Bill No. HB 547 (2015)

Amendment No.

COMMITTEE/SUBCOMMITTEE	ACTION
ADOPTED	(Y/N)
ADOPTED AS AMENDED	(Y/N)
ADOPTED W/O OBJECTION	(Y/N)
FAILED TO ADOPT	(Y/N)
WITHDRAWN	(Y/N)
OTHER	

Committee/Subcommittee hearing bill: Health Innovation

Subcommittee

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Representative Pigman offered the following:

Amendment (with title amendment)

6 Remove everything after the enacting clause and insert: 7 Section 1. Subsections (16) through (23) of section 8 464.003, Florida Statutes, are renumbered as subsections (17) 9 through (24), respectively, present subsections (2), (3), (20), 10 and (22) are amended, and a new subsection (16) is added to that 11 section, to read:

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

13 (2) "Advanced or specialized nursing practice" or "to 14 practice advanced or specialized nursing" means, in addition to 15 the practice of professional nursing, the performance of 16 advanced-level nursing acts approved by the board which, by 17 virtue of postbasic specialized education, training, and

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 1 of 161

Amendment No.

Bill No. HB 547 (2015)

18 experience, are appropriately performed by an independent 19 advanced practice registered nurse or an advanced practice 20 registered nurse practitioner. Within the context of advanced or 21 specialized nursing practice, the independent advanced practice 22 registered nurse and the advanced practice registered nurse 23 practitioner may perform acts of nursing diagnosis and nursing 24 treatment of alterations of the health status. The independent 25 advanced practice registered nurse and the advanced practice 26 registered nurse practitioner may also perform acts of medical 27 diagnosis, and treatment, prescription, and operation which are 28 identified and approved by a joint committee composed of three 29 members appointed by the Board of Nursing, one of whom must be 30 an independent advanced practice registered nurse and one two of 31 whom must be an advanced practice registered nurse 32 practitioners; three members appointed by the Board of Medicine, two of whom must have had work experience with advanced practice 33 34 registered nurses nurse practitioners; and the State Surgeon 35 General or the State Surgeon General's designee. Each committee 36 member appointed by a board shall be appointed to a term of 4 37 years unless a shorter term is required to establish or maintain staggered terms. The Board of Nursing shall adopt rules 38 39 authorizing the performance of any such acts approved by the joint committee. Unless otherwise specified by the joint 40 41 committee and unless such acts are performed by independent advanced practice registered nurses, such medical acts must be 42 43 performed under the general supervision of a practitioner 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 2 of 161

Bill No. HB 547 (2015)

Amendment No.

44 licensed under chapter 458, chapter 459, or chapter 466 within 45 the framework of standing protocols which identify the medical 46 acts to be performed and the conditions for their performance. 47 The department may, by rule, require that a copy of the protocol 48 be filed with the department along with the notice required by 49 s. 458.348 or s. 459.025.

(3) "Advanced <u>practice</u> registered nurse practitioner"
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 <u>certified</u> nurse practitioners.

55 (16) "Independent advanced practice registered nurse" 56 means an advanced practice registered nurse who maintains an 57 active and unencumbered certification under s. 464.012(2) and 58 registration under s. 464.0125 to practice advanced or 59 specialized nursing independently and without the supervision of 60 a physician or a protocol.

61 (21) (20) "Practice of professional nursing" means the 62 performance of those acts requiring substantial specialized 63 knowledge, judgment, and nursing skill based upon applied 64 principles of psychological, biological, physical, and social 65 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

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 3 of 161

Bill No. HB 547 (2015)

Amendment No.

69 of wellness, maintenance of health, and prevention of illness of 70 others. 71 (b) The prescribing and administration of medications and 72 treatments as prescribed or authorized by a duly licensed practitioner authorized by the laws of this state to prescribe 73 74 such medications and treatments. 75 (C) The supervision and teaching of other personnel in the 76 theory and performance of any of the acts described in this 77 subsection. 78 79 A professional nurse is responsible and accountable for making 80 decisions that are based upon the individual's educational 81 preparation and experience in nursing. 82 (23) (22) "Registered nurse" means any person licensed in 83 this state to practice professional nursing, except such licensed person may only administer medications and treatments 84 85 authorized by a duly licensed practitioner authorized by the laws of this state to prescribe such medications and treatments. 86 Section 2. Section 464.012, Florida Statutes, is amended 87 88 to read: 89 464.012 Certification of advanced practice registered nurses nurse practitioners; fees.-90 91 Any nurse desiring to be certified as an advanced (1)92 practice registered nurse practitioner shall apply to the board 93 department and submit proof that the nurse he or she holds a current license to practice professional nursing and that the 94 706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 4 of 161

Bill No. HB 547

(2015)

Amendment No.

95 <u>nurse</u> he or she meets one or more of the following requirements 96 as determined by the board:

97 (a) Satisfactory completion of a formal postbasic
98 educational program of at least one academic year, the primary
99 purpose of which is to prepare nurses for advanced or
100 specialized practice.

(a) (b) Certification by an appropriate specialty board. 101 102 Such certification shall be required for initial state 103 certification and any recertification as a nurse practitioner, 104 registered nurse anesthetist, or nurse midwife. The board may by rule provide for provisional state certification of graduate 105 nurse practitioners, nurse anesthetists, and nurse midwives for 106 107 a period of time determined to be appropriate for preparing for 108 and passing the national certification examination.

109 (b) (c) Graduation from a program leading to a master's 110 degree program in a nursing clinical specialty area with 111 preparation in specialized practitioner skills. For applicants graduating on or after October 1, 1998, graduation from a 112 113 master's degree program shall be required for initial 114 certification as a nurse practitioner under paragraph (4)(c). 115 For applicants graduating on or after October 1, 2001, graduation from a master's degree program shall be required for 116 117 initial certification as a registered nurse anesthetist under 118 paragraph (4) (a).

119 (2) The board shall provide by rule the appropriate120 requirements for advanced practice registered nurses nurse

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 5 of 161

Bill No. HB 547

(2015)

Amendment No.

121 practitioners in the categories of certified registered nurse 122 anesthetist, certified nurse midwife, and <u>certified</u> nurse 123 practitioner.

124 (3) An advanced practice registered nurse practitioner 125 shall perform those functions authorized in this section within 126 the framework of an established protocol that is filed with the 127 board upon biennial license renewal and within 30 days after 128 entering into a supervisory relationship with a physician or 129 changes to the protocol. The board shall review the protocol to 130 ensure compliance with applicable regulatory standards for 131 protocols. The board shall refer to the department licensees 132 submitting protocols that are not compliant with the regulatory 133 standards for protocols. A practitioner currently licensed under 134 chapter 458, chapter 459, or chapter 466 shall maintain 135 supervision for directing the specific course of medical 136 treatment. Within the established framework, an advanced 137 practice registered nurse practitioner may:

138

(a) Monitor and alter drug therapies.

(b) Initiate appropriate therapies for certain conditions.
(c) Perform additional functions as may be determined by
rule in accordance with s. 464.003(2).

(d) Order diagnostic tests and physical and occupationaltherapy.

144 (e) Administer, dispense, and prescribe medicinal drugs,
 145 including controlled substances.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 6 of 161

Bill No. HB 547 (2015)

Amendment No.

146 (4) In addition to the general functions specified in 147 subsection (3), an advanced <u>practice</u> registered nurse 148 <u>practitioner</u> may perform the following acts within his or her 149 specialty:

(a) The certified registered nurse anesthetist may, to the
extent authorized by established protocol approved by the
medical staff of the facility in which the anesthetic service is
performed, perform any or all of the following:

154 1. Determine the health status of the patient as it 155 relates to the risk factors and to the anesthetic management of 156 the patient through the performance of the general functions.

157 2. Based on history, physical assessment, and supplemental 158 laboratory results, determine, with the consent of the 159 responsible physician, the appropriate type of anesthesia within 160 the framework of the protocol.

161

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.

169 5. Order or perform monitoring procedures indicated as 170 pertinent to the anesthetic health care management of the 171 patient.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 7 of 161

Bill No. HB 547 (2015)

Amendment No.

172 6. Support life functions during anesthesia health care,
173 including induction and intubation procedures, the use of
174 appropriate mechanical supportive devices, and the management of
175 fluid, electrolyte, and blood component balances.

