to read:

464.002 Purpose. -- The sole legislative purpose in enacting this part chapter is to ensure that every nurse practicing in this state meets minimum requirements for safe It is the legislative intent that nurses who fall below minimum competency or who otherwise present a danger to the public shall be prohibited from practicing in this state.

Section 124. Section 464.003, Florida Statutes, is amended to read:

464.003 Definitions.--As used in this part chapter:

- "Department" means the Department of Health.
- (2) "Board" means the Board of Nursing as created in this chapter.
- (3)(a) "Practice of professional nursing" means the performance of those acts requiring substantial specialized knowledge, judgment, and nursing skill based upon applied principles of psychological, biological, physical, and social sciences which shall include, but not be limited to:
- The observation, assessment, nursing diagnosis, planning, intervention, and evaluation of care; health teaching and counseling of the ill, injured, or infirm; and the promotion of wellness, maintenance of health, and prevention of illness of others.
- The administration of medications and treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe such 31 medications and treatments.

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- The supervision and teaching of other personnel in the theory and performance of any of the above acts.
- "Practice of practical nursing" means the performance of selected acts, including the administration of treatments and medications, in the care of the ill, injured, or infirm and the promotion of wellness, maintenance of health, and prevention of illness of others under the direction of a registered nurse, a licensed physician, a licensed osteopathic physician, a licensed podiatric physician, or a licensed dentist.

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> The professional nurse and the practical nurse shall be responsible and accountable for making decisions that are based upon the individual's educational preparation and experience in nursing.

"Advanced or specialized nursing practice" means, in addition to the practice of professional nursing, the performance of advanced-level nursing acts approved by the board which, by virtue of postbasic specialized education, training, and experience, are proper to be performed by an advanced registered nurse practitioner. Within the context of advanced or specialized nursing practice, the advanced registered nurse practitioner may perform acts of nursing diagnosis and nursing treatment of alterations of the health status. The advanced registered nurse practitioner may also perform acts of medical diagnosis and treatment, prescription, and operation which are identified and approved by a joint committee composed of three members appointed by the Board of Nursing, two of whom shall be advanced registered nurse practitioners; three members appointed by the Board of 31 | Medicine, two of whom shall have had work experience with

advanced registered nurse practitioners; and the secretary of the department or the secretary's designee. Each committee member appointed by a board shall be appointed to a term of 4 years unless a shorter term is required to establish or maintain staggered terms. The Board of Nursing shall adopt rules authorizing the performance of any such acts approved by the joint committee. Unless otherwise specified by the joint committee, such acts shall be performed under the general supervision of a practitioner licensed under chapter 458, chapter 459, or chapter 466 within the framework of standing protocols which identify the medical acts to be performed and the conditions for their performance. The department may, by rule, require that a copy of the protocol be filed with the department along with the notice required by s. 458.348.

- (d) "Nursing diagnosis" means the observation and evaluation of physical or mental conditions, behaviors, signs and symptoms of illness, and reactions to treatment and the determination as to whether such conditions, signs, symptoms, and reactions represent a deviation from normal.
- (e) "Nursing treatment" means the establishment and implementation of a nursing regimen for the care and comfort of individuals, the prevention of illness, and the education, restoration, and maintenance of health.
- (4) "Registered nurse" means any person licensed in this state to practice professional nursing.
- (5) "Licensed practical nurse" means any person licensed in this state to practice practical nursing.
- (6) "Advanced registered nurse practitioner" means any person licensed in this state to practice professional nursing and certified in advanced or specialized nursing practice.
 - (7) "Approved program" means a nursing program

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29 30 conducted in a school, college, or university which is approved by the board pursuant to s. 464.019 for the education of nurses.

Section 125. Section 464.006, Florida Statutes, is amended to read:

464.006 Authority to make rules. -- The board of Nursing has authority to adopt rules pursuant to ss. 120.536(1) and 120.54 to implement the provisions of this part chapter conferring duties upon it.

Section 126. Subsection (3) of section 464.009, Florida Statutes, is amended to read:

464.009 Licensure by endorsement.--

(3) The department shall not issue a license by endorsement to any applicant who is under investigation in another state for an act which would constitute a violation of this part chapter until such time as the investigation is complete, at which time the provisions of s. 464.018 shall apply.

Section 127. Paragraphs (a) and (d) of subsection (1) and paragraph (b) of subsection (2) of section 464.016, Florida Statutes, are amended to read:

464.016 Violations and penalties. --

- (1) Each of the following acts constitutes a felony of the third degree, punishable as provided in s. 775.082, s. 775.083, or s. 775.084:
- (a) Practicing advanced or specialized, professional or practical nursing, as defined in this part chapter, unless holding an active license or certificate to do so.
- (d) Obtaining or attempting to obtain a license or certificate under this part chapter by misleading statements 31 or knowing misrepresentation.

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- (2) Each of the following acts constitutes a misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083:
- (b) Knowingly concealing information relating to violations of this part chapter.

Section 128. Paragraphs (i), (k), and (l) of subsection (1) and subsection (4) of section 464.018, Florida Statutes, are amended to read:

464.018 Disciplinary actions.--

- (1) The following acts shall be grounds for disciplinary action set forth in this section:
- (i) Engaging or attempting to engage in the possession, sale, or distribution of controlled substances as set forth in chapter 893, for any other than legitimate purposes authorized by this part chapter.
- (k) Failing to report to the department any person who the licensee knows is in violation of this part chapter or of the rules of the department or the board; however, if the licensee verifies that such person is actively participating in a board-approved program for the treatment of a physical or mental condition, the licensee is required to report such person only to an impaired professionals consultant.
- (1) Knowingly violating any provision of this part chapter, a rule of the board or the department, or a lawful order of the board or department previously entered in a disciplinary proceeding or failing to comply with a lawfully issued subpoena of the department.
- (4) The board shall not reinstate the license of a nurse who has been found guilty by the board on three separate occasions of violations of this part chapter relating to the 31 use of drugs or narcotics, which offenses involved the

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diversion of drugs or narcotics from patients to personal use 2 or sale.

Section 129. Subsections (1), (2), and (3) of section 464.019, Florida Statutes, are amended to read:

464.019 Approval of nursing programs.--

- (1) An institution desiring to conduct an approved program for the education of professional or practical nurses shall apply to the department and submit such evidence as may be required to show that it complies with the provisions of this part chapter and with the rules of the board. The application shall include a program review fee, as set by the board, not to exceed \$1,000.
- The board shall adopt rules regarding educational objectives, faculty qualifications, curriculum guidelines, administrative procedures, and clinical training as are necessary to ensure that approved programs graduate nurses capable of competent practice under this part act.
- The department shall survey each institution applying for approval and submit its findings to the board. If the board is satisfied that the program meets the requirements of this part chapter and rules pursuant thereto, it shall certify the program for approval and the department shall approve the program.

Section 130. Section 464.022, Florida Statutes, is amended to read:

- 464.022 Exceptions. -- No provision of this part chapter shall be construed to prohibit:
- (1) The care of the sick by friends or members of the family without compensation, the incidental care of the sick by domestic servants, or the incidental care of 31 | noninstitutionalized persons by a surrogate family.

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- (2) Assistance by anyone in the case of an emergency. (3) The practice of nursing by students enrolled in

approved schools of nursing.

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- The practice of nursing by graduates of approved programs or the equivalent, pending the result of the first licensing examination for which they are eligible following graduation, provided they practice under direct supervision of a registered professional nurse. The board shall by rule define what constitutes direct supervision.
- (5) The rendering of services by nursing assistants acting under the direct supervision of a registered professional nurse.
- (6) Any nurse practicing in accordance with the practices and principles of the body known as the Church of Christ Scientist; nor shall any rule of the board apply to any sanitarium, nursing home, or rest home operated in accordance with the practices and principles of the body known as the Church of Christ Scientist.
- (7) The practice of any legally qualified nurse or licensed attendant of another state who is employed by the United States Government, or any bureau, division, or agency thereof, while in the discharge of official duties.
- (8) Any nurse currently licensed in another state from performing nursing services in this state for a period of 60 days after furnishing to the employer satisfactory evidence of current licensure in another state and having submitted proper application and fees to the board for licensure prior to employment. The board may extend this time for administrative purposes when necessary.
- (9) The rendering of nursing services on a 31 | fee-for-service basis, or the reimbursement for nursing

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services directly to a nurse rendering such services by any government program, commercial insurance company, hospital or medical services plan, or any other third-party payor.

