Florida Senate - 2005

By Senator Saunders

37-1060-05

1	A bill to be entitled
2	An act relating to health care risk management;
3	amending s. 395.10974, F.S.; revising the fee
4	requirements for applicants for licensure to
5	practice health care risk management; amending
6	s. 395.0197, F.S.; requiring that a licensed
7	health care facility use the services of a
8	licensed risk manager rather than hire a
9	licensed risk manager; providing that a risk
10	manager may not be responsible for more than
11	four internal risk management programs in
12	separate hospitals, unless the hospitals are
13	under one corporate ownership or the risk
14	management programs are in rural hospitals;
15	amending s. 456.072, F.S.; providing that
16	invasive action taken in preparation of the
17	patient constitutes grounds for which specified
18	disciplinary actions may be taken; provides
19	that noninvasive preparatory procedures do not
20	constitute grounds for which specified
21	disciplinary actions may be taken; providing an
22	exception for disciplinary action when leaving
23	a foreign body in a patient if leaving the
24	foreign body is medically indicated and
25	documented in the patient record; amending s.
26	395.3025, F.S.; clarifying circumstances under
27	which confidential patient records may be
28	disclosed by health care facility personnel and
29	other licensed health care facilities for the
30	purpose of treating a patient; authorizing the
31	disclosure of confidential patient records by

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1 facility personnel for the purposes of 2 treatment, payment, and its own health care 3 operations; authorizing the disclosure of 4 confidential patient records to health care 5 oversight agencies and researchers of facility б personnel for research purposes; defining the 7 term "marketing" for purposes of patient 8 treatment records that are confidential and exempt from the public-records law; providing 9 10 an effective date. 11 12 Be It Enacted by the Legislature of the State of Florida: 13 Section 1. Subsection (3) of section 395.10974, 14 Florida Statutes, is amended to read: 15 395.10974 Health care risk managers; gualifications, 16 17 licensure, fees.--(3) The agency shall issue a license to practice 18 health care risk management to any applicant who qualifies 19 under this section. The amount of the fees shall be 20 21 established by rule, as follows: and submits an application 22 fee of not more than \$75, a fingerprinting fee of not more 23 than \$75, and a license fee of not more than \$100. The agency shall by rule establish fees and procedures for the issuance 2.4 and cancellation of licenses. 25 Section 2. Subsection (2) of section 395.0197, Florida 26 27 Statutes, is amended to read: 2.8 395.0197 Internal risk management program.--29 (2) The internal risk management program is the responsibility of the governing board of the health care 30 facility. Each licensed facility shall use the services of 31

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1 hire a risk manager, licensed under s. 395.10974, who is 2 responsible for implementation and oversight of such facility's internal risk management program as required by 3 this section. A risk manager must not be made responsible for 4 more than four internal risk management programs in separate 5 6 hospitals licensed facilities, unless the hospitals facilities 7 are under one corporate ownership or the risk management 8 programs are in rural hospitals. Section 3. Paragraphs (aa) and (bb) of subsection (1) 9 of section 456.072, Florida Statutes, are amended to read: 10 456.072 Grounds for discipline; penalties; 11 12 enforcement.--13 (1) The following acts shall constitute grounds for which the disciplinary actions specified in subsection (2) may 14 15 be taken: (aa) Performing or attempting to perform health care 16 17 services on the wrong patient, a wrong-site procedure, a wrong 18 procedure, or an unauthorized procedure or a procedure that is medically unnecessary or otherwise unrelated to the patient's 19 diagnosis or medical condition. For the purposes of this 20 21 paragraph, performing or attempting to perform health care services includes invasive action taken in furtherance of the 22 23 preparation of the patient, but does not include those preparations that are noninvasive. 2.4 25 (bb) Leaving a foreign body in a patient, such as a sponge, clamp, forceps, surgical needle, or other 26 27 paraphernalia commonly used in surgical, examination, or other 2.8 diagnostic procedures, unless leaving the foreign body is medically indicated and documented in the patient record. For 29 the purposes of this paragraph, it shall be legally presumed 30 that retention of a foreign body is not in the best interest 31

1 of the patient and is not within the standard of care of the 2 profession, unless medically indicated and documented in the patient record regardless of the intent of the professional. 3 Section 4. Subsections (4) and (7) of section 4 395.3025, Florida Statutes, are amended to read: 5 б 395.3025 Patient and personnel records; copies; 7 examination. --(4) Patient records are confidential and must not be 8 disclosed without the consent of the person to whom they 9 pertain, but appropriate disclosure may be made without such 10 consent to: 11 12 (a) Licensed Facility personnel and all other licensed 13 health care facilities and practitioners if such disclosure pertains to the facility's treatment of the patient or the 14 treatment by another health care provider of the patient 15 16 attending physicians for use in connection with the treatment 17 of the patient. 18 (b) Licensed Facility personnel may disclose protected health information for treatment and payment and for purposes 19 of the facility's health care operations as defined by 45 2.0 21 C.F.R. 160 and 164 only for administrative purposes or risk 22 management and quality assurance functions. 23 (c) Health care oversight agencies The agency, for 2.4 purposes of health care cost containment. 25 (d) In any civil or criminal action, unless otherwise prohibited by law, upon the issuance of a subpoena from a 26 27 court of competent jurisdiction and proper notice by the party 2.8 seeking such records to the patient or his or her legal 29 representative. 30 (e) The agency upon subpoena issued pursuant to s. 456.071, but the records obtained thereby must be used solely 31

