A bill to be entitled 1 2 An act relating to advanced practice registered 3 nurses; amending s. 464.003, F.S.; revising and 4 providing definitions; redesignating advanced 5 registered nurse practitioners as advanced practice 6 registered nurses; providing for independent advanced 7 practice registered nurses to practice advanced or 8 specialized nursing; revising composition of a joint 9 committee to include an independent advanced practice 10 registered nurse; exempting an independent advanced 11 practice registered nurse from a requirement that 12 certain medical acts be supervised by a physician; 13 amending s. 464.012, F.S.; revising advanced practice registered nurse certification requirements; 14 15 authorizing advanced practice registered nurses to 16 administer, dispense, and prescribe medicinal drugs 17 pursuant to a protocol; creating s. 464.0125, F.S.; providing for the registration of independent advanced 18 19 practice registered nurses who meet certain requirements; specifying acts that independent 20 21 advanced practice registered nurses are authorized to 22 perform without physician supervision or protocol; 23 providing for biennial renewal of registration, 24 including continuing education requirements; providing 25 for application and biennial renewal fees; providing 26 rulemaking authority; amending s. 464.015, F.S.; Page 1 of 154

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27 providing title protection for independent advanced 28 practice registered nurses; creating s. 464.0155, 29 F.S.; requiring independent advanced practice 30 registered nurses to report adverse incidents to the 31 Department of Health in a certain manner; providing 32 for department review of adverse incidents; 33 authorizing the department to take disciplinary action 34 in cases of adverse incidents; amending s. 464.016, 35 F.S.; providing penalties for illegally using certain 36 titles; amending s. 464.018, F.S.; adding grounds for 37 disciplinary actions against nurses; amending s. 38 39.303, F.S.; revising requirements relating to review of certain cases of abuse or neglect and standards for 39 face-to-face medical evaluations by a child protection 40 41 team; amending s. 39.304, F.S.; authorizing an 42 independent advanced practice registered nurse to 43 perform or order an examination and diagnose a child under certain circumstances without parental consent; 44 45 amending s. 90.503, F.S.; redefining the term "psychotherapist" to include an independent advanced 46 47 practice registered nurse with a specified scope of 48 practice; amending s. 112.0455, F.S.; authorizing an 49 independent advanced practice registered nurse to 50 collect specimens for drug testing; amending s. 51 121.0515, F.S.; designating an advanced practice 52 registered nurse as a special risk member under Page 2 of 154

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53 certain conditions; amending ss. 310.071, 310.073, and 54 310.081, F.S.; revising deputy pilot certification and 55 state pilot licensure requirements to permit an 56 independent advanced practice registered nurse to 57 administer the required physical examination; 58 broadening an exception to the prohibition against the 59 use of controlled substances by an applicant for a 60 deputy pilot certificate or a state pilot license to allow the use of controlled substances prescribed by 61 62 an independent advanced practice registered nurse or 63 an advanced practice registered nurse; requiring an 64 independent advanced practice registered nurse 65 performing the physical examination to know the minimum licensure standards and certify that such 66 67 standards are met; amending s. 320.0848, F.S.; 68 authorizing an independent advanced practice 69 registered nurse to certify that a person is disabled; 70 amending s. 381.00315, F.S.; authorizing the 71 reactivation of an independent advanced practice 72 registered nurse license in a public health emergency; 73 amending s. 381.00593, F.S.; redefining the term 74 "health care practitioner" to include an independent 75 advanced practice registered nurse; amending ss. 76 381.026, 383.141, 627.357, and 766.1115, F.S.; 77 revising the term "health care provider" to include an 78 independent advanced practice registered nurse; Page 3 of 154

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79 amending s. 382.008, F.S.; authorizing an independent 80 advanced practice nurse or an advanced practice registered nurse to file a certificate of death or 81 82 fetal death under certain circumstances; authorizing a 83 certified nurse midwife to provide certain information to a funeral director within a specified time period; 84 revising the term "primary or attending physician"; 85 86 amending s. 390.0111, F.S.; including an independent 87 advanced practice registered nurse in the list of 88 health care practitioners authorized to review an 89 ultrasound with a woman prior to an abortion procedure; amending s. 390.012, F.S.; including an 90 independent advanced practice registered nurse in the 91 list of health care practitioners authorized to 92 93 provide postoperative monitoring and required to be 94 available throughout an abortion procedure, remain at 95 the abortion clinic until all patients are discharged, and attempt to assess the patient's recovery within a 96 97 specified time; amending s. 394.455, F.S.; revising the term "psychiatric nurse" to include an independent 98 99 advanced practice registered nurse certified in a 100 specified specialty; amending s. 394.463, F.S.; authorizing an independent advanced practice 101 102 registered nurse or advanced practice registered nurse 103 to initiate an involuntary examination for mental 104 illness under certain circumstances; providing for Page 4 of 154

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105	examination of a patient by a psychiatric nurse;
106	authorizing a psychiatric nurse to approve the release
107	of a patient under certain conditions; amending s.
108	395.0191, F.S.; providing for eligibility of an
109	independent advanced practice registered nurse for
110	clinical privileges; providing an exception to the
111	requirement for onsite medical direction for certain
112	independent advanced practice registered nurses;
113	amending s. 395.605, F.S.; including independent
114	advanced practice registered nurses in a list of
115	health care practitioners that must supervise the care
116	of a patient or be on duty for a specified duration in
117	an emergency care setting; amending s. 397.311, F.S.;
118	revising the term "qualified professional" to include
119	an independent advanced practice registered nurse;
120	conforming terminology; amending s. 397.405, F.S.;
121	providing that an independent advanced practice
122	registered nurse's practice may not be limited under
123	certain circumstances; amending s. 397.501, F.S.;
124	prohibiting the denial of certain services to an
125	individual who takes medication prescribed by an
126	independent advanced practice registered nurse or an
127	advanced practice registered nurse; amending s.
128	400.021, F.S.; revising the term "geriatric outpatient
129	clinic" to include a site staffed by an independent
130	advanced practice registered nurse; amending s.
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131 400.0255, F.S.; including independent advanced 132 practice registered nurses in a list of health care 133 practitioners who must sign a notice of discharge or 134 transfer; amending s. 400.172, F.S.; revising 135 provisions relating to who may provide a prospective 136 respite care resident with certain medical information 137 to include independent advanced practice registered 138 nurses and advanced practice registered nurses; 139 amending s. 400.462, F.S.; defining the term 140 "independent advanced practice registered nurse"; 141 amending s. 400.487, F.S.; including independent 142 advanced practice registered nurses in a list of 143 health care practitioners who must establish treatment 144 orders for certain patients and under certain 145 circumstances; amending s. 400.506, F.S.; applying 146 requirements applicable to medical plans of treatment 147 to independent advanced practice registered nurses; 148 amending s. 400.9905, F.S.; exempting entities where 149 health care services are provided by independent 150 advanced practice registered nurses from clinic 151 licensure requirements; amending s. 401.445, F.S.; 152 prohibiting recovery of damages in court against an 153 independent advanced practice registered nurse under 154 certain circumstances; requiring an independent 155 advanced practice registered nurse to attempt to 156 obtain consent of a person prior to providing Page 6 of 154

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157 emergency services; amending s. 409.905, F.S.; 158 providing for the payment of independent advanced 159 practice registered nurses by the Agency for Health 160 Care Administration for mandatory Medicaid services; 161 providing for the gualification of rural health 162 clinics to be paid by the agency; amending s. 409.908, 163 F.S.; providing for the reimbursement of Medicaid 164 services provided by independent advanced practice 165 registered nurses; amending s. 409.9081, F.S.; 166 requiring copayments under the Medicaid program to be 167 paid for independent advanced practice registered nurse services; amending s. 409.973, F.S.; requiring 168 managed care plans to cover independent advanced 169 170 practice registered nurse services; amending s. 171 429.26, F.S.; prohibiting independent advanced 172practice registered nurses from having a financial 173 interest in the assisted living facility that employs 174 them; including independent advanced practice 175 registered nurses in a list of health care 176 practitioners from whom an assisted living facility 177 resident may obtain an examination prior to admission; 178 amending s. 429.918, F.S.; revising the term "ADRD 179 participant" to include participants who have a 180 documented diagnosis of Alzheimer's disease or a 181 dementia-related disorder from an independent advanced 182 practice registered nurse; including independent Page 7 of 154

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183	advanced practice registered nurses in a list of
184	health care practitioners from whom an ADRD
185	participant may obtain signed medical documentation;
186	amending s. 440.102, F.S.; authorizing, for the
187	purpose of drug-free workforce program requirements,
188	an independent advanced practice registered nurse to
189	collect a specimen for a drug test; amending s.
190	456.048, F.S.; requiring independent advanced practice
191	registered nurses to maintain medical malpractice
192	insurance or provide proof of financial
193	responsibility; exempting independent advanced
194	practice registered nurses from such requirements
195	under certain circumstances; amending s. 456.053,
196	F.S.; revising the term "board" to include the Board
197	of Nursing; revising the terms "health care provider"
198	and "sole provider" to include independent advanced
199	practice registered nurses; authorizing an independent
200	advanced practice registered nurse to make referrals
201	under certain circumstances; amending s. 456.072,
202	F.S.; requiring the suspension and fining of an
203	independent advanced practice registered nurse or
204	advanced practice registered nurse for prescribing or
205	dispensing a controlled substances in a certain
206	manner; amending s. 456.44, F.S.; providing certain
207	requirements for independent advanced practice
208	registered nurses and advanced practice registered
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209	nurses who prescribe controlled substances for the
210	treatment of chronic nonmalignant pain; amending s.
211	458.3265, F.S.; requiring an independent advanced
212	practice registered nurse to perform a physical
213	examination of a patient at a pain management clinic
214	under certain circumstances; amending ss. 458.348 and
215	459.025, F.S.; deleting obsolete provisions; amending
216	s. 459.0137, F.S.; requiring an independent advanced
217	practice registered nurse to perform a physical
218	examination of a patient at a pain management clinic
219	under certain circumstances; amending s. 464.0205,
220	F.S.; authorizing a retired volunteer nurse to work
221	under the direct supervision of an independent
222	advanced practice registered nurse; amending s.
223	480.0475; authorizing the operation of a massage
224	establishment during specified times if a massage is
225	prescribed by an independent advanced practice
226	registered nurse; amending s. 483.041, F.S.; revising
227	the term "licensed practitioner" to include an
228	independent advanced practice registered nurse;
229	amending s. 483.181, F.S.; requiring clinical
230	laboratories to accept a human specimen submitted by
231	an independent advanced practice registered nurse;
232	amending s. 486.021, F.S.; authorizing a physical
233	therapist to implement a plan of treatment provided by
234	an independent advanced practice registered nurse;
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235 amending s. 490.012, F.S.; allowing certain qualified 236 independent advanced practice registered nurses to use 237 the word, or a form of the word, "psychotherapy"; 238 amending s. 491.0057, F.S.; authorizing certain 239 qualified independent advanced practice registered 240 nurses to be licensed as marriage and family 241 therapists; amending s. 491.012, F.S.; authorizing 242 certain qualified independent advanced practice 243 registered nurses to use specified terms; amending s. 244 493.6108, F.S.; authorizing an independent advanced 245 practice registered nurse to certify the physical 246 fitness of a certain class of applicants to bear a 247 weapon or firearm; amending s. 626.9707, F.S.; 248 prohibiting discrimination by an insurer of a person 249 with sickle-cell trait for services authorized to be 250 provided by an independent advanced practice 251 registered nurse; amending s. 627.6471, F.S.; 252 requiring insurers under certain circumstances to 253 provide eligibility criteria for qualified independent 254 advanced practice registered nurses; amending s. 255 627.6472, F.S.; requiring insurers under certain 256 circumstances to provide eligibility criteria for 257 qualified independent advanced practice registered 258 nurses; prohibiting an exclusive provider organization 259 from discriminating against participation by a 260 qualified independent advanced practice registered Page 10 of 154

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261 nurse; amending s. 627.736, F.S.; requiring personal 262 injury protection insurance to cover a certain amount 263 of medical services provided by an independent 264 advanced practice registered nurse, practitioners 265 supervised by an independent advanced practice 266 registered nurse, or an entity wholly owned by one or 267 more independent advanced practice registered nurses; 268 providing for reimbursement amounts for independent 269 advanced practice registered nurses; amending s. 270 633.412, F.S.; permitting an applicant for 271 certification as a firefighter to obtain a medical 272 examination by an independent advanced practice 273 registered nurse; amending s. 641.3923, F.S.; 274 prohibiting a health maintenance organization from 275 discriminating against the participation of an 276 independent advanced practice registered nurse; 277 amending s. 641.495, F.S.; requiring a health 278 maintenance organization to disclose in certain 279 documents that certain services may be provided by 280 independent advanced practice registered nurses; 281 amending s. 744.703, F.S.; adding independent advanced 282 practice registered nurses to a list of authorized 283 professionals with whom a public guardian may contract 284 to carry out guardianship functions; amending s. 285 766.102, F.S.; providing requirements for 286 qualification as an expert witness in a medical Page 11 of 154

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287	negligence case concerning the standard of care for an
288	independent advanced practice registered nurse;
289	amending s. 766.103, F.S.; prohibiting recovery of
290	damages against an independent advanced practice
291	registered nurse under certain conditions; amending s.
292	766.1116, F.S.; revising the term "health care
293	practitioner" to include an independent advanced
294	practice registered nurse; amending s. 766.118, F.S.;
295	revising the term "practitioner" to include an
296	independent advanced practice registered nurse;
297	amending s. 768.135, F.S.; providing immunity from
298	liability for an independent advanced practice
299	registered nurse who provides volunteer services under
300	certain circumstances; amending s. 782.071, F.S.;
301	allowing a person serving community service in a
302	trauma center or hospital to be under the supervision
303	of an independent advanced practice registered nurse
304	or an advanced practice registered nurse; amending s.
305	794.08, F.S.; providing that the section does not
306	apply to procedures conducted by an independent
307	advanced practice registered nurse under certain
308	circumstances; amending s. 893.02, F.S.; revising the
309	term "practitioner" to include an independent advanced
310	practice registered nurse and an advanced practice
311	registered nurse; amending s. 943.13, F.S.;
312	authorizing a law enforcement officer or correctional
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313 officer to satisfy qualifications for employment or 314 appointment by passing a physical examination 315 conducted by an independent advanced practice 316 registered nurse; amending s. 945.603, F.S.; 317 authorizing the Correctional Medical Authority to 318 review and make recommendations as to the use of 319 advanced practice registered nurses to act as 320 physician extenders; amending s. 1002.20, F.S.; 321 preventing a school district and its employees and 322 agents from being held liable for the use of 323 epinephrine auto-injectors under certain circumstances 324 regardless if authorized by an independent advanced 325 practice registered nurse; amending s. 1002.42, F.S.; 326 preventing a private school and its employees and 327 agents from being held liable for the use of 328 epinephrine auto-injectors under certain circumstances 329 regardless if authorized by an independent advanced 330 practice registered nurse; amending s. 1006.062, F.S.; 331 authorizing nonmedical assistive personnel to perform 332 health services if trained by an independent advanced 333 practice registered nurse; requiring monitoring of 334 such personnel by an independent advanced practice 335 registered nurse; including independent advanced 336 practice registered nurses in a list of practitioners 337 who must determine whether such personnel may perform 338 certain invasive medical services; amending s.

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FLORIDA HOUSE OF REPRESENTATIVES	F	L	0	R		D	Α	ŀ	-	0	U	S	Е	0	F	R	Е	Р	R	Е	S	Е	Ν	Т	Α	Т		V	Е	S
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339 1006.20, F.S.; authorizing students athletes to 340 satisfy a medical evaluation requirement by having an 341 independent advanced practice registered nurse perform 342 the evaluation; amending ss. 110.12315, 252.515, 343 395.602, 397.427, 456.0391, 456.0392, 456.041, 344 458.331, 459.015, 464.004, 467.003, 483.801, 744.331, 345 1009.65, 1009.66, and 1009.67, F.S.; conforming 346 terminology; providing an effective date. 347 Be It Enacted by the Legislature of the State of Florida: 348 349 350 Section 1. Subsections (16) through (23) of section 351 464.003, Florida Statutes, are renumbered as subsections (17) 352 through (24), respectively, present subsections (2), (3), (20), 353 and (22) are amended, and a new subsection (16) is added to that 354 section, to read: 355 464.003 Definitions.-As used in this part, the term: 356 "Advanced or specialized nursing practice" or "to (2)357 practice advanced or specialized nursing" means, in addition to 358 the practice of professional nursing, the performance of 359 advanced-level nursing acts approved by the board which, by virtue of postbasic specialized education, training, and 360 361 experience, are appropriately performed by an independent 362 advanced practice registered nurse or an advanced practice 363 registered nurse practitioner. Within the context of advanced or 364 specialized nursing practice, the independent advanced practice Page 14 of 154

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365 registered nurse and advanced practice registered nurse 366 practitioner may perform acts of nursing diagnosis and nursing 367 treatment of alterations of the health status. The independent 368 advanced practice registered nurse and advanced practice 369 registered nurse practitioner may also perform acts of medical 370 diagnosis, and treatment, prescription, and operation which are 371 identified and approved by a joint committee composed of three 372 members appointed by the Board of Nursing, one of whom must be 373 an independent advanced practice registered nurse and one two of 374 whom must be an advanced practice registered nurse 375 practitioners; three members appointed by the Board of Medicine, 376 two of whom must have had work experience with advanced practice 377 registered nurses nurse practitioners; and the State Surgeon 378 General or the State Surgeon General's designee. Each committee 379 member appointed by a board shall be appointed to a term of 4 380 years unless a shorter term is required to establish or maintain 381 staggered terms. The Board of Nursing shall adopt rules 382 authorizing the performance of any such acts approved by the 383 joint committee. Unless otherwise specified by the joint 384 committee and unless such acts are performed by independent 385 advanced practice registered nurses, such medical acts must be performed under the general supervision of a practitioner 386 licensed under chapter 458, chapter 459, or chapter 466 within 387 388 the framework of standing protocols which identify the medical 389 acts to be performed and the conditions for their performance. 390 The department may, by rule, require that a copy of the protocol Page 15 of 154

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391 be filed with the department along with the notice required by 392 s. 458.348 or s. 459.025.

(3) "Advanced <u>practice</u> registered nurse <u>practitioner</u>"
means any person licensed in this state to practice professional
nursing and certified in advanced or specialized nursing
practice, including certified registered nurse anesthetists,
certified nurse midwives, and certified nurse practitioners.

398 <u>(16) "Independent advanced practice registered nurse"</u>
399 <u>means an advanced practice registered nurse who maintains an</u>
400 <u>active and unencumbered certification under s. 464.012(2) and</u>
401 <u>registration under s. 464.0125 to practice advanced or</u>
402 <u>specialized nursing independently and without the supervision of</u>
403 <u>a physician or a protocol.</u>

404 <u>(21)(20)</u> "Practice of professional nursing" means the 405 performance of those acts requiring substantial specialized 406 knowledge, judgment, and nursing skill based upon applied 407 principles of psychological, biological, physical, and social 408 sciences which shall include, but not be limited to:

(a) 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.

(b) The <u>prescribing and</u> administration of medications and treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe **Page 16 of 154**

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417 such medications and treatments. 418 The supervision and teaching of other personnel in the (C) 419 theory and performance of any of the acts described in this 420 subsection. 421 422 A professional nurse is responsible and accountable for making 423 decisions that are based upon the individual's educational 424 preparation and experience in nursing. 425 (23) (22) "Registered nurse" means any person licensed in this state to practice professional nursing, except such 426 licensed person may only administer medications and treatments 427 authorized by a duly licensed practitioner authorized by the 428 429 laws of this state to prescribe such medications and treatments. 430 Section 2. Section 464.012, Florida Statutes, is amended 431 to read: 432 464.012 Certification of advanced practice registered 433 nurses nurse practitioners; fees.-434 Any nurse desiring to be certified as an advanced (1)435 practice registered nurse practitioner shall apply to the board 436 department and submit proof that the nurse he or she holds a current license to practice professional nursing and that the 437 438 nurse he or she meets one or more of the following requirements 439 as determined by the board: 440 (a) Satisfactory completion of a formal postbasic 441 educational program of at least one academic year, the primary 442 purpose of which is to prepare nurses for advanced or Page 17 of 154

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443 specialized practice.

444 (a) (b) Certification by an appropriate specialty board. 445 Such certification shall be required for initial state 446 certification and any recertification as a nurse practitioner, 447 registered nurse anesthetist, or nurse midwife. The board may by 448 rule provide for provisional state certification of graduate 449 nurse practitioners, nurse anesthetists, and nurse midwives for 450 a period of time determined to be appropriate for preparing for and passing the national certification examination. 451

452 (b) (c) Graduation from a program leading to a master's degree program in a nursing clinical specialty area with 453 454 preparation in specialized practitioner skills. For applicants 455 graduating on or after October 1, 1998, graduation from a 456 master's degree program shall be required for initial 457 certification as a nurse practitioner under paragraph (4) (c). 458 For applicants graduating on or after October 1, 2001, 459 graduation from a master's degree program shall be required for 460 initial certification as a registered nurse anesthetist under 461 paragraph (4) (a).

462 (2) The board shall provide by rule the appropriate
463 requirements for advanced <u>practice</u> registered <u>nurses</u> nurse
464 practitioners in the categories of certified registered nurse
465 anesthetist, certified nurse midwife, and <u>certified</u> nurse
466 practitioner.

467 (3) An advanced <u>practice</u> registered nurse practitioner
 468 shall perform those functions authorized in this section within
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469 the framework of an established protocol that is filed with the board upon biennial license renewal and within 30 days after 470 471 entering into a supervisory relationship with a physician or 472 changes to the protocol. The board shall review the protocol to 473 ensure compliance with applicable regulatory standards for 474 protocols. The board shall refer to the department licensees 475 submitting protocols that are not compliant with the regulatory 476 standards for protocols. A practitioner currently licensed under chapter 458, chapter 459, or chapter 466 shall maintain 477 supervision for directing the specific course of medical 478 treatment. Within the established framework, an advanced 479 480 practice registered nurse practitioner may: 481 Monitor and alter drug therapies. (a) 482 Initiate appropriate therapies for certain conditions. (b) 483 (C) Perform additional functions as may be determined by rule in accordance with s. 464.003(2). 484 485 (d) Order diagnostic tests and physical and occupational 486 therapy. 487 (e) Administer, dispense, and prescribe medicinal drugs, 488 including controlled substances. 489 In addition to the general functions specified in (4) 490 subsection (3), an advanced practice registered nurse 491 practitioner may perform the following acts within his or her 492 specialty: 493 (a) The certified registered nurse anesthetist may, to the 494 extent authorized by established protocol approved by the Page 19 of 154

495 medical staff of the facility in which the anesthetic service is 496 performed, perform any or all of the following:

497 1. Determine the health status of the patient as it
498 relates to the risk factors and to the anesthetic management of
499 the patient through the performance of the general functions.

500 2. Based on history, physical assessment, and supplemental 501 laboratory results, determine, with the consent of the 502 responsible physician, the appropriate type of anesthesia within 503 the framework of the protocol.

504

3. Order under the protocol preanesthetic medication.

4. Perform under the protocol procedures commonly used to render the patient insensible to pain during the performance of surgical, obstetrical, therapeutic, or diagnostic clinical procedures. These procedures include ordering and administering regional, spinal, and general anesthesia; inhalation agents and techniques; intravenous agents and techniques; and techniques of hypnosis.

512 5. Order or perform monitoring procedures indicated as 513 pertinent to the anesthetic health care management of the 514 patient.

515 6. Support life functions during anesthesia health care, 516 including induction and intubation procedures, the use of 517 appropriate mechanical supportive devices, and the management of 518 fluid, electrolyte, and blood component balances.

519 7. Recognize and take appropriate corrective action for 520 abnormal patient responses to anesthesia, adjunctive medication, Page 20 of 154

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521 or other forms of therapy.

522 8. Recognize and treat a cardiac arrhythmia while the 523 patient is under anesthetic care.

9. Participate in management of the patient while in the
postanesthesia recovery area, including ordering the
administration of fluids and drugs.

527 10. Place special peripheral and central venous and 528 arterial lines for blood sampling and monitoring as appropriate.