- (10) The establishment of an independent practice by one or more nurses for the purpose of rendering to patients nursing services within the scope of the nursing license.
- (11) The furnishing of hemodialysis treatments in a patient's home, using an assistant chosen by the patient, provided that the assistant is properly trained, as defined by the board by rule, and has immediate telephonic access to a registered nurse who is licensed pursuant to this part chapter and who has dialysis training and experience.
- (12) The practice of nursing by any legally qualified nurse of another state whose employment requires the nurse to accompany and care for a patient temporarily residing in this state for not more than 30 consecutive days, provided the patient is not in an inpatient setting, the board is notified prior to arrival of the patient and nurse, the nurse has the standing physician orders and current medical status of the patient available, and prearrangements with the appropriate licensed health care providers in this state have been made in case the patient needs placement in an inpatient setting.
- (13) The practice of nursing by individuals enrolled in board-approved remedial courses.

Section 131. Section 464.023, Florida Statutes, is amended to read:

464.023 Saving clauses.--

- (1) No judicial or administrative proceeding pending on July 1, 1979, shall be abated as a result of the repeal and reenactment of this part chapter.
 - (2) Each licensee or holder of a certificate who was

duly licensed or certified on June 30, 1979, shall be entitled 2 to hold such license or certificate. Henceforth, such license 3 or certificate shall be renewed in accordance with the provisions of this part act. 5 Section 132. Subsection (3) of section 464.027, 6 Florida Statutes, is amended to read: 7 464.027 Registered nurse first assistant.--(3) QUALIFICATIONS. -- A registered nurse first 8 9 assistant is any person who: 10 (a) Is licensed as a registered nurse under this part 11 chapter; 12 (b) Is certified in perioperative nursing; and (c) Holds a certificate from, and has successfully 13 14 completed, a recognized program. 15 Section 133. Subsection (6) of section 466.003, Florida Statutes, is amended to read: 16 17 466.003 Definitions.--As used in this chapter: "Dental assistant" means a person, other than a 18 dental hygienist, who, under the supervision and authorization 19 20 of a dentist, provides dental care services directly to a 21 patient. This term shall not include a certified registered nurse anesthetist licensed under part I of chapter 464. 22 Section 134. Subsection (2) of section 467.003, 23 Florida Statutes, is amended to read: 24 25 467.003 Definitions.--As used in this chapter, unless 26 the context otherwise requires: 27 "Certified nurse midwife" means a person who is

licensed as an advanced registered nurse practitioner under

part I of chapter 464 and who is certified to practice

midwifery by the American College of Nurse Midwives.

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section 467.0125, Florida Statutes, is amended to read: 467.0125 Licensure by endorsement.--

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(2) The department may issue a temporary certificate to practice in areas of critical need to any midwife who is qualifying for licensure by endorsement under subsection (1), with the following restrictions:

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(a) The Department of Health shall determine the areas of critical need, and the midwife so certified shall practice only in those specific areas, under the auspices of a physician licensed pursuant to chapter 458 or chapter 459, a certified nurse midwife licensed pursuant to part I of chapter 464, or a midwife licensed under this chapter, who has a minimum of 3 years' professional experience. Such areas shall include, but not be limited to, health professional shortage areas designated by the United States Department of Health and Human Services.

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Section 136. Paragraph (e) of subsection (2) of section 467.203, Florida Statutes, is amended to read:

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467.203 Disciplinary actions; penalties.--

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(2) When the department finds any person guilty of any of the grounds set forth in subsection (1), it may enter an order imposing one or more of the following penalties:

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(e) Placement of the midwife on probation for such period of time and subject to such conditions as the department may specify, including requiring the midwife to submit to treatment; undertake further relevant education or training; take an examination; or work under the supervision of another licensed midwife, a physician, or a nurse midwife licensed under part I of chapter 464.

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Section 137. Paragraph (a) of subsection (1) of 31 section 468.505, Florida Statutes, is amended to read:

468.505 Exemptions; exceptions.--

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prohibiting or restricting the practice, services, or activities of: (a) A person licensed in this state under chapter 457,

(1) Nothing in this part may be construed as

chapter 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, part I of chapter 464, chapter 465, chapter 466, chapter 480, chapter 490, or chapter 491, when engaging in the profession or occupation for which he or she is licensed, or of any person employed by and under the supervision of the licensee when rendering services within the scope of the profession or occupation of the licensee.

Section 138. Subsection (7) of section 483.041, Florida Statutes, is amended to read:

483.041 Definitions.--As used in this part, the term:

"Licensed practitioner" means a physician licensed under chapter 458, chapter 459, chapter 460, or chapter 461; a dentist licensed under chapter 466; a person licensed under chapter 462; or an advanced registered nurse practitioner licensed under part I of chapter 464; or a duly licensed practitioner from another state licensed under similar statutes who orders examinations on materials or specimens for nonresidents of the State of Florida, but who reside in the same state as the requesting licensed practitioner.

Section 139. Subsection (5) of section 483.801, Florida Statutes, is amended to read:

483.801 Exemptions. -- This part applies to all clinical laboratories and clinical laboratory personnel within this state, except:

(5) Advanced registered nurse practitioners licensed 31 under part I of chapter 464 who perform provider-performed

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Section 140. Paragraph (a) of subsection (4) of section 491.0112, Florida Statutes, is amended to read:

491.0112 Sexual misconduct by a psychotherapist; penalties.--

- (4) For the purposes of this section:
- (a) The term "psychotherapist" means any person licensed pursuant to chapter 458, chapter 459, part I of chapter 464, chapter 490, or chapter 491, or any other person who provides or purports to provide treatment, diagnosis, assessment, evaluation, or counseling of mental or emotional illness, symptom, or condition.

Section 141. Subsection (5) of section 550.24055, Florida Statutes, is amended to read:

550.24055 Use of controlled substances or alcohol prohibited; testing of certain occupational licensees; penalty; evidence of test or action taken and admissibility for criminal prosecution limited.--

(5) This section does not apply to the possession and use of controlled or chemical substances that are prescribed as part of the care and treatment of a disease or injury by a practitioner licensed under chapter 458, chapter 459, part I of chapter 464, or chapter 466.

Section 142. Paragraph (h) of subsection (4) of section 627.351, Florida Statutes, is amended to read:

627.351 Insurance risk apportionment plans.--

- (4) MEDICAL MALPRACTICE RISK APPORTIONMENT. --
- (h) As used in this subsection:
- 1. "Health care provider" means hospitals licensed under chapter 395; physicians licensed under chapter 458;

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29 30 osteopathic physicians licensed under chapter 459; podiatric physicians licensed under chapter 461; dentists licensed under chapter 466; chiropractic physicians licensed under chapter 460; naturopaths licensed under chapter 462; nurses licensed under part I of chapter 464; midwives licensed under chapter 467; clinical laboratories registered under chapter 483; physician assistants licensed under chapter 458 or chapter 459; physical therapists and physical therapist assistants licensed under chapter 486; health maintenance organizations certificated under part I of chapter 641; ambulatory surgical centers licensed under chapter 395; other medical facilities as defined in subparagraph 2.; blood banks, plasma centers, industrial clinics, and renal dialysis facilities; or professional associations, partnerships, corporations, joint ventures, or other associations for professional activity by health care providers.

- "Other medical facility" means a facility the primary purpose of which is to provide human medical diagnostic services or a facility providing nonsurgical human medical treatment, to which facility the patient is admitted and from which facility the patient is discharged within the same working day, and which facility is not part of a hospital. However, a facility existing for the primary purpose of performing terminations of pregnancy or an office maintained by a physician or dentist for the practice of medicine shall not be construed to be an "other medical facility."
- "Health care facility" means any hospital licensed under chapter 395, health maintenance organization certificated under part I of chapter 641, ambulatory surgical 31 center licensed under chapter 395, or other medical facility

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as defined in subparagraph 2. 1 2 Section 143. Paragraph (b) of subsection (1) of 3 section 627.357, Florida Statutes, is amended to read: 4 627.357 Medical malpractice self-insurance.--5 (1) DEFINITIONS.--As used in this section, the term: "Health care provider" means any: 6 7 1. Hospital licensed under chapter 395. Physician licensed, or physician assistant 8 2. 9 licensed, under chapter 458. 10 Osteopathic physician or physician assistant licensed under chapter 459. 11 12 Podiatric physician licensed under chapter 461. 13 Health maintenance organization certificated under 14 part I of chapter 641. 15 Ambulatory surgical center licensed under chapter 16 395. 17 7. Chiropractic physician licensed under chapter 460. 8. Psychologist licensed under chapter 490. 18 9. Optometrist licensed under chapter 463. 19 20 10. Dentist licensed under chapter 466. 21 11. Pharmacist licensed under chapter 465. Registered nurse, licensed practical nurse, or 22 23 advanced registered nurse practitioner licensed or registered 24 under part I of chapter 464. 13. Other medical facility. 25 26 14. Professional association, partnership, 27 corporation, joint venture, or other association established 28 by the individuals set forth in subparagraphs 2., 3., 4., 7., 8., 9., 10., 11., and 12. for professional activity. 29 30 Section 144. Subsection (6) of section 627.9404,

31 Florida Statutes, is amended to read:

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"Licensed health care practitioner" means any physician, nurse licensed under part I of chapter 464, or psychotherapist licensed under chapter 490 or chapter 491, or any individual who meets any requirements prescribed by rule by the department.

