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#### 1 A bill to be entitled 2 An act relating to medical malpractice; creating ss. 3 458.3175, 459.0066, and 466.005, F.S.; requiring the 4 Department of Health to issue expert witness certificates 5 to certain physicians and dentists licensed outside of the 6 state; providing application and certification 7 requirements; establishing application fees; providing for 8 the validity and use of certifications; exempting 9 physicians and dentists issued certifications from certain 10 licensure and fee requirements; amending ss. 458.331, 11 459.015, and 466.028, F.S.; providing additional acts that constitute grounds for denial of a license or disciplinary 12 action to which penalties apply; providing construction 13 14 with respect to the doctrine of incorporation by 15 reference; amending ss. 458.351 and 459.026, F.S.; 16 requiring the Board of Medicine and the Board of Osteopathic Medicine to adopt within a specified period 17 certain patient forms specifying cataract surgery risks; 18 19 specifying that an incident resulting from risks disclosed 20 in the patient form is not an adverse incident; providing 21 for the execution and admissibility of the patient forms 22 in civil and administrative proceedings; creating a 23 rebuttable presumption that a physician disclosed cataract 24 surgery risks if the patient form is executed; amending s. 25 627.4147, F.S.; deleting a requirement that medical 26 malpractice insurance contracts contain a clause authorizing the insurer to make and conclude certain 27 28 offers within policy limits over the insured's veto;

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29 amending s. 766.102, F.S.; defining terms; providing that 30 certain insurance information is not admissible as 31 evidence in medical negligence actions; establishing the 32 burden of proof that a claimant must meet in certain damage claims against health care providers based on death 33 or personal injury; requiring that certain expert 34 35 witnesses who provide certain expert testimony meet 36 certain licensure or certification requirements; excluding 37 a health care provider's failure to comply with or breach 38 of federal requirements from evidence in medical 39 negligence cases in the state; amending s. 766.106, F.S.; requiring claimants for medical malpractice to execute an 40 authorization form; allowing prospective medical 41 42 malpractice defendants to interview a claimant's treating 43 health care provider without notice to or the presence of 44 the claimant or the claimant's legal representative; 45 authorizing prospective defendants to take unsworn statements of a claimant's health care provider; creating 46 47 s. 766.1065, F.S.; requiring that presuit notice for 48 medical negligence claims be accompanied by an 49 authorization for release of protected health information; 50 providing requirements for the form of such authorization; 51 amending s. 766.206, F.S.; requiring dismissal of a 52 medical malpractice claim if such authorization is not 53 completed in good faith; amending s. 768.0981, F.S.; 54 limiting the liability of hospitals related to certain 55 medical negligence claims; providing an effective date.

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57	Be It Enacted by the Legislature of the State of Florida:
58	
59	Section 1. Section 458.3175, Florida Statutes, is created
60	to read:
61	458.3175 Expert witness certificate
62	(1) (a) The department shall issue a certificate
63	authorizing a physician who holds an active and valid license to
64	practice medicine in another state or a province of Canada to
65	provide expert testimony in this state, if the physician submits
66	to the department:
67	1. A complete registration application containing the
68	physician's legal name, mailing address, telephone number,
69	business locations, the names of the jurisdictions where the
70	physician holds an active and valid license to practice
71	medicine, and the license number or other identifying number
72	issued to the physician by the jurisdiction's licensing entity;
73	and
74	2. An application fee of \$50.
75	(b) The department shall approve an application for an
76	expert witness certificate within 7 business days after receipt
77	of the completed application and payment of the application fee
78	if the applicant holds an active and valid license to practice
79	medicine in another state or a province of Canada and has not
80	had a previous expert witness certificate revoked by the board.
81	An application is approved by default if the department does not
82	act upon the application within the required period. A physician
83	must notify the department in writing of his or her intent to
84	rely on a certificate approved by default.