(b) The certified nurse midwife may, to the extent authorized by an established protocol which has been approved by the medical staff of the health care facility in which the midwifery services are performed, or approved by the nurse midwife's physician backup when the delivery is performed in a patient's home, perform any or all of the following:

535

1. Perform superficial minor surgical procedures.

536 2. Manage the patient during labor and delivery to include 537 amniotomy, episiotomy, and repair.

538 3. Order, initiate, and perform appropriate anesthetic539 procedures.

540

541

543

4. Perform postpartum examination.

5. Order appropriate medications.

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542
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6.

7. Manage the medical care of the normal obstetrical

Provide family-planning services and well-woman care.

544 patient and the initial care of a newborn patient.

545 (c) The <u>certified</u> nurse practitioner may perform any or 546 all of the following acts within the framework of established Page 21 of 154

547 protocol:

548 1. Manage selected medical problems.

549 2. Order physical and occupational therapy.

3. Initiate, monitor, or alter therapies for certainuncomplicated acute illnesses.

4. Monitor and manage patients with stable chronicdiseases.

554 5. Establish behavioral problems and diagnosis and make 555 treatment recommendations.

(5) The board shall certify, and the department shall issue a certificate to, any nurse meeting the qualifications in this section. The board shall establish an application fee not to exceed \$100 and a biennial renewal fee not to exceed \$50. The board is authorized to adopt such other rules as are necessary to implement the provisions of this section.

562 Section 3. Section 464.0125, Florida Statutes, is created 563 to read:

564 <u>464.0125</u> Registration of independent advanced practice 565 registered nurses; fees.—

566 (1) To be registered as an independent advanced practice 567 registered nurse, an applicant must hold an active and 568 unencumbered certificate under s. 464.012, and must have:

569 (a) Completed, in any jurisdiction of the United States,

570 at least 2,000 clinical practice hours within a 3-year period

571 immediately preceding the submission of the application and

572 while practicing as an advanced practice registered nurse.

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573	(b) Not been subject to any disciplinary action under s.
574	464.018 or s. 456.072, or any similar disciplinary action in any
575	other jurisdiction, during the 5 years immediately preceding the
576	submission of the application.
577	(c) Completed a graduate level course in pharmacology.
578	(2) The board may provide by rule additional requirements
579	appropriate for each applicant practicing in a specialty under
580	s. 464.012(4).
581	(3) An independent advanced practice registered nurse may
582	perform, without physician supervision or a protocol, the acts
583	authorized in s. 464.012(3), acts within his or her specialty as
584	described in s. 464.012(4), and any of the following:
585	(a) For a patient who requires the services of a health
586	care facility, as defined in s. 408.032(8):
587	1. Admit the patient to the facility.
588	2. Manage the care that the patient receives in the
589	facility.
590	3. Discharge the patient from the facility.
591	(b) Provide a signature, certification, stamp,
592	verification, affidavit, or other endorsement that is otherwise
593	required by law to be provided by a physician.
594	(4) An advanced practice registered nurse registered under
595	this section must submit to the department proof of registration
596	along with the information required under s. 456.0391, and the
597	department shall include the registration in the advanced
598	practice registered nurse's practitioner profile created
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599	pursuant to s. 456.041.
600	(5) To be eligible for biennial renewal of registration,
601	an independent advanced practice registered nurse must complete
602	at least 10 hours of continuing education approved by the board
603	in pharmacology in addition to completing the continuing
604	education requirements established by board rule pursuant to s.
605	464.013. The biennial renewal for registration shall coincide
606	with the independent advanced practice registered nurse's
607	biennial renewal period for advanced practice registered nurse
608	certification. If the initial renewal period occurs before
609	January 1, 2015, an independent advanced practice registered
610	nurse is not required to complete the continuing education
611	requirement under this subsection until the following biennial
612	renewal period.
613	(6) The board shall register any nurse meeting the
614	qualifications in this section. The board shall establish an
615	application fee not to exceed \$100 and a biennial renewal fee
616	not to exceed \$50. The board is authorized to adopt rules as
617	necessary to implement this section.
618	Section 4. Subsections (8) and (9) of section 464.015,
619	Florida Statutes, are amended to read:
620	464.015 Titles and abbreviations; restrictions; penalty
621	(8) Only <u>a person certified under s. 464.012</u> persons who
622	hold valid certificates to practice as <u>an</u> advanced <u>practice</u>
623	registered nurse-practitioners in this state may use the title
624	"Advanced <u>Practice</u> Registered Nurse Practitioner " and the
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625 abbreviation "A.P.R.N." Only a person registered under s. 626 464.0125 to practice as an independent advanced practice 627 registered nurse in this state may use the title "Independent 628 Advanced Practice Registered Nurse" and the abbreviation "I.A.P.R.N." "A.R.N.P." 629 630 (9) A person may not practice or advertise as, or assume 631 the title of, registered nurse, licensed practical nurse, clinical nurse specialist, certified registered nurse 632 633 anesthetist, certified nurse midwife, certified nurse practitioner, or advanced practice registered nurse, or 634 independent advanced practice registered nurse practitioner or 635 use the abbreviation "R.N.," "L.P.N.," "C.N.S.," "C.R.N.A.," 636 "C.N.M.," "C.N.P.," "A.P.R.N.," or "I.A.P.R.N." "A.R.N.P." or 637 638 take any other action that would lead the public to believe that 639 person was certified or registered as such or is performing 640 nursing services pursuant to the exception set forth in s. 641 464.022(8), unless that person is licensed, or certified, or 642 registered to practice as such. 643 Section 5. Section 464.0155, Florida Statutes, is created 644 to read: 464.0155 Reports of adverse incidents by independent 645 646 advanced practice registered nurses.-(1) Effective January 1, 2015, an independent advanced 647 648 practice registered nurse must report an adverse incident to the 649 department in accordance with this section. 650 (2) The report must be in writing, sent to the department Page 25 of 154

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651	by certified mail, and postmarked within 15 days after the
652	adverse incident if the adverse incident occurs when the patient
653	is at the office of the independent advanced practice registered
654	nurse. If the adverse incident occurs when the patient is not at
655	the office of the independent advanced practice registered
656	nurse, the report must be postmarked within 15 days after the
657	independent advanced practice registered nurse discovers, or
658	reasonably should have discovered, the occurrence of the adverse
659	incident.
660	(3) For the purpose of this section, the term "adverse
661	incident" means any of the following events when it is
662	reasonable to believe that the event is attributable to the
663	prescription of a controlled substance by the independent
664	advanced practice registered nurse:
665	(a) A condition that requires the transfer of a patient to
666	a hospital licensed under chapter 395.
667	(b) Permanent physical injury to the patient.
668	(c) Death of the patient.
669	(4) The department shall review each adverse incident and
670	determine whether the independent advanced practice registered
671	nurse caused the adverse incident. The board may take
672	disciplinary action upon such a finding, in which case s.
673	456.073 applies.
674	Section 6. Paragraph (a) of subsection (2) of section
675	464.016, Florida Statutes, is amended to read:
676	464.016 Violations and penalties
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677 (2) Each of the following acts constitutes a misdemeanor
678 of the first degree, punishable as provided in s. 775.082 or s.
679 775.083:

680 Using the name or title "Nurse," "Registered Nurse," (a) 681 "Licensed Practical Nurse," "Clinical Nurse Specialist," "Certified Registered Nurse Anesthetist," "Certified Nurse 682 Midwife," "Certified Nurse Practitioner," "Advanced Practice 683 684 Registered Nurse Practitioner, " "Independent Advanced Practice Registered Nurse," or any other name or title that which implies 685 that a person was licensed or certified as same, unless such 686 person is duly licensed or certified. 687

Section 7. Paragraphs (p) through (z) are added to
subsection (1) of section 464.018, Florida Statutes, to read:
464.018 Disciplinary actions.-

(1) The following acts constitute grounds for denial of a
license or disciplinary action, as specified in s. 456.072(2):
(p) Prescribing, dispensing, administering, mixing, or

694 otherwise preparing a legend drug, including any controlled 695 substance, other than in the course of the professional practice 696 of the independent advanced practice registered nurse or 697 advanced practice registered nurse. For the purposes of this 698 paragraph, it shall be legally presumed that prescribing, dispensing, administering, mixing, or otherwise preparing legend 699 700 drugs, including all controlled substances, inappropriately or 701 in excessive or inappropriate quantities is not in the best 702 interest of the patient and is not in the course of the

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703	professional practice of the independent advanced practice
704	registered nurse or advanced practice registered nurse, without
705	regard to the nurse's intent.
706	(q) Dispensing a controlled substance listed in Schedule
707	II or Schedule III in violation of s. 465.0276.
708	(r) Presigning blank prescription forms.
709	(s) Prescribing any medicinal drug appearing on Schedule
710	II in chapter 893 by the nurse for office use.
711	(t) Prescribing, ordering, dispensing, administering,
712	supplying, selling, or giving any Schedule II drug that is an
713	amphetamine or sympathomimetic amine or any compound thereof,
714	pursuant to chapter 893, to or for any person except for:
715	1. The treatment of narcolepsy; hyperkinesis; behavioral
716	syndrome characterized by the developmentally inappropriate
717	symptoms of moderate to severe distractability, short attention
718	span, hyperactivity, emotional liability, and impulsivity; or
719	drug-induced brain dysfunction;
720	2. The differential diagnostic psychiatric evaluation of
721	depression or the treatment of depression shown to be refractory
722	to other therapeutic modalities; or
723	3. The clinical investigation of the effects of such drugs
724	or compounds when an investigative protocol therefor is
725	submitted to, reviewed, and approved by the board before such
726	investigation begins.
727	(u) Prescribing, ordering, dispensing, administering,
728	supplying, selling, or giving growth hormones, testosterone or
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729	its analogs, human chorionic gonadotropin (HCG), or other
730	hormones for the purpose of muscle building or to enhance
731	athletic performance. For the purposes of this subsection, the
732	term "muscle building" does not include the treatment of injured
733	muscle. A prescription written for the drug products listed
734	above may be dispensed by the pharmacist with the presumption
735	that the prescription is for legitimate medical use.
736	(v) Prescribing, ordering, dispensing, administering,
737	supplying, selling, or giving amygdalin (laetrile) to any
738	person.
739	(w) Promoting or advertising on any prescription form of a
740	community pharmacy, unless the form also states, "This
741	prescription may be filled at any pharmacy of your choice."
742	(x) Promoting or advertising through any communication
743	media the use, sale, or dispensing of any controlled substance
744	appearing on any schedule in chapter 893.
745	(y) Prescribing or dispensing any medicinal drug appearing
746	on any schedule set forth in chapter 893 by the independent
747	advanced practice registered nurse, or advanced practice
748	registered nurse for himself or herself or administering any
749	such drug by the nurse to himself or herself unless such drug is
750	prescribed for the nurse by another practitioner authorized to
751	prescribe medicinal drugs.
752	(z) For an independent advanced practice registered nurse
753	registered under s. 464.0125:
754	1. Paying or receiving any commission, bonus, kickback, or
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755	rebate, or engaging in any split-fee arrangement in any form
756	whatsoever with a health care practitioner, organization,
757	agency, or person, either directly or indirectly, for patients
758	referred to providers of health care goods and services,
759	including, but not limited to, hospitals, nursing homes,
760	clinical laboratories, ambulatory surgical centers, or
761	pharmacies. The provisions of this paragraph may not be
762	construed to prevent an independent advanced practice registered
763	nurse from receiving a fee for professional consultation
764	services.
765	2. Exercising influence within a patient-independent
766	advanced practice registered nurse relationship for purposes of
767	engaging a patient in sexual activity. A patient shall be
768	presumed to be incapable of giving free, full, and informed
769	consent to sexual activity with his or her independent advanced
770	practice registered nurse.
771	3. Making deceptive, untrue, or fraudulent representations
772	in or related to the practice of advanced or specialized nursing
773	or employing a trick or scheme in the practice of advanced or
774	specialized nursing.
775	4. Soliciting patients, either personally or through an
776	agent, through the use of fraud, intimidation, undue influence,
777	or a form of overreaching or vexatious conduct. A solicitation
778	is any communication that directly or implicitly requests an
779	immediate oral response from the recipient.
780	5. Failing to keep legible, as defined by department rule
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781	in consultation with the board, medical records that identify
782	the independent advanced practice registered nurse by name and
783	professional title who is responsible for rendering, ordering,
784	supervising, or billing for each diagnostic or treatment
785	procedure and that justify the course of treatment of the
786	patient, including, but not limited to, patient histories;
787	examination results; test results; records of drugs prescribed,
788	dispensed, or administered; and reports of consultations or
789	<u>referrals.</u>
790	6. Exercising influence on a patient or client in a manner
791	as to exploit the patient or client for financial gain of the
792	licensee or of a third party, which shall include, but not be
793	limited to, the promoting or selling of services, goods,
794	appliances, or drugs.
795	7. Performing professional services that have not been
796	duly authorized by the patient or client, or his or her legal
797	representative, except as provided in s. 766.103 or s. 768.13.
798	8. Performing any procedure or prescribing any therapy
799	that, by the prevailing standards of advanced or specialized
800	nursing practice in the community, would constitute
801	experimentation on a human subject, without first obtaining
802	full, informed, and written consent.
803	9. Delegating professional responsibilities to a person
804	when the licensee delegating the responsibilities knows or has
805	reason to know that the person is not qualified by training,
806	experience, or licensure to perform them.
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807	10. Conspiring with another independent advanced practice
808	registered nurse or with any other person to commit an act, or
809	committing an act, which would tend to coerce, intimidate, or
810	preclude another independent advanced practice registered nurse
811	from lawfully advertising his or her services.
812	11. Advertising or holding oneself out as having
813	certification in a specialty that the independent advanced
814	practice registered nurse has not received.
815	12. Failing to comply with the requirements of ss. 381.026
816	and 381.0261 to provide patients with information about their
817	patient rights and how to file a patient complaint.
818	13. Providing deceptive or fraudulent expert witness
819	testimony related to the advanced or specialized practice of
820	nursing.
821	Section 8. Paragraph (c) of subsection (3) and paragraph
822	(a) of subsection (4) of section 39.303, Florida Statutes, are
823	amended to read:
824	39.303 Child protection teams; services; eligible cases
825	The Children's Medical Services Program in the Department of
826	Health shall develop, maintain, and coordinate the services of
827	one or more multidisciplinary child protection teams in each of
828	the service districts of the Department of Children and Family
829	Services. Such teams may be composed of appropriate
830	representatives of school districts and appropriate health,
831	mental health, social service, legal service, and law
832	enforcement agencies. The Legislature finds that optimal
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833 coordination of child protection teams and sexual abuse 834 treatment programs requires collaboration between the Department 835 of Health and the Department of Children and Family Services. 836 The two departments shall maintain an interagency agreement that 837 establishes protocols for oversight and operations of child 838 protection teams and sexual abuse treatment programs. The State 839 Surgeon General and the Deputy Secretary for Children's Medical 840 Services, in consultation with the Secretary of Children and 841 Family Services, shall maintain the responsibility for the screening, employment, and, if necessary, the termination of 842 child protection team medical directors, at headquarters and in 843 844 the 15 districts. Child protection team medical directors shall 845 be responsible for oversight of the teams in the districts.

846 All abuse and neglect cases transmitted for (3) 847 investigation to a district by the hotline must be 848 simultaneously transmitted to the Department of Health child 849 protection team for review. For the purpose of determining 850 whether face-to-face medical evaluation by a child protection 851 team is necessary, all cases transmitted to the child protection 852 team which meet the criteria in subsection (2) must be timely 853 reviewed by:

(c) An advanced <u>practice</u> registered nurse <u>certified</u>, or an <u>independent advanced practice registered nurse registered</u>, <u>practitioner licensed</u> under chapter 464, who has a <u>specialty</u> <u>speciality</u> in pediatrics or family medicine and is a member of a child protection team;

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(4) A face-to-face medical evaluation by a child protection team is not necessary when: The child was examined for the alleged abuse or (a) neglect by a physician or an independent advanced practice registered nurse, who is not a member of the child protection team, and a consultation between the child protection team board-certified pediatrician, advanced practice registered nurse practitioner, physician assistant working under the supervision of a child protection team board-certified pediatrician, or registered nurse working under the direct supervision of a child protection team board-certified pediatrician, and the examining practitioner physician concludes that a further medical evaluation is unnecessary; Notwithstanding paragraphs (a), (b), and (c), a child protection team pediatrician, as authorized in subsection (3), may determine that a face-to-face medical evaluation is necessary. Section 9. 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)If the areas of trauma visible on a child indicate a (b) 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

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885 alleged to have been sexually abused, the person required to 886 investigate may cause the child to be referred for diagnosis to 887 a licensed physician, an independent advanced practice 888 registered nurse, or an emergency department in a hospital 889 without the consent of the child's parents or legal custodian. 890 Such examination may be performed by a any licensed physician, a 891 registered independent advanced practice registered nurse, or a 892 certified an advanced practice registered nurse practitioner 893 licensed pursuant to part I of chapter 464. Any examining 894 practitioner licensed physician, or advanced registered nurse 895 practitioner licensed pursuant to part I of chapter 464, who has 896 reasonable cause to suspect that an injury was the result of 897 child abuse, abandonment, or neglect may authorize a 898 radiological examination to be performed on the child without 899 the consent of the child's parent or legal custodian. 900 Section 10. Paragraph (a) of subsection (1) of section 90.503, Florida Statutes, is amended to read: 901 902 90.503 Psychotherapist-patient privilege.-903 (1)For purposes of this section: 904 A "psychotherapist" is: (a) 905 A person authorized to practice medicine in any state 1. or nation, or reasonably believed by the patient so to be, who 906 907 is engaged in the diagnosis or treatment of a mental or 908 emotional condition, including alcoholism and other drug 909 addiction; 910 2. A person licensed or certified as a psychologist under Page 35 of 154

911 the laws of any state or nation, who is engaged primarily in the 912 diagnosis or treatment of a mental or emotional condition, 913 including alcoholism and other drug addiction;

914 3. A person licensed or certified as a clinical social 915 worker, marriage and family therapist, or mental health 916 counselor under the laws of this state, who is engaged primarily 917 in the diagnosis or treatment of a mental or emotional 918 condition, including alcoholism and other drug addiction;

919 Treatment personnel of facilities licensed by the state 4. pursuant to chapter 394, chapter 395, or chapter 397, of 920 facilities designated by the Department of Children and Families 921 922 Family Services pursuant to chapter 394 as treatment facilities, 923 or of facilities defined as community mental health centers 924 pursuant to s. 394.907(1), who are engaged primarily in the 925 diagnosis or treatment of a mental or emotional condition, 926 including alcoholism and other drug addiction; or

927 5. An <u>independent advanced practice registered nurse or</u> 928 advanced <u>practice</u> registered nurse practitioner certified under 929 s. 464.012, whose primary scope of practice is the diagnosis or 930 treatment of mental or emotional conditions, including chemical 931 abuse, and limited only to actions performed in accordance with 932 part I of chapter 464.

933 Section 11. Subsection (3) of section 110.12315, Florida 934 Statutes, is amended to read:

935 110.12315 Prescription drug program.—The state employees' 936 prescription drug program is established. This program shall be Page 36 of 154

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937 administered by the Department of Management Services, according 938 to the terms and conditions of the plan as established by the 939 relevant provisions of the annual General Appropriations Act and 940 implementing legislation, subject to the following conditions:

941 The Department of Management Services shall establish (3)942 the reimbursement schedule for prescription pharmaceuticals 943 dispensed under the program. Reimbursement rates for a 944 prescription pharmaceutical must be based on the cost of the 945 generic equivalent drug if a generic equivalent exists, unless the health care practitioner physician prescribing the 946 pharmaceutical clearly states on the prescription that the brand 947 name drug is medically necessary or that the drug product is 948 949 included on the formulary of drug products that may not be 950 interchanged as provided in chapter 465, in which case 951 reimbursement must be based on the cost of the brand name drug 952 as specified in the reimbursement schedule adopted by the 953 Department of Management Services.

954 Section 12. Paragraph (e) of subsection (8) of section 955 112.0455, Florida Statutes, is amended to read:

956

112.0455 Drug-Free Workplace Act.-

957 (8) PROCEDURES AND EMPLOYEE PROTECTION.—All specimen
 958 collection and testing for drugs under this section shall be
 959 performed in accordance with the following procedures:

960 (e) A specimen for a drug test may be taken or collected961 by any of the following persons:

962

 A physician, a physician's assistant, <u>an independent</u> Page 37 of 154

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963	advanced practice registered nurse, an advanced practice
964	registered nurse, a registered professional nurse, a licensed
965	practical nurse, a nurse practitioner, or a certified paramedic
966	who is present at the scene of an accident for the purpose of
967	rendering emergency medical service or treatment.
968	2. A qualified person employed by a licensed laboratory.
969	Section 13. Paragraph (f) of subsection (3) of section
970	121.0515, Florida Statutes, is amended to read:
971	121.0515 Special Risk Class
972	(3) CRITERIA.—A member, to be designated as a special risk
973	member, must meet the following criteria:
974	(f) Effective January 1, 2001, the member must be employed
975	in one of the following classes and must spend at least 75
976	percent of his or her time performing duties which involve
977	contact with patients or inmates in a correctional or forensic
978	facility or institution:
979	1. Dietitian (class codes 5203 and 5204);
980	2. Public health nutrition consultant (class code 5224);
981	3. Psychological specialist (class codes 5230 and 5231);
982	4. Psychologist (class code 5234);
983	5. Senior psychologist (class codes 5237 and 5238);
984	6. Regional mental health consultant (class code 5240);
985	7. Psychological Services Director-DCF (class code 5242);
986	8. Pharmacist (class codes 5245 and 5246);
987	9. Senior pharmacist (class codes 5248 and 5249);
988	10. Dentist (class code 5266);
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989	11. Senior dentist (class code 5269);
990	12. Registered nurse (class codes 5290 and 5291);
991	13. Senior registered nurse (class codes 5292 and 5293);
992	14. Registered nurse specialist (class codes 5294 and
993	5295);
994	15. Clinical associate (class codes 5298 and 5299);
995	16. Advanced <u>practice</u> registered nurse practitioner (class
996	codes 5297 and 5300);
997	17. Advanced practice registered nurse practitioner
998	specialist (class codes 5304 and 5305);
999	18. Registered nurse supervisor (class codes 5306 and
1000	5307);
1001	19. Senior registered nurse supervisor (class codes 5308
1002	and 5309);
1003	20. Registered nursing consultant (class codes 5312 and
1004	5313);
1005	21. Quality management program supervisor (class code
1006	5314);
1007	22. Executive nursing director (class codes 5320 and
1008	5321);
1009	23. Speech and hearing therapist (class code 5406); or
1010	24. Pharmacy manager (class code 5251);
1011	Section 14. Paragraph (a) of subsection (3) of section
1012	252.515, Florida Statutes, is amended to read:
1013	252.515 Postdisaster Relief Assistance Act; immunity from
1014	civil liability
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As used in this section, the term: 1015 (3) 1016 "Emergency first responder" means: (a) 1017 A physician licensed under chapter 458. 1. An osteopathic physician licensed under chapter 459. 1018 2. A chiropractic physician licensed under chapter 460. 1019 3. 1020 4. A podiatric physician licensed under chapter 461. 1021 5. A dentist licensed under chapter 466. 1022 6. An advanced practice registered nurse practitioner 1023 certified under s. 464.012. 1024 A physician assistant licensed under s. 458.347 or s. 7. 1025 459.022. 1026 A worker employed by a public or private hospital in 8. 1027 the state. 1028 A paramedic as defined in s. 401.23(17). 9. 1029 10. An emergency medical technician as defined in s. 401.23(11). 1030 1031 A firefighter as defined in s. 633.102. 11. 1032 12. A law enforcement officer as defined in s. 943.10. A member of the Florida National Guard. 1033 13. 1034 14. Any other personnel designated as emergency personnel by the Governor pursuant to a declared emergency. 1035 1036 Section 15. Paragraph (c) of subsection (1) of section 1037 310.071, Florida Statutes, is amended to read: 1038 310.071 Deputy pilot certification.-1039 (1)In addition to meeting other requirements specified in 1040 this chapter, each applicant for certification as a deputy pilot Page 40 of 154

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1041 must: Be in good physical and mental health, as evidenced by 1042 (C) documentary proof of having satisfactorily passed a complete 1043 physical examination administered by a licensed physician or an 1044 independent advanced practice registered nurse within the 1045 1046 preceding 6 months. The board shall adopt rules to establish 1047 requirements for passing the physical examination, which rules 1048 shall establish minimum standards for the physical or mental 1049 capabilities necessary to carry out the professional duties of a certificated deputy pilot. Such standards shall include zero 1050 1051 tolerance for any controlled substance regulated under chapter 1052 893 unless that individual is under the care of a physician, an 1053 independent advanced practice registered nurse, or an advanced 1054 practice registered nurse and that controlled substance was 1055 prescribed by that physician, independent advanced practice 1056 registered nurse, or advanced practice registered nurse. To 1057 maintain eligibility as a certificated deputy pilot, each 1058 certificated deputy pilot must annually provide documentary 1059 proof of having satisfactorily passed a complete physical examination administered by a licensed physician or an 1060 independent advanced practice registered nurse. The examining 1061 practitioner physician must know the minimum standards and 1062 1063 certify that the certificateholder satisfactorily meets the standards. The standards for certificateholders shall include a 1064 1065 drug test. 1066 Section 16. Subsection (3) of section 310.073, Florida

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1067 Statutes, is amended to read:

1068 310.073 State pilot licensing.—In addition to meeting 1069 other requirements specified in this chapter, each applicant for 1070 license as a state pilot must:

1071 Be in good physical and mental health, as evidenced by (3) 1072 documentary proof of having satisfactorily passed a complete 1073 physical examination administered by a licensed physician or an 1074 independent advanced practice registered nurse within the 1075 preceding 6 months. The board shall adopt rules to establish requirements for passing the physical examination, which rules 1076 shall establish minimum standards for the physical or mental 1077 1078 capabilities necessary to carry out the professional duties of a 1079 licensed state pilot. Such standards shall include zero 1080 tolerance for any controlled substance regulated under chapter 1081 893 unless that individual is under the care of a physician, an 1082 independent advanced practice registered nurse, or an advanced 1083 practice registered nurse and that controlled substance was 1084 prescribed by that physician, independent advanced practice 1085 registered nurse, or advanced practice registered nurse. To 1086 maintain eligibility as a licensed state pilot, each licensed 1087 state pilot must annually provide documentary proof of having satisfactorily passed a complete physical examination 1088 administered by a licensed physician or an independent advanced 1089 1090 practice registered nurse. The examining practitioner physician 1091 must know the minimum standards and certify that the licensee 1092 satisfactorily meets the standards. The standards for licensees Page 42 of 154

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1093 shall include a drug test.