627.9404 Definitions.--For the purposes of this part:

Section 145. Subsection (21) of section 641.31, Florida Statutes, is amended to read:

641.31 Health maintenance contracts.--

(21) Notwithstanding any other provision of law, health maintenance policies or contracts which provide anesthesia coverage, benefits, or services shall offer to the subscriber, if requested and available, the services of a certified registered nurse anesthetist licensed pursuant to part I of chapter 464.

Section 146. Subsection (8) of section 766.101, Florida Statutes, is amended to read:

766.101 Medical review committee, immunity from liability.--

(8) No cause of action of any nature by a person licensed pursuant to chapter 458, chapter 459, chapter 461, chapter 463, part I of chapter 464, chapter 465, or chapter 466 shall arise against another person licensed pursuant to chapter 458, chapter 459, chapter 461, chapter 463, part I of chapter 464, chapter 465, or chapter 466 for furnishing information to a duly appointed medical review committee, to an internal risk management program established under s. 395.0197, to the Department of Business and Professional Regulation, or to the appropriate regulatory board if the information furnished concerns patient care at a facility 31 | licensed pursuant to part I of chapter 395 where both persons

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29 30 provide health care services, if the information is not intentionally fraudulent, and if the information is within the scope of the functions of the committee, department, or board. However, if such information is otherwise available from original sources, it is not immune from discovery or use in a civil action merely because it was presented during a proceeding of the committee, department, or board.

Section 147. Subsection (2) of section 766.110, Florida Statutes, is amended to read:

766.110 Liability of health care facilities.--

(2) Every hospital licensed under chapter 395 may carry liability insurance or adequately insure itself in an amount of not less than \$1.5 million per claim, \$5 million annual aggregate to cover all medical injuries to patients resulting from negligent acts or omissions on the part of those members of its medical staff who are covered thereby in furtherance of the requirements of ss. 458.320 and 459.0085. Self-insurance coverage extended hereunder to a member of a hospital's medical staff meets the financial responsibility requirements of ss. 458.320 and 459.0085 if the physician's coverage limits are not less than the minimum limits established in ss. 458.320 and 459.0085 and the hospital is a verified trauma center as of July 1, 1990, that has extended self-insurance coverage continuously to members of its medical staff for activities both inside and outside of the hospital since January 1, 1987. Any insurer authorized to write casualty insurance may make available, but shall not be required to write, such coverage. The hospital may assess on an equitable and pro rata basis the following professional health care providers for a portion of the total hospital 31 | insurance cost for this coverage: physicians licensed under

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chapter 458, osteopathic physicians licensed under chapter 459, podiatric physicians licensed under chapter 461, dentists licensed under chapter 466, and nurses licensed under part I of chapter 464. The hospital may provide for a deductible amount to be applied against any individual health care provider found liable in a law suit in tort or for breach of contract. The legislative intent in providing for the deductible to be applied to individual health care providers found negligent or in breach of contract is to instill in each individual health care provider the incentive to avoid the risk of injury to the fullest extent and ensure that the citizens of this state receive the highest quality health care obtainable.

Section 148. Paragraph (d) of subsection (3) of section 766.1115, Florida Statutes, is amended to read:

766.1115 Health care providers; creation of agency relationship with governmental contractors.--

- (3) DEFINITIONS.--As used in this section, the term:
- (d) "Health care provider" or "provider" means:
- 1. A birth center licensed under chapter 383.
- 2. An ambulatory surgical center licensed under chapter 395.
 - 3. A hospital licensed under chapter 395.
- 4. A physician or physician assistant licensed under chapter 458.
- 5. An osteopathic physician or osteopathic physician assistant licensed under chapter 459.
- 6. A chiropractic physician licensed under chapter 460.
 - 7. A podiatric physician licensed under chapter 461.
 - 8. A registered nurse, nurse midwife, licensed

practical nurse, or advanced registered nurse practitioner licensed or registered under <u>part I of</u> chapter 464 or any facility which employs nurses licensed or registered under <u>part I of</u> chapter 464 to supply all or part of the care delivered under this section.

- 9. A midwife licensed under chapter 467.
- 10. A health maintenance organization certificated under part I of chapter 641.
- 11. A health care professional association and its employees or a corporate medical group and its employees.
- 12. Any other medical facility the primary purpose of which is to deliver human medical diagnostic services or which delivers nonsurgical human medical treatment, and which includes an office maintained by a provider.
- 13. A dentist or dental hygienist licensed under chapter 466.
- 14. Any other health care professional, practitioner, provider, or facility under contract with a governmental contractor.

The term includes any nonprofit corporation qualified as exempt from federal income taxation under s. 501(c) of the Internal Revenue Code which delivers health care services provided by licensed professionals listed in this paragraph, any federally funded community health center, and any volunteer corporation or volunteer health care provider that delivers health care services.

Section 149. Subsection (1) of section 877.111, Florida Statutes, is amended to read:

877.111 Inhalation, ingestion, possession, sale, purchase, or transfer of harmful chemical substances;

penalties. --

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(1) It is unlawful for any person to inhale or ingest, or to possess with intent to breathe, inhale, or drink, any compound, liquid, or chemical containing toluol, hexane, trichloroethylene, acetone, toluene, ethyl acetate, methyl ethyl ketone, trichloroethane, isopropanol, methyl isobutyl ketone, ethylene glycol monomethyl ether acetate, cyclohexanone, nitrous oxide, diethyl ether, alkyl nitrites (butyl nitrite), or any similar substance for the purpose of inducing a condition of intoxication or which distorts or disturbs the auditory, visual, or mental processes. section does not apply to the possession and use of these substances as part of the care or treatment of a disease or injury by a practitioner licensed under chapter 458, chapter 459, part I of chapter 464, or chapter 466 or to beverages controlled by the provisions of chapter 561, chapter 562, chapter 563, chapter 564, or chapter 565.

Section 150. Subsection (6) of section 945.602, Florida Statutes, is amended to read:

945.602 State of Florida Correctional Medical Authority; creation; members.--

(6) At least one member of the authority must be a nurse licensed under part I of chapter 464 and have at least 5 years' experience in the practice of nursing.

Section 151. Subsection (2) of section 960.28, Florida Statutes, is amended to read:

960.28 Payment for victims' initial forensic physical examinations.--

(2) The Crime Victims' Services Office of the department shall pay for medical expenses connected with an 31 | initial forensic physical examination of a victim who reports

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a violation of chapter 794 or chapter 800 to a law enforcement officer. Such payment shall be made regardless of whether or 3 not the victim is covered by health or disability insurance. The payment shall be made only out of moneys allocated to the 5 Crime Victims' Services Office for the purposes of this 6 section, and the payment may not exceed \$250 with respect to 7 any violation. Payment may not be made for an initial forensic physical examination unless the law enforcement officer 8 certifies in writing that the initial forensic physical 10 examination is needed to aid in the investigation of an alleged sexual offense and that the claimant is the alleged 11 12 victim of the offense. The department shall develop and 13 maintain separate protocols for the initial forensic physical examination of adults and children. Payment under this section 14 15 is limited to medical expenses connected with the initial forensic physical examination, and payment may be made to a 16 17 medical provider using an examiner qualified under part I of chapter 464, excluding s. 464.003(5); chapter 458; or chapter 18 459. Payment made to the medical provider by the department 19 20 shall be considered by the provider as payment in full for the 21 initial forensic physical examination associated with the collection of evidence. The victim may not be required to pay, 22 directly or indirectly, the cost of an initial forensic 23 24 physical examination performed in accordance with this section. 25 Section 152. Subsection (36) of section 984.03, 26 27 Florida Statutes, is amended to read: 28 984.03 Definitions.--When used in this chapter, the 29 term:

31 physician licensed under chapter 458, an osteopathic physician

(36) "Licensed health care professional" means a

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29 30 licensed under chapter 459, a nurse licensed under part I of chapter 464, a physician assistant licensed under chapter 458 or chapter 459, or a dentist licensed under chapter 466.