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85 (c) An expert witness certificate is valid for 2 years 86 after the date of issuance. (2) An expert witness certificate authorizes the physician 87 88 to whom the certificate is issued to do only the following: 89 (a) Provide a verified written medical expert opinion as 90 provided in s. 766.203. 91 (b) Provide expert testimony about the prevailing 92 professional standard of care in connection with medical 93 negligence litigation pending in this state against a physician licensed under this chapter or chapter 459. 94 95 (3) An expert witness certificate does not authorize a 96 physician to engage in the practice of medicine as defined in s. 97 458.305. A physician issued a certificate under this section who 98 does not otherwise practice medicine in this state is not 99 required to obtain a license under this chapter or pay any 100 license fees, including, but not limited to, a neurological 101 injury compensation assessment. An expert witness certificate 102 shall be treated as a license in any disciplinary action, and 103 the holder of an expert witness certificate shall be subject to 104 discipline by the board. 105 Section 2. Subsection (11) is added to section 458.331, 106 Florida Statutes, paragraphs (oo) through (qq) of subsection (1) 107 of that section are redesignated as paragraphs (pp) through 108 (rr), respectively, and a new paragraph (oo) is added to that subsection, to read: 109 458.331 Grounds for disciplinary action; action by the 110 111 board and department.-The following acts constitute grounds for denial of a 112 (1) Page 4 of 26

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113	license or disciplinary action, as specified in s. 456.072(2):
114	(oo) Providing misleading, deceptive, or fraudulent expert
115	witness testimony related to the practice of medicine.
116	(11) The purpose of this section is to facilitate uniform
117	discipline for those acts made punishable under this section
118	and, to this end, a reference to this section constitutes a
119	general reference under the doctrine of incorporation by
120	reference.
121	Section 3. Subsection (6) of section 458.351, Florida
122	Statutes, is renumbered as subsection (7), and a new subsection
123	(6) is added to that section to read:
124	458.351 Reports of adverse incidents in office practice
125	settings
126	(6)(a) The board shall adopt rules establishing a standard
127	informed consent form that sets forth the recognized specific
128	risks related to cataract surgery. The board must propose such
129	rules within 90 days after the effective date of this
130	subsection.
131	(b) Before formally proposing the rule, the board must
132	consider information from physicians licensed under this chapter
133	or chapter 459 regarding recognized specific risks related to
134	cataract surgery and the standard informed consent forms adopted
135	for use in the medical field by other states.
136	(c) A patient's informed consent is not executed until the
137	patient, or a person authorized by the patient to give consent,
138	and a competent witness sign the form adopted by the board.
139	(d) An incident resulting from recognized specific risks
140	described in the signed consent form is not considered an
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141	adverse incident for purposes of s. 395.0197 and this section.
142	(e) In a civil action or administrative proceeding against
143	a physician based on his or her alleged failure to properly
144	disclose the risks of cataract surgery, a patient's informed
145	consent executed as provided in paragraph (c) on the form
146	adopted by the board is admissible as evidence and creates a
147	rebuttable presumption that the physician properly disclosed the
148	risks.
149	Section 4. Section 459.0066, Florida Statutes, is created
150	to read:
151	459.0066 Expert witness certificate
152	(1) (a) The department shall issue a certificate
153	authorizing a physician who holds an active and valid license to
154	practice osteopathic medicine in another state or a province of
155	Canada to provide expert testimony in this state, if the
156	physician submits to the department:
157	1. A complete registration application containing the
158	physician's legal name, mailing address, telephone number,
159	business locations, the names of the jurisdictions where the
160	physician holds an active and valid license to practice
161	osteopathic medicine, and the license number or other
162	identifying number issued to the physician by the jurisdiction's
163	licensing entity; and
164	2. An application fee of \$50.
165	(b) The department shall approve an application for an
166	expert witness certificate within 7 business days after receipt
167	of the completed application and payment of the application fee
168	if the applicant holds an active and valid license to practice
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169 osteopathic medicine in another state or a province of Canada 170 and has not had a previous expert witness certificate revoked by 171 the board. An application is approved by default if the 172 department does not act upon the application within the required 173 period. A physician must notify the department in writing of his 174 or her intent to rely on a certificate approved by default. 175 (C) An expert witness certificate is valid for 2 years 176 after the date of issuance. 177 (2) An expert witness certificate authorizes the physician to whom the certificate is issued to do only the following: 178 179 (a) Provide a verified written medical expert opinion as 180 provided in s. 766.203. Provide expert testimony about the prevailing 181 (b) professional standard of care in connection with medical 182 183 negligence litigation pending in this state against a physician 184 licensed under chapter 458 or this chapter. 185 (3) An expert witness certificate does not authorize a 186 physician to engage in the practice of osteopathic medicine as 187 defined in s. 459.003. A physician issued a certificate under 188 this section who does not otherwise practice osteopathic 189 medicine in this state is not required to obtain a license under 190 this chapter or pay any license fees, including, but not limited 191 to, a neurological injury compensation assessment. An expert 192 witness certificate shall be treated as a license in any 193 disciplinary action, and the holder of an expert witness 194 certificate shall be subject to discipline by the board. 195 Section 5. Subsection (11) is added to section 459.015, 196 Florida Statutes, paragraphs (qq) through (ss) of subsection (1) Page 7 of 26