1094 Section 17. Paragraph (b) of subsection (3) of section 1095 310.081, Florida Statutes, is amended to read:

1096 310.081 Department to examine and license state pilots and 1097 certificate deputy pilots; vacancies.-

1098 (3) Pilots shall hold their licenses or certificates1099 pursuant to the requirements of this chapter so long as they:

1100 (b) Are in good physical and mental health as evidenced by 1101 documentary proof of having satisfactorily passed a physical examination administered by a licensed physician, an independent 1102 advanced practice registered nurse, or a physician assistant 1103 within each calendar year. The board shall adopt rules to 1104 1105 establish requirements for passing the physical examination, 1106 which rules shall establish minimum standards for the physical 1107 or mental capabilities necessary to carry out the professional 1108 duties of a licensed state pilot or a certificated deputy pilot. 1109 Such standards shall include zero tolerance for any controlled 1110 substance regulated under chapter 893 unless that individual is 1111 under the care of a physician, an independent advanced practice registered nurse, or an advanced practice registered nurse and 1112 1113 that controlled substance was prescribed by that physician, 1114 independent advanced practice registered nurse, or advanced 1115 practice registered nurse. To maintain eligibility as a 1116 certificated deputy pilot or licensed state pilot, each 1117 certificated deputy pilot or licensed state pilot must annually 1118 provide documentary proof of having satisfactorily passed a Page 43 of 154

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1119 complete physical examination administered by a licensed 1120 physician or an independent advanced practice registered nurse. 1121 The physician or independent advanced practice registered nurse 1122 must know the minimum standards and certify that the 1123 certificateholder or licensee satisfactorily meets the 1124 standards. The standards for certificateholders and for 1125 licensees shall include a drug test. 1126 1127 Upon resignation or in the case of disability permanently 1128 affecting a pilot's ability to serve, the state license or 1129 certificate issued under this chapter shall be revoked by the 1130 department. 1131 Section 18. Paragraph (b) of subsection (1) of section 1132 320.0848, Florida Statutes, is amended to read: 1133 320.0848 Persons who have disabilities; issuance of 1134 disabled parking permits; temporary permits; permits for certain 1135 providers of transportation services to persons who have 1136 disabilities.-1137 (1)The person must be currently certified as being 1138 (b)1. 1139 legally blind or as having any of the following disabilities 1140 that render him or her unable to walk 200 feet without stopping 1141 to rest: 1142 Inability to walk without the use of or assistance from a. 1143 a brace, cane, crutch, prosthetic device, or other assistive 1144 device, or without the assistance of another person. If the Page 44 of 154

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1145 assistive device significantly restores the person's ability to 1146 walk to the extent that the person can walk without severe 1147 limitation, the person is not eligible for the exemption parking 1148 permit.

1149

b. The need to permanently use a wheelchair.

c. Restriction by lung disease to the extent that the person's forced (respiratory) expiratory volume for 1 second, when measured by spirometry, is less than 1 liter, or the person's arterial oxygen is less than 60 mm/hg on room air at rest.

1155

d. Use of portable oxygen.

e. Restriction by cardiac condition to the extent that the person's functional limitations are classified in severity as Class III or Class IV according to standards set by the American Heart Association.

1160 f. Severe limitation in the person's ability to walk due 1161 to an arthritic, neurological, or orthopedic condition.

1162 2. The certification of disability which is required under 1163 subparagraph 1. must be provided by a physician licensed under 1164 chapter 458, chapter 459, or chapter 460; - by a podiatric 1165 physician licensed under chapter 461; - by an optometrist licensed under chapter 463; - by an independent advanced practice 1166 1167 registered nurse registered, or an advanced practice registered 1168 nurse certified, practitioner licensed under part I of chapter 1169 464; under the protocol of a licensed physician as stated in 1170 this subparagraph, by a physician assistant licensed under Page 45 of 154

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1171 chapter 458 or chapter 459<u>;</u> or by a similarly licensed 1172 physician from another state if the application is accompanied 1173 by documentation of the physician's licensure in the other state 1174 and a form signed by the out-of-state physician verifying his or 1175 her knowledge of this state's eligibility guidelines.

Section 19. Paragraph (b) of subsection (1) of section 381.00315, Florida Statutes, is amended to read:

1178 381.00315 Public health advisories; public health 1179 emergencies; quarantines.—The State Health Officer is 1180 responsible for declaring public health emergencies and 1181 quarantines and issuing public health advisories.

1182

(1) As used in this section, the term:

1183 "Public health emergency" means any occurrence, or (b) 1184 threat thereof, whether natural or man made, which results or 1185 may result in substantial injury or harm to the public health 1186 from infectious disease, chemical agents, nuclear agents, 1187 biological toxins, or situations involving mass casualties or 1188 natural disasters. Prior to declaring a public health emergency, 1189 the State Health Officer shall, to the extent possible, consult 1190 with the Governor and shall notify the Chief of Domestic Security. The declaration of a public health emergency shall 1191 continue until the State Health Officer finds that the threat or 1192 1193 danger has been dealt with to the extent that the emergency 1194 conditions no longer exist and he or she terminates the 1195 declaration. However, a declaration of a public health emergency 1196 may not continue for longer than 60 days unless the Governor Page 46 of 154

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1197 concurs in the renewal of the declaration. The State Health
1198 Officer, upon declaration of a public health emergency, may take
1199 actions that are necessary to protect the public health. Such
1200 actions include, but are not limited to:

1201 1. Directing manufacturers of prescription drugs or over-1202 the-counter drugs who are permitted under chapter 499 and 1203 wholesalers of prescription drugs located in this state who are 1204 permitted under chapter 499 to give priority to the shipping of 1205 specified drugs to pharmacies and health care providers within 1206 geographic areas that have been identified by the State Health 1207 Officer. The State Health Officer must identify the drugs to be 1208 shipped. Manufacturers and wholesalers located in the state must 1209 respond to the State Health Officer's priority shipping 1210 directive before shipping the specified drugs.

2. Notwithstanding chapters 465 and 499 and rules adopted thereunder, directing pharmacists employed by the department to compound bulk prescription drugs and provide these bulk prescription drugs to physicians and nurses of county health departments or any qualified person authorized by the State Health Officer for administration to persons as part of a prophylactic or treatment regimen.

1218 3. Notwithstanding s. 456.036, temporarily reactivating 1219 the inactive license of the following health care practitioners, 1220 when such practitioners are needed to respond to the public 1221 health emergency: physicians licensed under chapter 458 or 1222 chapter 459; physician assistants licensed under chapter 458 or

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1223 chapter 459; independent advanced practice registered nurses 1224 registered, licensed practical nurses or τ registered nurses 1225 licensed, and advanced practice registered nurses certified 1226 nurse practitioners licensed under part I of chapter 464; 1227 respiratory therapists licensed under part V of chapter 468; and 1228 emergency medical technicians and paramedics certified under 1229 part III of chapter 401. Only those health care practitioners 1230 specified in this paragraph who possess an unencumbered inactive 1231 license and who request that such license be reactivated are 1232 eligible for reactivation. An inactive license that is 1233 reactivated under this paragraph shall return to inactive status 1234 when the public health emergency ends or prior to the end of the 1235 public health emergency if the State Health Officer determines 1236 that the health care practitioner is no longer needed to provide 1237 services during the public health emergency. Such licenses may 1238 only be reactivated for a period not to exceed 90 days without 1239 meeting the requirements of s. 456.036 or chapter 401, as 1240 applicable.

4. Ordering an individual to be examined, tested, vaccinated, treated, or quarantined for communicable diseases that have significant morbidity or mortality and present a severe danger to public health. Individuals who are unable or unwilling to be examined, tested, vaccinated, or treated for reasons of health, religion, or conscience may be subjected to quarantine.

1248

a. Examination, testing, vaccination, or treatment may be Page 48 of 154

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1249 performed by any qualified person authorized by the State Health 1250 Officer. 1251 b. If the individual poses a danger to the public health, 1252 the State Health Officer may subject the individual to 1253 quarantine. If there is no practical method to quarantine the

1254 individual, the State Health Officer may use any means necessary
1255 to vaccinate or treat the individual.

1257 Any order of the State Health Officer given to effectuate this 1258 paragraph shall be immediately enforceable by a law enforcement 1259 officer under s. 381.0012.

Section 20. Subsection (3) of section 381.00593, Florida
Statutes, is amended to read:

1262 381.00593 Public school volunteer health care practitioner 1263 program.-

1264 For purposes of this section, the term "health care (3)1265 practitioner" means a physician licensed under chapter 458; an 1266 osteopathic physician licensed under chapter 459; a chiropractic 1267 physician licensed under chapter 460; a podiatric physician 1268 licensed under chapter 461; an optometrist licensed under 1269 chapter 463; an independent advanced practice registered nurse 1270 registered, an advanced practice registered nurse certified 1271 practitioner, or a registered nurse, or licensed practical nurse 1272 licensed under part I of chapter 464; a pharmacist licensed 1273 under chapter 465; a dentist or dental hygienist licensed under 1274 chapter 466; a midwife licensed under chapter 467; a speech-Page 49 of 154

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1275 language pathologist or audiologist licensed under part I of 1276 chapter 468; a dietitian/nutritionist licensed under part X of 1277 chapter 468; or a physical therapist licensed under chapter 486. 1278 Section 21. Paragraph (c) of subsection (2) of section

1279 381.026, Florida Statutes, is amended to read:1280 381.026 Florida Patient's Bill of Rights and

1281 Responsibilities.-

1282 (2) DEFINITIONS.—As used in this section and s. 381.0261,1283 the term:

(c) "Health care provider" means a physician licensed under chapter 458, an osteopathic physician licensed under chapter 459, or a podiatric physician licensed under chapter 461, or an independent advanced practice registered nurse registered under part I of chapter 464.

1289 Section 22. Paragraph (a) of subsection (2) and 1290 subsections (3) through (5) of section 382.008, Florida 1291 Statutes, are amended to read:

1292

382.008 Death and fetal death registration.-

1293 (2) (a) The funeral director who first assumes custody of a 1294 dead body or fetus shall file the certificate of death or fetal 1295 death. In the absence of the funeral director, the physician, 1296 independent advanced practice registered nurse, advanced practice registered nurse, or other person in attendance at or 1297 1298 after the death or the district medical examiner of the county 1299 in which the death occurred or the body was found shall file the 1300 certificate of death or fetal death. The person who files the Page 50 of 154

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1301 certificate shall obtain personal data from the next of kin or 1302 the best qualified person or source available. The medical 1303 certification of cause of death shall be furnished to the funeral director, either in person or via certified mail or 1304 1305 electronic transfer, by the physician, independent advanced 1306 practice registered nurse, advanced practice registered nurse, 1307 or medical examiner responsible for furnishing such information. 1308 For fetal deaths, the physician, certified nurse midwife, 1309 midwife, or hospital administrator shall provide any medical or health information to the funeral director within 72 hours after 1310 expulsion or extraction. 1311

Within 72 hours after receipt of a death or fetal 1312 (3)1313 death certificate from the funeral director, the medical 1314 certification of cause of death shall be completed and made 1315 available to the funeral director by the decedent's primary or attending practitioner physician or, if s. 382.011 applies, the 1316 1317 district medical examiner of the county in which the death 1318 occurred or the body was found. The primary or attending 1319 practitioner physician or the medical examiner shall certify over his or her signature the cause of death to the best of his 1320 or her knowledge and belief. As used in this section, the term 1321 1322 "primary or attending practitioner physician" means a physician, 1323 independent advanced practice registered nurse, or advanced 1324 practice registered nurse, who treated the decedent through 1325 examination, medical advice, or medication during the 12 months 1326 preceding the date of death.

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(a) The local registrar may grant the funeral director an
extension of time upon a good and sufficient showing of any of
the following conditions:

1330

1. An autopsy is pending.

1331 2. Toxicology, laboratory, or other diagnostic reports1332 have not been completed.

1333 3. The identity of the decedent is unknown and further1334 investigation or identification is required.

1335 If the decedent's primary or attending practitioner, (b) physician or the district medical examiner of the county in 1336 1337 which the death occurred or the body was found, indicates that he or she will sign and complete the medical certification of 1338 1339 cause of death but will not be available until after the 5-day 1340 registration deadline, the local registrar may grant an 1341 extension of 5 days. If a further extension is required, the funeral director must provide written justification to the 1342 1343 registrar.

1344 If the department or local registrar grants an (4)1345 extension of time to provide the medical certification of cause 1346 of death, the funeral director shall file a temporary certificate of death or fetal death which shall contain all 1347 available information, including the fact that the cause of 1348 1349 death is pending. The decedent's primary or attending practitioner physician or the district medical examiner of the 1350 1351 county in which the death occurred or the body was found shall 1352 provide an estimated date for completion of the permanent

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1353	certificate.
1354	(5) A permanent certificate of death or fetal death,
1355	containing the cause of death and any other information that was
1356	previously unavailable, shall be registered as a replacement for
1357	the temporary certificate. The permanent certificate may also
1358	include corrected information if the items being corrected are
1359	noted on the back of the certificate and dated and signed by the
1360	funeral director, physician, <u>independent advanced practice</u>
1361	registered nurse, advanced practice registered nurse, or
1362	district medical examiner of the county in which the death
1363	occurred or the body was found, as appropriate.
1364	Section 23. Paragraph (c) of subsection (1) of section
1365	383.141, Florida Statutes, is amended to read:
1366	383.141 Prenatally diagnosed conditions; patient to be
1367	provided information; definitions; information clearinghouse;
1368	advisory council
1369	(1) As used in this section, the term:
1370	(c) "Health care provider" means a practitioner licensed
1371	or registered under chapter 458 or chapter 459 <u>, or an</u>
1372	independent advanced practice registered nurse registered, or an
1373	advanced <u>practice</u> registered nurse practitioner certified <u>,</u> under
1374	part I of chapter 464.
1375	Section 24. Paragraph (a) of subsection (3) of section
1376	390.0111, Florida Statutes, is amended to read:
1377	390.0111 Termination of pregnancies
1378	(3) CONSENTS REQUIREDA termination of pregnancy may not
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be performed or induced except with the voluntary and informed written consent of the pregnant woman or, in the case of a mental incompetent, the voluntary and informed written consent of her court-appointed guardian.

(a) Except in the case of a medical emergency, consent toa termination of pregnancy is voluntary and informed only if:

1385 1. The physician who is to perform the procedure, or the 1386 referring physician, has, at a minimum, orally, in person, 1387 informed the woman of:

a. The nature and risks of undergoing or not undergoing
the proposed procedure that a reasonable patient would consider
material to making a knowing and willful decision of whether to
terminate a pregnancy.

b. The probable gestational age of the fetus, verified by
an ultrasound, at the time the termination of pregnancy is to be
performed.

(I) The ultrasound must be performed by the physician who is to perform the abortion or by a person having documented evidence that he or she has completed a course in the operation of ultrasound equipment as prescribed by rule and who is working in conjunction with the physician.

(II) The person performing the ultrasound must offer the woman the opportunity to view the live ultrasound images and hear an explanation of them. If the woman accepts the opportunity to view the images and hear the explanation, a physician or a registered nurse, licensed practical nurse,

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1405 advanced <u>practice</u> registered nurse <u>practitioner</u>, <u>independent</u> 1406 <u>advanced practice registered nurse</u>, or physician assistant 1407 working in conjunction with the physician must contemporaneously 1408 review and explain the images to the woman before the woman 1409 gives informed consent to having an abortion procedure 1410 performed.

1411 The woman has a right to decline to view and hear (III) 1412 the explanation of the live ultrasound images after she is 1413 informed of her right and offered an opportunity to view the 1414 images and hear the explanation. If the woman declines, the 1415 woman shall complete a form acknowledging that she was offered an opportunity to view and hear the explanation of the images 1416 1417 but that she declined that opportunity. The form must also 1418 indicate that the woman's decision was not based on any undue 1419 influence from any person to discourage her from viewing the images or hearing the explanation and that she declined of her 1420 own free will. 1421

1422 Unless requested by the woman, the person performing (IV) 1423 the ultrasound may not offer the opportunity to view the images 1424 and hear the explanation and the explanation may not be given 1425 if, at the time the woman schedules or arrives for her appointment to obtain an abortion, a copy of a restraining 1426 1427 order, police report, medical record, or other court order or 1428 documentation is presented which provides evidence that the 1429 woman is obtaining the abortion because the woman is a victim of 1430 rape, incest, domestic violence, or human trafficking or that

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1431 the woman has been diagnosed as having a condition that, on the 1432 basis of a physician's good faith clinical judgment, would 1433 create a serious risk of substantial and irreversible impairment 1434 of a major bodily function if the woman delayed terminating her 1435 pregnancy.

1436 c. The medical risks to the woman and fetus of carrying1437 the pregnancy to term.

1438 2. Printed materials prepared and provided by the 1439 department have been provided to the pregnant woman, if she 1440 chooses to view these materials, including:

1441 a. A description of the fetus, including a description of 1442 the various stages of development.

1443 b. A list of entities that offer alternatives to1444 terminating the pregnancy.

1445 c. Detailed information on the availability of medical 1446 assistance benefits for prenatal care, childbirth, and neonatal 1447 care.

1448 3. The woman acknowledges in writing, before the 1449 termination of pregnancy, that the information required to be 1450 provided under this subsection has been provided.

Nothing in this paragraph is intended to prohibit a physician from providing any additional information which the physician deems material to the woman's informed decision to terminate her pregnancy.

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Section 25. Paragraphs (c), (e), and (f) of subsection (3) Page 56 of 154

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1457 of section 390.012, Florida Statutes, are amended to read:

1458390.012Powers of agency; rules; disposal of fetal1459remains.-

1460 (3) For clinics that perform or claim to perform abortions 1461 after the first trimester of pregnancy, the agency shall adopt 1462 rules pursuant to ss. 120.536(1) and 120.54 to implement the 1463 provisions of this chapter, including the following:

1464 (c) Rules relating to abortion clinic personnel. At a 1465 minimum, these rules shall require that:

1466 1. The abortion clinic designate a medical director who is 1467 licensed to practice medicine in this state and who has 1468 admitting privileges at a licensed hospital in this state or has 1469 a transfer agreement with a licensed hospital within reasonable 1470 proximity of the clinic.

1471 2. If a physician is not present after an abortion is
1472 performed, a registered nurse, licensed practical nurse,
1473 advanced practice registered nurse practitioner, independent
1474 advanced practice registered nurse, or physician assistant shall
1475 be present and remain at the clinic to provide postoperative
1476 monitoring and care until the patient is discharged.

1477 3. Surgical assistants receive training in counseling,
1478 patient advocacy, and the specific responsibilities associated
1479 with the services the surgical assistants provide.

14804. Volunteers receive training in the specific1481responsibilities associated with the services the volunteers1482provide, including counseling and patient advocacy as provided

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1483 in the rules adopted by the director for different types of 1484 volunteers based on their responsibilities.

Rules relating to the abortion procedure. At a 1485 (e) 1486 minimum, these rules shall require:

1487 1. That a physician, registered nurse, licensed practical 1488 nurse, advanced practice registered nurse practitioner, 1489 independent advanced practice registered nurse, or physician 1490 assistant is available to all patients throughout the abortion 1491 procedure.

Standards for the safe conduct of abortion procedures 1492 2. 1493 that conform to obstetric standards in keeping with established standards of care regarding the estimation of fetal age as 1494 1495 defined in rule.

1496 Appropriate use of general and local anesthesia, 3. 1497 analgesia, and sedation if ordered by the physician.

1498 Appropriate precautions, such as the establishment of 4. 1499 intravenous access at least for patients undergoing post-first 1500 trimester abortions.

1501 5. Appropriate monitoring of the vital signs and other 1502 defined signs and markers of the patient's status throughout the 1503 abortion procedure and during the recovery period until the 1504 patient's condition is deemed to be stable in the recovery room.

1505 Rules that prescribe minimum recovery room standards. (f) 1506 At a minimum, these rules shall require that:

1507 Postprocedure recovery rooms are supervised and staffed 1. 1508 to meet the patients' needs.

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1509 2. Immediate postprocedure care consists of observation in 1510 a supervised recovery room for as long as the patient's 1511 condition warrants.

1512 3. The clinic arranges hospitalization if any complication1513 beyond the medical capability of the staff occurs or is1514 suspected.

4. A registered nurse, licensed practical nurse, advanced practice registered nurse practitioner, independent advanced practice registered nurse, or physician assistant who is trained in the management of the recovery area and is capable of providing basic cardiopulmonary resuscitation and related emergency procedures remains on the premises of the abortion clinic until all patients are discharged.

1522 5. A physician shall sign the discharge order and be 1523 readily accessible and available until the last patient is 1524 discharged to facilitate the transfer of emergency cases if 1525 hospitalization of the patient or viable fetus is necessary.

1526 A physician discusses Rho(D) immune globulin with each 6. 1527 patient for whom it is indicated and ensures that it is offered 1528 to the patient in the immediate postoperative period or that it 1529 will be available to her within 72 hours after completion of the abortion procedure. If the patient refuses the Rho(D) immune 1530 1531 globulin, a refusal form approved by the agency shall be signed 1532 by the patient and a witness and included in the medical record. 1533 7. Written instructions with regard to postabortion

1534 coitus, signs of possible problems, and general aftercare are Page 59 of 154

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1535 given to each patient. Each patient shall have specific written 1536 instructions regarding access to medical care for complications, 1537 including a telephone number to call for medical emergencies.

1538 8. There is a specified minimum length of time that a 1539 patient remains in the recovery room by type of abortion 1540 procedure and duration of gestation.

9. The physician ensures that a registered nurse, licensed practical nurse, advanced <u>practice</u> registered nurse practitioner, <u>independent advanced practice registered nurse</u>, or physician assistant from the abortion clinic makes a good faith effort to contact the patient by telephone, with the patient's consent, within 24 hours after surgery to assess the patient's recovery.