Section 153. Subsection (37) of section 985.03, Florida Statutes, is amended to read:

985.03 Definitions.--When used in this chapter, the term:

(37) "Licensed health care professional" means a physician licensed under chapter 458, an osteopathic physician licensed under chapter 459, a nurse licensed under part I of chapter 464, a physician assistant licensed under chapter 458 or chapter 459, or a dentist licensed under chapter 466.

Section 154. Section 455.557, Florida Statutes, is amended to read:

455.557 Standardized credentialing for health care practitioners.--

(1) INTENT. -- The Legislature recognizes that an efficient and effective health care practitioner credentialing program helps to ensure access to quality health care and also recognizes that health care practitioner credentialing activities have increased significantly as a result of health care reform and recent changes in health care delivery and reimbursement systems. Moreover, the resulting duplication of health care practitioner credentialing activities is unnecessarily costly and cumbersome for both the practitioner and the entity granting practice privileges. Therefore, it is the intent of this section that a credentials collection program be established which provides that, once a health care practitioner's core credentials data are collected, they need not be collected again, except for corrections, updates, and 31 | modifications thereto. Participation under this section shall

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29 30 initially include those individuals licensed under chapter 458, chapter 459, chapter 460, or chapter 461, or s. 464.012. However, the department shall, with the approval of the applicable board, include other professions under the jurisdiction of the Division of Medical Quality Assurance in this program, provided they meet the requirements of s. 455.565 or s. 455.56503.

- (2) DEFINITIONS.--As used in this section, the term: (a) "Advisory council" or "council" means the Credentials Advisory Council.
- (a) (b) "Certified" or "accredited," as applicable, means approved by a quality assessment program, from the National Committee for Quality Assurance, the Joint Commission on Accreditation of Healthcare Organizations, the American Accreditation HealthCare Commission/URAC, or any such other nationally recognized and accepted organization authorized by the department, used to assess and certify any credentials verification program, entity, or organization that verifies the credentials of any health care practitioner.

(b) (c) "Core credentials data" means the following data: current name, any former name, and any alias, any professional education, professional training, licensure, current Drug Enforcement Administration certification, social security number, specialty board certification, Educational Commission for Foreign Medical Graduates certification, hospital or other institutional affiliations, evidence of professional liability coverage or evidence of financial responsibility as required by s. 458.320, or s. 459.0085, or s. 455.694, history of claims, suits, judgments, or settlements, final disciplinary action reported pursuant to s. $31 \mid 455.565(1)(a)8.$ or s. 455.56503(1)(a)8., and Medicare or

Medicaid

Medicaid sanctions.

 $\underline{(c)}(d)$ "Credential" or "credentialing" means the process of assessing and verifying the qualifications of a licensed health care practitioner or applicant for licensure as a health care practitioner.

 $\underline{(d)}_{(e)}$ "Credentials verification organization" means any organization certified or accredited as a credentials verification organization.

 $\underline{\text{(e)}(f)}$ "Department" means the Department of Health, Division of Medical Quality Assurance.

 $\underline{(f)(g)}$ "Designated credentials verification organization" means the credentials verification organization which is selected by the health care practitioner, if the health care practitioner chooses to make such a designation.

(g)(h) "Drug Enforcement Administration certification" means certification issued by the Drug Enforcement Administration for purposes of administration or prescription of controlled substances. Submission of such certification under this section must include evidence that the certification is current and must also include all current addresses to which the certificate is issued.

(h)(i) "Health care entity" means:

- 1. Any health care facility or other health care organization licensed or certified to provide approved medical and allied health services in this state;
- 2. Any entity licensed by the Department of Insurance as a prepaid health care plan or health maintenance organization or as an insurer to provide coverage for health care services through a network of providers; or
 - 3. Any accredited medical school in this state.
 - (i) "Health care practitioner" means any person

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29 30 licensed, or, for credentialing purposes only, any person applying for licensure, under chapter 458, chapter 459, chapter 460, or chapter 461, or s. 464.012 or any person licensed or applying for licensure under a chapter subsequently made subject to this section by the department with the approval of the applicable board, except a person registered or applying for registration pursuant to s. 458.345 or s. 459.021.

(j)(k) "Hospital or other institutional affiliations" means each hospital or other institution for which the health care practitioner or applicant has provided medical services. Submission of such information under this section must include, for each hospital or other institution, the name and address of the hospital or institution, the staff status of the health care practitioner or applicant at that hospital or institution, and the dates of affiliation with that hospital or institution.

(k)(1) "National accrediting organization" means an organization that awards accreditation or certification to hospitals, managed care organizations, credentials verification organizations, or other health care organizations, including, but not limited to, the Joint Commission on Accreditation of Healthcare Organizations, the American Accreditation HealthCare Commission/URAC, and the National Committee for Quality Assurance.

(1)(m) "Professional training" means any internship, residency, or fellowship relating to the profession for which the health care practitioner is licensed or seeking licensure.

(m) (n) "Specialty board certification" means certification in a specialty issued by a specialty board 31 recognized by the board in this state that regulates the

profession for which the health care practitioner is licensed

or seeking licensure.

(3) STANDARDIZED CREDENTIALS VERIFICATION PROGRAM. --

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(a) Every health care practitioner shall:

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1. Report all core credentials data to the department which is not already on file with the department, either by designating a credentials verification organization to submit the data or by submitting the data directly.

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Notify the department within 45 days of any corrections, updates, or modifications to the core credentials data either through his or her designated credentials verification organization or by submitting the data directly. Corrections, updates, and modifications to the core credentials data provided the department under this section shall comply with the updating requirements of s. 455.565(3) or s. 455.56503(3) related to profiling.

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(b) The department shall:

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Maintain a complete, current file of core 1. credentials data on each health care practitioner, which shall include all updates provided in accordance with subparagraph (a)2.

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2. Release the core credentials data that is otherwise confidential or exempt from the provisions of chapter 119 and s. 24(a), Art. I of the State Constitution and any corrections, updates, and modifications thereto, if authorized by the health care practitioner.

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3. Charge a fee to access the core credentials data, which may not exceed the actual cost, including prorated setup and operating costs, pursuant to the requirements of chapter 119. The actual cost shall be set in consultation with the

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31 advisory council.

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- 4. Develop, in consultation with the advisory council, standardized forms to be used by the health care practitioner or designated credentials verification organization for the initial reporting of core credentials data, for the health care practitioner to authorize the release of core credentials data, and for the subsequent reporting of corrections, updates, and modifications thereto.
- 5. Establish a Credentials Advisory Council, consisting of 13 members, to assist the department as provided in this section. The secretary, or his or her designee, shall serve as one member and chair of the council and shall appoint the remaining 12 members. Except for any initial lesser term required to achieve staggering, such appointments shall be for 4-year staggered terms, with one 4-year reappointment, as applicable. Three members shall represent hospitals, and two members shall represent health maintenance organizations. One member shall represent health insurance entities. One member shall represent the credentials verification industry. Two members shall represent physicians licensed under chapter 458. One member shall represent osteopathic physicians licensed under chapter 459. One member shall represent chiropractic physicians licensed under chapter 460. One member shall represent podiatric physicians licensed under chapter 461.
- (c) A registered credentials verification organization may be designated by a health care practitioner to assist the health care practitioner to comply with the requirements of subparagraph (a)2. A designated credentials verification organization shall:
- Timely comply with the requirements of subparagraph
 (a)2., pursuant to rules adopted by the department.
 - 2. Not provide the health care practitioner's core

 data, including all corrections, updates, and modifications, without the authorization of the practitioner.