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197	of that section are redesignated as paragraphs (rr) through
198	(tt), respectively, and a new paragraph (qq) is added to that
199	subsection, to read:
200	459.015 Grounds for disciplinary action; action by the
201	board and department
202	(1) The following acts constitute grounds for denial of a
203	license or disciplinary action, as specified in s. 456.072(2):
204	(qq) Providing misleading, deceptive, or fraudulent expert
205	witness testimony related to the practice of osteopathic
206	medicine.
207	(11) The purpose of this section is to facilitate uniform
208	discipline for those acts made punishable under this section
209	and, to this end, a reference to this section constitutes a
210	general reference under the doctrine of incorporation by
211	reference.
212	Section 6. Section 466.005, Florida Statutes, is created
213	to read:
214	466.005 Expert witness certificate
215	(1)(a) The department shall issue a certificate
216	authorizing a dentist who holds an active and valid license to
217	practice dentistry in another state or a province of Canada to
218	provide expert testimony in this state, if the dentist submits
219	to the department:
220	1. A complete registration application containing the
221	dentist's legal name, mailing address, telephone number,
222	business locations, the names of the jurisdictions where the
223	dentist holds an active and valid license to practice dentistry,
224	and the license number or other identifying number issued to the
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225	dentist by the jurisdiction's licensing entity; and
226	2. An application fee of \$50.
227	(b) The department shall approve an application for an
228	expert witness certificate within 7 business days after receipt
229	of the completed application and payment of the application fee
230	if the applicant holds an active and valid license to practice
231	dentistry in another state or a province of Canada and has not
232	had a previous expert witness certificate revoked by the board.
233	An application is approved by default if the department does not
234	act upon the application within the required period. A dentist
235	must notify the department in writing of his or her intent to
236	rely on a certificate approved by default.
237	(c) An expert witness certificate is valid for 2 years
238	after the date of issuance.
239	(2) An expert witness certificate authorizes the dentist
240	to whom the certificate is issued to do only the following:
241	(a) Provide a verified written medical expert opinion as
242	provided in s. 766.203.
243	(b) Provide expert testimony about the prevailing
244	professional standard of care in connection with medical
245	negligence litigation pending in this state against a dentist
246	licensed under this chapter.
247	(3) An expert witness certificate does not authorize a
248	dentist to engage in the practice of dentistry as defined in s.
249	466.003. A dentist issued a certificate under this section who
250	does not otherwise practice dentistry in this state is not
251	required to obtain a license under this chapter or pay any
252	license fees. An expert witness certificate shall be treated as
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253	a license in any disciplinary action, and the holder of an
254	expert witness certificate shall be subject to discipline by the
255	board.
256	Section 7. Subsection (8) is added to section 466.028,
257	Florida Statutes, paragraph (ll) of subsection (1) of that
258	section is redesignated as paragraph (mm), and a new paragraph
259	(ll) is added to that subsection, to read:
260	466.028 Grounds for disciplinary action; action by the
261	board
262	(1) The following acts constitute grounds for denial of a
263	license or disciplinary action, as specified in s. 456.072(2):
264	(11) Providing misleading, deceptive, or fraudulent expert
265	witness testimony related to the practice of dentistry.
266	(8) The purpose of this section is to facilitate uniform
267	discipline for those acts made punishable under this section
268	and, to this end, a reference to this section constitutes a
269	general reference under the doctrine of incorporation by
270	reference.
271	Section 8. Subsection (6) of section 459.026, Florida
272	Statutes, is renumbered as subsection (7), and a new subsection
273	(6) is added to that section to read:
274	459.026 Reports of adverse incidents in office practice
275	settings
276	(6)(a) The board shall adopt rules establishing a standard
277	informed consent form that sets forth the recognized specific
278	risks related to cataract surgery. The board must propose such
279	rules within 90 days after the effective date of this
280	subsection.