1548 10. Equipment and services are readily accessible to 1549 provide appropriate emergency resuscitative and life support 1550 procedures pending the transfer of the patient or viable fetus 1551 to the hospital.

Section 26. Subsection (23) of section 394.455, Florida Statutes, is amended to read:

1554 394.455 Definitions.—As used in this part, unless the 1555 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, or an independent advanced practice registered nurse registered under,

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1561	or an advanced practice registered nurse certified under, part I
1562	of chapter 464, who obtains national certification as a
1563	psychiatric-mental health advanced practice nurse.
1564	Section 27. Paragraphs (a) and (f) of subsection (2) of
1565	section 394.463, Florida Statutes, are amended to read:
1566	394.463 Involuntary examination
1567	(2) INVOLUNTARY EXAMINATION
1568	(a) An involuntary examination may be initiated by any one
1569	of the following means:
1570	1. A court may enter an ex parte order stating that a
1571	person appears to meet the criteria for involuntary examination,
1572	giving the findings on which that conclusion is based. The ex
1573	parte order for involuntary examination must be based on sworn
1574	testimony, written or oral. If other less restrictive means are
1575	not available, such as voluntary appearance for outpatient
1576	evaluation, a law enforcement officer, or other designated agent
1577	of the court, shall take the person into custody and deliver him
1578	or her to the nearest receiving facility for involuntary
1579	examination. The order of the court shall be made a part of the
1580	patient's clinical record. No fee shall be charged for the
1581	filing of an order under this subsection. Any receiving facility
1582	accepting the patient based on this order must send a copy of
1583	the order to the Agency for Health Care Administration on the
1584	next working day. The order shall be valid only until executed
1585	or, if not executed, for the period specified in the order
1586	itself. If no time limit is specified in the order, the order
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1587 shall be valid for 7 days after the date that the order was 1588 signed.

1589 A law enforcement officer shall take a person who 2. 1590 appears to meet the criteria for involuntary examination into 1591 custody and deliver the person or have him or her delivered to 1592 the nearest receiving facility for examination. The officer 1593 shall execute a written report detailing the circumstances under 1594 which the person was taken into custody, and the report shall be 1595 made a part of the patient's clinical record. Any receiving 1596 facility accepting the patient based on this report must send a 1597 copy of the report to the Agency for Health Care Administration 1598 on the next working day.

1599 A physician, clinical psychologist, psychiatric nurse, 3. 1600 independent advanced practice registered nurse, advanced 1601 practice registered nurse, mental health counselor, marriage and family therapist, or clinical social worker may execute a 1602 1603 certificate stating that he or she has examined a person within 1604 the preceding 48 hours and finds that the person appears to meet 1605 the criteria for involuntary examination and stating the 1606 observations upon which that conclusion is based. If other less 1607 restrictive means are not available, such as voluntary 1608 appearance for outpatient evaluation, a law enforcement officer 1609 shall take the person named in the certificate into custody and 1610 deliver him or her to the nearest receiving facility for 1611 involuntary examination. The law enforcement officer shall 1612 execute a written report detailing the circumstances under which

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1613 the person was taken into custody. The report and certificate 1614 shall be made a part of the patient's clinical record. Any 1615 receiving facility accepting the patient based on this 1616 certificate must send a copy of the certificate to the Agency 1617 for Health Care Administration on the next working day.

1618 A patient shall be examined by a physician, or (f) 1619 clinical psychologist, or psychiatric nurse at a receiving 1620 facility without unnecessary delay and may, upon the order of a 1621 physician, be given emergency treatment if it is determined that such treatment is necessary for the safety of the patient or 1622 1623 others. The patient may not be released by the receiving 1624 facility or its contractor without the documented approval of a psychiatrist, a clinical psychologist, or a psychiatric nurse, 1625 1626 or, if the receiving facility is a hospital, the release may 1627 also be approved by an attending emergency department physician with experience in the diagnosis and treatment of mental and 1628 1629 nervous disorders and after completion of an involuntary 1630 examination pursuant to this subsection. However, a patient may 1631 not be held in a receiving facility for involuntary examination 1632 longer than 72 hours.

1633 Section 28. Paragraphs (a) and (b) of subsection (2) and 1634 subsection (4) of section 395.0191, Florida Statutes, are 1635 amended to read:

1636 395.0191 Staff membership and clinical privileges.1637 (2) (a) Each licensed facility shall establish rules and
1638 procedures for consideration of an application for clinical
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1639 privileges submitted by an independent advanced practice registered nurse registered, or an advanced practice registered 1640 nurse practitioner licensed and certified, under part I of 1641 1642 chapter 464, in accordance with the provisions of this section. 1643 A No licensed facility may not shall deny such application 1644 solely because the applicant is registered or certified licensed 1645 under part I of chapter 464 or because the applicant is not a 1646 participant in the Florida Birth-Related Neurological Injury 1647 Compensation Plan.

An advanced practice registered nurse practitioner who 1648 (b) 1649 is a certified as a registered nurse anesthetist licensed under part I of chapter 464 shall administer anesthesia under the 1650 1651 onsite medical direction of a professional licensed under 1652 chapter 458, chapter 459, or chapter 466, and in accordance with 1653 an established protocol approved by the medical staff. The medical direction shall specifically address the needs of the 1654 1655 individual patient. This paragraph does not apply to an 1656 independent advanced practice registered nurse who is a 1657 certified registered nurse anesthetist under part I of chapter 1658 464.

(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

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1665 case. In making such recommendations and in the delineation of 1666 privileges, each applicant shall be considered individually 1667 pursuant to criteria for a doctor licensed under chapter 458, 1668 chapter 459, chapter 461, or chapter 466; τ or an independent 1669 advanced practice registered nurse registered, or an advanced 1670 practice registered nurse practitioner licensed and certified, 1671 under part I of chapter 464; τ or for a psychologist licensed 1672 under chapter 490, as applicable. The applicant's eligibility 1673 for staff membership or clinical privileges shall be determined by the applicant's background, experience, health, training, and 1674 demonstrated competency; the applicant's adherence to applicable 1675 professional ethics; the applicant's reputation; and the 1676 1677 applicant's ability to work with others and by such other 1678 elements as determined by the governing board, consistent with 1679 this part.

1680 Section 29. Subsection (3) of section 395.602, Florida 1681 Statutes, is amended to read:

1682

395.602 Rural hospitals.-

1683 (3) USE OF FUNDS.-It is the intent of the Legislature that 1684 funds as appropriated shall be utilized by the department for 1685 the purpose of increasing the number of primary care physicians, 1686 physician assistants, certified nurse midwives, certified nurse 1687 practitioners, and nurses in rural areas, either through the 1688 Medical Education Reimbursement and Loan Repayment Program as 1689 defined by s. 1009.65 or through a federal loan repayment 1690 program which requires state matching funds. The department may Page 65 of 154

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1691 use funds appropriated for the Medical Education Reimbursement 1692 and Loan Repayment Program as matching funds for federal loan 1693 repayment programs for health care personnel, such as that 1694 authorized in Pub. L. No. 100-177, s. 203. If the department 1695 receives federal matching funds, the department shall only 1696 implement the federal program. Reimbursement through either 1697 program shall be limited to:

(a) Primary care physicians, physician assistants, certified nurse midwives, <u>certified</u> nurse practitioners, and nurses employed by or affiliated with rural hospitals, as defined in this act; and

(b) Primary care physicians, physician assistants, certified nurse midwives, <u>certified</u> nurse practitioners, and nurses employed by or affiliated with rural area health education centers, as defined in this section. These personnel shall practice:

1707 1. In a county with a population density of no greater 1708 than 100 persons per square mile; or

1709 2. Within the boundaries of a hospital tax district which 1710 encompasses a population of no greater than 100 persons per 1711 square mile.

1712

1713 If the department administers a federal loan repayment program, 1714 priority shall be given to obligating state and federal matching 1715 funds pursuant to paragraphs (a) and (b). The department may use 1716 federal matching funds in other health workforce shortage areas Page 66 of 154

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1717 and medically underserved areas in the state for loan repayment 1718 programs for primary care physicians, physician assistants, 1719 certified nurse midwives, <u>certified</u> nurse practitioners, and 1720 nurses who are employed by publicly financed health care 1721 programs that serve medically indigent persons.

1722Section 30. Paragraphs (b) and (c) of subsection (8) of1723section 395.605, Florida Statutes, are amended to read:

395.605 Emergency care hospitals.-

1725 (8)

1724

(b) All patients shall be under the care of a physician <u>or</u>
an independent advanced practice registered nurse or under the
care of <u>an advanced practice registered</u> a nurse practitioner or
physician assistant supervised by a physician.

(c) A physician, <u>an independent advanced practice</u> registered nurse, an advanced practice registered nurse practitioner, or <u>a</u> physician assistant shall be on duty at all times, or a physician shall be on call and available within 30 minutes at all times.

1735 Section 31. Subsection (26) of section 397.311, Florida 1736 Statutes, is amended to read:

1737 397.311 Definitions.—As used in this chapter, except part1738 VIII, the term:

(26) "Qualified professional" means a physician or a physician assistant licensed under chapter 458 or chapter 459; a professional licensed under chapter 490 or chapter 491; an <u>independent advanced practice registered nurse or</u> advanced

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1743 practice registered nurse, who has practitioner having a specialty in psychiatry and is registered or certified licensed 1744 under part I of chapter 464; or a person who is certified 1745 1746 through a department-recognized certification process for substance abuse treatment services and who holds, at a minimum, 1747 1748 a bachelor's degree. A person who is certified in substance 1749 abuse treatment services by a state-recognized certification 1750 process in another state at the time of employment with a 1751 licensed substance abuse provider in this state may perform the 1752 functions of a qualified professional as defined in this chapter 1753 but must meet certification requirements contained in this 1754 subsection no later than 1 year after his or her date of 1755 employment. 1756 Section 32. Section 397.405, Florida Statutes, is amended 1757 to read: 1758 397.405 Exemptions from licensure.-The following are exempt from the licensing provisions of this chapter: 1759 1760 A hospital or hospital-based component licensed under (1)1761 chapter 395. 1762 A nursing home facility as defined in s. 400.021. (2)1763 A substance abuse education program established (3) 1764 pursuant to s. 1003.42. 1765 (4) A facility or institution operated by the Federal 1766 Government. 1767 (5) A physician or physician assistant licensed under 1768 chapter 458 or chapter 459. Page 68 of 154

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(6) A psychologist licensed under chapter 490.

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(7) A social worker, marriage and family therapist, or mental health counselor licensed under chapter 491.

1772 (8) A legally cognizable church or nonprofit religious organization or denomination providing substance abuse services, 1773 1774 including prevention services, which are solely religious, 1775 spiritual, or ecclesiastical in nature. A church or nonprofit 1776 religious organization or denomination providing any of the 1777 licensed service components itemized under s. 397.311(18) is not exempt from substance abuse licensure but retains its exemption 1778 1779 with respect to all services which are solely religious, 1780 spiritual, or ecclesiastical in nature.

(9) Facilities licensed under chapter 393 which, in addition to providing services to persons with developmental disabilities, also provide services to persons developmentally at risk as a consequence of exposure to alcohol or other legal or illegal drugs while in utero.

(10) DUI education and screening services provided pursuant to ss. 316.192, 316.193, 322.095, 322.271, and 322.291. Persons or entities providing treatment services must be licensed under this chapter unless exempted from licensing as provided in this section.

1791 (11) A facility licensed under s. 394.875 as a crisis 1792 stabilization unit.

1794 The exemptions from licensure in this section do not apply to Page 69 of 154

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1795 any service provider that receives an appropriation, grant, or 1796 contract from the state to operate as a service provider as defined in this chapter or to any substance abuse program 1797 1798 regulated pursuant to s. 397.406. Furthermore, this chapter may not be construed to limit the practice of a physician or 1799 1800 physician assistant licensed under chapter 458 or chapter 459, a 1801 psychologist licensed under chapter 490, a psychotherapist 1802 licensed under chapter 491, or an independent advanced practice 1803 registered nurse registered, or an advanced practice registered 1804 nurse certified, practitioner licensed under part I of chapter 1805 464, who provides substance abuse treatment, unless a 1806 practitioner represents so long as the physician, physician 1807 assistant, psychologist, psychotherapist, or advanced registered 1808 nurse practitioner does not represent to the public that the 1809 practitioner he or she is a licensed service provider and provides does not provide services to individuals pursuant to 1810 1811 part V of this chapter. Failure to comply with any requirement 1812 necessary to maintain an exempt status under this section is a 1813 misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083. 1814

1815 Section 33. Subsections (5), (9), and (10) of section 1816 397.427, Florida Statutes, are amended to read:

1817 397.427 Medication-assisted treatment service providers; 1818 rehabilitation program; needs assessment and provision of 1819 services; persons authorized to issue takeout medication; 1820 unlawful operation; penalty.-

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(5) Notwithstanding s. 465.019(2), a physician assistant, a registered nurse, an advanced <u>practice</u> registered nurse practitioner, or a licensed practical nurse working for a licensed service provider may deliver takeout medication for opiate treatment to persons enrolled in a maintenance treatment program for medication-assisted treatment for opiate addiction if:

(a) The medication-assisted treatment program for opiate
addiction has an appropriate valid permit issued pursuant to
rules adopted by the Board of Pharmacy;

(b) The medication for treatment of opiate addiction has been delivered pursuant to a valid prescription written by the program's physician licensed pursuant to chapter 458 or chapter 459;

(c) The medication for treatment of opiate addiction which is ordered appears on a formulary and is prepackaged and prelabeled with dosage instructions and distributed from a source authorized under chapter 499;

1839 (d) Each licensed provider adopts written protocols which provide for supervision of the physician assistant, registered 1840 1841 nurse, advanced practice registered nurse practitioner, or 1842 licensed practical nurse by a physician licensed pursuant to 1843 chapter 458 or chapter 459 and for the procedures by which 1844 patients' medications may be delivered by the physician 1845 assistant, registered nurse, advanced practice registered nurse 1846 practitioner, or licensed practical nurse. Such protocols shall Page 71 of 154

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1847 be signed by the supervising physician and either the 1848 administering registered nurse, the advanced <u>practice</u> registered 1849 nurse practitioner, or the licensed practical nurse.

(e) Each licensed service provider maintains and has
available for inspection by representatives of the Board of
Pharmacy all medical records and patient care protocols,
including records of medications delivered to patients, in
accordance with the board.

(9) A physician assistant, a registered nurse, an advanced practice registered nurse practitioner, or a licensed practical nurse working for a licensed service provider may deliver medication as prescribed by rule if:

1859 (a) The service provider is authorized to provide1860 medication-assisted treatment;

(b) The medication has been administered pursuant to a valid prescription written by the program's physician who is licensed under chapter 458 or chapter 459; and

1864 (c) The medication ordered appears on a formulary or meets1865 federal requirements for medication-assisted treatment.

1866 Each licensed service provider that provides (10)1867 medication-assisted treatment must adopt written protocols as 1868 specified by the department and in accordance with federally 1869 required rules, regulations, or procedures. The protocol shall 1870 provide for the supervision of the physician assistant, 1871 registered nurse, advanced practice registered nurse 1872 practitioner, or licensed practical nurse working under the Page 72 of 154

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1873 supervision of a physician who is licensed under chapter 458 or 1874 chapter 459. The protocol must specify how the medication will 1875 be used in conjunction with counseling or psychosocial treatment 1876 and that the services provided will be included on the treatment 1877 plan. The protocol must specify the procedures by which 1878 medication-assisted treatment may be administered by the 1879 supervised physician assistant, registered nurse, advanced 1880 registered nurse practitioner, or licensed practical nurse. 1881 These protocols shall be signed by the supervising physician and 1882 the supervised administering physician assistant, registered 1883 nurse, advanced registered nurse practitioner, or licensed 1884 practical nurse.

1885Section 34. Paragraph (a) of subsection (2) of section1886397.501, Florida Statutes, is amended to read:

1887 397.501 Rights of individuals.-Individuals receiving 1888 substance abuse services from any service provider are 1889 guaranteed protection of the rights specified in this section, 1890 unless otherwise expressly provided, and service providers must 1891 ensure the protection of such rights.

1892

(2) RIGHT TO NONDISCRIMINATORY SERVICES.-

(a) Service providers may not deny an individual access to
substance abuse services solely on the basis of race, gender,
ethnicity, age, sexual preference, human immunodeficiency virus
status, prior service departures against medical advice,
disability, or number of relapse episodes. Service providers may
not deny an individual who takes medication prescribed by a

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physician, independent advanced practice registered nurse, or advanced practice registered nurse access to substance abuse services solely on that basis. Service providers who receive state funds to provide substance abuse services may not, if space and sufficient state resources are available, deny access to services based solely on inability to pay.

Section 35. Subsection (8) of section 400.021, Florida
Statutes, is amended to read:

1907 400.021 Definitions.-When used in this part, unless the 1908 context otherwise requires, the term:

(8) "Geriatric outpatient clinic" means a site for
providing outpatient health care to persons 60 years of age or
older, which is staffed by a registered nurse, a physician
assistant, or a licensed practical nurse under the direct
supervision of a registered nurse, <u>independent advanced practice</u>
<u>registered nurse</u>, advanced <u>practice</u> registered nurse
practitioner, physician assistant, or physician.

1916 Section 36. Subsection (3) of section 400.0255, Florida 1917 Statutes, is amended to read:

1918 400.0255 Resident transfer or discharge; requirements and 1919 procedures; hearings.-

(3) When a discharge or transfer is initiated by the nursing home, the nursing home administrator employed by the nursing home that is discharging or transferring the resident, or an individual employed by the nursing home who is designated by the nursing home administrator to act on behalf of the

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1925 administration, must sign the notice of discharge or transfer. 1926 Any notice indicating a medical reason for transfer or discharge 1927 must either be signed by the resident's attending physician or 1928 the medical director of the facility, or include an attached 1929 written order for the discharge or transfer. The notice or the 1930 order must be signed by the resident's physician, medical 1931 director, treating physician, independent advanced practice 1932 registered nurse, advanced practice registered nurse practitioner, or physician assistant. 1933

1934 Section 37. Subsection (3) of section 400.172, Florida 1935 Statutes, is amended to read:

1936 400.172 Respite care provided in nursing home facilities.-1937 A prospective respite care resident must provide (3) 1938 medical information from a physician, physician assistant, 1939 independent advanced practice registered nurse, or advanced 1940 practice registered nurse practitioner and any other information 1941 provided by the primary caregiver required by the facility 1942 before or when the person is admitted to receive respite care. 1943 The medical information must include a physician's or an 1944 independent advanced practice registered nurse's order for respite care and proof of a physical examination by a licensed 1945 physician, physician assistant, independent advanced practice 1946 1947 registered nurse, or advanced practice registered nurse 1948 practitioner. The physician's order and physical examination may 1949 be used to provide intermittent respite care for up to 12 months 1950 after the date the order is written.

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1951 Section 38. Subsections (20) through (29) of section 1952 400.462, Florida Statutes, are renumbered as subsections (21) 1953 through (30), respectively, subsection (3) is amended, and a new 1954 subsection (20) is added to that section, to read: 1955 400.462 Definitions.-As used in this part, the term: 1956 "Advanced practice registered nurse practitioner" (3) 1957 means a person licensed in this state to practice professional 1958 nursing and certified in advanced or specialized nursing 1959 practice, as defined in s. 464.003. 1960 (20) "Independent advanced practice registered nurse" 1961 means a person licensed in this state to practice professional 1962 nursing and registered to practice advanced or specialized 1963 nursing independently and without physician supervision or a 1964 protocol, as defined in s. 464.003. 1965 Section 39. Subsection (2) of section 400.487, Florida 1966 Statutes, is amended to read: 1967 400.487 Home health service agreements; physician's, 1968 physician assistant's, independent advanced practice registered 1969 nurse's, and advanced practice registered nurse's nurse 1970 practitioner's treatment orders; patient assessment; establishment and review of plan of care; provision of services; 1971 1972 orders not to resuscitate.-1973 (2) When required by the provisions of chapter 464; part 1974 I, part III, or part V of chapter 468; or chapter 486, the 1975 attending physician, physician assistant, independent advanced 1976 practice registered nurse, or advanced practice registered nurse Page 76 of 154

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1977 practitioner, acting within his or her respective scope of 1978 practice, shall establish treatment orders for a patient who is 1979 to receive skilled care. The treatment orders must be signed by 1980 the physician, physician assistant, independent advanced practice registered nurse, or advanced practice registered nurse 1981 1982 practitioner before a claim for payment for the skilled services 1983 is submitted by the home health agency. If the claim is 1984 submitted to a managed care organization, the treatment orders 1985 must be signed within the time allowed under the provider 1986 agreement. The treatment orders shall be reviewed, as frequently 1987 as the patient's illness requires, by the physician, physician assistant, independent advanced practice registered nurse, or 1988 1989 advanced practice registered nurse practitioner in consultation 1990 with the home health agency.

1991Section 40. Paragraph (a) of subsection (13) of section1992400.506, Florida Statutes, is amended to read:

1993 400.506 Licensure of nurse registries; requirements; 1994 penalties.-

(13) 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
for the medical care of the patient, a medical plan of treatment
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2003 must be established for each patient receiving care or treatment 2004 provided by a licensed nurse in the home. The original medical 2005 plan of treatment must be timely signed by the physician, 2006 physician assistant, independent advanced practice registered 2007 nurse, or advanced practice registered nurse practitioner, 2008 acting within his or her respective scope of practice, and 2009 reviewed in consultation with the licensed nurse at least every 2010 2 months. Any additional order or change in orders must be obtained from, reduced to writing by, and timely signed by the 2011 physician, physician assistant, independent advanced practice 2012 registered nurse, or advanced practice registered nurse 2013 2014 practitioner and reduced to writing and timely signed by the 2015 physician, physician assistant, or advanced registered nurse 2016 practitioner. The delivery of care under a medical plan of 2017 treatment must be substantiated by the appropriate nursing notes 2018 or documentation made by the nurse in compliance with nursing 2019 practices established under part I of chapter 464.

2020Section 41. Paragraph (g) of subsection (4) of section2021400.9905, Florida Statutes, is amended to read:

400.9905 Definitions.-

(4) "Clinic" means an entity where health care services are provided to individuals and which tenders charges for reimbursement for such services, including a mobile clinic and a portable equipment provider. As used in this part, the term does not include and the licensure requirements of this part do not apply to:

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2029 (q) A sole proprietorship, group practice, partnership, or 2030 corporation that provides health care services by licensed 2031 health care practitioners under chapter 457, chapter 458, 2032 chapter 459, chapter 460, chapter 461, chapter 462, chapter 463, 2033 chapter 466, chapter 467, chapter 480, chapter 484, chapter 486, 2034 chapter 490, chapter 491, or part I, part III, part X, part 2035 XIII, or part XIV of chapter 468, or s. 464.012 or s. 464.0125, 2036 and that is wholly owned by one or more licensed health care 2037 practitioners, or the licensed health care practitioners set 2038 forth in this paragraph and the spouse, parent, child, or 2039 sibling of a licensed health care practitioner if one of the 2040 owners who is a licensed health care practitioner is supervising 2041 the business activities and is legally responsible for the 2042 entity's compliance with all federal and state laws. However, a 2043 health care practitioner may not supervise services beyond the 2044 scope of the practitioner's license, except that, for the 2045 purposes of this part, a clinic owned by a licensee in s. 2046 456.053(3)(b) which provides only services authorized pursuant 2047 to s. 456.053(3)(b) may be supervised by a licensee specified in 2048 s. 456.053(3)(b).

2050 Notwithstanding this subsection, an entity shall be deemed a 2051 clinic and must be licensed under this part in order to receive 2052 reimbursement under the Florida Motor Vehicle No-Fault Law, ss. 2053 627.730-627.7405, unless exempted under s. 627.736(5)(h).