- (d) This section shall not be construed to restrict in any way the authority of the health care entity to credential and to approve or deny an application for hospital staff membership, clinical privileges, or managed care network participation.
 - (4) DUPLICATION OF DATA PROHIBITED. --
- (a) A health care entity or credentials verification organization is prohibited from collecting or attempting to collect duplicate core credentials data from any health care practitioner if the information is available from the department. This section shall not be construed to restrict the right of any health care entity or credentials verification organization to collect additional information from the health care practitioner which is not included in the core credentials data file. This section shall not be construed to prohibit a health care entity or credentials verification organization from obtaining all necessary attestation and release form signatures and dates.
- (b) Effective July 1, 2002, a state agency in this state which credentials health care practitioners may not collect or attempt to collect duplicate core credentials data from any individual health care practitioner if the information is already available from the department. This section shall not be construed to restrict the right of any such state agency to request additional information not included in the core credential data file, but which is deemed necessary for the agency's specific credentialing purposes.
- (5) STANDARDS AND REGISTRATION.--Any credentialsverification organization that does business in this state

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29 30 must be fully accredited or certified as a credentials verification organization by a national accrediting organization as specified in paragraph (2)(a)(b)and must register with the department. The department may charge a reasonable registration fee, set in consultation with the advisory council, not to exceed an amount sufficient to cover its actual expenses in providing and enforcing such registration. The department shall establish by rule for biennial renewal of such registration. Failure by a registered credentials verification organization to maintain full accreditation or certification, to provide data as authorized by the health care practitioner, to report to the department changes, updates, and modifications to a health care practitioner's records within the time period specified in subparagraph (3)(a)2., or to comply with the prohibition against collection of duplicate core credentials data from a practitioner may result in denial of an application for renewal of registration or in revocation or suspension of a registration.

- (6) LIABILITY.--No civil, criminal, or administrative action may be instituted, and there shall be no liability, against any registered credentials verification organization or health care entity on account of its reliance on any data obtained directly from the department.
- (7) LIABILITY INSURANCE REQUIREMENTS.--Each credentials verification organization doing business in this state shall maintain liability insurance appropriate to meet the certification or accreditation requirements established in this section.
- 30 (8) RULES.--The department, in consultation with the advisory council, shall adopt rules necessary to develop and

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implement the standardized core credentials data collection program established by this section. 3

(9) COUNCIL ABOLISHED; DEPARTMENT AUTHORITY. -- The council shall be abolished October 1, 1999. After the council is abolished, all duties of the department required under this section to be in consultation with the council may be carried out by the department on its own.

Section 155. Section 455.56503, Florida Statutes, is created to read:

455.56503 Advanced registered nurse practitioners; information required for certification .--

- (1)(a) Each person who applies for initial certification under s. 464.012 must, at the time of application, and each person certified under s. 464.012 who applies for certification renewal must, in conjunction with the renewal of such certification and under procedures adopted by the Department of Health, and in addition to any other information that may be required from the applicant, furnish the following information to the Department of Health:
- The name of each school or training program that the applicant has attended, with the months and years of attendance and the month and year of graduation, and a description of all graduate professional education completed by the applicant, excluding any coursework taken to satisfy continuing education requirements.
- 2. The name of each location at which the applicant practices.
- 3. The address at which the applicant will primarily conduct his or her practice.
- 4. Any certification or designation that the applicant 31 has received from a specialty or certification board that is

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recognized or approved by the regulatory board or department to which the applicant is applying.

- 5. The year that the applicant received initial certification and began practicing the profession in any jurisdiction and the year that the applicant received initial certification in this state.
- 6. Any appointment which the applicant currently holds to the faculty of a school related to the profession and an indication as to whether the applicant has had the responsibility for graduate education within the most recent 10 years.
- 7. A description of any criminal offense of which the applicant has been found guilty, regardless of whether adjudication of guilt was withheld, or to which the applicant has pled guilty or nolo contendere. A criminal offense committed in another jurisdiction which would have been a felony or misdemeanor if committed in this state must be reported. If the applicant indicates that a criminal offense is under appeal and submits a copy of the notice for appeal of that criminal offense, the department must state that the criminal offense is under appeal if the criminal offense is reported in the applicant's profile. If the applicant indicates to the department that a criminal offense is under appeal, the applicant must, within 15 days after the disposition of the appeal, submit to the department a copy of the final written order of disposition.
- 8. A description of any final disciplinary action taken within the previous 10 years against the applicant by a licensing or regulatory body in any jurisdiction, by a specialty board that is recognized by the board or department, or by a licensed hospital, health maintenance organization,

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prepaid health clinic, ambulatory surgical center, or nursing
home. Disciplinary action includes resignation from or
nonrenewal of staff membership or the restriction of
privileges at a licensed hospital, health maintenance
organization, prepaid health clinic, ambulatory surgical
center, or nursing home taken in lieu of or in settlement of a
pending disciplinary case related to competence or character.
If the applicant indicates that the disciplinary action is
under appeal and submits a copy of the document initiating an
appeal of the disciplinary action, the department must state
that the disciplinary action is under appeal if the
disciplinary action is reported in the applicant's profile.
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- (b) In addition to the information required under paragraph (a), each applicant for initial certification or certification renewal must provide the information required of licensees pursuant to s. 455.697.
- (2) The Department of Health shall send a notice to each person certified under s. 464.012 at the certificateholder's last known address of record regarding the requirements for information to be submitted by advanced registered nurse practitioners pursuant to this section in conjunction with the renewal of such certificate.
- (3) Each person certified under s. 464.012 who has submitted information pursuant to subsection (1) must update that information in writing by notifying the Department of Health within 45 days after the occurrence of an event or the attainment of a status that is required to be reported by subsection (1). Failure to comply with the requirements of this subsection to update and submit information constitutes a ground for disciplinary action under chapter 464 and s. 31 455.624(1)(k). For failure to comply with the requirements of

this subsection to update and submit information, the department or board, as appropriate, may:

- (a) Refuse to issue a certificate to any person applying for initial certification who fails to submit and update the required information.
- (b) Issue a citation to any certificateholder who fails to submit and update the required information and may fine the certificateholder up to \$50 for each day that the certificateholder is not in compliance with this subsection. The citation must clearly state that the certificateholder may choose, in lieu of accepting the citation, to follow the procedure under s. 455.621. If the certificateholder disputes the matter in the citation, the procedures set forth in s. 455.621 must be followed. However, if the certificateholder does not dispute the matter in the citation with the department within 30 days after the citation is served, the citation becomes a final order and constitutes discipline. Service of a citation may be made by personal service or certified mail, restricted delivery, to the subject at the certificateholder's last known address.
- (4)(a) An applicant for initial certification under s.

 464.012 must submit a set of fingerprints to the Department of

 Health on a form and under procedures specified by the

 department, along with payment in an amount equal to the costs

 incurred by the Department of Health for a national criminal

 history check of the applicant.
- (b) An applicant for renewed certification who has not previously submitted a set of fingerprints to the Department of Health for purposes of certification must submit a set of fingerprints to the department as a condition of the initial renewal of his or her certificate after the effective date of

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this section. The applicant must submit the fingerprints on a
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   form and under procedures specified by the department, along
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   with payment in an amount equal to the costs incurred by the
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   Department of Health for a national criminal history check.
   For subsequent renewals, the applicant for renewed
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   certification must only submit information necessary to
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   conduct a statewide criminal history check, along with payment
   in an amount equal to the costs incurred by the Department of
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   Health for a statewide criminal history check.
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- (c)1. The Department of Health shall submit the fingerprints provided by an applicant for initial certification to the Florida Department of Law Enforcement for a statewide criminal history check, and the Florida Department of Law Enforcement shall forward the fingerprints to the Federal Bureau of Investigation for a national criminal history check of the applicant.
- 2. The department shall submit the fingerprints provided by an applicant for the initial renewal of certification to the Florida Department of Law Enforcement for a statewide criminal history check, and the Florida Department of Law Enforcement shall forward the fingerprints to the Federal Bureau of Investigation for a national criminal history check for the initial renewal of the applicant's certificate after the effective date of this section.
- 3. For any subsequent renewal of the applicant's certificate, the department shall submit the required information for a statewide criminal history check of the applicant to the Florida Department of Law Enforcement.
- (d) Any applicant for initial certification or renewal of certification as an advanced registered nurse practitioner who submits to the Department of Health a set of fingerprints

and information required for the criminal history check 2 required under this section shall not be required to provide a 3 subsequent set of fingerprints or other duplicate information 4 required for a criminal history check to the Agency for Health Care Administration, the Department of Juvenile Justice, or 5 6 the Department of Children and Family Services for employment 7 or licensure with such agency or department, if the applicant has undergone a criminal history check as a condition of 8 initial certification or renewal of certification as an 9 10 advanced registered nurse practitioner with the Department of Health, notwithstanding any other provision of law to the 11 12 contrary. In lieu of such duplicate submission, the Agency for Health Care Administration, the Department of Juvenile 13 Justice, and the Department of Children and Family Services 14 15 shall obtain criminal history information for employment or licensure of persons certified under s. 464.012 by such agency 16 17 or department from the Department of Health's health care 18 practitioner credentialing system.