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281 (b) Before formally proposing the rule, the board must 282 consider information from physicians licensed under chapter 458 283 or this chapter regarding recognized specific risks related to 284 cataract surgery and the standard informed consent forms adopted 285 for use in the medical field by other states. 286 (c) A patient's informed consent is not executed until the 287 patient, or a person authorized by the patient to give consent, 288 and a competent witness sign the form adopted by the board. 289 (d) An incident resulting from recognized specific risks described in the signed consent form is not considered an 290 291 adverse incident for purposes of s. 395.0197 and this section. 292 (e) In a civil action or administrative proceeding against 293 a physician based on his or her alleged failure to properly 294 disclose the risks of cataract surgery, a patient's informed 295 consent executed as provided in paragraph (c) on the form 296 adopted by the board is admissible as evidence and creates a rebuttable presumption that the physician properly disclosed the 297 298 risks. 299 Section 9. Paragraph (b) of subsection (1) of section 627.4147, Florida Statutes, is amended to read: 300 301 627.4147 Medical malpractice insurance contracts.-302 In addition to any other requirements imposed by law, (1)303 each self-insurance policy as authorized under s. 627.357 or s. 304 624.462 or insurance policy providing coverage for claims arising out of the rendering of, or the failure to render, 305 medical care or services, including those of the Florida Medical 306 Malpractice Joint Underwriting Association, shall include: 307 308 Except as provided in subparagraph 2., a clause (b)1. Page 11 of 26

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309 authorizing the insurer or self-insurer to determine, to make, 310 and to conclude, without the permission of the insured, any 311 offer of admission of liability and for arbitration pursuant to 312 s. 766.106, settlement offer, or offer of judgment, if the offer 313 is within the policy limits. It is against public policy for any 314 insurance or self-insurance policy to contain a clause giving 315 the insured the exclusive right to veto any offer for admission 316 of liability and for arbitration made pursuant to s. 766.106, 317 settlement offer, or offer of judgment, when such offer is 318 within the policy limits. However, any offer of admission of liability, settlement offer, or offer of judgment made by an 319 320 insurer or self-insurer shall be made in good faith and in the best interests of the insured. 321

322 2.a. With respect to dentists licensed under chapter 466, 323 A clause clearly stating whether or not the insured has the 324 exclusive right to veto any offer of admission of liability and 325 for arbitration pursuant to s. 766.106, settlement offer, or 326 offer of judgment if the offer is within policy limits. An 327 insurer or self-insurer shall not make or conclude, without the permission of the insured, any offer of admission of liability 328 329 and for arbitration pursuant to s. 766.106, settlement offer, or offer of judgment, if such offer is outside the policy limits. 330 331 However, any offer for admission of liability and for arbitration made under s. 766.106, settlement offer, or offer of 332 judgment made by an insurer or self-insurer shall be made in 333 good faith and in the best interest of the insured. 334

335 <u>2.b.</u> If the policy contains a clause stating the insured
336 does not have the exclusive right to veto any offer or admission

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337 of liability and for arbitration made pursuant to s. 766.106, 338 settlement offer or offer of judgment, the insurer or self-339 insurer shall provide to the insured or the insured's legal 340 representative by certified mail, return receipt requested, a 341 copy of the final offer of admission of liability and for 342 arbitration made pursuant to s. 766.106, settlement offer or 343 offer of judgment and at the same time such offer is provided to 344 the claimant. A copy of any final agreement reached between the 345 insurer and claimant shall also be provided to the insurer or his or her legal representative by certified mail, return 346 347 receipt requested not more than 10 days after affecting such 348 agreement.