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Section 42. Subsections (1) and (2) of section 401.445, Page 79 of 154

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2055 Florida Statutes, are amended to read:

2056 401.445 Emergency examination and treatment of 2057 incapacitated persons.—

2058 No Recovery is not shall be allowed in any court in (1)2059 this state against any emergency medical technician, paramedic, 2060 or physician as defined in this chapter, any independent 2061 advanced practice registered nurse registered under s. 464.0125, 2062 any advanced practice registered nurse practitioner certified 2063 under s. 464.012, or any physician assistant licensed under s. 2064 458.347 or s. 459.022, or any person acting under the direct medical supervision of a physician, in an action brought for 2065 2066 examining or treating a patient without his or her informed 2067 consent if:

(a) The patient at the time of examination or treatment is intoxicated, under the influence of drugs, or otherwise incapable of providing informed consent as provided in s. 766.103;

2072 (b) The patient at the time of examination or treatment is 2073 experiencing an emergency medical condition; and

(c) The patient would reasonably, under all the surrounding circumstances, undergo such examination, treatment, or procedure if <u>the patient</u> he or she were advised by the emergency medical technician, paramedic, physician, <u>independent</u> <u>advanced practice registered nurse</u>, advanced <u>practice</u> registered nurse <u>practitioner</u>, or physician assistant in accordance with s. 766.103(3).

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Examination and treatment provided under this subsection shall be limited to reasonable examination of the patient to determine the medical condition of the patient and treatment reasonably necessary to alleviate the emergency medical condition or to stabilize the patient.

2087 (2) In examining and treating a person who is apparently 2088 intoxicated, under the influence of drugs, or otherwise 2089 incapable of providing informed consent, the emergency medical technician, paramedic, physician, independent advanced practice 2090 registered nurse, advanced practice registered nurse 2091 2092 practitioner, or physician assistant, or any person acting under 2093 the direct medical supervision of a physician, shall proceed 2094 wherever possible with the consent of the person. If the person 2095 reasonably appears to be incapacitated and refuses his or her 2096 consent, the person may be examined, treated, or taken to a 2097 hospital or other appropriate treatment resource if he or she is 2098 in need of emergency attention, without his or her consent, but 2099 unreasonable force shall not be used.

2100 Section 43. Subsections (1) and (11) of section 409.905, 2101 Florida Statutes, are amended to read:

409.905 Mandatory Medicaid services.—The agency may make payments for the following services, which are required of the state by Title XIX of the Social Security Act, furnished by Medicaid providers to recipients who are determined to be eligible on the dates on which the services were provided. Any

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2107 service under this section shall be provided only when medically 2108 necessary and in accordance with state and federal law. 2109 Mandatory services rendered by providers in mobile units to 2110 Medicaid recipients may be restricted by the agency. Nothing in 2111 this section shall be construed to prevent or limit the agency 2112 from adjusting fees, reimbursement rates, lengths of stay, 2113 number of visits, number of services, or any other adjustments 2114 necessary to comply with the availability of moneys and any 2115 limitations or directions provided for in the General 2116 Appropriations Act or chapter 216.

2117 (1)INDEPENDENT ADVANCED PRACTICE REGISTERED NURSE AND 2118 ADVANCED PRACTICE REGISTERED NURSE PRACTITIONER SERVICES.-The agency shall pay for services provided to a recipient by a 2119 2120 registered independent advanced practice registered nurse, a 2121 certified licensed advanced practice registered nurse practitioner who has a valid collaboration agreement with a 2122 2123 licensed physician on file with the Department of Health, or a 2124 certified registered nurse anesthetist who provides anesthesia 2125 services in accordance with established protocol required by state law and approved by the medical staff of the facility in 2126 which the anesthetic service is performed. Reimbursement for 2127 2128 such services must be provided in an amount that equals not less 2129 than 80 percent of the reimbursement to a physician who provides 2130 the same services, unless otherwise provided for in the General 2131 Appropriations Act.

2132

(11) RURAL HEALTH CLINIC SERVICES.—The agency shall pay Page 82 of 154

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2133 for outpatient primary health care services for a recipient 2134 provided by a clinic certified by and participating in the 2135 Medicare program which is located in a federally designated, 2136 rural, medically underserved area and has on its staff one or 2137 more certified licensed primary care nurse practitioners or 2138 physician assistants, and a licensed staff supervising 2139 physician, or a consulting supervising physician, or an 2140 independent advanced practice registered nurse.

2141 Section 44. Paragraph (a) of subsection (3) and subsection 2142 (7) of section 409.908, Florida Statutes, are amended to read: 409.908 Reimbursement of Medicaid providers.-Subject to 2143 2144 specific appropriations, the agency shall reimburse Medicaid providers, in accordance with state and federal law, according 2145 2146 to methodologies set forth in the rules of the agency and in 2147 policy manuals and handbooks incorporated by reference therein. 2148 These methodologies may include fee schedules, reimbursement 2149 methods based on cost reporting, negotiated fees, competitive 2150 bidding pursuant to s. 287.057, and other mechanisms the agency 2151 considers efficient and effective for purchasing services or 2152 goods on behalf of recipients. If a provider is reimbursed based 2153 on cost reporting and submits a cost report late and that cost 2154 report would have been used to set a lower reimbursement rate 2155 for a rate semester, then the provider's rate for that semester 2156 shall be retroactively calculated using the new cost report, and 2157 full payment at the recalculated rate shall be effected 2158 retroactively. Medicare-granted extensions for filing cost Page 83 of 154

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2159 reports, if applicable, shall also apply to Medicaid cost 2160 reports. Payment for Medicaid compensable services made on behalf of Medicaid eligible persons is subject to the 2161 availability of moneys and any limitations or directions 2162 2163 provided for in the General Appropriations Act or chapter 216. 2164 Further, nothing in this section shall be construed to prevent 2165 or limit the agency from adjusting fees, reimbursement rates, 2166 lengths of stay, number of visits, or number of services, or 2167 making any other adjustments necessary to comply with the availability of moneys and any limitations or directions 2168 2169 provided for in the General Appropriations Act, provided the 2170 adjustment is consistent with legislative intent.

2171 Subject to any limitations or directions provided for (3)2172 in the General Appropriations Act, the following Medicaid 2173 services and goods may be reimbursed on a fee-for-service basis. 2174 For each allowable service or goods furnished in accordance with 2175 Medicaid rules, policy manuals, handbooks, and state and federal 2176 law, the payment shall be the amount billed by the provider, the 2177 provider's usual and customary charge, or the maximum allowable 2178 fee established by the agency, whichever amount is less, with 2179 the exception of those services or goods for which the agency 2180 makes payment using a methodology based on capitation rates, 2181 average costs, or negotiated fees.

2182(a) Independent advanced practice registered nurse or2183advanced practice registered nurse practitioner services.

2184 (7) A provider of family planning services shall be Page 84 of 154

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2185 reimbursed the lesser of the amount billed by the provider or an 2186 all-inclusive amount per type of visit for physicians, 2187 <u>independent advanced practice registered nurses</u>, and advanced 2188 <u>practice registered nurses nurse practitioners</u>, as established 2189 by the agency in a fee schedule.

2190 Section 45. Subsection (2) of section 409.9081, Florida 2191 Statutes, is amended to read:

2192

409.9081 Copayments.-

2193 The agency shall, subject to federal regulations and (2)2194 any directions or limitations provided for in the General 2195 Appropriations Act, require copayments for the following 2196 additional services: hospital inpatient, laboratory and X-ray 2197 services, transportation services, home health care services, 2198 community mental health services, rural health services, 2199 federally qualified health clinic services, and independent 2200 advanced practice registered nurse or advanced practice 2201 registered nurse practitioner services. The agency may only 2202 establish copayments for prescribed drugs or for any other 2203 federally authorized service if such copayment is specifically 2204 provided for in the General Appropriations Act or other law.

2205 Section 46. Paragraph (a) of subsection (1) of section 2206 409.973, Florida Statutes, is amended to read:

2207 409.973 Benefits.-

2208 (1) MINIMUM BENEFITS.-Managed care plans shall cover, at a 2209 minimum, the following services:

2210 (a) Independent advanced practice registered nurse and

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2211 advanced practice registered nurse practitioner services.

2212 Section 47. Subsections (2), (4), and (5) of section 2213 429.26, Florida Statutes, are amended to read:

2214 429.26 Appropriateness of placements; examinations of 2215 residents.-

(2) A physician, physician assistant, <u>independent advanced</u>
 <u>practice registered nurse</u>, or <u>advanced practice registered</u> nurse
 practitioner who is employed by an assisted living facility to
 provide an initial examination for admission purposes may not
 have financial interest in the facility.

2221 If possible, each resident shall have been examined by (4) 2222 a licensed physician, a licensed physician assistant, a 2223 registered independent advanced practice registered nurse, or a 2224 certified advanced practice registered licensed nurse 2225 practitioner within 60 days before admission to the facility. 2226 The signed and completed medical examination report shall be 2227 submitted to the owner or administrator of the facility who 2228 shall use the information contained therein to assist in the 2229 determination of the appropriateness of the resident's admission 2230 and continued stay in the facility. The medical examination 2231 report shall become a permanent part of the record of the 2232 resident at the facility and shall be made available to the 2233 agency during inspection or upon request. An assessment that has 2234 been completed through the Comprehensive Assessment and Review 2235 for Long-Term Care Services (CARES) Program fulfills the 2236 requirements for a medical examination under this subsection and Page 86 of 154

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2237 s. 429.07(3)(b)6.

2238 Except as provided in s. 429.07, if a medical (5) 2239 examination has not been completed within 60 days before the 2240 admission of the resident to the facility, a licensed physician, licensed physician assistant, registered independent advanced 2241 2242 practice registered nurse, or certified advanced practice 2243 registered licensed nurse practitioner shall examine the 2244 resident and complete a medical examination form provided by the 2245 agency within 30 days following the admission to the facility to 2246 enable the facility owner or administrator to determine the 2247 appropriateness of the admission. The medical examination form 2248 shall become a permanent part of the record of the resident at 2249 the facility and shall be made available to the agency during 2250 inspection by the agency or upon request.

2251 Section 48. Paragraph (a) of subsection (2) and paragraph 2252 (a) of subsection (7) of section 429.918, Florida Statutes, are 2253 amended to read:

2254 429.918 Licensure designation as a specialized Alzheimer's 2255 services adult day care center.—

2256

(2) As used in this section, the term:

(a) "ADRD participant" means a participant who has a documented diagnosis of Alzheimer's disease or a dementiarelated disorder (ADRD) from a licensed physician, licensed physician assistant, <u>registered independent advanced practice</u> <u>registered nurse</u>, or a certified licensed advanced <u>practice</u> registered nurse <u>practitioner</u>.

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(7) (a) An ADRD participant admitted to an adult day care center having a license designated under this section, or the caregiver when applicable, must:

2266 1. Require ongoing supervision to maintain the highest 2267 level of medical or custodial functioning and have a 2268 demonstrated need for a responsible party to oversee his or her 2269 care.

2270 2. Not actively demonstrate aggressive behavior that 2271 places himself, herself, or others at risk of harm.

2272 3. Provide the following medical documentation signed by a
 2273 licensed physician, licensed physician assistant, <u>registered</u>
 2274 <u>independent advanced practice registered nurse</u>, or <u>certified</u> a
 2275 licensed advanced <u>practice</u> registered nurse <u>practitioner</u>:

2276 a. Any physical, health, or emotional conditions that 2277 require medical care.

2278 b. A listing of the ADRD participant's current prescribed 2279 and over-the-counter medications and dosages, diet restrictions, 2280 mobility restrictions, and other physical limitations.

4. Provide documentation signed by a health care provider licensed in this state which indicates that the ADRD participant is free of the communicable form of tuberculosis and free of signs and symptoms of other communicable diseases.

2285 Section 49. Paragraph (e) of subsection (5) of section 2286 440.102, Florida Statutes, is amended to read:

2287 440.102 Drug-free workplace program requirements.—The 2288 following provisions apply to a drug-free workplace program Page 88 of 154

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2314

(4)

2289 implemented pursuant to law or to rules adopted by the Agency 2290 for Health Care Administration:

(5) PROCEDURES AND EMPLOYEE PROTECTION.—All specimen collection and testing for drugs under this section shall be performed in accordance with the following procedures:

(e) A specimen for a drug test may be taken or collectedby any of the following persons:

A physician, a physician assistant, <u>an independent</u>
 <u>advanced practice registered nurse</u>, an <u>advanced practice</u>
 <u>registered nurse</u>, a registered <u>professional</u> nurse, a licensed
 practical nurse, or <u>a nurse practitioner or</u> a certified
 paramedic who is present at the scene of an accident for the
 purpose of rendering emergency medical service or treatment.

2302 2. A qualified person employed by a licensed or certified2303 laboratory as described in subsection (9).

2304 Section 50. Subsection (2) and paragraph (d) of subsection 2305 (4) of section 456.0391, Florida Statutes, are amended to read:

2306456.0391Advanced practice registered nurses2307practitioners; information required for certification.-

(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 <u>practice</u> registered
<u>nurses</u> nurse practitioners pursuant to this section in
conjunction with the renewal of such certificate.

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2315 (d) Any applicant for initial certification or renewal of 2316 certification as an advanced practice registered nurse 2317 practitioner who submits to the Department of Health a set of 2318 fingerprints and information required for the criminal history check required under this section shall not be required to 2319 2320 provide a subsequent set of fingerprints or other duplicate 2321 information required for a criminal history check to the Agency 2322 for Health Care Administration, the Department of Juvenile 2323 Justice, or the Department of Children and Family Services for 2324 employment or licensure with such agency or department, if the 2325 applicant has undergone a criminal history check as a condition of initial certification or renewal of certification as an 2326 2327 advanced practice registered nurse practitioner with the 2328 Department of Health, notwithstanding any other provision of law 2329 to the contrary. In lieu of such duplicate submission, the 2330 Agency for Health Care Administration, the Department of 2331 Juvenile Justice, and the Department of Children and Family 2332 Services shall obtain criminal history information for 2333 employment or licensure of persons certified under s. 464.012 by 2334 such agency or department from the Department of Health's health 2335 care practitioner credentialing system. 2336 Section 51. Subsection (2) of section 456.0392, Florida 2337 Statutes, is amended to read: 2338 456.0392 Prescription labeling.-2339 A prescription for a drug that is not listed as a (2)

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controlled substance in chapter 893 which is written by an

advanced <u>practice</u> registered nurse practitioner certified under s. 464.012 is presumed, subject to rebuttal, to be valid and within the parameters of the prescriptive authority delegated by a practitioner licensed under chapter 458, chapter 459, or chapter 466.

2346 Section 52. Paragraph (a) of subsection (1) and subsection 2347 (6) of section 456.041, Florida Statutes, are amended to read: 2348 456.041 Practitioner profile: creation -

2348 456.041 Practitioner profile; creation.-2349 The Department of Health shall compile the (1) (a) 2350 information submitted pursuant to s. 456.039 into a practitioner 2351 profile of the applicant submitting the information, except that 2352 the Department of Health shall develop a format to compile 2353 uniformly any information submitted under s. 456.039(4)(b). 2354 Beginning July 1, 2001, the Department of Health may compile the information submitted pursuant to s. 456.0391 into a 2355 2356 practitioner profile of the applicant submitting the 2357 information. The protocol submitted pursuant to s. 464.012(3) 2358 must be included in the practitioner profile of the advanced 2359 practice registered nurse practitioner.

(6) The Department of Health shall provide in each
practitioner profile for every physician or advanced <u>practice</u>
registered nurse practitioner terminated for cause from
participating in the Medicaid program, pursuant to s. 409.913,
or sanctioned by the Medicaid program a statement that the
practitioner has been terminated from participating in the
Florida Medicaid program or sanctioned by the Medicaid program.

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2367 Section 53. Subsection (1) and paragraphs (a), (d), and 2368 (e) of subsection (2) of section 456.048, Florida Statutes, are 2369 amended to read:

2370 456.048 Financial responsibility requirements for certain 2371 health care practitioners.—

2372 As a prerequisite for licensure or license renewal, (1)2373 the Board of Acupuncture, the Board of Chiropractic Medicine, 2374 the Board of Podiatric Medicine, and the Board of Dentistry 2375 shall, by rule, require that all health care practitioners licensed under the respective board, and the Board of Medicine 2376 2377 and the Board of Osteopathic Medicine shall, by rule, require 2378 that all anesthesiologist assistants licensed pursuant to s. 2379 458.3475 or s. 459.023, and the Board of Nursing shall, by rule, 2380 require that independent advanced practice registered nurses 2381 registered under s. 464.0125 and advanced practice registered 2382 nurses nurse practitioners certified under s. 464.012, and the 2383 department shall, by rule, require that midwives maintain 2384 medical malpractice insurance or provide proof of financial 2385 responsibility in an amount and in a manner determined by the 2386 board or department to be sufficient to cover claims arising out 2387 of the rendering of or failure to render professional care and 2388 services in this state.

(2) The board or department may grant exemptions upon application by practitioners meeting any of the following criteria:

2392

(a) Any person licensed under chapter 457, s. 458.3475, s. **Page 92 of 154**

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2393 459.023, chapter 460, chapter 461, s. 464.012, s. 464.0125, 2394 chapter 466, or chapter 467 who practices exclusively as an 2395 officer, employee, or agent of the Federal Government or of the 2396 state or its agencies or its subdivisions. For the purposes of 2397 this subsection, an agent of the state, its agencies, or its 2398 subdivisions is a person who is eligible for coverage under any 2399 self-insurance or insurance program authorized by the provisions 2400 of s. 768.28(16) or who is a volunteer under s. 110.501(1).

2401 Any person licensed or certified under chapter 457, s. (d) 458.3475, s. 459.023, chapter 460, chapter 461, s. 464.012, s. 2402 464.0125, chapter 466, or chapter 467 who practices only in 2403 2404 conjunction with his or her teaching duties at an accredited 2405 school or in its main teaching hospitals. Such person may engage 2406 in the practice of medicine to the extent that such practice is 2407 incidental to and a necessary part of duties in connection with 2408 the teaching position in the school.

(e) Any person holding an active license or certification under chapter 457, s. 458.3475, s. 459.023, chapter 460, chapter 461, s. 464.012, <u>s. 464.0125</u>, chapter 466, or chapter 467 who is not practicing in this state. If such person initiates or resumes practice in this state, he or she must notify the department of such activity.

2415 Section 54. Paragraphs (a), (i), (o), and (r) of 2416 subsection (3) and paragraph (g) of subsection (5) of section 2417 456.053, Florida Statutes, are amended to read:

2418 456.053 Financial arrangements between referring health Page 93 of 154

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2419 care providers and providers of health care services.-

2420 (3) DEFINITIONS.—For the purpose of this section, the 2421 word, phrase, or term:

"Board" means any of the following boards relating to 2422 (a) 2423 the respective professions: the Board of Medicine as created in 2424 s. 458.307; the Board of Osteopathic Medicine as created in s. 2425 459.004; the Board of Chiropractic Medicine as created in s. 2426 460.404; the Board of Podiatric Medicine as created in s. 2427 461.004; the Board of Optometry as created in s. 463.003; the 2428 Board of Pharmacy as created in s. 465.004; and the Board of 2429 Dentistry as created in s. 466.004; and the Board of Nursing as 2430 created in s. 464.004.

(i) "Health care provider" means <u>a</u> any physician licensed under chapter 458, chapter 459, chapter 460, or chapter 461<u>; an</u> <u>independent advanced practice registered nurse registered under</u> <u>s. 464.0125;</u> or <u>a</u> any health care provider licensed under chapter 463 or chapter 466.

(o) "Referral" means any referral of a patient by a health care provider for health care services, including, without limitation:

2439 1. The forwarding of a patient by a health care provider 2440 to another health care provider or to an entity which provides 2441 or supplies designated health services or any other health care 2442 item or service; or

2443 2. The request or establishment of a plan of care by a 2444 health care provider, which includes the provision of designated Page 94 of 154

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2445 health services or other health care item or service.

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3. The following orders, recommendations, or plans of care shall not constitute a referral by a health care provider:

a. By a radiologist for diagnostic-imaging services.

b. By a physician specializing in the provision ofradiation therapy services for such services.

c. By a medical oncologist for drugs and solutions to be prepared and administered intravenously to such oncologist's patient, as well as for the supplies and equipment used in connection therewith to treat such patient for cancer and the complications thereof.

2456

d. By a cardiologist for cardiac catheterization services.

e. By a pathologist for diagnostic clinical laboratory
tests and pathological examination services, if furnished by or
under the supervision of such pathologist pursuant to a
consultation requested by another physician.

2461 f. By a health care provider who is the sole provider or 2462 member of a group practice for designated health services or 2463 other health care items or services that are prescribed or 2464 provided solely for such referring health care provider's or 2465 group practice's own patients, and that are provided or 2466 performed by or under the direct supervision of such referring 2467 health care provider or group practice; provided, however, that 2468 effective July 1, 1999, a physician licensed pursuant to chapter 2469 458, chapter 459, chapter 460, or chapter 461 or an independent 2470 advanced practice registered nurse registered under s. 464.0125

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2471 may refer a patient to a sole provider or group practice for 2472 diagnostic imaging services, excluding radiation therapy 2473 services, for which the sole provider or group practice billed both the technical and the professional fee for or on behalf of 2474 the patient, if the referring physician or independent advanced 2475 2476 practice registered nurse has no investment interest in the 2477 practice. The diagnostic imaging service referred to a group 2478 practice or sole provider must be a diagnostic imaging service 2479 normally provided within the scope of practice to the patients of the group practice or sole provider. The group practice or 2480 2481 sole provider may accept no more than 15 percent of their patients receiving diagnostic imaging services from outside 2482 2483 referrals, excluding radiation therapy services. 2484 By a health care provider for services provided by an g. 2485 ambulatory surgical center licensed under chapter 395. 2486 By a urologist for lithotripsy services. h. 2487 i. By a dentist for dental services performed by an 2488 employee of or health care provider who is an independent 2489 contractor with the dentist or group practice of which the dentist is a member. 2490 By a physician for infusion therapy services to a 2491 j. 2492 patient of that physician or a member of that physician's group 2493 practice. 2494 k. By a nephrologist for renal dialysis services and 2495 supplies, except laboratory services.

2496

1.

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By a health care provider whose principal professional

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2497 practice consists of treating patients in their private 2498 residences for services to be rendered in such private 2499 residences, except for services rendered by a home health agency 2500 licensed under chapter 400. For purposes of this sub-2501 subparagraph, the term "private residences" includes patients' 2502 private homes, independent living centers, and assisted living 2503 facilities, but does not include skilled nursing facilities.

m. By a health care provider for sleep-related testing.

2505 "Sole provider" means one health care provider (r) 2506 licensed under chapter 458, chapter 459, chapter 460, or chapter 2507 461, or s. 464.0125, who maintains a separate medical office and 2508 a medical practice separate from any other health care provider 2509 and who bills for his or her services separately from the 2510 services provided by any other health care provider. A sole 2511 provider shall not share overhead expenses or professional 2512 income with any other person or group practice.

2513 (5) PROHIBITED REFERRALS AND CLAIMS FOR PAYMENT.—Except as 2514 provided in this section:

2515 (a) A violation of this section by a health care provider 2516 shall constitute grounds for disciplinary action to be taken by 2517 the applicable board pursuant to s. 458.331(2), s. 459.015(2), s. 460.413(2), s. 461.013(2), s. 463.016(2), s. 464.018, or s. 2518 2519 466.028(2). Any hospital licensed under chapter 395 found in 2520 violation of this section shall be subject to s. 395.0185(2). 2521 Section 55. Subsection (7) of section 456.072, Florida 2522 Statutes, is amended to read:

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2523 456.072 Grounds for discipline; penalties; enforcement.-2524 (7) Notwithstanding subsection (2), upon a finding that a 2525 physician, an independent advanced practice registered nurse, or 2526 an advanced practice registered nurse has prescribed or 2527 dispensed a controlled substance, or caused a controlled 2528 substance to be prescribed or dispensed, in a manner that 2529 violates the standard of practice set forth in s. 458.331(1)(q) 2530 or (t), s. 459.015(1)(t) or (x), s. 461.013(1)(o) or (s), s. 2531 464.018(1)(p), or s. 466.028(1)(p) or (x), the practitioner 2532 physician shall be suspended for a period of not less than 6 2533 months and pay a fine of not less than \$10,000 per count. 2534 Repeated violations shall result in increased penalties. 2535 Section 56. Paragraph (a) of subsection (2) and subsection 2536 (3) of section 456.44, Florida Statutes, are amended to read: 2537 456.44 Controlled substance prescribing.-2538 REGISTRATION. Effective January 1, 2012, A physician (2)licensed under chapter 458, chapter 459, chapter 461, or chapter 2539 2540 466, or an independent advanced practice registered nurse 2541 registered, or an advanced practice registered nurse certified, 2542 under part I of chapter 464, who prescribes any controlled 2543 substance, listed in Schedule II, Schedule III, or Schedule IV as defined in s. 893.03, for the treatment of chronic 2544 2545 nonmalignant pain, must: 2546 Designate himself or herself as a controlled substance (a) 2547 prescribing practitioner on the practitioner's physician's 2548 practitioner profile.