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1	for the purpose of the agency and the appropriate professional
2	board in its investigation, prosecution, and appeal of
3	disciplinary proceedings. If the agency requests copies of the
4	records, the facility shall charge no more than its actual
5	copying costs, including reasonable staff time. The records
6	must be sealed and must not be available to the public
7	pursuant to s. 119.07(1) or any other statute providing access
8	to records, nor may they be available to the public as part of
9	the record of investigation for and prosecution in
10	disciplinary proceedings made available to the public by the
11	agency or the appropriate regulatory board. However, the
12	agency must make available, upon written request by a
13	practitioner against whom probable cause has been found, any
14	such records that form the basis of the determination of
15	probable cause.
16	(f) The Department of Health or its agent, for the
17	purpose of establishing and maintaining a trauma registry and
18	for the purpose of ensuring that hospitals and trauma centers
19	are in compliance with the standards and rules established
20	under ss. 395.401, 395.4015, 395.4025, 395.404, 395.4045, and
21	395.405, and for the purpose of monitoring patient outcome at
22	hospitals and trauma centers that provide trauma care
23	services.
24	(g) The Department of Children and Family Services or
25	its agent, for the purpose of investigations of cases of
26	abuse, neglect, or exploitation of children or vulnerable
27	adults.
28	(h) The State Long-Term Care Ombudsman Council and the
29	local long-term care ombudsman councils, with respect to the
30	records of a patient who has been admitted from a nursing home
31	or long-term care facility, when the councils are conducting
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1 an investigation involving the patient as authorized under 2 part II of chapter 400, upon presentation of identification as a council member by the person making the request. Disclosure 3 under this paragraph shall only be made after a competent 4 patient or the patient's representative has been advised that 5 6 disclosure may be made and the patient has not objected. 7 (i) A local trauma agency or a regional trauma agency 8 that performs quality assurance activities, or a panel or committee assembled to assist a local trauma agency or a 9 regional trauma agency in performing quality assurance 10 activities. Patient records obtained under this paragraph are 11 12 confidential and exempt from s. 119.07(1) and s. 24(a), Art. I 13 of the State Constitution. (j) Organ procurement organizations, tissue banks, and 14 eye banks required to conduct death records reviews pursuant 15 to s. 395.2050. 16 17 (k) The Medicaid Fraud Control Unit in the Department 18 of Legal Affairs pursuant to s. 409.920. (1) The Department of Financial Services, or an agent, 19 employee, or independent contractor of the department who is 20 21 auditing for unclaimed property pursuant to chapter 717. 22 (m) Researchers or facility personnel for research 23 purposes if the facility or researchers demonstrate compliance with the requirements of 45 C.F.R. s. 164.512(12)(i). 2.4 (7)(a) If the content of any record of patient 25 treatment is provided under this section, the recipient, if 26 27 other than the patient or the patient's representative, may 2.8 use such information only for the purpose provided and may not 29 further disclose any information to any other person or entity, unless expressly permitted by the written consent of 30 the patient. A general authorization for the release of 31

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1 medical information is not sufficient for this purpose. The 2 content of such patient treatment record is confidential and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. 3 I of the State Constitution. 4 5 (b) Absent a specific written release or authorization 6 permitting utilization of patient information for solicitation 7 or marketing the sale of goods or services, any use of such 8 that information for that purpose those purposes is prohibited. As used in this paragraph, the term "marketing" 9 10 has the same meaning as set forth in 45 C.F.R. s. 164.501 11 Section 5. This act shall take effect July 1, 2005. 12 13 14 SENATE SUMMARY 15 Establisher fees for health care risk management licenses. Provides that a health care facility only need use the services of, instead of hire, a licensed risk 16 manager. Requires that the licensed risk manager must not 17 be responsible for more than four risk management programs in separate hospitals, but provides exceptions 18 to the requirement. Provides that invasive preparatory procedures constitute grounds for specific disciplinary 19 actions while noninvasive preparatory procedures do not. Provides that leaving a foreign body in a patient does 20 not constitute grounds for discipline if doing so is medically indicated and documented in the patient record. 21 Provides additional situations in which confidential patient records may be disclosed. Defines the term 22 "marketing" for purposes of a public-records exemption. 23 2.4 25 26 27 28 29 30 31

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