176 7. Recognize and take appropriate corrective action for
177 abnormal patient responses to anesthesia, adjunctive medication,
178 or other forms of therapy.

179 8. Recognize and treat a cardiac arrhythmia while the180 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.

184 10. Place special peripheral and central venous and185 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:

192

1. Perform superficial minor surgical procedures.

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

195 3. Order, initiate, and perform appropriate anesthetic196 procedures.

197

4. Perform postpartum examination.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 8 of 161

Bill No. HB 547 (2015)

Amendment No.

5. Order appropriate medications. 6. Provide family-planning services and well-woman care.

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7. Manage the medical care of the normal obstetrical 201 patient and the initial care of a newborn patient.

202 The certified nurse practitioner may perform any or (C) 203 all of the following acts within the framework of established 204 protocol:

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206

1. Manage selected medical problems.

2. Order physical and occupational therapy.

207 3. Initiate, monitor, or alter therapies for certain uncomplicated acute illnesses. 208

209 4. Monitor and manage patients with stable chronic 210 diseases.

5. Establish behavioral problems and diagnosis and make 211 212 treatment recommendations.

213 The board shall certify, and the department shall (5) 214 issue a certificate to, any nurse meeting the qualifications in 215 this section. The board shall establish an application fee not 216 to exceed \$100 and a biennial renewal fee not to exceed \$50. The 217 board is authorized to adopt such other rules as are necessary 218 to implement the provisions of this section.

Section 3. Section 464.0125, Florida Statutes, is created 219 220 to read:

221 464.0125 Registration of independent advanced practice 2.2.2 registered nurses; fees.-

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 9 of 161

Bill No. HB 547 (2015)

Amendment No.

	Amendment No.
223	(1) To be registered as an independent advanced practice
224	registered nurse, an applicant must hold an active and
225	unencumbered certificate under s. 464.012, and must have:
226	(a) Completed, in any jurisdiction of the United States,
227	at least 2,000 clinical practice hours within a 3-year period
228	immediately preceding the submission of the application and
229	while practicing as an advanced practice registered nurse.
230	(b) Not been subject to any disciplinary action under s.
231	464.018 or s. 456.072, or any similar disciplinary action in any
232	other jurisdiction, during the 5 years immediately preceding the
233	submission of the application.
234	(c) Completed a graduate level course in pharmacology.
235	(2) The board may provide by rule additional requirements
236	appropriate for each applicant practicing in a specialty under
237	s. 464.012(4).
238	(3) An independent advanced practice registered nurse may
239	perform, without physician supervision or a protocol, the
240	functions authorized in s. 464.012(3), the acts within his or
241	her specialty as described in s. 464.012(4), and any of the
242	following:
243	(a) For a patient who requires the services of a health
244	care facility, as defined in s. 408.032(8):
245	1. Admit the patient to the facility.
246	2. Manage the care that the patient receives in the
247	facility.
248	3. Discharge the patient from the facility.
	706771 - h0547-strike.docx
	Published On: 3/17/2015 5:45:31 PM

Page 10 of 161

Amendment No.

Bill No. HB 547 (2015)

249	(b) Provide a signature, certification, stamp,
250	verification, affidavit, or other endorsement that is otherwise
251	required by law to be provided by a physician.
252	(4) An advanced practice registered nurse registered under
253	this section must submit to the department proof of registration
254	along with the information required under s. 456.0391, and the
255	department shall include the registration in the advanced
256	practice registered nurse's practitioner profile created
257	pursuant to s. 456.041.
258	(5) To be eligible for biennial renewal of registration,
259	an independent advanced practice registered nurse must complete
260	at least 10 hours of continuing education approved by the board
261	in pharmacology in addition to completing the continuing
262	education requirements established by board rule pursuant to s.
263	464.013. The biennial renewal for registration shall coincide
264	with the independent advanced practice registered nurse's
265	biennial renewal period for advanced practice registered nurse
266	certification. If the initial renewal period occurs before
267	January 1, 2016, an independent advanced practice registered
268	nurse is not required to complete the continuing education
269	requirement under this subsection until the following biennial
270	renewal period.
271	(6) The board shall register any nurse meeting the
272	qualifications in this section. The board shall establish an
273	application fee not to exceed \$100 and a biennial renewal fee

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 11 of 161

Bill No. HB 547 (2015)

Amendment No.

274	not to exceed \$50. The board is authorized to adopt rules as
275	necessary to implement this section.
276	Section 4. Subsections (8) and (9) of section 464.015,
277	Florida Statutes, are amended to read:
278	464.015 Titles and abbreviations; restrictions; penalty
279	(8) Only <u>a person certified under s. 464.012</u> persons who
280	hold valid certificates to practice as <u>an</u> advanced <u>practice</u>
281	registered nurse practitioners in this state may use the title
282	"Advanced <u>Practice</u> Registered Nurse Practitioner " and the
283	abbreviation "A.P.R.N." Only a person registered under s.
284	464.0125 to practice as an independent advanced practice
285	registered nurse in this state may use the title "Independent
286	Advanced Practice Registered Nurse" and the abbreviation
287	<u>"I.A.P.R.N."</u> "A.R.N.P."
288	(9) A person may not practice or advertise as, or assume
289	the title of, registered nurse, licensed practical nurse,
290	clinical nurse specialist, certified registered nurse
291	anesthetist, certified nurse midwife, certified nurse
292	practitioner, or advanced <u>practice</u> registered nurse, or
293	independent advanced practice registered nurse practitioner or
294	use the abbreviation "R.N.," "L.P.N.," "C.N.S.," "C.R.N.A.,"
295	"C.N.M.," <u>"C.N.P.," "A.P.R.N.,"</u> or <u>"I.A.P.R.N."</u> "A.R.N.P." or
296	take any other action that would lead the public to believe that
297	person was certified <u>or registered</u> as such or is performing
298	nursing services pursuant to the exception set forth in s.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 12 of 161

Bill No. HB 547 (2015)

Amendment No.

299	464.022(8), unless that person is licensed <u>, or</u> certified <u>, or</u>
300	registered to practice as such.
301	Section 5. Section 464.0155, Florida Statutes, is created
302	to read:
303	464.0155 Reports of adverse incidents by independent
304	advanced practice registered nurses
305	(1) Effective January 1, 2016, an independent advanced
306	practice registered nurse must report an adverse incident to the
307	department in accordance with this section.
308	(2) The report must be in writing, sent to the department
309	by certified mail, and postmarked within 15 days after the
310	adverse incident if the adverse incident occurs when the patient
311	is at the office of the independent advanced practice registered
312	nurse. If the adverse incident occurs when the patient is not at
313	the office of the independent advanced practice registered
314	nurse, the report must be postmarked within 15 days after the
315	independent advanced practice registered nurse discovers, or
316	reasonably should have discovered, the occurrence of the adverse
317	incident.
318	(3) For the purpose of this section, the term "adverse
319	incident" means any of the following events when it is
320	reasonable to believe that the event is attributable to the
321	prescription of a controlled substance by the independent
322	advanced practice registered nurse:
323	(a) A condition that requires the transfer of a patient to
324	a hospital licensed under chapter 395.
	706771 - h0547-strike.docx
	Published On: 3/17/2015 5:45:31 PM

Page 13 of 161

Bill No. HB 547 (2015)

Amendment No.

325	(b) Permanent physical injury to the patient.
326	(c) Death of the patient.
327	(4) The department shall review each adverse incident and
328	determine whether the independent advanced practice registered
329	nurse caused the adverse incident. The board may take
330	disciplinary action upon such a finding, in which case s.
331	456.073 applies.
332	Section 6. Paragraph (a) of subsection (2) of section
333	464.016, Florida Statutes, is amended to read:
334	464.016 Violations and penalties
335	(2) Each of the following acts constitutes a misdemeanor
336	of the first degree, punishable as provided in s. 775.082 or s.
337	775.083:
338	(a) Using the name or title "Nurse," "Registered Nurse,"
339	"Licensed Practical Nurse," "Clinical Nurse Specialist,"
340	"Certified Registered Nurse Anesthetist," "Certified Nurse
341	Midwife," <u>"Certified Nurse Practitioner,"</u> "Advanced <u>Practice</u>
342	Registered Nurse Practitioner ," <u>"Independent Advanced Practice</u>
343	<u>Registered Nurse,"</u> or any other name or title <u>that</u> which implies
344	that a person was licensed, or certified, or registered as same,
345	unless such person is duly licensed <u>,</u> or certified <u>, or</u>
346	registered.
347	Section 7. Paragraphs (p) through (z) are added to
348	subsection (1) of section 464.018, Florida Statutes, to read:
349	464.018 Disciplinary actions
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	706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 14 of 161

Bill No. HB 547 (2015)

Amendment No.