- (5) Each person who is required to submit information pursuant to this section may submit additional information to the Department of Health. Such information may include, but is not limited to:
- (a) Information regarding publications in peer-reviewed professional literature within the previous 10 years.
- (b) Information regarding professional or community service activities or awards.
- (c) Languages, other than English, used by the applicant to communicate with patients or clients and identification of any translating service that may be available at the place where the applicant primarily conducts

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his or her practice.

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(d) An indication of whether the person participates in the Medicaid program.

Section 156. Section 455.5651, Florida Statutes, is amended to read:

455.5651 Practitioner profile; creation.--

- Beginning July 1, 1999, the Department of Health shall compile the information submitted pursuant to s. 455.565 into a practitioner profile of the applicant submitting the information, except that the Department of Health may develop a format to compile uniformly any information submitted under s. 455.565(4)(b). Beginning July 1, 2001, the Department of Health may compile the information submitted pursuant to s. 455.56503 into a practitioner profile of the applicant submitting the information.
- (2) On the profile published required under subsection (1), the department shall indicate if the information provided under s. 455.565(1)(a)7. or s. 455.56503(1)(a)7.is not corroborated by a criminal history check conducted according to this subsection. If the information provided under s. 455.565(1)(a)7. or s. 455.56503(1)(a)7.is corroborated by the criminal history check, the fact that the criminal history check was performed need not be indicated on the profile. The department, or the board having regulatory authority over the practitioner acting on behalf of the department, shall investigate any information received by the department or the board when it has reasonable grounds to believe that the practitioner has violated any law that relates to the practitioner's practice.
- (3) The Department of Health may include in each 31 | practitioner's practitioner profile that criminal information

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29 30 that directly relates to the practitioner's ability to competently practice his or her profession. The department must include in each practitioner's practitioner profile the following statement: "The criminal history information, if any exists, may be incomplete; federal criminal history information is not available to the public."

(4) The Department of Health shall include, with respect to a practitioner licensed under chapter 458 or chapter 459, a statement of how the practitioner has elected to comply with the financial responsibility requirements of s. 458.320 or s. 459.0085. The department shall include, with respect to practitioners subject to s. 455.694, a statement of how the practitioner has elected to comply with the financial responsibility requirements of that section. The department shall include, with respect to practitioners licensed under chapter 458, chapter 459, or chapter 461, information relating to liability actions which has been reported under s. 455.697 or s. 627.912 within the previous 10 years for any paid claim that exceeds \$5,000. Such claims information shall be reported in the context of comparing an individual practitioner's claims to the experience of other practitioners physicians within the same specialty, or profession if the practitioner is not a specialist, to the extent such information is available to the Department of Health. If information relating to a liability action is included in a practitioner's practitioner profile, the profile must also include the following statement: "Settlement of a claim may occur for a variety of reasons that do not necessarily reflect negatively on the professional competence or conduct of the practitioner physician. A payment in settlement of a medical malpractice 31 | action or claim should not be construed as creating a

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presumption that medical malpractice has occurred."

(5) The Department of Health may not include disciplinary action taken by a licensed hospital or an ambulatory surgical center in the practitioner profile.

- The Department of Health may include in the practitioner's practitioner profile any other information that is a public record of any governmental entity and that relates to a practitioner's ability to competently practice his or her profession. However, the department must consult with the board having regulatory authority over the practitioner before such information is included in his or her profile.
- (7) Upon the completion of a practitioner profile under this section, the Department of Health shall furnish the practitioner who is the subject of the profile a copy of it. The practitioner has a period of 30 days in which to review the profile and to correct any factual inaccuracies in it. The Department of Health shall make the profile available to the public at the end of the 30-day period. The department shall make the profiles available to the public through the World Wide Web and other commonly used means of distribution.
- (8) Making a practitioner profile available to the public under this section does not constitute agency action for which a hearing under s. 120.57 may be sought.

Section 157. Section 455.5653, Florida Statutes, is amended to read:

455.5653 Practitioner profiles; data storage. -- Effective upon this act becoming a law, the Department of Health must develop or contract for a computer system to accommodate the new data collection and storage requirements under this act pending the development and 31 operation of a computer system by the Department of Health for

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29 30 handling the collection, input, revision, and update of data submitted by physicians as a part of their initial licensure or renewal to be compiled into individual practitioner profiles. The Department of Health must incorporate any data required by this act into the computer system used in conjunction with the regulation of health care professions under its jurisdiction. The department must develop, by the year 2000, a schedule and procedures for each practitioner within a health care profession regulated within the Division of Medical Quality Assurance to submit relevant information to be compiled into a profile to be made available to the public. The Department of Health is authorized to contract with and negotiate any interagency agreement necessary to develop and implement the practitioner profiles. The Department of Health shall have access to any information or record maintained by the Agency for Health Care Administration, including any information or record that is otherwise confidential and exempt from the provisions of chapter 119 and s. 24(a), Art. I of the State Constitution, so that the Department of Health may corroborate any information that practitioners physicians are required to report under s. 455.565 or s. 455.56503.

Section 158. Section 455.5654, Florida Statutes, is amended to read:

455.5654 Practitioner profiles; rules; workshops. -- Effective upon this act becoming a law, the Department of Health shall adopt rules for the form of a practitioner profile that the agency is required to prepare. The Department of Health, pursuant to chapter 120, must hold public workshops for purposes of rule development to implement this section. An agency to which information is to be 31 submitted under this act may adopt by rule a form for the

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29 30 submission of the information required under s. 455.565 or s. 455.56503.

Section 159. Subsection (20) of section 400.462, Florida Statutes, is repealed.

Section 160. Paragraph (d) of subsection (4) of section 400.471, Florida Statutes, is amended to read:

400.471 Application for license; fee; provisional license; temporary permit. --

- (4) Each applicant for licensure must comply with the following requirements:
- (d) A provisional license may be granted to an applicant when each individual required by this section to undergo background screening has met the standards for the abuse registry background check through the agency and the Department of Law Enforcement background check, but the agency has not yet received background screening results from the Federal Bureau of Investigation. A standard license may be granted to the licensee upon the agency's receipt of a report of the results of the Federal Bureau of Investigation background screening for each individual required by this section to undergo background screening which confirms that all standards have been met, or upon the granting of a disqualification exemption by the agency as set forth in chapter 435. Any other person who is required to undergo level 2 background screening may serve in his or her capacity pending the agency's receipt of the report from the Federal Bureau of Investigation. However, the person may not continue to serve if the report indicates any violation of background screening standards and a disqualification exemption has not been requested of and granted by the agency as set forth in 31 chapter 435.

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Section 161. Subsection (3) is added to section 400.484, Florida Statutes, to read:

400.484 Right of inspection; deficiencies; fines.--

(3) In addition to any other penalties imposed pursuant to this section or part, the agency may assess costs related to an investigation that results in a successful prosecution, excluding costs associated with an attorney's time.

Section 162. Section 400.487, Florida Statutes, is amended to read:

400.487 Home health service agreements; physician's treatment orders; patient assessment; establishment and review of plan of care; provision of services; orders not to resuscitate.--

- (1) Services provided by a home health agency must be covered by an agreement between the home health agency and the patient or the patient's legal representative specifying the home health services to be provided, the rates or charges for services paid with private funds, and the method of payment. A The home health agency providing skilled care must make an assessment of the patient's needs within 48 hours after the start of services.
- (2) When required by the provisions of chapter 464, part I, part III, or part V of chapter 468, or chapter 486, the attending physician for a patient who is to receive skilled care must establish treatment orders. The treatment orders must be signed by the physician within 30 24 days after the start of care and must be reviewed, as at least every 62 days or more frequently as if the patient's illness requires, by the physician in consultation with home health agency 31 personnel that provide services to the patient.