349 Section 10. Subsections (3), (4), and (5) of section 350 766.102, Florida Statutes, are amended, subsection (12) of that 351 section is renumbered as subsection (14), and new subsections 352 (12) and (13) are added to that section, to read:

353 766.102 Medical negligence; standards of recovery; expert 354 witness.-

355 (3) (a) As used in this subsection, the term: 356 1. "Insurer" means any public or private insurer, 357 including the Centers for Medicare and Medicaid Services. 358 2. "Reimbursement determination" means an insurer's 359 determination of the amount that the insurer will reimburse a 360 health care provider for health care services. 3. "Reimbursement policies" means an insurer's policies 361 362 and procedures governing its decisions regarding health 363 insurance coverage and method of payment and the data upon which 364 such policies and procedures are based, including, but not

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365 <u>limited to, data from national research groups and other patient</u> 366 safety data as defined in s. 766.1016.

367 The existence of a medical injury does shall not (b) 368 create any inference or presumption of negligence against a 369 health care provider, and the claimant must maintain the burden 370 of proving that an injury was proximately caused by a breach of 371 the prevailing professional standard of care by the health care provider. Any records, policies, or testimony of an insurer's 372 reimbursement policies or reimbursement determination regarding 373 374 the care provided to the plaintiff are not admissible as 375 evidence in any medical negligence action. However, the 376 discovery of the presence of a foreign body, such as a sponge, 377 clamp, forceps, surgical needle, or other paraphernalia commonly 378 used in surgical, examination, or diagnostic procedures, shall be prima facie evidence of negligence on the part of the health 379 380 care provider.

381 (4) (a) The Legislature is cognizant of the changing trends 382 and techniques for the delivery of health care in this state and 383 the discretion that is inherent in the diagnosis, care, and 384 treatment of patients by different health care providers. The 385 failure of a health care provider to order, perform, or 386 administer supplemental diagnostic tests is shall not be 387 actionable if the health care provider acted in good faith and 388 with due regard for the prevailing professional standard of 389 care.

(b) In an action for damages based on death or personal
 injury which alleges that such death or injury resulted from the
 failure of a health care provider to order, perform, or

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393 <u>administer supplemental diagnostic tests</u>, the claimant has the 394 <u>burden of proving by clear and convincing evidence that the</u> 395 <u>alleged actions of the health care provider represented a breach</u> 396 of the prevailing professional standard of care.

397 (5) A person may not give expert testimony concerning the
398 prevailing professional standard of care unless <u>the</u> that person
399 is a <del>licensed</del> health care provider <u>who holds an active and valid</u>
400 <u>license and conducts a complete review of the pertinent medical</u>
401 <u>records</u> and meets the following criteria:

402 (a) If the health care provider against whom or on whose
403 behalf the testimony is offered is a specialist, the expert
404 witness must:

1. Specialize in the same specialty as the health care provider against whom or on whose behalf the testimony is offered; or specialize in a similar specialty that includes the evaluation, diagnosis, or treatment of the medical condition that is the subject of the claim and have prior experience treating similar patients; and

411 2. Have devoted professional time during the 3 years
412 immediately preceding the date of the occurrence that is the
413 basis for the action to:

a. The active clinical practice of, or consulting with
respect to, the same or similar specialty that includes the
evaluation, diagnosis, or treatment of the medical condition
that is the subject of the claim and have prior experience
treating similar patients;

b. Instruction of students in an accredited healthprofessional school or accredited residency or clinical research

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421 program in the same or similar specialty; or

422 c. A clinical research program that is affiliated with an
423 accredited health professional school or accredited residency or
424 clinical research program in the same or similar specialty.

(b) If the health care provider against whom or on whose behalf the testimony is offered is a general practitioner, the expert witness must have devoted professional time during the 5 years immediately preceding the date of the occurrence that is the basis for the action to:

430 1. The active clinical practice or consultation as a431 general practitioner;

432 2. The instruction of students in an accredited health
433 professional school or accredited residency program in the
434 general practice of medicine; or

3. A clinical research program that is affiliated with an
accredited medical school or teaching hospital and that is in
the general practice of medicine.