	Allendilent No.
350	(1) The following acts constitute grounds for denial of a
351	license or disciplinary action, as specified in s. 456.072(2):
352	(p) Prescribing, dispensing, administering, mixing, or
353	otherwise preparing a legend drug, including any controlled
354	substance, other than in the course of the professional practice
355	of the independent advanced practice registered nurse or
356	advanced practice registered nurse. For the purposes of this
357	paragraph, it shall be legally presumed that prescribing,
358	dispensing, administering, mixing, or otherwise preparing legend
359	drugs, including all controlled substances, inappropriately or
360	in excessive or inappropriate quantities is not in the best
361	interest of the patient and is not in the course of the
362	professional practice of the independent advanced practice
363	registered nurse or advanced practice registered nurse, without
364	regard to the nurse's intent.
365	(q) Dispensing a controlled substance listed in Schedule
366	II or Schedule III in violation of s. 465.0276.
367	(r) Presigning blank prescription forms.
368	(s) Prescribing any medicinal drug appearing on Schedule
369	II in chapter 893 by the nurse for office use.
370	(t) Prescribing, ordering, dispensing, administering,
371	supplying, selling, or giving any Schedule II drug that is an
372	amphetamine or sympathomimetic amine or any compound thereof,
373	pursuant to chapter 893, to or for any person except for:
374	1. The treatment of narcolepsy; hyperkinesis; behavioral
375	syndrome characterized by the developmentally inappropriate
	706771 - h0547-strike.docx
	Published On: 3/17/2015 5:45:31 PM

Page 15 of 161

Bill No. HB 547 (2015)

Amendment No.

376	symptoms of moderate to severe distractability, short attention
377	span, hyperactivity, emotional liability, and impulsivity; or
378	drug-induced brain dysfunction;
379	2. The differential diagnostic psychiatric evaluation of
380	depression or the treatment of depression shown to be refractory
381	to other therapeutic modalities; or
382	3. The clinical investigation of the effects of such drugs
383	or compounds when an investigative protocol therefor is
384	submitted to, reviewed, and approved by the board before such
385	investigation begins.
386	(u) Prescribing, ordering, dispensing, administering,
387	supplying, selling, or giving growth hormones, testosterone or
388	its analogs, human chorionic gonadotropin (HCG), or other
389	hormones for the purpose of muscle building or to enhance
390	athletic performance. For the purposes of this paragraph, the
391	term "muscle building" does not include the treatment of injured
392	muscle. A prescription written for the drug products listed in
393	this paragraph may be dispensed by the pharmacist with the
394	presumption that the prescription is for legitimate medical use.
395	(v) Prescribing, ordering, dispensing, administering,
396	supplying, selling, or giving amygdalin (laetrile) to any
397	person.
398	(w) Promoting or advertising on any prescription form of a
399	community pharmacy, unless the form also states, "This
400	prescription may be filled at any pharmacy of your choice."
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706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 16 of 161

Bill No. HB 547 (2015)

Amendment No.

	Amenament No.
401	(x) Promoting or advertising through any communication
402	media the use, sale, or dispensing of any controlled substance
403	appearing on any schedule in chapter 893.
404	(y) Prescribing or dispensing any medicinal drug appearing
405	on any schedule set forth in chapter 893 by the independent
406	advanced practice registered nurse or the advanced practice
407	registered nurse for himself or herself or administering any
408	such drug by the nurse to himself or herself unless such drug is
409	prescribed for the nurse by another practitioner authorized to
410	prescribe medicinal drugs.
411	(z) For an independent advanced practice registered nurse
412	registered under s. 464.0125:
413	1. Paying or receiving any commission, bonus, kickback, or
414	rebate, or engaging in any split-fee arrangement in any form
415	whatsoever with a health care practitioner, organization,
416	agency, or person, either directly or indirectly, for patients
417	referred to providers of health care goods and services,
418	including, but not limited to, hospitals, nursing homes,
419	clinical laboratories, ambulatory surgical centers, or
420	pharmacies. The provisions of this subparagraph may not be
421	construed to prevent an independent advanced practice registered
422	nurse from receiving a fee for professional consultation
423	services.
424	2. Exercising influence within a patient-independent
425	advanced practice registered nurse relationship for purposes of
426	engaging a patient in sexual activity. A patient shall be
	706771 - h0547-strike.docx
	Published On: 3/17/2015 5:45:31 PM
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Page 17 of 161

Bill No. HB 547 (2015)

Amendment No.

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427	presumed to be incapable of giving free, full, and informed
428	consent to sexual activity with his or her independent advanced
429	practice registered nurse.
430	3. Making deceptive, untrue, or fraudulent representations
431	in or related to the practice of advanced or specialized nursing
432	or employing a trick or scheme in the practice of advanced or
433	specialized nursing.
434	4. Soliciting patients, either personally or through an
435	agent, through the use of fraud, intimidation, undue influence,
436	or a form of overreaching or vexatious conduct. A solicitation
437	is any communication that directly or implicitly requests an
438	immediate oral response from the recipient.
439	5. Failing to keep legible, as defined by department rule
440	in consultation with the board, medical records that identify
441	the independent advanced practice registered nurse by name and
442	professional title who is responsible for rendering, ordering,
443	supervising, or billing for each diagnostic or treatment
444	procedure and that justify the course of treatment of the
445	patient, including, but not limited to, patient histories;
446	examination results; test results; records of drugs prescribed,
447	dispensed, or administered; and reports of consultations or
448	referrals.
449	6. Exercising influence on a patient or client in a manner
450	as to exploit the patient or client for financial gain of the
451	licensee or of a third party, which shall include, but not be

| 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 18 of 161

Amendment No.

Bill No. HB 547 (2015)

452 limited to, the promoting or selling of services, goods, 453 appliances, or drugs. 454 7. Performing professional services that have not been 455 duly authorized by the patient or client, or his or her legal 456 representative, except as provided in s. 766.103 or s. 768.13. 457 8. Performing any procedure or prescribing any therapy 458 that, by the prevailing standards of advanced or specialized 459 nursing practice in the community, would constitute 460 experimentation on a human subject, without first obtaining 461 full, informed, and written consent. 462 9. Delegating professional responsibilities to a person 463 when the licensee delegating the responsibilities knows or has 464 reason to know that the person is not qualified by training, 465 experience, or licensure to perform the responsibilities. 466 10. Conspiring with another independent advanced practice 467 registered nurse or with any other person to commit an act, or 468 committing an act, which would tend to coerce, intimidate, or 469 preclude another independent advanced practice registered nurse 470 from lawfully advertising his or her services. 471 11. Advertising or holding oneself out as having 472 certification in a specialty that the independent advanced 473 practice registered nurse has not received. 474 12. Failing to comply with the requirements of ss. 381.026 475 and 381.0261 to provide patients with information about their 476 patient rights and how to file a patient complaint.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 19 of 161

Bill No. HB 547 (2015)

Amendment No.

477 <u>13. Providing deceptive or fraudulent expert witness</u>
478 <u>testimony related to the advanced or specialized practice of</u>
479 <u>nursing.</u>

480 Section 8. Paragraph (c) of subsection (3) and paragraph 481 (a) of subsection (4) of section 39.303, Florida Statutes, are 482 amended to read:

483 39.303 Child protection teams; services; eligible cases.-484 The Children's Medical Services Program in the Department of 485 Health shall develop, maintain, and coordinate the services of 486 one or more multidisciplinary child protection teams in each of 487 the service districts of the Department of Children and 488 Families. Such teams may be composed of appropriate 489 representatives of school districts and appropriate health, 490 mental health, social service, legal service, and law 491 enforcement agencies. The Department of Health and the 492 Department of Children and Families shall maintain an 493 interagency agreement that establishes protocols for oversight 494 and operations of child protection teams and sexual abuse 495 treatment programs. The State Surgeon General and the Deputy 496 Secretary for Children's Medical Services, in consultation with 497 the Secretary of Children and Families, shall maintain the 498 responsibility for the screening, employment, and, if necessary, 499 the termination of child protection team medical directors, at 500 headquarters and in the 15 districts. Child protection team 501 medical directors shall be responsible for oversight of the 502 teams in the districts.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 20 of 161

Bill No. HB 547 (2015)

Amendment No.