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- A home health agency shall arrange for supervisory visits by a registered nurse to the home of a patient receiving home health aide services in accordance with the patient's direction and approval. If a client is accepted for home health aide services or homemaker or companion services and such services do not require a physician's order, the home health agency shall establish a service provision plan and maintain a record of the services provided.
- (4) Each patient or client has the right to be informed of and to participate in the planning of his or her care. Each patient must be provided, upon request, a copy of the plan of care or service provision plan established and maintained for that patient or client by the home health agency.
- When nursing services are ordered, the home health agency to which a patient has been admitted for care must provide the initial admission visit, all service evaluation visits, and the discharge visit by qualified personnel who are on the payroll of, and to whom an IRS payroll form W-2 will be issued by, the home health agency. Services provided by others under contractual arrangements to a home health agency must be monitored and managed by the admitting home health agency. The admitting home health agency is fully responsible for ensuring that all care provided through its employees or contract staff is delivered in accordance with this part and applicable rules.
- The skilled care services provided by a home health agency, directly or under contract, must be supervised and coordinated in accordance with the plan of care.
- (7) Home health agency personnel may withhold or 31 | withdraw cardiopulmonary resuscitation if presented with an

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29 30 order not to resuscitate executed pursuant to s. 401.45. The agency shall adopt rules providing for the implementation of such orders. Home health personnel and agencies shall not be subject to criminal prosecution or civil liability, nor be considered to have engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation pursuant to such an order and rules adopted by the agency.

Section 163. Section 400.497, Florida Statutes, is amended to read:

400.497 Rules establishing minimum standards.--The agency shall adopt, publish, and enforce rules to implement this part, including, as applicable, ss. 400.506 and 400.509, which must provide reasonable and fair minimum standards relating to:

- (1) The home health aide competency test and home health aide training. The qualifications, minimum training requirements, and supervision requirements of all home health agency personnel. The agency shall create the home health aide competency test and establish the curriculum and instructor qualifications for home health aide training. Licensed home health agencies may provide this training and shall furnish documentation of such training to other licensed home health agencies upon request. Successful passage of the competency test by home health aides may be substituted for the training required under this section and any rule adopted pursuant thereto.
- (2) Shared staffing. The agency shall allow shared staffing if the home health agency is part of a retirement community that provides multiple levels of care, is located on 31 one campus, is licensed under this chapter, and otherwise

meets the requirements of law and rule.

- health agency must require prospective employees and contractors to submit an employment or contractual history, and it must verify the employment or contractual history unless through diligent efforts such verification is not possible. The agency shall prescribe by rule the minimum requirements for establishing that diligent efforts have been made. There is no monetary liability on the part of, and no cause of action for damages arising against, a former employer of a prospective employee of or prospective independent contractor with a licensed home health agency who reasonably and in good faith communicates his or her honest opinions about the former employee's job performance. This subsection does not affect the official immunity of an officer or employee of a public corporation.
- (3) The criteria for the frequency of onsite licensure surveys.
 - (4) Licensure application and renewal.
- (5)(4) The administration of the home health agency, including requirements for onsite and electronic accessibility of supervisory personnel of home health agencies.
- (5) Procedures for administering drugs and biologicals.
- (6) Information to be included in $\frac{Procedures}{Procedures}$ for maintaining patients' records.
- (7) Ensuring that home health services are provided in accordance with the treatment orders established for each patient for whom physician orders are required.
 - (7)(8) Geographic service areas.
 - (9) Standards for contractual arrangements for the

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29 30 provision of home health services by providers not employed by the home health agency to whom the patient has been admitted.

Section 164. Paragraph (d) of subsection (2) and subsection (13) of section 400.506, Florida Statutes, are amended, subsection (17) is renumbered as subsection (18), and a new subsection (17) is added to said section, to read:

400.506 Licensure of nurse registries; requirements; penalties.--

- (2) Each applicant for licensure must comply with the following requirements:
- (d) A provisional license may be granted to an applicant when each individual required by this section to undergo background screening has met the standards for the abuse registry background check through the agency and the Department of Law Enforcement background check, but the agency has not yet received background screening results from the Federal Bureau of Investigation. A standard license may be granted to the applicant upon the agency's receipt of a report of the results of the Federal Bureau of Investigation background screening for each individual required by this section to undergo background screening which confirms that all standards have been met, or upon the granting of a disqualification exemption by the agency as set forth in chapter 435. Any other person who is required to undergo level 2 background screening may serve in his or her capacity pending the agency's receipt of the report from the Federal Bureau of Investigation. However, the person may not continue to serve if the report indicates any violation of background screening standards and a disqualification exemption has not been requested of and granted by the agency as set forth in 31 chapter 435.

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- (13) Each nurse registry must comply with the procedures set forth in s. 400.512 400.497(3) for maintaining records of the employment history of all persons referred for contract and is subject to the standards and conditions set forth in that section s. 400.512. However, an initial screening may not be required for persons who have been continuously registered with the nurse registry since September 30, 1990.
- (17) In addition to any other penalties imposed pursuant to this section or part, the agency may assess costs related to an investigation that results in a successful prosecution, excluding costs associated with an attorney's time. If the agency imposes such an assessment and the assessment is not paid, and if challenged is not the subject of a pending appeal, prior to the renewal of the license, the license shall not be issued until the assessment is paid or arrangements for payment of the assessment are made.

Section 165. Paragraph (d) of subsection (4) of section 400.509, Florida Statutes, is amended, subsection (14) is renumbered as subsection (15), and a new subsection (14) is added to said section, to read:

400.509 Registration of particular service providers exempt from licensure; certificate of registration; regulation of registrants. --

- (4) Each applicant for registration must comply with the following requirements:
- (d) A provisional registration may be granted to an applicant when each individual required by this section to undergo background screening has met the standards for the abuse-registry background check through the agency and the 31 Department of Law Enforcement background check, but the agency

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29 30 has not yet received background screening results from the Federal Bureau of Investigation. A standard registration may be granted to the applicant upon the agency's receipt of a report of the results of the Federal Bureau of Investigation background screening for each individual required by this section to undergo background screening which confirms that all standards have been met, or upon the granting of a disqualification exemption by the agency as set forth in chapter 435. Any other person who is required to undergo level 2 background screening may serve in his or her capacity pending the agency's receipt of the report from the Federal Bureau of Investigation. However, the person may not continue to serve if the report indicates any violation of background screening standards and if a disqualification exemption has not been requested of and granted by the agency as set forth in chapter 435.

(14) In addition to any other penalties imposed pursuant to this section or part, the agency may assess costs related to an investigation that results in a successful prosecution, excluding costs associated with an attorney's time. If the agency imposes such an assessment and the assessment is not paid, and if challenged is not the subject of a pending appeal, prior to the renewal of the registration, the registration shall not be issued until the assessment is paid or arrangements for payment of the assessment are made.

Section 166. Section 400.512, Florida Statutes, is amended to read:

400.512 Screening of home health agency personnel; nurse registry personnel; and companions and homemakers. -- The agency shall require employment or contractor screening as 31 provided in chapter 435, using the level 1 standards for

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29 30 screening set forth in that chapter, for home health agency personnel; persons referred for employment by nurse registries; and persons employed by companion or homemaker services registered under s. 400.509.

- (1) The agency may grant exemptions from disqualification from employment or contracting under this section as provided in s. 435.07.
- (2) The administrator of each home health agency, the managing employee of each nurse registry, and the managing employee of each companion or homemaker service registered under s. 400.509 must sign an affidavit annually, under penalty of perjury, stating that all personnel hired, contracted with, or registered on or after October 1, 1994, who enter the home of a patient or client in their service capacity have been screened and that its remaining personnel have worked for the home health agency or registrant continuously since before October 1, 1994.
- (3) As a prerequisite to operating as a home health agency, nurse registry, or companion or homemaker service under s. 400.509, the administrator or managing employee, respectively, must submit to the agency his or her name and any other information necessary to conduct a complete screening according to this section. The agency shall submit the information to the Department of Law Enforcement and shall conduct a search for any report of confirmed abuse the department's abuse hotline for state processing. shall review the record of the administrator or manager with respect to the offenses specified in this section and shall notify the owner of its findings. If disposition information is missing on a criminal record, the administrator or manager, 31 upon request of the agency, must obtain and supply within 30

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29 30 days the missing disposition information to the agency. Failure to supply missing information within 30 days or to show reasonable efforts to obtain such information will result in automatic disqualification.

- (4) Proof of compliance with the screening requirements of chapter 435 shall be accepted in lieu of the requirements of this section if the person has been continuously employed or registered without a breach in service that exceeds 180 days, the proof of compliance is not more than 2 years old, and the person has been screened through the agency for any reports of confirmed abuse central abuse registry and tracking system of the department and for any criminal record from by the Department of Law Enforcement. A home health agency, nurse registry, or companion or homemaker service registered under s. 400.509 shall directly provide proof of compliance to another home health agency, nurse registry, or companion or homemaker service registered under s. 400.509. The recipient home health agency, nurse registry, or companion or homemaker service registered under s. 400.509 may not accept any proof of compliance directly from the person who requires screening. Proof of compliance with the screening requirements of this section shall be provided upon request to the person screened by the home health agencies; nurse registries; or companion or homemaker services registered under s. 400.509.
- (5)(a) There is no monetary liability on the part of, and no cause of action for damages arises against, a licensed home health agency, licensed nurse registry, or companion or homemaker service registered under s. 400.509, that, upon notice of a confirmed report of adult abuse, neglect, or 31 exploitation through the agency, terminates the employee or

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contractor against whom the report was issued, whether or not the employee or contractor has filed for an exemption with the agency in accordance with chapter 435 and whether or not the time for filing has expired.