(c) If the health care provider against whom or on whose behalf the testimony is offered is a health care provider other than a specialist or a general practitioner, the expert witness must have devoted professional time during the 3 years immediately preceding the date of the occurrence that is the basis for the action to:

1. The active clinical practice of, or consulting with respect to, the same or similar health profession as the health care provider against whom or on whose behalf the testimony is offered;

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2. The instruction of students in an accredited health Page 16 of 26

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449 professional school or accredited residency program in the same 450 or similar health profession in which the health care provider 451 against whom or on whose behalf the testimony is offered; or 452 3. A clinical research program that is affiliated with an 453 accredited medical school or teaching hospital and that is in 454 the same or similar health profession as the health care 455 provider against whom or on whose behalf the testimony is 456 offered. 457 (12) If a physician licensed under chapter 458 or chapter 459 or a dentist licensed under chapter 466 is the party against 458 459 whom, or on whose behalf, expert testimony about the prevailing 460 professional standard of care is offered, the expert witness 461 must be licensed under chapter 458, chapter 459, or chapter 466 462 or possess a valid expert witness certificate issued under s. 463 458.3175, s. 459.0066, or s. 466.005. 464

464 (13) A health care provider's failure to comply with or
465 breach of any federal requirement is not admissible as evidence
466 in any medical negligence case in this state.

Section 11. Paragraph (a) of subsection (2), subsection
(5), and paragraph (b) of subsection (6) of section 766.106,
Florida Statutes, are amended to read:

470 766.106 Notice before filing action for medical
471 negligence; presuit screening period; offers for admission of
472 liability and for arbitration; informal discovery; review.-

473

(2) PRESUIT NOTICE.-

474 (a) After completion of presuit investigation pursuant to
475 s. 766.203(2) and prior to filing a complaint for medical
476 negligence, a claimant shall notify each prospective defendant

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477 by certified mail, return receipt requested, of intent to 478 initiate litigation for medical negligence. Notice to each 479 prospective defendant must include, if available, a list of all 480 known health care providers seen by the claimant for the 481 injuries complained of subsequent to the alleged act of negligence, all known health care providers during the 2-year 482 483 period prior to the alleged act of negligence who treated or 484 evaluated the claimant, and copies of all of the medical records 485 relied upon by the expert in signing the affidavit, and the executed authorization form provided in s. 766.1065. The 486 requirement of providing the list of known health care providers 487 488 may not serve as grounds for imposing sanctions for failure to 489 provide presuit discovery.

490 (5) DISCOVERY AND ADMISSIBILITY.-A No statement, discussion, written document, report, or other work product 491 492 generated by the presuit screening process is not discoverable 493 or admissible in any civil action for any purpose by the 494 opposing party. All participants, including, but not limited to, 495 physicians, investigators, witnesses, and employees or 496 associates of the defendant, are immune from civil liability 497 arising from participation in the presuit screening process. 498 This subsection does not prevent a physician licensed under 499 chapter 458 or chapter 459 or a dentist licensed under chapter 500 466 who submits a verified written expert medical opinion from 501 being subject to denial of a license or disciplinary action <u>under s. 458.331(1)</u>(00), s. 459.015(1)(qq), or s. 502 466.028(1)(11). 503

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(6) INFORMAL DISCOVERY.-

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505 (b) Informal discovery may be used by a party to obtain 506 unsworn statements, the production of documents or things, and 507 physical and mental examinations, as follows:

Unsworn statements.-Any party may require other parties 508 1. 509 to appear for the taking of an unsworn statement. Such 510 statements may be used only for the purpose of presuit screening 511 and are not discoverable or admissible in any civil action for any purpose by any party. A party desiring to take the unsworn 512 513 statement of any party must give reasonable notice in writing to 514 all parties. The notice must state the time and place for taking 515 the statement and the name and address of the party to be examined. Unless otherwise impractical, the examination of any 516 517 party must be done at the same time by all other parties. Any 518 party may be represented by counsel at the taking of an unsworn 519 statement. An unsworn statement may be recorded electronically, 520 stenographically, or on videotape. The taking of unsworn 521 statements is subject to the provisions of the Florida Rules of 522 Civil Procedure and may be terminated for abuses.