503 (3) All abuse and neglect cases transmitted for 504 investigation to a district by the hotline must be 505 simultaneously transmitted to the Department of Health child 506 protection team for review. For the purpose of determining 507 whether face-to-face medical evaluation by a child protection 508 team is necessary, all cases transmitted to the child protection 509 team which meet the criteria in subsection (2) must be timely 510 reviewed by:

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

516 (4) A face-to-face medical evaluation by a child 517 protection team is not necessary when:

518 The child was examined for the alleged abuse or (a) 519 neglect by a physician or an independent advanced practice 520 registered nurse who is not a member of the child protection 521 team, and a consultation between the child protection team 522 board-certified pediatrician, advanced practice registered nurse 523 practitioner, physician assistant working under the supervision 524 of a child protection team board-certified pediatrician, or 525 registered nurse working under the direct supervision of a child 526 protection team board-certified pediatrician, and the examining 527 practitioner physician concludes that a further medical 528 evaluation is unnecessary;

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 21 of 161

Bill No. HB 547 (2015)

Amendment No.

529	
530	Notwithstanding paragraphs (a), (b), and (c), a child protection
531	team pediatrician, as authorized in subsection (3), may
532	determine that a face-to-face medical evaluation is necessary.
533	Section 9. Paragraph (b) of subsection (1) of section
534	39.304, Florida Statutes, is amended to read:
535	39.304 Photographs, medical examinations, X rays, and
536	medical treatment of abused, abandoned, or neglected child
537	(1)
538	(b) If the areas of trauma visible on a child indicate a
539	need for a medical examination, or if the child verbally
540	complains or otherwise exhibits distress as a result of injury
541	through suspected child abuse, abandonment, or neglect, or is
542	alleged to have been sexually abused, the person required to
543	investigate may cause the child to be referred for diagnosis to
544	a licensed physician, an independent advanced practice
545	registered nurse, or an emergency department in a hospital
546	without the consent of the child's parents or legal custodian.
547	Such examination may be performed by <u>a</u> any licensed physician, a
548	physician assistant, a registered independent advanced practice
549	registered nurse, or <u>a certified</u> an advanced <u>practice</u> registered
550	nurse practitioner licensed pursuant to part I of chapter 464.
551	Any examining practitioner licensed physician, or advanced
552	registered nurse practitioner licensed pursuant to part I of
553	$rac{chapter 464_{m{ au}}}{m{ au}}$ who has reasonable cause to suspect that an injury
554	was the result of child abuse, abandonment, or neglect may
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Published On: 3/17/2015 5:45:31 PM

Page 22 of 161

Bill No. HB 547 (2015)

Amendment No.

authorize a radiological examination to be performed on the child without the consent of the child's parent or legal custodian.

558 Section 10. Paragraph (a) of subsection (1) of section 559 90.503, Florida Statutes, is amended to read:

560 561 90.503 Psychotherapist-patient privilege.-

(1) For purposes of this section:

562

(a) A "psychotherapist" is:

1. A person authorized to practice medicine in any state or nation, or reasonably believed by the patient so to be, who is engaged in the diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction;

2. A person licensed or certified as a psychologist under the laws of any state or nation, who is engaged primarily in the diagnosis or treatment of a mental or emotional condition, including alcoholism and other drug addiction;

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

4. Treatment personnel of facilities licensed by the state pursuant to chapter 394, chapter 395, or chapter 397, of facilities designated by the Department of Children and Families pursuant to chapter 394 as treatment facilities, or of

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 23 of 161

Bill No. HB 547 (2015)

Amendment No.

581 facilities defined as community mental health centers pursuant 582 to s. 394.907(1), who are engaged primarily in the diagnosis or 583 treatment of a mental or emotional condition, including 584 alcoholism and other drug addiction; or

585 5. An <u>independent advanced practice registered nurse or</u> advanced <u>practice</u> registered nurse practitioner certified under 587 s. 464.012, whose primary scope of practice is the diagnosis or 588 treatment of mental or emotional conditions, including chemical 589 abuse, and limited only to actions performed in accordance with 590 part I of chapter 464.

591 Section 11. Subsection (3) of section 110.12315, Florida 592 Statutes, as amended by chapter 2014-53, Laws of Florida, is 593 amended to read:

110.12315 Prescription drug program.—The state employees' prescription drug program is established. This program shall be administered by the Department of Management Services, according to the terms and conditions of the plan as established by the relevant provisions of the annual General Appropriations Act and implementing legislation, subject to the following conditions:

(3) The department of Management Services shall establish
the reimbursement schedule for prescription pharmaceuticals
dispensed under the program. Reimbursement rates for a
prescription pharmaceutical must be based on the cost of the
generic equivalent drug if a generic equivalent exists, unless
the <u>health care practitioner</u> physician prescribing the
pharmaceutical clearly states on the prescription that the brand

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 24 of 161

Bill No. HB 547 (2015)

Amendment No.

607	name drug is medically necessary or that the drug product is
608	included on the formulary of drug products that may not be
609	interchanged as provided in chapter 465, in which case
610	reimbursement must be based on the cost of the brand name drug
611	as specified in the reimbursement schedule adopted by the
612	department of Management Services .
613	Section 12. Paragraph (e) of subsection (8) of section
614	112.0455, Florida Statutes, is amended to read:
615	112.0455 Drug-Free Workplace Act
616	(8) PROCEDURES AND EMPLOYEE PROTECTIONAll specimen
617	collection and testing for drugs under this section shall be
618	performed in accordance with the following procedures:
619	(e) A specimen for a drug test may be taken or collected
620	by any of the following persons:
621	1. A physician, a physician physician's assistant, an
622	independent advanced practice registered nurse, an advanced
623	practice registered nurse, a registered professional nurse, a
624	licensed practical nurse, a nurse practitioner, or a certified
625	paramedic who is present at the scene of an accident for the
626	purpose of rendering emergency medical service or treatment.
627	2. A qualified person employed by a licensed laboratory.
628	Section 13. Paragraph (f) of subsection (3) of section
629	121.0515, Florida Statutes, is amended to read:
630	121.0515 Special Risk Class
631	(3) CRITERIAA member, to be designated as a special risk
632	member, must meet the following criteria:
-	706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 25 of 161

Bill No. HB 547

(2015)

Amendment No.

633 (f) Effective January 1, 2001, the member must be employed 634 in one of the following classes and must spend at least 75 635 percent of his or her time performing duties which involve 636 contact with patients or inmates in a correctional or forensic 637 facility or institution: 638 1. Dietitian (class codes 5203 and 5204); 639 2. Public health nutrition consultant (class code 5224); 640 3. Psychological specialist (class codes 5230 and 5231); 641 Psychologist (class code 5234); 4. 642 5. Senior psychologist (class codes 5237 and 5238); 6. 643 Regional mental health consultant (class code 5240); 644 7. Psychological Services Director-DCF (class code 5242); 645 8. Pharmacist (class codes 5245 and 5246); 646 9. Senior pharmacist (class codes 5248 and 5249); 647 10. Dentist (class code 5266); 648 11. Senior dentist (class code 5269); 649 12. Registered nurse (class codes 5290 and 5291); 650 13. Senior registered nurse (class codes 5292 and 5293); 651 14. Registered nurse specialist (class codes 5294 and 652 5295); Clinical associate (class codes 5298 and 5299); 653 15. 654 16. Advanced practice registered nurse practitioner (class 655 codes 5297 and 5300); 656 17. Advanced practice registered nurse practitioner 657 specialist (class codes 5304 and 5305); 706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 26 of 161

Bill No. HB 547

(2015)

Amendment No.