- (b) If a home health agency is asked about a person who was employed by or contracted with that agency, there is no monetary liability on the part of, and no cause of action for damages arising against, a former employer of the person for that agency, who reasonably and in good faith communicates his or her honest opinions about the former caregiver's job performance. This paragraph does not affect the official immunity of an officer or employee of a public corporation.
- (6) The costs of processing the statewide correspondence criminal records checks and the search of the department's central abuse hotline must be borne by the home health agency; the nurse registry; or the companion or homemaker service registered under s. 400.509, or by the person being screened, at the discretion of the home health agency, nurse registry, or s. 400.509 registrant.
- (7)(a) It is a misdemeanor of the first degree, punishable under s. 775.082 or s. 775.083, for any person willfully, knowingly, or intentionally to:
- 1. Fail, by false statement, misrepresentation, impersonation, or other fraudulent means, to disclose in any application for voluntary or paid employment a material fact used in making a determination as to such person's qualifications to be an employee under this section;
- Operate or attempt to operate an entity licensed or registered under this part with persons who do not meet the minimum standards for good moral character as contained in 31 this section; or

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- 3. Use information from the criminal records or the agency's reports of confirmed abuse central abuse hotline obtained under this section for any purpose other than screening that person for employment as specified in this section or release such information to any other person for any purpose other than screening for employment under this section.
- It is a felony of the third degree, punishable under s. 775.082, s. 775.083, or s. 775.084, for any person willfully, knowingly, or intentionally to use information from the juvenile records of a person obtained under this section for any purpose other than screening for employment under this section.

Section 167. Subsection (5) of section 455.587, Florida Statutes, is amended to read:

455.587 Fees; receipts; disposition.--

(5) All moneys collected by the department from fees or fines or from costs awarded to the agency by a court shall be paid into a trust fund used by the department to implement this part. The Legislature shall appropriate funds from this trust fund sufficient to carry out this part and the provisions of law with respect to professions regulated by the Division of Medical Quality Assurance within the department and the boards. The department may contract with public and private entities to receive and deposit revenue pursuant to this section. The department shall maintain separate accounts in the trust fund used by the department to implement this part for every profession within the department. maximum extent possible, the department shall directly charge all expenses to the account of each regulated profession. For 31 the purpose of this subsection, direct charge expenses

include, but are not limited to, costs for investigations, examinations, and legal services. For expenses that cannot be charged directly, the department shall provide for the proportionate allocation among the accounts of expenses incurred by the department in the performance of its duties with respect to each regulated profession. The regulation by the department of professions, as defined in this part, shall be financed solely from revenue collected by it from fees and other charges and deposited in the Medical Quality Assurance Trust Fund, and all such revenue is hereby appropriated to the department. However, it is legislative intent that each profession shall operate within its anticipated fees. The department may not expend funds from the account of a profession to pay for the expenses incurred on behalf of another profession, except that the Board of Nursing must pay for any costs incurred in the regulation of certified nursing assistants. The department shall maintain adequate records to support its allocation of agency expenses. The department shall provide any board with reasonable access to these records upon request. The department shall provide each board an annual report of revenue and direct and allocated expenses related to the operation of that profession. The board shall use these reports and the department's adopted long-range plan to determine the amount of license fees. A condensed version of this information, with the department's recommendations, shall be included in the annual report to the Legislature prepared under s. 455.644. Section 168. There is appropriated from the Medical Quality Assurance Trust Fund to the Department of Health the

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sum of \$280,000 to implement the provisions of this act.

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(Redesignate subsequent sections.)
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    ======= T I T L E A M E N D M E N T =========
    And the title is amended as follows:
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           On page 150, line 31, after the semicolon,
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    insert:
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           amending part XV of chapter 468, F.S., relating
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           to certified nursing assistants, and
           transferring that part to chapter 464, F.S.,
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           relating to nursing, to transfer from the
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           Department of Health to the Board of Nursing
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           responsibility and rulemaking authority for
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           regulation of certified nursing assistants;
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           changing requirements for nursing assistants;
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           transferring from the Department of Education
           to the board responsibility for approval of
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           training programs; revising grounds for which
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           the board may impose certain penalties;
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           creating s. 464.2085, F.S.; creating and
           providing requirements for a Council on
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           Certified Nursing Assistants; amending ss.
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           20.43, 39.01, 39.304, 110.131, 232.46,
           240.4075, 246.081, 310.102, 381.0302, 384.30,
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           384.31, 394.455, 395.0191, 400.021, 400.211,
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           400.402, 400.407, 400.4255, 400.426, 400.462,
           400.464, 400.506, 400.6105, 401.23, 401.252,
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           408.706, 409.908, 415.1085, 455.597, 455.604,
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           455.667, 455.677, 455.694, 455.707, 458.348,
           464.001, 464.002, 464.003, 464.006, 464.009,
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464.016, 464.018, 464.019, 464.022, 464.023, 464.027, 466.003, 467.003, 467.0125, 467.203, 468.505, 483.041, 483.801, 491.0112, 550.24055, 627.351, 627.357, 627.9404, 641.31, 766.101, 766.110, 766.1115, 877.111, 945.602, 960.28, 984.03, 985.03, F.S.; conforming references; revising application procedures for certified nursing assistants; revising registration requirements for certified nursing assistants; amending ss. 400.215, 400.512, F.S.; revising provisions relating to the granting of exemptions from disqualification for employment in nursing homes or home health agencies; amending s. 400.23, F.S.; authorizing licensed practical nurses in nursing home facilities to supervise the activities of other licensed practical nurses, certified nursing assistants, and other unlicensed personnel working in such facilities in accordance with rules adopted by the Board of Nursing; amending s. 455.557, F.S.; including advanced registered nurse practitioners under the credentialing program; creating s. 455.56503, F.S.; requiring advanced registered nurse practitioners to submit information and fingerprints for profiling purposes; amending s. 455.5651, F.S.; authorizing the department to publish certain information in practitioner profiles; amending s. 455.5653, F.S.; deleting obsolete provisions relating to scheduling and development of practitioner profiles for additional health

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care practitioners; providing access to information on advanced registered nurse practitioners maintained by the Agency for Health Care Administration for corroboration purposes; amending s. 455.5654, F.S.; providing for adoption by rule of a form for submission of profiling information; repealing s. 400.462(20), F.S., to delete the definition of "screening" under the Home Health Services Act; amending s. 400.471, F.S.; providing for an abuse registry background check through the Agency for Health Care Administration; amending s. 400.484, F.S.; providing for assessment of certain costs of an investigation that results in a successful prosecution; amending s. 400.487, F.S.; requiring home health service agreements; revising requirements for physician's treatment orders; providing for supervisory visits by a registered nurse under certain circumstances; deleting provisions relating to service provision plans; amending s. 400.497, F.S.; providing for a home health aide competency test, criteria for the frequency of onsite licensure surveys, and information to be included in patients' records; amending s. 400.506, F.S.; providing for an abuse registry background check through the Agency for Health Care Administration; authorizing assessment of certain costs of an investigation that results in a successful prosecution; revising a cross reference; making

1 renewal of license contingent on payment or 2 arrangement for payment of any unpaid 3 assessment; amending s. 400.509, F.S.; 4 providing for an abuse registry background 5 check through the Agency for Health Care 6 Administration; authorizing assessment of 7 certain costs of an investigation that results in a successful prosecution; making renewal of 8 9 registration contingent on payment or 10 arrangement for payment of any unpaid assessment; amending s. 400.512, F.S.; revising 11 12 provisions relating to the screening of home health agency, nurse registry, and companion 13 14 and homemaker service personnel; requiring the 15 Agency for Health Care Administration to conduct the search for reports of confirmed 16 17 abuse; providing an exemption from liability under certain conditions for providing opinions 18 19 on the job performance of former employees and 20 contract workers; providing conforming changes; 21 amending s. 455.587, F.S.; providing requirements for funding regulation of 22 professions by the Department of Health; 23 24 providing an appropriation; 25 26 27 28 29 30

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