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

530 3. Physical and mental examinations.—A prospective 531 defendant may require an injured claimant to appear for 532 examination by an appropriate health care provider. The

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533 prospective defendant shall give reasonable notice in writing to 534 all parties as to the time and place for examination. Unless 535 otherwise impractical, a claimant is required to submit to only 536 one examination on behalf of all potential defendants. The 537 practicality of a single examination must be determined by the nature of the claimant's condition, as it relates to the 538 539 liability of each prospective defendant. Such examination report 540 is available to the parties and their attorneys upon payment of 541 the reasonable cost of reproduction and may be used only for the purpose of presuit screening. Otherwise, such examination report 542 543 is confidential and exempt from the provisions of s. 119.07(1) and s. 24(a), Art. I of the State Constitution. 544

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

549 <u>5. Ex parte interviews of treating health care providers.</u> 550 <u>A prospective defendant or his or her legal representative may</u> 551 <u>interview the claimant's treating health care providers without</u> 552 <u>notice to or the presence of the claimant or the claimant's</u> 553 legal representative.

554 <u>6.5.</u> Unsworn statements of treating health care providers 555 Medical information release. The claimant must execute a medical 556 information release that allows A prospective defendant or his 557 or her legal representative <u>may also</u> to take unsworn statements 558 of the claimant's treating <u>health care providers</u> physicians. The 559 statements must be limited to those areas that are potentially 560 relevant to the claim of personal injury or wrongful death.

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Subject to the procedural requirements of subparagraph 1., a prospective defendant may take unsworn statements from a claimant's treating physicians. Reasonable notice and opportunity to be heard must be given to the claimant or the claimant's legal representative <u>before taking unsworn</u> <u>statements</u>. The claimant or claimant's legal representative has the right to attend the taking of such unsworn statements.

568 Section 12. Section 766.1065, Florida Statutes, is created 569 to read:

570 <u>766.1065</u> Authorization for release of protected health 571 information.—

572 (1) Presuit notice of intent to initiate litigation for 573 medical negligence under s. 766.106(2) must be accompanied by an 574 authorization for release of protected health information in the 575 form specified by this section, authorizing the disclosure of 576 protected health information that is potentially relevant to the 577 claim of personal injury or wrongful death. The presuit notice 578 is void if this authorization does not accompany the presuit 579 notice and other materials required by s. 766.106(2).

580 (2) If the authorization required by this section is 581 revoked, the presuit notice under s. 766.106(2) is deemed 582 retroactively void from the date of issuance, and any tolling 583 effect that the presuit notice may have had on any applicable 584 statute-of-limitations period is retroactively rendered void. 585 (3) The authorization required by this section shall be in 586 the following form and shall be construed in accordance with the 587 "Standards for Privacy of Individually Identifiable Health 588 Information" in 45 C.F.R. parts 160 and 164:

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589	
590	AUTHORIZATION FOR RELEASE OF PROTECTED HEALTH INFORMATION
591	
592	A. I, (Name of patient or authorized
593	representative) [hereinafter "Patient"], authorize that
594	(Name of health care provider to whom the presuit
595	notice is directed) and his/her/its insurer(s), self-
596	insurer(s), and attorney(s) may obtain and disclose
597	(within the parameters set out below) the protected health
598	information described below for the following specific
599	purposes:
600	1. Facilitating the investigation and evaluation of
601	the medical negligence claim described in the accompanying
602	presuit notice; or
603	2. Defending against any litigation arising out of
604	the medical negligence claim made on the basis of the
605	accompanying presuit notice.
606	B. The health information obtained, used, or
607	disclosed extends to, and includes, the verbal as well as
608	the written and is described as follows:
609	1. The health information in the custody of the
610	following health care providers who have examined,
611	evaluated, or treated the Patient in connection with
612	injuries complained of after the alleged act of
613	negligence: (List the name and current address of all
614	health care providers). This authorization extends to any
615	additional health care providers that may in the future