658 18. Registered nurse supervisor (class codes 5306 and 659 5307); 660 19. Senior registered nurse supervisor (class codes 5308 661 and 5309); 662 20. Registered nursing consultant (class codes 5312 and 663 5313); 664 21. Quality management program supervisor (class code 665 5314); 666 22. Executive nursing director (class codes 5320 and 5321); 667 668 23. Speech and hearing therapist (class code 5406); or 669 Pharmacy manager (class code 5251); 24. 670 Section 14. Paragraph (a) of subsection (3) of section 252.515, Florida Statutes, is amended to read: 671 672 252.515 Postdisaster Relief Assistance Act; immunity from 673 civil liability.-674 (3) As used in this section, the term: 675 "Emergency first responder" means: (a) 676 A physician licensed under chapter 458. 1. 677 An osteopathic physician licensed under chapter 459. 2. 678 3. A chiropractic physician licensed under chapter 460. 679 A podiatric physician licensed under chapter 461. 4. 5. A dentist licensed under chapter 466. 680 681 6. An advanced practice registered nurse practitioner certified under s. 464.012. 682 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 27 of 161

Bill No. HB 547

(2015)

Amendment No.

683 7. A physician assistant licensed under s. 458.347 or s. 684 459.022. 685 8. A worker employed by a public or private hospital in 686 the state. 687 9. A paramedic as defined in s. 401.23(17). 688 10. An emergency medical technician as defined in s. 401.23(11). 689 690 11. A firefighter as defined in s. 633.102. 691 12. A law enforcement officer as defined in s. 943.10. 692 13. A member of the Florida National Guard. 693 Any other personnel designated as emergency personnel 14. 694 by the Governor pursuant to a declared emergency. 695 Section 15. Paragraph (c) of subsection (1) of section 310.071, Florida Statutes, is amended to read: 696 697 310.071 Deputy pilot certification.-698 (1)In addition to meeting other requirements specified in 699 this chapter, each applicant for certification as a deputy pilot 700 must: 701 Be in good physical and mental health, as evidenced by (C) 702 documentary proof of having satisfactorily passed a complete 703 physical examination administered by a licensed physician, 704 licensed physician assistant, or registered independent advanced 705 practice registered nurse within the preceding 6 months. The 706 board shall adopt rules to establish requirements for passing 707 the physical examination, which rules shall establish minimum 708 standards for the physical or mental capabilities necessary to 706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 28 of 161

Amendment No.

Bill No. HB 547 (2015)

709 carry out the professional duties of a certificated deputy 710 pilot. Such standards shall include zero tolerance for any 711 controlled substance regulated under chapter 893 unless that 712 individual is under the care of a physician, a physician 713 assistant, an independent advanced practice registered nurse, or 714 an advanced practice registered nurse and that controlled 715 substance was prescribed by that physician, physician assistant, 716 independent advanced practice registered nurse, or advanced 717 practice registered nurse. To maintain eligibility as a 718 certificated deputy pilot, each certificated deputy pilot must 719 annually provide documentary proof of having satisfactorily 720 passed a complete physical examination administered by a 721 licensed physician, licensed physician assistant, or registered 722 independent advanced practice registered nurse. The examining 723 practitioner physician must know the minimum standards and 724 certify that the certificateholder satisfactorily meets the 725 standards. The standards for certificateholders shall include a 726 drug test.

Section 16. Subsection (3) of section 310.073, FloridaStatutes, is amended to read:

729 310.073 State pilot licensing.—In addition to meeting 730 other requirements specified in this chapter, each applicant for 731 license as a state pilot must:

(3) Be in good physical and mental health, as evidenced by
documentary proof of having satisfactorily passed a complete
physical examination administered by a licensed physician,

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 29 of 161

Bill No. HB 547

(2015)

Amendment No.

735 licensed physician assistant, or registered independent advanced 736 practice registered nurse within the preceding 6 months. The 737 board shall adopt rules to establish requirements for passing 738 the physical examination, which rules shall establish minimum 739 standards for the physical or mental capabilities necessary to 740 carry out the professional duties of a licensed state pilot. Such standards shall include zero tolerance for any controlled 741 742 substance regulated under chapter 893 unless that individual is 743 under the care of a physician, a physician assistant, an 744 independent advanced practice registered nurse, or an advanced 745 practice registered nurse and that controlled substance was prescribed by that physician, physician assistant, independent 746 747 advanced practice registered nurse, or advanced practice 748 registered nurse. To maintain eligibility as a licensed state 749 pilot, each licensed state pilot must annually provide 750 documentary proof of having satisfactorily passed a complete 751 physical examination administered by a licensed physician, 752 licensed physician assistant, or registered independent advanced 753 practice registered nurse. The examining practitioner physician 754 must know the minimum standards and certify that the licensee 755 satisfactorily meets the standards. The standards for licensees 756 shall include a drug test.

757 Section 17. Paragraph (b) of subsection (3) of section758 310.081, Florida Statutes, is amended to read:

759 310.081 Department to examine and license state pilots and760 certificate deputy pilots; vacancies.-

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 30 of 161

Bill No. HB 547

(2015)

Amendment No.

761 (3) Pilots shall hold their licenses or certificates 762 pursuant to the requirements of this chapter so long as they: 763 (b) Are in good physical and mental health as evidenced by 764 documentary proof of having satisfactorily passed a physical 765 examination administered by a licensed physician, an independent 766 advanced practice registered nurse, or a physician assistant 767 within each calendar year. The board shall adopt rules to establish requirements for passing the physical examination, 768 769 which rules shall establish minimum standards for the physical 770 or mental capabilities necessary to carry out the professional 771 duties of a licensed state pilot or a certificated deputy pilot. 772 Such standards shall include zero tolerance for any controlled 773 substance regulated under chapter 893 unless that individual is under the care of a physician, a physician assistant, an 774 775 independent advanced practice registered nurse, or an advanced 776 practice registered nurse and that controlled substance was 777 prescribed by that physician, physician assistant, independent 778 advanced practice registered nurse, or advanced practice 779 registered nurse. To maintain eligibility as a certificated 780 deputy pilot or licensed state pilot, each certificated deputy 781 pilot or licensed state pilot must annually provide documentary 782 proof of having satisfactorily passed a complete physical 783 examination administered by a licensed physician, licensed 784 physician assistant, or registered independent advanced practice registered nurse. The physician, physician assistant, or 785 786 independent advanced practice registered nurse must know the 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 31 of 161

Bill No. HB 547 (2015)

Amendment No.

787 minimum standards and certify that the certificateholder or 788 licensee satisfactorily meets the standards. The standards for 789 certificateholders and for licensees shall include a drug test. 790

791 Upon resignation or in the case of disability permanently 792 affecting a pilot's ability to serve, the state license or 793 certificate issued under this chapter shall be revoked by the 794 department.

795 Section 18. Paragraph (b) of subsection (1) of section796 320.0848, Florida Statutes, is amended to read:

797 320.0848 Persons who have disabilities; issuance of 798 disabled parking permits; temporary permits; permits for certain 799 providers of transportation services to persons who have 800 disabilities.-

(1)

801

(b)1. The person must be currently certified as being legally blind or as having any of the following disabilities that render him or her unable to walk 200 feet without stopping to rest:

a. Inability to walk without the use of or assistance from a brace, cane, crutch, prosthetic device, or other assistive device, or without the assistance of another person. If the assistive device significantly restores the person's ability to walk to the extent that the person can walk without severe limitation, the person is not eligible for the exemption parking permit.

706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 32 of 161

Bill No. HB 547 (2015)

Amendment No.

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.

819

813

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.

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

826 2. The certification of disability which is required under 827 subparagraph 1. must be provided by a physician licensed under 828 chapter 458, chapter 459, or chapter 460; - by a podiatric 829 physician licensed under chapter 461; - by an optometrist licensed under chapter 463; - by an independent advanced practice 830 registered nurse registered, or an advanced practice registered 831 832 nurse certified, practitioner licensed under part I of chapter 833 464; under the protocol of a licensed physician as stated in 834 this subparagraph, by a physician assistant licensed under 835 chapter 458 or chapter 459; $_{\tau}$ or by a similarly licensed 836 physician from another state if the application is accompanied 837 by documentation of the physician's licensure in the other state

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 33 of 161

Amendment No.