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(3) STANDARDS OF PRACTICE.—The standards of practice in this section do not supersede the level of care, skill, and treatment recognized in general law related to health care licensure.

2553 A complete medical history and a physical examination (a) 2554 must be conducted before beginning any treatment and must be 2555 documented in the medical record. The exact components of the 2556 physical examination shall be left to the judgment of the 2557 clinician who is expected to perform a physical examination 2558 proportionate to the diagnosis that justifies a treatment. The medical record must, at a minimum, document the nature and 2559 2560 intensity of the pain, current and past treatments for pain, 2561 underlying or coexisting diseases or conditions, the effect of 2562 the pain on physical and psychological function, a review of 2563 previous medical records, previous diagnostic studies, and 2564 history of alcohol and substance abuse. The medical record shall 2565 also document the presence of one or more recognized medical 2566 indications for the use of a controlled substance. Each 2567 registrant must develop a written plan for assessing each 2568 patient's risk of aberrant drug-related behavior, which may 2569 include patient drug testing. Registrants must assess each 2570 patient's risk for aberrant drug-related behavior and monitor 2571 that risk on an ongoing basis in accordance with the plan.

(b) Each registrant must develop a written individualized treatment plan for each patient. The treatment plan shall state objectives that will be used to determine treatment success,

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2575 such as pain relief and improved physical and psychosocial 2576 function, and shall indicate if any further diagnostic 2577 evaluations or other treatments are planned. After treatment 2578 begins, the practitioner physician shall adjust drug therapy to 2579 the individual medical needs of each patient. Other treatment 2580 modalities, including a rehabilitation program, shall be 2581 considered depending on the etiology of the pain and the extent 2582 to which the pain is associated with physical and psychosocial 2583 impairment. The interdisciplinary nature of the treatment plan 2584 shall be documented.

2585 The practitioner physician shall discuss the risks and (C) 2586 benefits of the use of controlled substances, including the 2587 risks of abuse and addiction, as well as physical dependence and 2588 its consequences, with the patient, persons designated by the 2589 patient, or the patient's surrogate or guardian if the patient 2590 is incompetent. The practitioner physician shall use a written 2591 controlled substance agreement between the practitioner 2592 physician and the patient outlining the patient's 2593 responsibilities, including, but not limited to:

Number and frequency of controlled substance
 prescriptions and refills.

2596 2. Patient compliance and reasons for which drug therapy 2597 may be discontinued, such as a violation of the agreement.

3. An agreement that controlled substances for the
treatment of chronic nonmalignant pain shall be prescribed by a
single treating <u>practitioner</u> physician unless otherwise

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2601 authorized by the treating practitioner physician and documented 2602 in the medical record.

2603 The patient shall be seen by the practitioner (d) 2604 physician at regular intervals, not to exceed 3 months, to 2605 assess the efficacy of treatment, ensure that controlled 2606 substance therapy remains indicated, evaluate the patient's 2607 progress toward treatment objectives, consider adverse drug 2608 effects, and review the etiology of the pain. Continuation or 2609 modification of therapy shall depend on the practitioner's 2610 physician's evaluation of the patient's progress. If treatment 2611 goals are not being achieved, despite medication adjustments, 2612 the practitioner physician shall reevaluate the appropriateness 2613 of continued treatment. The practitioner physician shall monitor 2614 patient compliance in medication usage, related treatment plans, 2615 controlled substance agreements, and indications of substance abuse or diversion at a minimum of 3-month intervals. 2616

2617 (e) The practitioner physician shall refer the patient as 2618 necessary for additional evaluation and treatment in order to 2619 achieve treatment objectives. Special attention shall be given 2620 to those patients who are at risk for misusing their medications 2621 and those whose living arrangements pose a risk for medication 2622 misuse or diversion. The management of pain in patients with a 2623 history of substance abuse or with a comorbid psychiatric 2624 disorder requires extra care, monitoring, and documentation and 2625 requires consultation with or referral to an addiction medicine 2626 specialist or psychiatrist.

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2627	(f) A practitioner physician registered under this section
2628	must maintain accurate, current, and complete records that are
2629	accessible and readily available for review and comply with the
2630	requirements of this section, the applicable practice act, and
2631	applicable board rules. The medical records must include, but
2632	are not limited to:
2633	1. The complete medical history and a physical
2634	examination, including history of drug abuse or dependence.
2635	2. Diagnostic, therapeutic, and laboratory results.
2636	3. Evaluations and consultations.
2637	4. Treatment objectives.
2638	5. Discussion of risks and benefits.
2639	6. Treatments.
2640	7. Medications, including date, type, dosage, and quantity
2641	prescribed.
2642	8. Instructions and agreements.
2643	9. Periodic reviews.
2644	10. Results of any drug testing.
2645	11. A photocopy of the patient's government-issued photo
2646	identification.
2647	12. If a written prescription for a controlled substance
2648	is given to the patient, a duplicate of the prescription.
2649	13. The <u>practitioner's</u> physician's full name presented in
2650	a legible manner.
2651	(g) Patients with signs or symptoms of substance abuse
2652	shall be immediately referred to a board-certified pain
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2653 management physician, an addiction medicine specialist, or a 2654 mental health addiction facility as it pertains to drug abuse or 2655 addiction unless the practitioner is a physician who is board-2656 certified or board-eligible in pain management. Throughout the 2657 period of time before receiving the consultant's report, a 2658 prescribing practitioner physician shall clearly and completely 2659 document medical justification for continued treatment with 2660 controlled substances and those steps taken to ensure medically 2661 appropriate use of controlled substances by the patient. Upon 2662 receipt of the consultant's written report, the prescribing 2663 practitioner physician shall incorporate the consultant's 2664 recommendations for continuing, modifying, or discontinuing 2665 controlled substance therapy. The resulting changes in treatment 2666 shall be specifically documented in the patient's medical 2667 record. Evidence or behavioral indications of diversion shall be 2668 followed by discontinuation of controlled substance therapy, and 2669 the patient shall be discharged, and all results of testing and 2670 actions taken by the practitioner physician shall be documented 2671 in the patient's medical record. 2672

2673 This subsection does not apply to a board-eligible or board-2674 certified anesthesiologist, physiatrist, rheumatologist, or 2675 neurologist, or to a board-certified physician who has surgical 2676 privileges at a hospital or ambulatory surgery center and 2677 primarily provides surgical services. This subsection does not 2678 apply to a board-eligible or board-certified medical specialist Page 103 of 154

2679 who has also completed a fellowship in pain medicine approved by the Accreditation Council for Graduate Medical Education or the 2680 2681 American Osteopathic Association, or who is board eligible or 2682 board certified in pain medicine by the American Board of Pain 2683 Medicine or a board approved by the American Board of Medical 2684 Specialties or the American Osteopathic Association and performs 2685 interventional pain procedures of the type routinely billed 2686 using surgical codes. This subsection does not apply to a 2687 practitioner physician who prescribes medically necessary 2688 controlled substances for a patient during an inpatient stay in 2689 a hospital licensed under chapter 395.

2690Section 57. Paragraph (c) of subsection (2) of section2691458.3265, Florida Statutes, is amended to read:

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458.3265 Pain-management clinics.-

(2) PHYSICIAN RESPONSIBILITIES.—These responsibilities apply to any physician who provides professional services in a pain-management clinic that is required to be registered in subsection (1).

2697 (C) A physician, a physician assistant, an independent 2698 advanced practice registered nurse, or an advanced practice 2699 registered nurse practitioner must perform a physical 2700 examination of a patient on the same day that the physician 2701 prescribes a controlled substance to a patient at a pain-2702 management clinic. If the physician prescribes more than a 72-2703 hour dose of controlled substances for the treatment of chronic 2704 nonmalignant pain, the physician must document in the patient's Page 104 of 154

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2705 record the reason for prescribing that quantity.

2706 Section 58. Paragraph (dd) of subsection (1) of section 2707 458.331, Florida Statutes, is amended to read:

2708 458.331 Grounds for disciplinary action; action by the 2709 board and department.-

(1) The following acts constitute grounds for denial of a license or disciplinary action, as specified in s. 456.072(2):

(dd) Failing to supervise adequately the activities of those physician assistants, paramedics, emergency medical technicians, advanced <u>practice</u> registered <u>nurses</u> nurse practitioners, or anesthesiologist assistants acting under the supervision of the physician.

2717 Section 59. Paragraph (a) of subsection (1), subsection 2718 (2), and paragraphs (c) and (e) of subsection (4) of section 2719 458.348, Florida Statutes, are amended to read:

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

(1) NOTICE.-

2722

2723 (a) When a physician enters into a formal supervisory 2724 relationship or standing orders with an emergency medical 2725 technician or paramedic licensed pursuant to s. 401.27, which 2726 relationship or orders contemplate the performance of medical 2727 acts, or when a physician enters into an established protocol 2728 with an advanced practice registered nurse practitioner, which 2729 protocol contemplates the performance of medical acts identified 2730 and approved by the joint committee pursuant to s. 464.003(2) or Page 105 of 154

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2731 acts set forth in s. 464.012(3) and (4), the physician shall 2732 submit notice to the board. The notice shall contain a statement 2733 in substantially the following form:

I, ... (name and professional license number of physician)..., of ... (address of physician)... have hereby entered into a formal supervisory relationship, standing orders, or an established protocol with ... (number of persons)... emergency medical technician(s), ... (number of persons)... paramedic(s), or ... (number of persons)... advanced <u>practice</u> registered <u>nurse(s)</u> <u>nurse practitioner(s)</u>.

2741 (2)ESTABLISHMENT OF STANDARDS BY JOINT COMMITTEE.-The 2742 joint committee created under s. 464.003(2) shall determine 2743 minimum standards for the content of established protocols 2744 pursuant to which an advanced practice registered nurse 2745 practitioner may perform medical acts identified and approved by 2746 the joint committee pursuant to s. 464.003(2) or acts set forth 2747 in s. 464.012(3) and (4) and shall determine minimum standards 2748 for supervision of such acts by the physician, unless the joint 2749 committee determines that any act set forth in s. 464.012(3) or 2750 (4) is not a medical act. Such standards shall be based on risk 2751 to the patient and acceptable standards of medical care and 2752 shall take into account the special problems of medically 2753 underserved areas. The standards developed by the joint 2754 committee shall be adopted as rules by the Board of Nursing and 2755 the Board of Medicine for purposes of carrying out their 2756 responsibilities pursuant to part I of chapter 464 and this Page 106 of 154

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2757 chapter, respectively, but neither board shall have disciplinary 2758 powers over the licensees of the other board.

2759 SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.-(4)2760 A physician who supervises an advanced practice registered nurse 2761 practitioner or physician assistant at a medical office other 2762 than the physician's primary practice location, where the 2763 advanced practice registered nurse practitioner or physician 2764 assistant is not under the onsite supervision of a supervising 2765 physician, must comply with the standards set forth in this 2766 subsection. For the purpose of this subsection, a physician's "primary practice location" means the address reflected on the 2767 2768 physician's profile published pursuant to s. 456.041.

2769 A physician who supervises an advanced practice (C) 2770 registered nurse practitioner or physician assistant at a 2771 medical office other than the physician's primary practice 2772 location, where the advanced practice registered nurse 2773 practitioner or physician assistant is not under the onsite 2774 supervision of a supervising physician and the services offered 2775 at the office are primarily dermatologic or skin care services, 2776 which include aesthetic skin care services other than plastic 2777 surgery, must comply with the standards listed in subparagraphs 1.-4. Notwithstanding s. 458.347(4)(e)6., a physician 2778 2779 supervising a physician assistant pursuant to this paragraph may 2780 not be required to review and cosign charts or medical records 2781 prepared by such physician assistant.

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 The physician shall submit to the board the addresses Page 107 of 154

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of all offices where <u>the physician</u> he or she is supervising an advanced <u>practice</u> registered nurse practitioner or a physician's assistant which are not the physician's primary practice location.

2787 2. The physician must be board certified or board eligible 2788 in dermatology or plastic surgery as recognized by the board 2789 pursuant to s. 458.3312.

3. All such offices that are not the physician's primary place of practice must be within 25 miles of the physician's primary place of practice or in a county that is contiguous to the county of the physician's primary place of practice. However, the distance between any of the offices may not exceed 75 miles.

2796 The physician may supervise only one office other than 4. 2797 the physician's primary place of practice except that until July 2798 1, 2011, the physician may supervise up to two medical offices other than the physician's primary place of practice if the 2799 2800 addresses of the offices are submitted to the board before July 2801 1, 2006. Effective July 1, 2011, the physician may supervise 2802 only one office other than the physician's primary place of 2803 practice, regardless of when the addresses of the offices 2804 submitted to the board.

(e) This subsection does not apply to health care services provided in facilities licensed under chapter 395 or in conjunction with a college of medicine, a college of nursing, an accredited graduate medical program, or a nursing education Page 108 of 154

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2809 program; not-for-profit, family-planning clinics that are not 2810 licensed pursuant to chapter 390; rural and federally qualified 2811 health centers; health care services provided in a nursing home 2812 licensed under part II of chapter 400, an assisted living 2813 facility licensed under part I of chapter 429, a continuing care 2814 facility licensed under chapter 651, or a retirement community 2815 consisting of independent living units and a licensed nursing 2816 home or assisted living facility; anesthesia services provided 2817 in accordance with law; health care services provided in a 2818 designated rural health clinic; health care services provided to 2819 persons enrolled in a program designed to maintain elderly persons and persons with disabilities in a home or community-2820 2821 based setting; university primary care student health centers; 2822 school health clinics; or health care services provided in 2823 federal, state, or local government facilities. Subsection (3) 2824 and this subsection do not apply to offices at which the 2825 exclusive service being performed is laser hair removal by an 2826 advanced practice registered nurse practitioner or physician 2827 assistant.

2828Section 60. Paragraph (c) of subsection (2) of section2829459.0137, Florida Statutes, is amended to read:

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459.0137 Pain-management clinics.-

(2) PHYSICIAN RESPONSIBILITIES.—These responsibilities apply to any osteopathic physician who provides professional services in a pain-management clinic that is required to be registered in subsection (1).

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2835 (C) An osteopathic physician, a physician assistant, an 2836 independent advanced practice registered nurse, or an advanced 2837 practice registered nurse practitioner must perform a physical 2838 examination of a patient on the same day that the physician 2839 prescribes a controlled substance to a patient at a pain-2840 management clinic. If the osteopathic physician prescribes more 2841 than a 72-hour dose of controlled substances for the treatment 2842 of chronic nonmalignant pain, the osteopathic physician must 2843 document in the patient's record the reason for prescribing that 2844 quantity. 2845 Section 61. Paragraph (hh) of subsection (1) of section 459.015, Florida Statutes, is amended to read: 2846 2847 459.015 Grounds for disciplinary action; action by the 2848 board and department.-2849 The following acts constitute grounds for denial of a (1)2850 license or disciplinary action, as specified in s. 456.072(2): 2851 (hh) Failing to supervise adequately the activities of 2852 those physician assistants, paramedics, emergency medical 2853 technicians, advanced practice registered nurses nurse 2854 practitioners, anesthesiologist assistants, or other persons 2855 acting under the supervision of the osteopathic physician. 2856 Section 62. Paragraph (a) of subsection (1) and subsection 2857 (3) of section 459.025, Florida Statutes, are amended to read: 2858 459.025 Formal supervisory relationships, standing orders, 2859 and established protocols; notice; standards.-2860 (1)NOTICE.-

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2861 (a) When an osteopathic physician enters into a formal 2862 supervisory relationship or standing orders with an emergency 2863 medical technician or paramedic licensed pursuant to s. 401.27, 2864 which relationship or orders contemplate the performance of 2865 medical acts, or when an osteopathic physician enters into an 2866 established protocol with an advanced practice registered nurse 2867 practitioner, which protocol contemplates the performance of 2868 medical acts identified and approved by the joint committee 2869 pursuant to s. 464.003(2) or acts set forth in s. 464.012(3) and 2870 (4), the osteopathic physician shall submit notice to the board. 2871 The notice must contain a statement in substantially the 2872 following form:

I, ... (name and professional license number of osteopathic physician)..., of ... (address of osteopathic physician)... have hereby entered into a formal supervisory relationship, standing orders, or an established protocol with ... (number of persons)... emergency medical technician(s), ... (number of persons)... paramedic(s), or ... (number of persons)... advanced <u>practice</u> registered <u>nurse(s)</u> nurse practitioner(s).

2880 SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.-(3) 2881 An osteopathic physician who supervises an advanced practice 2882 registered nurse practitioner or physician assistant at a 2883 medical office other than the osteopathic physician's primary 2884 practice location, where the advanced practice registered nurse 2885 practitioner or physician assistant is not under the onsite 2886 supervision of a supervising osteopathic physician, must comply Page 111 of 154

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2887 with the standards set forth in this subsection. For the purpose 2888 of this subsection, an osteopathic physician's "primary practice 2889 location" means the address reflected on the physician's profile 2890 published pursuant to s. 456.041.

2891 (a) An osteopathic physician who is engaged in providing 2892 primary health care services may not supervise more than four 2893 offices in addition to the osteopathic physician's primary 2894 practice location. For the purpose of this subsection, "primary 2895 health care" means health care services that are commonly 2896 provided to patients without referral from another practitioner, 2897 including obstetrical and gynecological services, and excludes practices providing primarily dermatologic and skin care 2898 2899 services, which include aesthetic skin care services.

2900 An osteopathic physician who is engaged in providing (b) 2901 specialty health care services may not supervise more than two 2902 offices in addition to the osteopathic physician's primary 2903 practice location. For the purpose of this subsection, 2904 "specialty health care" means health care services that are 2905 commonly provided to patients with a referral from another 2906 practitioner and excludes practices providing primarily 2907 dermatologic and skin care services, which include aesthetic skin care services. 2908

(c) An osteopathic physician who supervises an advanced practice registered nurse practitioner or physician assistant at a medical office other than the osteopathic physician's primary practice location, where the advanced practice registered nurse Page 112 of 154

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2913 practitioner or physician assistant is not under the onsite 2914 supervision of a supervising osteopathic physician and the 2915 services offered at the office are primarily dermatologic or 2916 skin care services, which include aesthetic skin care services 2917 other than plastic surgery, must comply with the standards 2918 listed in subparagraphs 1.-4. Notwithstanding s. 2919 459.022(4)(e)6., an osteopathic physician supervising a 2920 physician assistant pursuant to this paragraph may not be 2921 required to review and cosign charts or medical records prepared 2922 by such physician assistant.

1. The osteopathic physician shall submit to the Board of Osteopathic Medicine the addresses of all offices where <u>the</u> osteopathic physician he or she is supervising or has a protocol with an advanced <u>practice</u> registered nurse practitioner or a physician's assistant which are not the osteopathic physician's primary practice location.

2929 2. The osteopathic physician must be board certified or 2930 board eligible in dermatology or plastic surgery as recognized 2931 by the Board of Osteopathic Medicine pursuant to s. 459.0152.

2932 3. All such offices that are not the osteopathic 2933 physician's primary place of practice must be within 25 miles of 2934 the osteopathic physician's primary place of practice or in a 2935 county that is contiguous to the county of the osteopathic 2936 physician's primary place of practice. However, the distance 2937 between any of the offices may not exceed 75 miles.

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 The osteopathic physician may supervise only one office Page 113 of 154

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2939 other than the osteopathic physician's primary place of practice 2940 except that until July 1, 2011, the osteopathic physician may 2941 supervise up to two medical offices other than the osteopathic 2942 physician's primary place of practice if the addresses of the 2943 offices are submitted to the Board of Osteopathic Medicine 2944 before July 1, 2006. Effective July 1, 2011, the osteopathic 2945 physician may supervise only one office other than the 2946 osteopathic physician's primary place of practice, regardless of 2947 when the addresses of the offices were submitted to the Board of 2948 Osteopathic Medicine.

(d) An osteopathic physician who supervises an office in addition to the osteopathic physician's primary practice location must conspicuously post in each of the osteopathic physician's offices a current schedule of the regular hours when the osteopathic physician is present in that office and the hours when the office is open while the osteopathic physician is not present.

2956 This subsection does not apply to health care services (e) 2957 provided in facilities licensed under chapter 395 or in 2958 conjunction with a college of medicine or college of nursing or 2959 an accredited graduate medical or nursing education program; 2960 offices where the only service being performed is hair removal 2961 by an advanced practice registered nurse practitioner or 2962 physician assistant; not-for-profit, family-planning clinics 2963 that are not licensed pursuant to chapter 390; rural and 2964 federally qualified health centers; health care services Page 114 of 154

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2965 provided in a nursing home licensed under part II of chapter 400, an assisted living facility licensed under part I of 2966 2967 chapter 429, a continuing care facility licensed under chapter 2968 651, or a retirement community consisting of independent living 2969 units and either a licensed nursing home or assisted living 2970 facility; anesthesia services provided in accordance with law; 2971 health care services provided in a designated rural health clinic; health care services provided to persons enrolled in a 2972 2973 program designed to maintain elderly persons and persons with disabilities in a home or community-based setting; university 2974 2975 primary care student health centers; school health clinics; or 2976 health care services provided in federal, state, or local 2977 government facilities.

2978 Section 63. Subsection (2) of section 464.004, Florida 2979 Statutes, is amended to read:

2980 464.004 Board of Nursing; membership; appointment; terms.-2981 (2) Seven members of the board must be registered nurses 2982 who are residents of this state and who have been engaged in the 2983 practice of professional nursing for at least 4 years, including 2984 at least one advanced practice registered nurse practitioner, 2985 one nurse educator member of an approved program, and one nurse 2986 executive. These seven board members should be representative of 2987 the diverse areas of practice within the nursing profession. In 2988 addition, three members of the board must be licensed practical 2989 nurses who are residents of this state and who have been 2990 actively engaged in the practice of practical nursing for at Page 115 of 154

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2991 least 4 years prior to their appointment. The remaining three members must be residents of the state who have never been 2992 2993 licensed as nurses and who are in no way connected with the 2994 practice of nursing. No person may be appointed as a lay member 2995 who is in any way connected with, or has any financial interest 2996 in, any health care facility, agency, or insurer. At least one 2997 member of the board must be 60 years of age or older. 2998 Section 64. Paragraph (a) of subsection (4) of section 2999 464.0205, Florida Statutes, is amended to read: 3000 464.0205 Retired volunteer nurse certificate.-3001 A retired volunteer nurse receiving certification from (4) 3002 the board shall: 3003 Work under the direct supervision of the director of a (a) 3004 county health department, a physician working under a limited 3005 license issued pursuant to s. 458.317 or s. 459.0075, a 3006 physician licensed under chapter 458 or chapter 459, an 3007 independent advanced practice registered nurse registered under 3008 s. 464.0125, an advanced practice registered nurse practitioner 3009 certified under s. 464.012, or a registered nurse licensed under s. 464.008 or s. 464.009. 3010 3011 Section 65. Subsection (2) of section 467.003, Florida 3012 Statutes, is amended to read: 3013 467.003 Definitions.-As used in this chapter, unless the 3014 context otherwise requires: 3015 (2)"Certified nurse midwife" means a person who is 3016 certified licensed as an advanced practice registered nurse

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3017 practitioner under part I of chapter 464 and who is certified to 3018 practice midwifery by the American College of Nurse Midwives. Section 66. Paragraph (b) of subsection (1) of section 3019 3020 480.0475, Florida Statutes, is amended to read: 3021 480.0475 Massage establishments; prohibited practices.-3022 A person may not operate a massage establishment (1)3023 between the hours of midnight and 5 a.m. This subsection does 3024 not apply to a massage establishment: 3025 In which every massage performed between the hours of (b) midnight and 5 a.m. is performed by a massage therapist acting 3026 3027 under the prescription of a physician or physician assistant licensed under chapter 458, an osteopathic physician or 3028 3029 physician assistant licensed under chapter 459, a chiropractic 3030 physician licensed under chapter 460, a podiatric physician 3031 licensed under chapter 461, an independent advanced practice 3032 registered nurse registered, or an advanced practice registered 3033 nurse certified, practitioner licensed under part I of chapter 3034 464, or a dentist licensed under chapter 466; or 3035 Section 67. Subsection (7) of section 483.041, Florida 3036 Statutes, is amended to read: 3037 483.041 Definitions.-As used in this part, the term: 3038 (7)"Licensed practitioner" means a physician licensed 3039 under chapter 458, chapter 459, chapter 460, or chapter 461; a 3040 certified optometrist licensed under chapter 463; a dentist 3041 licensed under chapter 466; a person licensed under chapter 462; 3042 an independent advanced practice registered nurse registered, or Page 117 of 154

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3043 an advanced <u>practice</u> registered nurse <u>certified</u>, <u>practitioner</u> 3044 licensed under part I of chapter 464; or a duly licensed 3045 practitioner from another state licensed under similar statutes 3046 who orders examinations on materials or specimens for 3047 nonresidents of the State of Florida, but who reside in the same 3048 state as the requesting licensed practitioner.