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616	evaluate, examine, or treat the Patient for the injuries
617	complained of.
618	2. The health information in the custody of the
619	following health care providers who have examined,
620	evaluated, or treated the Patient during a period
621	commencing 2 years before the incident that is the basis
622	of the accompanying presuit notice.
623	
624	(List the name and current address of such health care
625	providers, if applicable.)
626	
627	C. This authorization does not apply to the
628	following list of health care providers possessing health
629	care information about the Patient because the Patient
630	certifies that such health care information is not
631	potentially relevant to the claim of personal injury or
632	wrongful death that is the basis of the accompanying
633	presuit notice.
634	
635	(List the name of each health care provider to whom this
636	authorization does not apply and the inclusive dates of
637	examination, evaluation, or treatment to be withheld from
638	disclosure. If none, specify "none.")
639	
640	D. The persons or class of persons to whom the
641	Patient authorizes such health information to be disclosed
642	or by whom such health information is to be used:

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643	1. Any health care provider providing care or
644	treatment for the Patient.
645	2. Any liability insurer or self-insurer providing
646	liability insurance coverage, self-insurance, or defense
647	to any health care provider to whom presuit notice is
648	given regarding the care and treatment of the Patient.
649	3. Any consulting or testifying expert employed by
650	or on behalf of (name of health care provider to whom
651	presuit notice was given), his/her/its insurer(s), self-
652	insurer(s), or attorney(s) regarding to the matter of the
653	presuit notice accompanying this authorization.
654	4. Any attorney (including secretarial, clerical, or
655	paralegal staff) employed by or on behalf of (name of
656	health care provider to whom presuit notice was given)
657	regarding the matter of the presuit notice accompanying
658	this authorization.
659	5. Any trier of the law or facts relating to any
660	suit filed seeking damages arising out of the medical care
661	or treatment of the Patient.
662	E. This authorization expires upon resolution of the
663	claim or at the conclusion of any litigation instituted in
664	connection with the matter of the presuit notice
665	accompanying this authorization, whichever occurs first.
666	F. The Patient understands that, without exception,
667	the Patient has the right to revoke this authorization in
668	writing. The Patient further understands that the
669	consequence of any such revocation is that the presuit
670	notice under s. 766.106(2), Florida Statutes, is deemed
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671	retroactively void from the date of issuance, and any
672	tolling effect that the presuit notice may have had on any
673	applicable statute-of-limitations period is retroactively
674	rendered void.
675	G. The Patient understands that signing this
676	authorization is not a condition for continued treatment,
677	payment, enrollment, or eligibility for health plan
678	benefits.
679	H. The Patient understands that information used or
680	disclosed under this authorization may be subject to
681	additional disclosure by the recipient and may not be
682	protected by federal HIPAA privacy regulations.
683	
684	Signature of Patient/Representative:
685	Date:
686	Name of Patient/Representative:
687	Description of Representative's Authority:
688	Section 13. Subsection (2) of section 766.206, Florida
689	Statutes, is amended to read:
690	766.206 Presuit investigation of medical negligence claims
691	and defenses by court
692	(2) If the court finds that the notice of intent to
693	initiate litigation mailed by the claimant <u>does</u> <del>is</del> not <u>comply</u> <del>in</del>
694	compliance with the reasonable investigation requirements of ss.
695	766.201-766.212, including a review of the claim and a verified
696	written medical expert opinion by an expert witness as defined
697	in s. 766.202, or that the authorization accompanying the notice
698	of intent required under s. 766.1065 is not completed in good
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699 <u>faith by the claimant</u>, the court shall dismiss the claim, and 700 the person who mailed such notice of intent, whether the 701 claimant or the claimant's attorney, shall be personally liable 702 for all attorney's fees and costs incurred during the 703 investigation and evaluation of the claim, including the 704 reasonable attorney's fees and costs of the defendant or the 705 defendant's insurer.

706 Section 14. Section 768.0981, Florida Statutes, is amended 707 to read:

768.0981 Limitation on actions against insurers, prepaid 708 709 limited health service organizations, health maintenance 710 organizations, hospitals, or prepaid health clinics.-An entity 711 licensed or certified under chapter 395, chapter 624, chapter 712 636, or chapter 641 is shall not be liable for the medical negligence of a health care provider with whom the licensed or 713 714 certified entity has entered into a contract, other than an 715 employee of such licensed or certified entity, unless the 716 licensed or certified entity expressly directs or exercises 717 actual control over the specific conduct that caused injury. 718 Section 15. This act shall take effect July 1, 2011.

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