Bill No. HB 547 (2015)

838 and a form signed by the out-of-state physician verifying his or 839 her knowledge of this state's eligibility guidelines.

840 Section 19. Paragraph (b) of subsection (1) of section 841 381.00315, Florida Statutes, is amended to read:

842 381.00315 Public health advisories; public health 843 emergencies; quarantines.—The State Health Officer is 844 responsible for declaring public health emergencies and 845 quarantines and issuing public health advisories.

846

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

847 (b) "Public health emergency" means any occurrence, or threat thereof, whether natural or man made, which results or 848 849 may result in substantial injury or harm to the public health 850 from infectious disease, chemical agents, nuclear agents, 851 biological toxins, or situations involving mass casualties or 852 natural disasters. Prior to declaring a public health emergency, 853 the State Health Officer shall, to the extent possible, consult 854 with the Governor and shall notify the Chief of Domestic 855 Security. The declaration of a public health emergency shall 856 continue until the State Health Officer finds that the threat or 857 danger has been dealt with to the extent that the emergency 858 conditions no longer exist and he or she terminates the 859 declaration. However, a declaration of a public health emergency 860 may not continue for longer than 60 days unless the Governor 861 concurs in the renewal of the declaration. The State Health 862 Officer, upon declaration of a public health emergency, may take

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 34 of 161

Bill No. HB 547 (2015)

Amendment No.

863 actions that are necessary to protect the public health. Such 864 actions include, but are not limited to:

865 Directing manufacturers of prescription drugs or over-1. 866 the-counter drugs who are permitted under chapter 499 and 867 wholesalers of prescription drugs located in this state who are 868 permitted under chapter 499 to give priority to the shipping of specified drugs to pharmacies and health care providers within 869 870 geographic areas that have been identified by the State Health 871 Officer. The State Health Officer must identify the drugs to be 872 shipped. Manufacturers and wholesalers located in the state must 873 respond to the State Health Officer's priority shipping 874 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.

3. Notwithstanding s. 456.036, temporarily reactivating the inactive license of the following health care practitioners, when such practitioners are needed to respond to the public health emergency: physicians licensed under chapter 458 or chapter 459; physician assistants licensed under chapter 458 or chapter 459; <u>independent advanced practice registered nurses</u> registered, licensed practical nurses or, registered nurses

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 35 of 161

Bill No. HB 547

(2015)

Amendment No.

889 licensed, and advanced practice registered nurses certified 890 nurse practitioners licensed under part I of chapter 464; 891 respiratory therapists licensed under part V of chapter 468; and 892 emergency medical technicians and paramedics certified under 893 part III of chapter 401. Only those health care practitioners 894 specified in this paragraph who possess an unencumbered inactive 895 license and who request that such license be reactivated are 896 eligible for reactivation. An inactive license that is 897 reactivated under this paragraph shall return to inactive status 898 when the public health emergency ends or prior to the end of the 899 public health emergency if the State Health Officer determines 900 that the health care practitioner is no longer needed to provide 901 services during the public health emergency. Such licenses may 902 only be reactivated for a period not to exceed 90 days without 903 meeting the requirements of s. 456.036 or chapter 401, as 904 applicable.

905 4. Ordering an individual to be examined, tested, 906 vaccinated, treated, or quarantined for communicable diseases 907 that have significant morbidity or mortality and present a 908 severe danger to public health. Individuals who are unable or 909 unwilling to be examined, tested, vaccinated, or treated for 910 reasons of health, religion, or conscience may be subjected to 911 quarantine.

a. Examination, testing, vaccination, or treatment may be
performed by any qualified person authorized by the State Health
Officer.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 36 of 161
Bill No. HB 547 (2015)

Amendment No.

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915 b. If the individual poses a danger to the public health, 916 the State Health Officer may subject the individual to 917 quarantine. If there is no practical method to quarantine the 918 individual, the State Health Officer may use any means necessary 919 to vaccinate or treat the individual.

921 Any order of the State Health Officer given to effectuate this 922 paragraph shall be immediately enforceable by a law enforcement 923 officer under s. 381.0012.

924 Section 20. Subsection (3) of section 381.00593, Florida 925 Statutes, is amended to read:

926 381.00593 Public school volunteer health care practitioner 927 program.-

928 For purposes of this section, the term "health care (3) 929 practitioner" means a physician or physician assistant licensed 930 under chapter 458; an osteopathic physician or physician 931 assistant licensed under chapter 459; a chiropractic physician 932 licensed under chapter 460; a podiatric physician licensed under 933 chapter 461; an optometrist licensed under chapter 463; an 934 independent advanced practice registered nurse registered, an 935 advanced practice registered nurse certified practitioner, or a 936 registered nurse, or licensed practical nurse licensed under 937 part I of chapter 464; a pharmacist licensed under chapter 465; 938 a dentist or dental hygienist licensed under chapter 466; a 939 midwife licensed under chapter 467; a speech-language pathologist or audiologist licensed under part I of chapter 468; 940

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 37 of 161

Bill No. HB 547 (2015)

Amendment No.

941	a dietitian/nutritionist licensed under part X of chapter 468;
942	or a physical therapist licensed under chapter 486.
943	Section 21. Paragraph (c) of subsection (2) of section
944	381.026, Florida Statutes, is amended to read:
945	381.026 Florida Patient's Bill of Rights and
946	Responsibilities
947	(2) DEFINITIONS.—As used in this section and s. 381.0261,
948	the term:
949	(c) "Health care provider" means a physician <u>or physician</u>
950	assistant licensed under chapter 458, an osteopathic physician
951	<u>or physician assistant</u> licensed under chapter 459, or a
952	podiatric physician licensed under chapter 461 <u>, or an</u>
953	independent advanced practice registered nurse registered under
954	part I of chapter 464.
955	Section 22. Paragraph (a) of subsection (2) and
956	subsections (3) through (5) of section 382.008, Florida
957	Statutes, are amended to read:
958	382.008 Death and fetal death registration
959	(2)(a) The funeral director who first assumes custody of a
960	dead body or fetus shall file the certificate of death or fetal
961	death. In the absence of the funeral director, the physician <u>,</u>
962	physician assistant, independent advanced practice registered
963	nurse, advanced practice registered nurse, or other person in
964	attendance at or after the death or the district medical
965	examiner of the county in which the death occurred or the body
966	was found shall file the certificate of death or fetal death.
	706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 38 of 161

Amendment No.

Bill No. HB 547 (2015)

967 The person who files the certificate shall obtain personal data 968 from the next of kin or the best qualified person or source available. The medical certification of cause of death shall be 969 furnished to the funeral director, either in person or via 970 971 certified mail or electronic transfer, by the physician, 972 physician assistant, independent advanced practice registered 973 nurse, advanced practice registered nurse, or medical examiner 974 responsible for furnishing such information. For fetal deaths, 975 the physician, certified nurse midwife, midwife, or hospital 976 administrator shall provide any medical or health information to 977 the funeral director within 72 hours after expulsion or 978 extraction.

979 (3) Within 72 hours after receipt of a death or fetal 980 death certificate from the funeral director, the medical 981 certification of cause of death shall be completed and made 982 available to the funeral director by the decedent's primary or 983 attending practitioner physician or, if s. 382.011 applies, the 984 district medical examiner of the county in which the death 985 occurred or the body was found. The primary or attending 986 practitioner physician or the medical examiner shall certify 987 over his or her signature the cause of death to the best of his 988 or her knowledge and belief. As used in this section, the term 989 "primary or attending practitioner physician" means a physician, 990 a physician assistant, an independent advanced practice registered nurse, or an advanced practice registered nurse, who 991

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 39 of 161

Bill No. HB 547 (2015)

Amendment No.

992 treated the decedent through examination, medical advice, or 993 medication during the 12 months preceding the date of death.

(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:

997

1. An autopsy is pending.

998 2. Toxicology, laboratory, or other diagnostic reports999 have not been completed.

1000 3. The identity of the decedent is unknown and further 1001 investigation or identification is required.

1002 If the decedent's primary or attending practitioner, (b) 1003 physician or the district medical examiner of the county in 1004 which the death occurred or the body was found, indicates that 1005 he or she will sign and complete the medical certification of 1006 cause of death but will not be available until after the 5-day registration deadline, the local registrar may grant an 1007 1008 extension of 5 days. If a further extension is required, the 1009 funeral director must provide written justification to the 1010 registrar.