3049 Section 68. Subsection (5) of section 483.181, Florida 3050 Statutes, is amended to read:

3051 483.181 Acceptance, collection, identification, and 3052 examination of specimens.-

3053 (5)A clinical laboratory licensed under this part must 3054 accept a human specimen submitted for examination by a 3055 practitioner licensed under chapter 458, chapter 459, chapter 3056 460, chapter 461, chapter 462, chapter 463, s. 464.012, s. 3057 464.0125, or chapter 466, if the specimen and test are the type 3058 performed by the clinical laboratory. A clinical laboratory may 3059 only refuse a specimen based upon a history of nonpayment for 3060 services by the practitioner. A clinical laboratory shall not 3061 charge different prices for tests based upon the chapter under 3062 which a practitioner submitting a specimen for testing is 3063 licensed.

3064 Section 69. Subsection (5) of section 483.801, Florida 3065 Statutes, is amended to read:

3066 483.801 Exemptions.—This part applies to all clinical 3067 laboratories and clinical laboratory personnel within this 3068 state, except:

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3069 (5) Advanced <u>practice</u> registered <u>nurses certified</u> nurse 3070 practitioners licensed under part I of chapter 464 who perform 3071 provider-performed microscopy procedures (PPMP) in an exclusive-3072 use laboratory setting.

3073 Section 70. Paragraph (a) of subsection (11) of section 3074 486.021, Florida Statutes, is amended to read:

3075 486.021 Definitions.-In this chapter, unless the context 3076 otherwise requires, the term:

3077 "Practice of physical therapy" means the performance (11)3078 of physical therapy assessments and the treatment of any 3079 disability, injury, disease, or other health condition of human 3080 beings, or the prevention of such disability, injury, disease, 3081 or other condition of health, and rehabilitation as related 3082 thereto by the use of the physical, chemical, and other 3083 properties of air; electricity; exercise; massage; the 3084 performance of acupuncture only upon compliance with the 3085 criteria set forth by the Board of Medicine, when no penetration 3086 of the skin occurs; the use of radiant energy, including 3087 ultraviolet, visible, and infrared rays; ultrasound; water; the 3088 use of apparatus and equipment in the application of the 3089 foregoing or related thereto; the performance of tests of 3090 neuromuscular functions as an aid to the diagnosis or treatment 3091 of any human condition; or the performance of electromyography 3092 as an aid to the diagnosis of any human condition only upon 3093 compliance with the criteria set forth by the Board of Medicine. 3094 (a) A physical therapist may implement a plan of treatment

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3095 developed by the physical therapist for a patient or provided 3096 for a patient by a practitioner of record or by an independent 3097 advanced practice registered nurse registered under s. 464.0125 3098 or an advanced practice registered nurse certified practitioner licensed under s. 464.012. The physical therapist shall refer 3099 3100 the patient to or consult with a practitioner of record if the 3101 patient's condition is found to be outside the scope of physical 3102 therapy. If physical therapy treatment for a patient is required 3103 beyond 21 days for a condition not previously assessed by a practitioner of record, the physical therapist shall obtain a 3104 3105 practitioner of record who will review and sign the plan. For 3106 purposes of this paragraph, a health care practitioner licensed 3107 under chapter 458, chapter 459, chapter 460, chapter 461, or 3108 chapter 466 and engaged in active practice is eligible to serve 3109 as a practitioner of record. 3110 Section 71. Paragraph (d) of subsection (1) of section 3111 490.012, Florida Statutes, is amended to read: 3112 490.012 Violations; penalties; injunction.-3113 (1)No person shall hold herself or himself out by any 3114 (d) 3115 title or description incorporating the word, or a permutation of the word, "psychotherapy" unless such person holds a valid, 3116 active license under chapter 458, chapter 459, chapter 490, or 3117 3118 chapter 491, or such person is registered as an independent 3119 advanced practice registered nurse under s. 464.0125 or 3120 certified as an advanced practice registered nurse under Page 120 of 154

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3121 practitioner, pursuant to s. 464.012 and, who has been 3122 determined by the Board of Nursing to be as a specialist in 3123 psychiatric mental health.

3124 Section 72. Subsection (1) of section 491.0057, Florida 3125 Statutes, is amended to read:

3126 491.0057 Dual licensure as a marriage and family 3127 therapist.—The department shall license as a marriage and family 3128 therapist any person who demonstrates to the board that he or 3129 she:

(1) Holds a valid, active license as a psychologist under
chapter 490 or as a clinical social worker or mental health
counselor under this chapter, or is <u>registered under s. 464.0125</u>
<u>as an independent advanced practice registered nurse or</u>
certified under s. 464.012 as an advanced <u>practice</u> registered
nurse <u>and practitioner who</u> has been determined by the Board of
Nursing <u>to be</u> as a specialist in psychiatric mental health.

3137 Section 73. Paragraph (d) of subsection (1) and subsection 3138 (2) of section 491.012, Florida Statutes, are amended to read: 3139 491.012 Violations; penalty; injunction.-

3140 (1) It is unlawful and a violation of this chapter for any 3141 person to:

(d) Use the terms "psychotherapist," "sex therapist," or "juvenile sexual offender therapist" unless such person is licensed pursuant to this chapter or chapter 490, or is registered under s. 464.0125 as an independent advanced practice registered nurse or certified under s. 464.012 as an advanced Page 121 of 154

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3147 <u>practice</u> registered nurse <u>and</u> practitioner who has been 3148 determined by the Board of Nursing <u>to be</u> as a specialist in 3149 psychiatric mental health and the use of such terms is within 3150 the scope of her or his practice based on education, training, 3151 and licensure.

3152 (2)It is unlawful and a violation of this chapter for any 3153 person to describe her or his services using the following terms 3154 or any derivative thereof, unless such person holds a valid, 3155 active license under this chapter or chapter 490, or is 3156 registered under s. 464.0125 as an independent advanced practice 3157 registered nurse or is certified under s. 464.012 as an advanced 3158 practice registered nurse and practitioner who has been 3159 determined by the Board of Nursing to be as a specialist in 3160 psychiatric mental health and the use of such terms is within 3161 the scope of her or his practice based on education, training, and licensure: 3162

- 3163 (a) "Psychotherapy."
- 3164 (b) "Sex therapy."
- 3165 (c) "Sex counseling."
- 3166 (d) "Clinical social work."
- 3167 (e) "Psychiatric social work."
- 3168 (f) "Marriage and family therapy."
- 3169 (g) "Marriage and family counseling."
- 3170 (h) "Marriage counseling."
- 3171 (i) "Family counseling."
- 3172 (j) "Mental health counseling."

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3173 Section 74. Subsection (2) of section 493.6108, Florida 3174 Statutes, is amended to read:

3175 493.6108 Investigation of applicants by Department of 3176 Agriculture and Consumer Services.—

In addition to subsection (1), the department shall 3177 (2)3178 make an investigation of the general physical fitness of the 3179 Class "G" applicant to bear a weapon or firearm. Determination 3180 of physical fitness shall be certified by a physician or 3181 physician assistant currently licensed pursuant to chapter 458, chapter 459, or any similar law of another state or authorized 3182 3183 to act as a licensed physician by a federal agency or department, or by an independent advanced practice registered 3184 3185 nurse registered, or an advanced practice registered nurse 3186 certified, under practitioner currently licensed pursuant to 3187 part I of chapter 464. Such certification shall be submitted on a form provided by the department. 3188

3189 Section 75. Subsection (1) of section 626.9707, Florida 3190 Statutes, is amended to read:

3191 626.9707 Disability insurance; discrimination on basis of 3192 sickle-cell trait prohibited.-

(1) <u>An</u> No insurer authorized to transact insurance in this state <u>may not</u> shall refuse to issue and deliver in this state any policy of disability insurance, whether such policy is defined as individual, group, blanket, franchise, industrial, or otherwise, which is currently being issued for delivery in this state and which affords benefits and coverage for any medical Page 123 of 154

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3199	treatment or service authorized and permitted to be furnished by
3200	a hospital, clinic, health clinic, neighborhood health clinic,
3201	health maintenance organization, physician, physician's
3202	assistant, independent advanced practice registered nurse,
3203	<u>advanced practice registered</u> nurse practitioner , or medical
3204	service facility or personnel solely because the person to be
3205	insured has the sickle-cell trait.
3206	Section 76. Paragraph (b) of subsection (1) of section
3207	627.357, Florida Statutes, is amended to read:
3208	627.357 Medical malpractice self-insurance
3209	(1) DEFINITIONSAs used in this section, the term:
3210	(b) "Health care provider" means any:
3211	1. Hospital licensed under chapter 395.
3212	2. Physician licensed, or physician assistant licensed,
3213	under chapter 458.
3214	3. Osteopathic physician or physician assistant licensed
3215	under chapter 459.
3216	4. Podiatric physician licensed under chapter 461.
3217	5. Health maintenance organization certificated under part
3218	I of chapter 641.
3219	6. Ambulatory surgical center licensed under chapter 395.
3220	7. Chiropractic physician licensed under chapter 460.
3221	8. Psychologist licensed under chapter 490.
3222	9. Optometrist licensed under chapter 463.
3223	10. Dentist licensed under chapter 466.
3224	11. Pharmacist licensed under chapter 465.
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3225 12. Registered nurse, licensed practical nurse, 3226 independent advanced practice registered nurse, or advanced 3227 practice registered nurse practitioner licensed, registered, or certified registered under part I of chapter 464. 3228 3229 Other medical facility. 13. 3230 14. Professional association, partnership, corporation, 3231 joint venture, or other association established by the 3232 individuals set forth in subparagraphs 2., 3., 4., 7., 8., 9., 3233 10., 11., and 12. for professional activity. 3234 Section 77. Subsection (6) of section 627.6471, Florida Statutes, is amended to read: 3235 3236 627.6471 Contracts for reduced rates of payment; 3237 limitations; coinsurance and deductibles.-3238 If psychotherapeutic services are covered by a policy (6) 3239 issued by the insurer, the insurer shall provide eligibility 3240 criteria for each group of health care providers licensed under 3241 chapter 458, chapter 459, chapter 490, or chapter 491, which 3242 include psychotherapy within the scope of their practice as 3243 provided by law, or for any person who is registered as an independent advanced practice registered nurse under s. 464.0125 3244 3245 or certified as an advanced practice registered nurse practitioner in psychiatric mental health under s. 464.012 and 3246 3247 who specializes in psychiatric mental health. When 3248 psychotherapeutic services are covered, eligibility criteria 3249 shall be established by the insurer to be included in the 3250 insurer's criteria for selection of network providers. The Page 125 of 154

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3251 insurer may not discriminate against a health care provider by 3252 excluding such practitioner from its provider network solely on 3253 the basis of the practitioner's license.

3254 Section 78. Subsections (15) and (17) of section 627.6472, 3255 Florida Statutes, are amended to read:

3256

627.6472 Exclusive provider organizations.-

3257 If psychotherapeutic services are covered by a policy (15)3258 issued by the insurer, the insurer shall provide eligibility 3259 criteria for all groups of health care providers licensed under 3260 chapter 458, chapter 459, chapter 490, or chapter 491, which 3261 include psychotherapy within the scope of their practice as provided by law, or for any person who is registered as an 3262 3263 independent advanced practice registered nurse under s. 464.0125 3264 or certified as an advanced practice registered nurse 3265 practitioner in psychiatric mental health under s. 464.012 and 3266 who specializes in psychiatric mental health. When 3267 psychotherapeutic services are covered, eligibility criteria 3268 shall be established by the insurer to be included in the 3269 insurer's criteria for selection of network providers. The 3270 insurer may not discriminate against a health care provider by 3271 excluding such practitioner from its provider network solely on 3272 the basis of the practitioner's license.

3273 (17) An exclusive provider organization <u>may shall</u> not
 3274 discriminate with respect to participation as to any <u>independent</u>
 3275 <u>advanced practice registered nurse registered pursuant to s.</u>
 3276 <u>464.0125 or</u> advanced <u>practice</u> registered nurse <u>practitioner</u>

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3277 licensed and certified pursuant to s. 464.012, who is acting 3278 within the scope of such registration or license and 3279 certification, solely on the basis of such registration license 3280 or certification. This subsection shall not be construed to prohibit a plan from including providers only to the extent 3281 3282 necessary to meet the needs of the plan's enrollees or from 3283 establishing any measure designed to maintain quality and 3284 control costs consistent with the responsibilities of the plan.

3285 Section 79. Paragraph (a) of subsection (1) of section 3286 627.736, Florida Statutes, is amended to read:

3287 627.736 Required personal injury protection benefits; 3288 exclusions; priority; claims.-

3289 REQUIRED BENEFITS. - An insurance policy complying with (1)3290 the security requirements of s. 627.733 must provide personal 3291 injury protection to the named insured, relatives residing in 3292 the same household, persons operating the insured motor vehicle, 3293 passengers in the motor vehicle, and other persons struck by the 3294 motor vehicle and suffering bodily injury while not an occupant 3295 of a self-propelled vehicle, subject to subsection (2) and 3296 paragraph (4)(e), to a limit of \$10,000 in medical and disability benefits and \$5,000 in death benefits resulting from 3297 bodily injury, sickness, disease, or death arising out of the 3298 3299 ownership, maintenance, or use of a motor vehicle as follows:

(a) Medical benefits.-Eighty percent of all reasonable
expenses for medically necessary medical, surgical, X-ray,
dental, and rehabilitative services, including prosthetic

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3303 devices and medically necessary ambulance, hospital, and nursing 3304 services if the individual receives initial services and care 3305 pursuant to subparagraph 1. within 14 days after the motor 3306 vehicle accident. The medical benefits provide reimbursement 3307 only for:

3308 1. Initial services and care that are lawfully provided, 3309 supervised, ordered, or prescribed by a physician licensed under 3310 chapter 458 or chapter 459, a dentist licensed under chapter 466, or a chiropractic physician licensed under chapter 460, or 3311 an independent advanced practice registered nurse registered 3312 3313 under s. 464.0125, or that are provided in a hospital or in a facility that owns, or is wholly owned by, a hospital. Initial 3314 services and care may also be provided by a person or entity 3315 3316 licensed under part III of chapter 401 which provides emergency 3317 transportation and treatment.

3318 Upon referral by a provider described in subparagraph 2. 3319 1., followup services and care consistent with the underlying 3320 medical diagnosis rendered pursuant to subparagraph 1. which may 3321 be provided, supervised, ordered, or prescribed only by a 3322 physician licensed under chapter 458 or chapter 459, a chiropractic physician licensed under chapter 460, a dentist 3323 licensed under chapter 466, an independent advanced practice 3324 registered nurse registered under s. 464.0125, or, to the extent 3325 3326 permitted by applicable law and under the supervision of such 3327 physician, osteopathic physician, chiropractic physician, or 3328 dentist, or independent advanced practice registered nurse

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3329 <u>registered under s. 464.0125</u>, by a physician assistant licensed 3330 under chapter 458 or chapter 459 or an advanced <u>practice</u> 3331 registered nurse <u>certified</u> practitioner licensed under <u>s.</u> 3332 <u>464.012</u> chapter 464. Followup services and care may also be 3333 provided by the following persons or entities:

3334 a. A hospital or ambulatory surgical center licensed under3335 chapter 395.

b. An entity wholly owned by one or more physicians
licensed under chapter 458 or chapter 459, chiropractic
physicians licensed under chapter 460, <u>independent advanced</u>
<u>practice registered nurses registered under s. 464.0125</u>, or
dentists licensed under chapter 466 or by such practitioners and
the spouse, parent, child, or sibling of such practitioners.

3342 c. An entity that owns or is wholly owned, directly or3343 indirectly, by a hospital or hospitals.

3344 d. A physical therapist licensed under chapter 486, based3345 upon a referral by a provider described in this subparagraph.

e. A health care clinic licensed under part X of chapter
400 which is accredited by an accrediting organization whose
standards incorporate comparable regulations required by this
state, or

(I) Has a medical director licensed under chapter 458,chapter 459, or chapter 460;

(II) Has been continuously licensed for more than 3 years or is a publicly traded corporation that issues securities traded on an exchange registered with the United States Page 129 of 154

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FLORIDA HOUSE OF REPRESENTATIVES

Provides at least four of the following medical

Securities and Exchange Commission as a national securities

HB 7071

exchange; and

(III)

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3357

3358 specialties: General medicine. 3359 (A) 3360 (B) Radiography. 3361 Orthopedic medicine. (C) 3362 (D) Physical medicine. 3363 Physical therapy. (E) 3364 Physical rehabilitation. (F) 3365 (G) Prescribing or dispensing outpatient prescription 3366 medication. 3367 Laboratory services. (H) 3. 3368 Reimbursement for services and care provided in 3369 subparagraph 1. or subparagraph 2. up to \$10,000 if a physician 3370 licensed under chapter 458 or chapter 459, a dentist licensed 3371 under chapter 466, an independent advanced practice registered 3372 nurse registered under s. 464.0125, a physician assistant 3373 licensed under chapter 458 or chapter 459, or an advanced 3374 practice registered nurse certified practitioner licensed under s. 464.012 chapter 464 has determined that the injured person 3375 3376 had an emergency medical condition. 3377 Reimbursement for services and care provided in 4.

3378 subparagraph 1. or subparagraph 2. is limited to \$2,500 if a 3379 provider listed in subparagraph 1. or subparagraph 2. determines 3380 that the injured person did not have an emergency medical Page 130 of 154

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3381 condition.

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5. Medical benefits do not include massage as defined in s. 480.033 or acupuncture as defined in s. 457.102, regardless of the person, entity, or licensee providing massage or acupuncture, and a licensed massage therapist or licensed acupuncturist may not be reimbursed for medical benefits under this section.

3388 6. The Financial Services Commission shall adopt by rule 3389 the form that must be used by an insurer and a health care 3390 provider specified in sub-subparagraph 2.b., sub-subparagraph 3391 2.c., or sub-subparagraph 2.e. to document that the health care 3392 provider meets the criteria of this paragraph. Such rule must 3393 include a requirement for a sworn statement or affidavit.

3395 Only insurers writing motor vehicle liability insurance in this 3396 state may provide the required benefits of this section, and 3397 such insurer may not require the purchase of any other motor 3398 vehicle coverage other than the purchase of property damage 3399 liability coverage as required by s. 627.7275 as a condition for 3400 providing such benefits. Insurers may not require that property 3401 damage liability insurance in an amount greater than \$10,000 be 3402 purchased in conjunction with personal injury protection. Such 3403 insurers shall make benefits and required property damage 3404 liability insurance coverage available through normal marketing 3405 channels. An insurer writing motor vehicle liability insurance 3406 in this state who fails to comply with such availability

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3407 requirement as a general business practice violates part IX of 3408 chapter 626, and such violation constitutes an unfair method of 3409 competition or an unfair or deceptive act or practice involving 3410 the business of insurance. An insurer committing such violation 3411 is subject to the penalties provided under that part, as well as 3412 those provided elsewhere in the insurance code.

3413Section 80. Paragraph (e) of subsection (1) of section3414633.412, Florida Statutes, is amended to read:

3415

633.412 Firefighters; qualifications for certification.-

3416 (1) A person applying for certification as a firefighter 3417 must:

Be in good physical condition as determined by a 3418 (e) medical examination given by a physician, surgeon, or physician 3419 3420 assistant licensed to practice in the state under pursuant to 3421 chapter 458; an osteopathic physician, surgeon, or physician 3422 assistant licensed to practice in the state under pursuant to 3423 chapter 459; an independent advanced practice registered nurse 3424 registered, or an advanced practice registered nurse certified, 3425 practitioner licensed to practice in the state under part I of 3426 pursuant to chapter 464. Such examination may include, but need 3427 not be limited to, the National Fire Protection Association 3428 Standard 1582. A medical examination evidencing good physical 3429 condition shall be submitted to the division, on a form as 3430 provided by rule, before an individual is eligible for admission 3431 into a course under s. 633.408.

3432

Section 81. Section 641.3923, Florida Statutes, is amended Page 132 of 154

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3433 to read: 3434 641.3923 Discrimination against providers prohibited.-A 3435 health maintenance organization may shall not discriminate with respect to participation as to any independent advanced practice 3436 3437 registered nurse registered pursuant to s. 464.0125 or advanced 3438 practice registered nurse practitioner licensed and certified 3439 pursuant to s. 464.012, who is acting within the scope of such 3440 registration or license and certification, solely on the basis 3441 of such registration license or certification. This section shall not be construed to prohibit a plan from including 3442 3443 providers only to the extent necessary to meet the needs of the 3444 plan's enrollees or from establishing any measure designed to 3445 maintain quality and control costs consistent with the 3446 responsibilities of the plan. 3447 Section 82. Subsection (8) of section 641.495, Florida 3448 Statutes, is amended to read: 3449 641.495 Requirements for issuance and maintenance of 3450 certificate.-3451 (8) Each organization's contracts, certificates, and 3452 subscriber handbooks shall contain a provision, if applicable, 3453 disclosing that, for certain types of described medical 3454 procedures, services may be provided by physician assistants, 3455 independent advanced practice registered nurses, advanced 3456 practice registered nurses nurse practitioners, or other 3457 individuals who are not licensed physicians. 3458 Section 83. Paragraph (a) of subsection (3) of section Page 133 of 154

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3459 744.331, Florida Statutes, is amended to read:

744.331 Procedures to determine incapacity.-

3460 3461

(3) EXAMINING COMMITTEE.-

Within 5 days after a petition for determination of 3462 (a) 3463 incapacity has been filed, the court shall appoint an examining 3464 committee consisting of three members. One member must be a 3465 psychiatrist or other physician. The remaining members must be 3466 either a psychologist, gerontologist, another psychiatrist, or 3467 other physician, a registered nurse, an advanced practice registered nurse practitioner, a licensed social worker, a 3468 3469 person with an advanced degree in gerontology from an accredited 3470 institution of higher education, or other person who by 3471 knowledge, skill, experience, training, or education may, in the 3472 court's discretion, advise the court in the form of an expert 3473 opinion. One of three members of the committee must have 3474 knowledge of the type of incapacity alleged in the petition. 3475 Unless good cause is shown, the attending or family physician 3476 may not be appointed to the committee. If the attending or 3477 family physician is available for consultation, the committee 3478 must consult with the physician. Members of the examining 3479 committee may not be related to or associated with one another, 3480 with the petitioner, with counsel for the petitioner or the 3481 proposed guardian, or with the person alleged to be totally or 3482 partially incapacitated. A member may not be employed by any 3483 private or governmental agency that has custody of, or 3484 furnishes, services or subsidies, directly or indirectly, to the Page 134 of 154

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3485 person or the family of the person alleged to be incapacitated or for whom a guardianship is sought. A petitioner may not serve 3486 as a member of the examining committee. Members of the examining 3487 3488 committee must be able to communicate, either directly or 3489 through an interpreter, in the language that the alleged 3490 incapacitated person speaks or to communicate in a medium 3491 understandable to the alleged incapacitated person if she or he 3492 is able to communicate. The clerk of the court shall send notice 3493 of the appointment to each person appointed no later than 3 days 3494 after the court's appointment.