1011 (4) If the department or local registrar grants an
1012 extension of time to provide the medical certification of cause
1013 of death, the funeral director shall file a temporary
1014 certificate of death or fetal death which shall contain all
1015 available information, including the fact that the cause of
1016 death is pending. The decedent's primary or attending
1017 practitioner physician or the district medical examiner of the

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 40 of 161

Bill No. HB 547

(2015)

Amendment No.

1018 county in which the death occurred or the body was found shall 1019 provide an estimated date for completion of the permanent 1020 certificate.

(5) A permanent certificate of death or fetal death, 1021 1022 containing the cause of death and any other information that was 1023 previously unavailable, shall be registered as a replacement for 1024 the temporary certificate. The permanent certificate may also 1025 include corrected information if the items being corrected are 1026 noted on the back of the certificate and dated and signed by the 1027 funeral director, physician, physician assistant, independent advanced practice registered nurse, advanced practice registered 1028 1029 nurse, or district medical examiner of the county in which the 1030 death occurred or the body was found, as appropriate.

1031 Section 23. Paragraph (c) of subsection (1) of section 1032 383.14, Florida Statutes, is amended to read:

1033383.14Screening for metabolic disorders, other hereditary1034and congenital disorders, and environmental risk factors.-

(1)1035 SCREENING REQUIREMENTS.-To help ensure access to the 1036 maternal and child health care system, the Department of Health 1037 shall promote the screening of all newborns born in Florida for 1038 metabolic, hereditary, and congenital disorders known to result in significant impairment of health or intellect, as screening 1039 1040 programs accepted by current medical practice become available 1041 and practical in the judgment of the department. The department 1042 shall also promote the identification and screening of all newborns in this state and their families for environmental risk 1043

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 41 of 161

Amendment No.

Bill No. HB 547 (2015)

1044 factors such as low income, poor education, maternal and family 1045 stress, emotional instability, substance abuse, and other high-1046 risk conditions associated with increased risk of infant 1047 mortality and morbidity to provide early intervention, 1048 remediation, and prevention services, including, but not limited 1049 to, parent support and training programs, home visitation, and 1050 case management. Identification, perinatal screening, and 1051 intervention efforts shall begin prior to and immediately following the birth of the child by the attending health care 1052 1053 provider. Such efforts shall be conducted in hospitals, 1054 perinatal centers, county health departments, school health 1055 programs that provide prenatal care, and birthing centers, and 1056 reported to the Office of Vital Statistics.

1057 Release of screening results.-Notwithstanding any law (C) 1058 to the contrary, the State Public Health Laboratory may release, directly or through the Children's Medical Services program, the 1059 1060 results of a newborn's hearing and metabolic tests or screenings to the newborn's health care practitioner. As used in this 1061 paragraph, the term "health care practitioner" means a physician 1062 1063 or physician assistant licensed under chapter 458; an 1064 osteopathic physician or physician assistant licensed under chapter 459; an independent advanced practice registered nurse 1065 1066 registered, an advanced practice registered nurse certified 1067 practitioner, or a registered nurse τ or licensed practical nurse 1068 licensed under part I of chapter 464; a midwife licensed under chapter 467; a speech-language pathologist or audiologist 1069

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 42 of 161

Bill No. HB 547 (2015)

Amendment No.

	Allendhent No.	
1070	licensed under part I of chapter 468; or a dietician or	
1071	nutritionist licensed under part X of chapter 468.	
1072	Section 24. Paragraph (c) of subsection (1) of section	
1073	383.141, Florida Statutes, is amended to read:	
1074	383.141 Prenatally diagnosed conditions; patient to be	
1075	provided information; definitions; information clearinghouse;	
1076	advisory council	
1077	(1) As used in this section, the term:	
1078	(c) "Health care provider" means a practitioner licensed	
1079	or registered under chapter 458 or chapter 459 <u>, or an</u>	
1080	independent advanced practice registered nurse registered, or an	
1081	advanced <u>practice</u> registered nurse practitioner certified <u>,</u> under	
1082	<u>part I of</u> chapter 464.	
1083	Section 25. Paragraph (a) of subsection (3) of section	
1084	390.0111, Florida Statutes, is amended to read:	
1085	390.0111 Termination of pregnancies	
1086	(3) CONSENTS REQUIREDA termination of pregnancy may not	
1087	be performed or induced except with the voluntary and informed	
1088	written consent of the pregnant woman or, in the case of a	
1089	mental incompetent, the voluntary and informed written consent	
1090	of her court-appointed guardian.	
1091	(a) Except in the case of a medical emergency, consent to	
1092	a termination of pregnancy is voluntary and informed only if:	
1093	1. The physician who is to perform the procedure, or the	
1094	referring physician, has, at a minimum, orally, in person,	
1095	informed the woman of:	
 706771 - h0547-strike.docx		
Published On: 3/17/2015 5:45:31 PM		

Page 43 of 161

Bill No. HB 547 (2015)

Amendment No.

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.

1108 The person performing the ultrasound must offer the (II)1109 woman the opportunity to view the live ultrasound images and hear an explanation of them. If the woman accepts the 1110 opportunity to view the images and hear the explanation, a 1111 1112 physician or a registered nurse, a licensed practical nurse, an advanced practice registered nurse practitioner, an independent 1113 advanced practice registered nurse, or a physician assistant 1114 working in conjunction with the physician must contemporaneously 1115 1116 review and explain the images to the woman before the woman gives informed consent to having an abortion procedure 1117 1118 performed.

(III) The woman has a right to decline to view and hear the explanation of the live ultrasound images after she is informed of her right and offered an opportunity to view the

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 44 of 161

Bill No. HB 547

(2015)

Amendment No.

1122 images and hear the explanation. If the woman declines, the 1123 woman shall complete a form acknowledging that she was offered 1124 an opportunity to view and hear the explanation of the images but that she declined that opportunity. The form must also 1125 1126 indicate that the woman's decision was not based on any undue 1127 influence from any person to discourage her from viewing the 1128 images or hearing the explanation and that she declined of her 1129 own free will.

Unless requested by the woman, the person performing 1130 (IV) 1131 the ultrasound may not offer the opportunity to view the images and hear the explanation and the explanation may not be given 1132 1133 if, at the time the woman schedules or arrives for her 1134 appointment to obtain an abortion, a copy of a restraining 1135 order, police report, medical record, or other court order or 1136 documentation is presented which provides evidence that the woman is obtaining the abortion because the woman is a victim of 1137 1138 rape, incest, domestic violence, or human trafficking or that the woman has been diagnosed as having a condition that, on the 1139 basis of a physician's good faith clinical judgment, would 1140 1141 create a serious risk of substantial and irreversible impairment of a major bodily function if the woman delayed terminating her 1142 1143 pregnancy.

1144 c. The medical risks to the woman and fetus of carrying 1145 the pregnancy to term.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 45 of 161

Bill No. HB 547 (2015)

Amendment No.

1146 2. Printed materials prepared and provided by the 1147 department have been provided to the pregnant woman, if she 1148 chooses to view these materials, including: a. A description of the fetus, including a description of 1149 1150 the various stages of development. 1151 A list of entities that offer alternatives to b. 1152 terminating the pregnancy. 1153 Detailed information on the availability of medical с. 1154 assistance benefits for prenatal care, childbirth, and neonatal 1155 care. 1156 3. The woman acknowledges in writing, before the 1157 termination of pregnancy, that the information required to be 1158 provided under this subsection has been provided. 1159 1160 Nothing in this paragraph is intended to prohibit a physician from providing any additional information which the physician 1161 1162 deems material to the woman's informed decision to terminate her 1163 pregnancy. Section 26. Paragraphs (c), (e), and (f) of subsection (3) 1164 of section 390.012, Florida Statutes, are amended to read: 1165 1166 390.012 Powers of agency; rules; disposal of fetal remains.-1167 For clinics that perform or claim to perform abortions 1168 (3) 1169 after the first trimester of pregnancy, the agency shall adopt 1170 rules pursuant to ss. 120.536(1) and 120.54 to implement the provisions of this chapter, including the following: 1171 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 46 of 161

Bill No. HB 547 (2015)

Amendment No.