3495 Section 84. Subsection (1) of section 744.703, Florida 3496 Statutes, is amended to read:

3497 744.703 Office of public guardian; appointment, 3498 notification.-

3499 (1)The executive director of the Statewide Public 3500 Guardianship Office, after consultation with the chief judge and 3501 other circuit judges within the judicial circuit and with 3502 appropriate advocacy groups and individuals and organizations 3503 who are knowledgeable about the needs of incapacitated persons, 3504 may establish, within a county in the judicial circuit or within 3505 the judicial circuit, one or more offices of public guardian and 3506 if so established, shall create a list of persons best qualified 3507 to serve as the public guardian, who have been investigated 3508 pursuant to s. 744.3135. The public guardian must have knowledge 3509 of the legal process and knowledge of social services available 3510 to meet the needs of incapacitated persons. The public guardian

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3511 shall maintain a staff or contract with professionally qualified 3512 individuals to carry out the guardianship functions, including 3513 an attorney who has experience in probate areas and another 3514 person who has a master's degree in social work, or a 3515 gerontologist, psychologist, registered nurse, independent 3516 advanced practice registered nurse, or advanced practice 3517 registered nurse practitioner. A public guardian that is a 3518 nonprofit corporate guardian under s. 744.309(5) must receive 3519 tax-exempt status from the United States Internal Revenue 3520 Service.

3521 Section 85. Subsection (6) of section 766.102, Florida 3522 Statutes, is amended to read:

3523 766.102 Medical negligence; standards of recovery; expert 3524 witness.-

3525 (6) A physician licensed under chapter 458 or chapter 459 3526 who qualifies as an expert witness under subsection (5) and who, 3527 by reason of active clinical practice or instruction of 3528 students, has knowledge of the applicable standard of care for 3529 nurses, independent advanced practice registered nurses, 3530 advanced practice registered nurses nurse practitioners, 3531 certified registered nurse anesthetists, certified registered 3532 nurse midwives, physician assistants, or other medical support 3533 staff may give expert testimony in a medical negligence action 3534 with respect to the standard of care of such medical support 3535 staff.

3536

Section 86. Subsection (3) of section 766.103, Florida Page 136 of 154

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3537 Statutes, is amended to read:

3538

766.103 Florida Medical Consent Law.-

3539 (3) No Recovery is not shall be allowed in any court in 3540 this state against any physician licensed under chapter 458, 3541 osteopathic physician licensed under chapter 459, chiropractic 3542 physician licensed under chapter 460, podiatric physician 3543 licensed under chapter 461, dentist licensed under chapter 466, 3544 independent advanced practice registered nurse registered under 3545 s. 464.0125, advanced practice registered nurse practitioner 3546 certified under s. 464.012, or physician assistant licensed under s. 458.347 or s. 459.022 in an action brought for 3547 3548 treating, examining, or operating on a patient without his or 3549 her informed consent when:

3550 The action of the physician, osteopathic physician, (a)1. 3551 chiropractic physician, podiatric physician, dentist, 3552 independent advanced practice registered nurse, advanced 3553 practice registered nurse practitioner, or physician assistant 3554 in obtaining the consent of the patient or another person 3555 authorized to give consent for the patient was in accordance 3556 with an accepted standard of medical practice among members of 3557 the medical profession with similar training and experience in 3558 the same or similar medical community as that of the person 3559 treating, examining, or operating on the patient for whom the 3560 consent is obtained; and

3561 2. A reasonable individual, from the information provided 3562 by the physician, osteopathic physician, chiropractic physician, Page 137 of 154

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3563 podiatric physician, dentist, independent advanced practice 3564 registered nurse, advanced practice registered nurse 3565 practitioner, or physician assistant, under the circumstances, 3566 would have a general understanding of the procedure, the 3567 medically acceptable alternative procedures or treatments, and 3568 the substantial risks and hazards inherent in the proposed 3569 treatment or procedures, which are recognized among other 3570 physicians, osteopathic physicians, chiropractic physicians, 3571 podiatric physicians, or dentists in the same or similar 3572 community who perform similar treatments or procedures; or

3573 (b) The patient would reasonably, under all the 3574 surrounding circumstances, have undergone such treatment or 3575 procedure had he or she been advised by the physician, 3576 osteopathic physician, chiropractic physician, podiatric 3577 physician, dentist, independent advanced practice registered 3578 nurse, advanced practice registered nurse practitioner, or 3579 physician assistant in accordance with the provisions of 3580 paragraph (a).

3581 Section 87. Paragraph (d) of subsection (3) of section 3582 766.1115, Florida Statutes, is amended to read:

3583766.1115Health care providers; creation of agency3584relationship with governmental contractors.-

3585	(3)	DEFINITIONSAs used in this section, the term:
3586	(d)	"Health care provider" or "provider" means:
3587	1.	A birth center licensed under chapter 383.
3588	2.	An ambulatory surgical center licensed under chapt

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3589 395. 3590 3. A hospital licensed under chapter 395. 3591 4. A physician or physician assistant licensed under 3592 chapter 458. 3593 An osteopathic physician or osteopathic physician 5. 3594 assistant licensed under chapter 459. 3595 A chiropractic physician licensed under chapter 460. 6. 3596 7. A podiatric physician licensed under chapter 461. 3597 A registered nurse, nurse midwife, licensed practical 8. nurse, independent advanced practice registered nurse, or 3598 advanced practice registered nurse practitioner licensed, 3599 registered, or certified registered under part I of chapter 464 3600 3601 or any facility that which employs nurses licensed, registered, 3602 or certified registered under part I of chapter 464 to supply 3603 all or part of the care delivered under this section. 3604 9. A midwife licensed under chapter 467. 3605 10. A health maintenance organization certificated under 3606 part I of chapter 641. 3607 11. A health care professional association and its 3608 employees or a corporate medical group and its employees. 3609 Any other medical facility the primary purpose of 12. 3610 which is to deliver human medical diagnostic services or which 3611 delivers nonsurgical human medical treatment, and which includes 3612 an office maintained by a provider. 3613 13. A dentist or dental hygienist licensed under chapter 3614 466. Page 139 of 154

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3615 14. A free clinic that delivers only medical diagnostic 3616 services or nonsurgical medical treatment free of charge to all 3617 low-income recipients.

3618 15. Any other health care professional, practitioner, 3619 provider, or facility under contract with a governmental 3620 contractor, including a student enrolled in an accredited 3621 program that prepares the student for licensure as any one of 3622 the professionals listed in subparagraphs 4.-9.

3624 The term includes any nonprofit corporation qualified as exempt 3625 from federal income taxation under s. 501(a) of the Internal 3626 Revenue Code, and described in s. 501(c) of the Internal Revenue 3627 Code, which delivers health care services provided by licensed 3628 professionals listed in this paragraph, any federally funded 3629 community health center, and any volunteer corporation or volunteer health care provider that delivers health care 3630 3631 services.

3632 Section 88. Subsection (1) of section 766.1116, Florida 3633 Statutes, is amended to read:

3634766.1116Health care practitioner; waiver of license3635renewal fees and continuing education requirements.-

(1) As used in this section, the term "health care practitioner" means a physician or physician assistant licensed under chapter 458; an osteopathic physician or physician assistant licensed under chapter 459; a chiropractic physician licensed under chapter 460; a podiatric physician licensed under Page 140 of 154

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3641 chapter 461; <u>an independent advanced practice registered nurse</u>, 3642 an advanced <u>practice</u> registered nurse <u>practitioner</u>, registered 3643 nurse, or licensed practical nurse licensed, <u>registered</u>, or 3644 <u>certified</u> under part I of chapter 464; a dentist or dental 3645 hygienist licensed under chapter 466; or a midwife licensed 3646 under chapter 467, who participates as a health care provider 3647 under s. 766.1115.

3648 Section 89. Paragraph (c) of subsection (1) of section 3649 766.118, Florida Statutes, is amended to read:

3650 3651 766.118 Determination of noneconomic damages.-

(1) DEFINITIONS.-As used in this section, the term:

"Practitioner" means any person licensed under chapter 3652 (C) 3653 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 3654 463, chapter 466, chapter 467, or chapter 486, registered under 3655 s. 464.0125, or certified under s. 464.012. "Practitioner" also 3656 means any association, corporation, firm, partnership, or other 3657 business entity under which such practitioner practices or any 3658 employee of such practitioner or entity acting in the scope of 3659 his or her employment. For the purpose of determining the 3660 limitations on noneconomic damages set forth in this section, 3661 the term "practitioner" includes any person or entity for whom a 3662 practitioner is vicariously liable and any person or entity 3663 whose liability is based solely on such person or entity being 3664 vicariously liable for the actions of a practitioner.

3665 Section 90. Subsection (3) of section 768.135, Florida 3666 Statutes, is amended to read:

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3667 768.135 Volunteer team practitioners physicians; 3668 immunity.-

(3) A practitioner licensed under chapter 458, chapter 459, chapter 460, or s. 464.012, <u>or s. 464.0125</u> who gratuitously and in good faith conducts an evaluation pursuant to s. 1006.20(2)(c) is not liable for any civil damages arising from that evaluation unless the evaluation was conducted in a wrongful manner.

3675 Section 91. Subsection (4) of section 782.071, Florida 3676 Statutes, is amended to read:

3677 782.071 Vehicular homicide.—"Vehicular homicide" is the 3678 killing of a human being, or the killing of a viable fetus by 3679 any injury to the mother, caused by the operation of a motor 3680 vehicle by another in a reckless manner likely to cause the 3681 death of, or great bodily harm to, another.

3682 In addition to any other punishment, the court may (4)3683 order the person to serve 120 community service hours in a 3684 trauma center or hospital that regularly receives victims of 3685 vehicle accidents, under the supervision of an independent 3686 advanced practice registered nurse, an advanced practice 3687 registered nurse, a registered nurse, an emergency room 3688 physician, or an emergency medical technician pursuant to a 3689 voluntary community service program operated by the trauma 3690 center or hospital.

3691 Section 92. Subsection (5) of section 794.08, Florida 3692 Statutes, is amended to read:

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794.08 Female genital mutilation.-

This section does not apply to procedures performed by 3694 (5) 3695 or under the direction of a physician licensed under chapter 458; τ an osteopathic physician licensed under chapter 459; τ a 3696 3697 registered nurse licensed under part I of chapter 464, a 3698 practical nurse licensed under part I of chapter 464, an 3699 independent advanced practice registered nurse, or an advanced practice registered nurse licensed, registered, or certified 3700 3701 practitioner licensed under part I of chapter 464; τ a midwife 3702 licensed under chapter 467; τ or a physician assistant licensed under chapter 458 or chapter 459, when necessary to preserve the 3703 3704 physical health of a female person. This section also does not 3705 apply to any autopsy or limited dissection conducted pursuant to 3706 chapter 406.

3707 Section 93. Subsection (21) of section 893.02, Florida 3708 Statutes, is amended to read:

3709 893.02 Definitions.—The following words and phrases as 3710 used in this chapter shall have the following meanings, unless 3711 the context otherwise requires:

(21) "Practitioner" means a physician licensed pursuant to
chapter 458, a dentist licensed pursuant to chapter 466, a
veterinarian licensed pursuant to chapter 474, an osteopathic
physician licensed pursuant to chapter 459, a naturopath
licensed pursuant to chapter 462, a certified optometrist
licensed pursuant to chapter 463, <u>an independent advanced</u>
practice registered nurse registered pursuant to s. 464.0125, an

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3719 <u>advanced practice registered nurse certified pursuant to s.</u>
3720 <u>464.012</u>, or a podiatric physician licensed pursuant to chapter
3721 461, provided such practitioner holds a valid federal controlled
3722 substance registry number.

3723 Section 94. Subsection (6) of section 943.13, Florida 3724 Statutes, is amended to read:

3725 943.13 Officers' minimum qualifications for employment or 3726 appointment.-On or after October 1, 1984, any person employed or 3727 appointed as a full-time, part-time, or auxiliary law enforcement officer or correctional officer; on or after October 3728 3729 1, 1986, any person employed as a full-time, part-time, or auxiliary correctional probation officer; and on or after 3730 3731 October 1, 1986, any person employed as a full-time, part-time, 3732 or auxiliary correctional officer by a private entity under 3733 contract to the Department of Corrections, to a county 3734 commission, or to the Department of Management Services shall:

3735 (6) Have passed a physical examination by a licensed 3736 physician, physician assistant, independent advanced practice 3737 registered nurse, or certified advanced practice registered 3738 nurse practitioner, based on specifications established by the 3739 commission. In order to be eligible for the presumption set 3740 forth in s. 112.18 while employed with an employing agency, a law enforcement officer, correctional officer, or correctional 3741 3742 probation officer must have successfully passed the physical 3743 examination required by this subsection upon entering into 3744 service as a law enforcement officer, correctional officer, or Page 144 of 154

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3745 correctional probation officer with the employing agency, which 3746 examination must have failed to reveal any evidence of 3747 tuberculosis, heart disease, or hypertension. A law enforcement 3748 officer, correctional officer, or correctional probation officer 3749 may not use a physical examination from a former employing 3750 agency for purposes of claiming the presumption set forth in s. 3751 112.18 against the current employing agency.

3752 Section 95. Subsection (2) of section 945.603, Florida 3753 Statutes, is amended to read:

3754 945.603 Powers and duties of authority.-The purpose of the 3755 authority is to assist in the delivery of health care services 3756 for inmates in the Department of Corrections by advising the 3757 Secretary of Corrections on the professional conduct of primary, 3758 convalescent, dental, and mental health care and the management 3759 of costs consistent with quality care, by advising the Governor 3760 and the Legislature on the status of the Department of 3761 Corrections' health care delivery system, and by assuring that 3762 adequate standards of physical and mental health care for 3763 inmates are maintained at all Department of Corrections 3764 institutions. For this purpose, the authority has the authority 3765 to:

3766 (2) Review and make recommendations regarding health care
3767 for the delivery of health care services including, but not
3768 limited to, acute hospital-based services and facilities,
3769 primary and tertiary care services, ancillary and clinical
3770 services, dental services, mental health services, intake and
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3771 screening services, medical transportation services, and the use 3772 of <u>advanced practice registered nurses</u> nurse practitioner and 3773 physician <u>assistants</u> assistant personnel to act as physician 3774 extenders as these relate to inmates in the Department of 3775 Corrections.

3776 Section 96. Paragraph (i) of subsection (3) of section 3777 1002.20, Florida Statutes, is amended to read:

3778 1002.20 K-12 student and parent rights.-Parents of public 3779 school students must receive accurate and timely information 3780 regarding their child's academic progress and must be informed 3781 of ways they can help their child to succeed in school. K-12 3782 students and their parents are afforded numerous statutory 3783 rights including, but not limited to, the following:

3784

(3) HEALTH ISSUES.-

3785

(3) 11111111 100010.

(i) Epinephrine use and supply.-

3786 A student who has experienced or is at risk for life-1. 3787 threatening allergic reactions may carry an epinephrine auto-3788 injector and self-administer epinephrine by auto-injector while 3789 in school, participating in school-sponsored activities, or in 3790 transit to or from school or school-sponsored activities if the 3791 school has been provided with parental and physician 3792 authorization. The State Board of Education, in cooperation with 3793 the Department of Health, shall adopt rules for such use of 3794 epinephrine auto-injectors that shall include provisions to 3795 protect the safety of all students from the misuse or abuse of 3796 auto-injectors. A school district, county health department,

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3797 public-private partner, and their employees and volunteers shall 3798 be indemnified by the parent of a student authorized to carry an 3799 epinephrine auto-injector for any and all liability with respect 3800 to the student's use of an epinephrine auto-injector pursuant to 3801 this paragraph.

3802 A public school may purchase from a wholesale 2. 3803 distributor as defined in s. 499.003 and maintain in a locked, 3804 secure location on its premises a supply of epinephrine auto-3805 injectors for use if a student is having an anaphylactic 3806 reaction. The participating school district shall adopt a protocol developed by a licensed physician for the 3807 3808 administration by school personnel who are trained to recognize 3809 an anaphylactic reaction and to administer an epinephrine auto-3810 injection. The supply of epinephrine auto-injectors may be 3811 provided to and used by a student authorized to self-administer epinephrine by auto-injector under subparagraph 1. or trained 3812 3813 school personnel.

3814 3. The school district and its employees and agents, 3815 including the physician who provides the standing protocol for 3816 school epinephrine auto-injectors, are not liable for any injury 3817 arising from the use of an epinephrine auto-injector 3818 administered by trained school personnel who follow the adopted 3819 protocol and whose professional opinion is that the student is 3820 having an anaphylactic reaction:

3821 a. Unless the trained school personnel's action is willful 3822 and wanton;

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3823 b. Notwithstanding that the parents or guardians of the 3824 student to whom the epinephrine is administered have not been 3825 provided notice or have not signed a statement acknowledging 3826 that the school district is not liable; and Regardless of whether authorization has been given by 3827 с. 3828 the student's parents or guardians or by the student's 3829 physician, a physician physician's assistant, an independent 3830 advanced practice registered nurse, or an advanced practice 3831 registered nurse practitioner. Section 97. Paragraph (b) of subsection (17) of section 3832 1002.42, Florida Statutes, is amended to read: 3833 3834 1002.42 Private schools.-3835 (17) EPINEPHRINE SUPPLY.-3836 The private school and its employees and agents, (b) 3837 including the physician who provides the standing protocol for 3838 school epinephrine auto-injectors, are not liable for any injury arising from the use of an epinephrine auto-injector 3839 3840 administered by trained school personnel who follow the adopted 3841 protocol and whose professional opinion is that the student is 3842 having an anaphylactic reaction: 3843 1. Unless the trained school personnel's action is willful 3844 and wanton; 3845 2. Notwithstanding that the parents or quardians of the 3846 student to whom the epinephrine is administered have not been 3847 provided notice or have not signed a statement acknowledging 3848 that the school district is not liable; and Page 148 of 154

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3849 3. Regardless of whether authorization has been given by 3850 the student's parents or guardians or by the student's 3851 physician, a physician physician's assistant, an independent 3852 advanced practice registered nurse, or an advanced practice 3853 registered nurse practitioner. 3854 Section 98. Subsections (4) and (5) of section 1006.062, 3855 Florida Statutes, are amended to read: 3856 1006.062 Administration of medication and provision of 3857 medical services by district school board personnel.-3858 (4) Nonmedical assistive personnel shall be allowed to 3859 perform health-related services upon successful completion of 3860 child-specific training by a registered nurse, an independent 3861 advanced practice registered nurse, or an advanced practice 3862 registered nurse practitioner licensed, registered, or certified 3863 under part I of chapter 464, a physician licensed pursuant to 3864 chapter 458 or chapter 459, or a physician assistant licensed 3865 pursuant to chapter 458 or chapter 459. All procedures shall be 3866 monitored periodically by a nurse, an independent advanced 3867 practice registered nurse, an advanced practice registered nurse 3868 practitioner, a physician assistant, or a physician, including, 3869 but not limited to: 3870 Intermittent clean catheterization. (a) 3871 Gastrostomy tube feeding. (b) 3872 Monitoring blood glucose. (C) 3873 (d) Administering emergency injectable medication. 3874 (5) For all other invasive medical services not listed in Page 149 of 154

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3875 this subsection, a registered nurse, an independent advanced practice registered nurse, or an advanced practice registered 3876 3877 nurse practitioner licensed, registered, or certified under part 3878 I of chapter 464; τ a physician licensed pursuant to chapter 458 or chapter 459; τ or a physician assistant licensed pursuant to 3879 3880 chapter 458 or chapter 459 shall determine if nonmedical 3881 district school board personnel shall be allowed to perform such 3882 service.

3883 Section 99. Paragraph (c) of subsection (2) of section 3884 1006.20, Florida Statutes, is amended to read:

3885

1006.20 Athletics in public K-12 schools.-

3886

(2) ADOPTION OF BYLAWS, POLICIES, OR GUIDELINES.-

3887 The FHSAA shall adopt bylaws that require all students (C) 3888 participating in interscholastic athletic competition or who are 3889 candidates for an interscholastic athletic team to 3890 satisfactorily pass a medical evaluation each year prior to 3891 participating in interscholastic athletic competition or 3892 engaging in any practice, tryout, workout, or other physical 3893 activity associated with the student's candidacy for an 3894 interscholastic athletic team. Such medical evaluation may be 3895 administered only by a practitioner licensed under chapter 458, chapter 459, chapter 460, or s. 464.012, or s. 464.0125, and in 3896 3897 good standing with the practitioner's regulatory board. The 3898 bylaws shall establish requirements for eliciting a student's 3899 medical history and performing the medical evaluation required 3900 under this paragraph, which shall include a physical assessment

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3901 of the student's physical capabilities to participate in 3902 interscholastic athletic competition as contained in a uniform 3903 preparticipation physical evaluation and history form. The 3904 evaluation form shall incorporate the recommendations of the 3905 American Heart Association for participation cardiovascular 3906 screening and shall provide a place for the signature of the 3907 practitioner performing the evaluation with an attestation that 3908 each examination procedure listed on the form was performed by 3909 the practitioner or by someone under the direct supervision of 3910 the practitioner. The form shall also contain a place for the 3911 practitioner to indicate if a referral to another practitioner 3912 was made in lieu of completion of a certain examination 3913 procedure. The form shall provide a place for the practitioner 3914 to whom the student was referred to complete the remaining 3915 sections and attest to that portion of the examination. The 3916 preparticipation physical evaluation form shall advise students 3917 to complete a cardiovascular assessment and shall include 3918 information concerning alternative cardiovascular evaluation and 3919 diagnostic tests. Results of such medical evaluation must be 3920 provided to the school. No student shall be eligible to 3921 participate in any interscholastic athletic competition or 3922 engage in any practice, tryout, workout, or other physical 3923 activity associated with the student's candidacy for an interscholastic athletic team until the results of the medical 3924 3925 evaluation have been received and approved by the school. 3926 Section 100. Subsection (1) and paragraph (a) of

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3927 subsection (2) of section 1009.65, Florida Statutes, are amended 3928 to read:

3929 1009.65 Medical Education Reimbursement and Loan Repayment 3930 Program.-

3931 To encourage qualified medical professionals to (1)3932 practice in underserved locations where there are shortages of 3933 such personnel, there is established the Medical Education 3934 Reimbursement and Loan Repayment Program. The function of the 3935 program is to make payments that offset loans and educational 3936 expenses incurred by students for studies leading to a medical 3937 or nursing degree, medical or nursing licensure, or advanced 3938 practice registered nurse practitioner certification or 3939 physician assistant licensure. The following licensed or 3940 certified health care professionals are eligible to participate 3941 in this program: medical doctors with primary care specialties, 3942 doctors of osteopathic medicine with primary care specialties, 3943 physician's assistants, licensed practical nurses and registered 3944 nurses, and advanced practice registered nurses nurse 3945 practitioners with primary care specialties such as certified 3946 nurse midwives. Primary care medical specialties for physicians include obstetrics, gynecology, general and family practice, 3947 internal medicine, pediatrics, and other specialties which may 3948 3949 be identified by the Department of Health.

3950 (2) From the funds available, the Department of Health 3951 shall make payments to selected medical professionals as 3952 follows:

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3953	(a) Up to \$4,000 per year for licensed practical nurses
3954	and registered nurses, up to \$10,000 per year for advanced
3955	practice registered nurses nurse practitioners and physician's
3956	assistants, and up to \$20,000 per year for physicians. Penalties
3957	for noncompliance shall be the same as those in the National
3958	Health Services Corps Loan Repayment Program. Educational
3959	expenses include costs for tuition, matriculation, registration,
3960	books, laboratory and other fees, other educational costs, and
3961	reasonable living expenses as determined by the Department of
3962	Health.
3963	Section 101. Subsection (2) of section 1009.66, Florida
3964	Statutes, is amended to read:
3965	1009.66 Nursing Student Loan Forgiveness Program
3966	(2) To be eligible, a candidate must have graduated from
3967	an accredited or approved nursing program and have received a
3968	Florida license as a licensed practical nurse or a registered
3969	nurse or a Florida certificate as an advanced <u>practice</u>
3970	registered nurse practitioner .
3971	Section 102. Subsection (3) of section 1009.67, Florida
3972	Statutes, is amended to read:
3973	1009.67 Nursing scholarship program.—
3974	(3) A scholarship may be awarded for no more than 2 years,
3975	in an amount not to exceed \$8,000 per year. However, registered
3976	nurses pursuing a graduate degree for a faculty position or to
3977	practice as an advanced <u>practice</u> registered nurse practitioner
3978	may receive up to \$12,000 per year. These amounts shall be
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3979 adjusted by the amount of increase or decrease in the Consumer 3980 Price Index for All Urban Consumers published by the United 3981 States Department of Commerce.

Section 103. This act shall take effect July 1, 2014.

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