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

1174 1. The abortion clinic designate a medical director who is 1175 licensed to practice medicine in this state and who has 1176 admitting privileges at a licensed hospital in this state or has 1177 a transfer agreement with a licensed hospital within reasonable 1178 proximity of the clinic.

1179 2. If a physician is not present after an abortion is 1180 performed, a registered nurse, <u>a</u> licensed practical nurse, <u>an</u> 1181 advanced <u>practice</u> registered nurse practitioner, <u>an independent</u> 1182 <u>advanced practice registered nurse</u>, or <u>a</u> physician assistant 1183 shall be present and remain at the clinic to provide 1184 postoperative monitoring and care until the patient is 1185 discharged.

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

1189 4. Volunteers receive training in the specific 1190 responsibilities associated with the services the volunteers 1191 provide, including counseling and patient advocacy as provided 1192 in the rules adopted by the director for different types of 1193 volunteers based on their responsibilities.

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

1196 1. That a physician, <u>a</u> registered nurse, <u>a</u> licensed 1197 practical nurse, <u>an</u> advanced <u>practice</u> registered nurse

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 47 of 161

Bill No. HB 547

(2015)

Amendment No.

1198 practitioner, an independent advanced practice registered nurse, 1199 or <u>a</u> physician assistant is available to all patients throughout 1200 the abortion procedure.

1201 2. Standards for the safe conduct of abortion procedures 1202 that conform to obstetric standards in keeping with established 1203 standards of care regarding the estimation of fetal age as 1204 defined in rule.

1205 3. Appropriate use of general and local anesthesia,1206 analgesia, and sedation if ordered by the physician.

1207 4. Appropriate precautions, such as the establishment of 1208 intravenous access at least for patients undergoing post-first 1209 trimester abortions.

1210 5. Appropriate monitoring of the vital signs and other 1211 defined signs and markers of the patient's status throughout the 1212 abortion procedure and during the recovery period until the 1213 patient's condition is deemed to be stable in the recovery room.

1214 (f) Rules that prescribe minimum recovery room standards.1215 At a minimum, these rules shall require that:

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

1218 2. Immediate postprocedure care consists of observation in 1219 a supervised recovery room for as long as the patient's 1220 condition warrants.

3. The clinic arranges hospitalization if any complication
beyond the medical capability of the staff occurs or is
suspected.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 48 of 161

Bill No. HB 547 (2015)

Amendment No.

4. A registered nurse, <u>a</u> licensed practical nurse, <u>an</u>
advanced <u>practice</u> registered nurse practitioner, <u>an independent</u>
<u>advanced practice registered nurse</u>, or <u>a</u> 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.

1231 5. A physician shall sign the discharge order and be 1232 readily accessible and available until the last patient is 1233 discharged to facilitate the transfer of emergency cases if 1234 hospitalization of the patient or viable fetus is necessary.

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

1242 7. Written instructions with regard to postabortion 1243 coitus, signs of possible problems, and general aftercare are 1244 given to each patient. Each patient shall have specific written 1245 instructions regarding access to medical care for complications, 1246 including a telephone number to call for medical emergencies.

1247 8. There is a specified minimum length of time that a 1248 patient remains in the recovery room by type of abortion 1249 procedure and duration of gestation.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 49 of 161

Bill No. HB 547 (2015)

Amendment No.

9. The physician ensures that a registered nurse, <u>a</u> licensed practical nurse, <u>an</u> advanced <u>practice</u> registered nurse practitioner, <u>an independent advanced practice registered nurse</u>, or <u>a</u> 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.

1257 10. Equipment and services are readily accessible to 1258 provide appropriate emergency resuscitative and life support 1259 procedures pending the transfer of the patient or viable fetus 1260 to the hospital.

1261 Section 27. Subsection (23) of section 394.455, Florida
1262 Statutes, is amended to read:

1263 394.455 Definitions.—As used in this part, unless the 1264 context clearly requires otherwise, the term:

1265 "Psychiatric nurse" means a registered nurse licensed (23)1266 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 1267 clinical experience under the supervision of a physician, or an 1268 1269 independent advanced practice registered nurse registered under, 1270 or an advanced practice registered nurse certified under, part I 1271 of chapter 464, who obtains national certification as a 1272 psychiatric-mental health advanced practice nurse.

Section 28. Paragraphs (a) and (f) of subsection (2) of section 394.463, Florida Statutes, are amended to read: 394.463 Involuntary examination.—

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 50 of 161

Bill No. HB 547 (2015)

Amendment No.

1276

(2) INVOLUNTARY EXAMINATION.-

1277 (a) An involuntary examination may be initiated by any one1278 of the following means:

1279 1. A court may enter an ex parte order stating that a 1280 person appears to meet the criteria for involuntary examination, 1281 giving the findings on which that conclusion is based. The ex 1282 parte order for involuntary examination must be based on sworn 1283 testimony, written or oral. If other less restrictive means are 1284 not available, such as voluntary appearance for outpatient 1285 evaluation, a law enforcement officer, or other designated agent 1286 of the court, shall take the person into custody and deliver him 1287 or her to the nearest receiving facility for involuntary 1288 examination. The order of the court shall be made a part of the 1289 patient's clinical record. No fee shall be charged for the 1290 filing of an order under this subsection. Any receiving facility 1291 accepting the patient based on this order must send a copy of 1292 the order to the Agency for Health Care Administration on the next working day. The order shall be valid only until executed 1293 1294 or, if not executed, for the period specified in the order 1295 itself. If no time limit is specified in the order, the order 1296 shall be valid for 7 days after the date that the order was 1297 signed.

1298 2. A law enforcement officer shall take a person who 1299 appears to meet the criteria for involuntary examination into 1300 custody and deliver the person or have him or her delivered to 1301 the nearest receiving facility for examination. The officer

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 51 of 161

Bill No. HB 547

(2015)

Amendment No.

1302 shall execute a written report detailing the circumstances under 1303 which the person was taken into custody, and the report shall be 1304 made a part of the patient's clinical record. Any receiving 1305 facility accepting the patient based on this report must send a 1306 copy of the report to the Agency for Health Care Administration 1307 on the next working day.

1308 3. A physician, a physician assistant, a clinical 1309 psychologist, a psychiatric nurse, an independent advanced practice registered nurse, an advanced practice registered 1310 1311 nurse, a mental health counselor, a marriage and family 1312 therapist, or a clinical social worker may execute a certificate 1313 stating that he or she has examined a person within the 1314 preceding 48 hours and finds that the person appears to meet the 1315 criteria for involuntary examination and stating the 1316 observations upon which that conclusion is based. If other less 1317 restrictive means are not available, such as voluntary 1318 appearance for outpatient evaluation, a law enforcement officer shall take the person named in the certificate into custody and 1319 deliver him or her to the nearest receiving facility for 1320 1321 involuntary examination. The law enforcement officer shall 1322 execute a written report detailing the circumstances under which the person was taken into custody. The report and certificate 1323 shall be made a part of the patient's clinical record. Any 1324 1325 receiving facility accepting the patient based on this 1326 certificate must send a copy of the certificate to the Agency 1327 for Health Care Administration on the next working day.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 52 of 161

Bill No. HB 547

(2015)

Amendment No.

1328 (f) A patient shall be examined by a physician, physician 1329 assistant, or clinical psychologist, or psychiatric nurse at a 1330 receiving facility without unnecessary delay and may, upon the order of a physician, be given emergency treatment if it is 1331 1332 determined that such treatment is necessary for the safety of 1333 the patient or others. The patient may not be released by the 1334 receiving facility or its contractor without the documented approval of a psychiatrist, a clinical psychologist, or 1335 psychiatric nurse, or, if the receiving facility is a hospital, 1336 1337 the release may also be approved by an attending emergency 1338 department physician with experience in the diagnosis and 1339 treatment of mental and nervous disorders and after completion 1340 of an involuntary examination pursuant to this subsection. 1341 However, a patient may not be held in a receiving facility for 1342 involuntary examination longer than 72 hours.

1343 Section 29. Paragraphs (a) and (b) of subsection (2) and 1344 subsection (4) of section 395.0191, Florida Statutes, are 1345 amended to read:

395.0191 Staff membership and clinical privileges.-1346 1347 (2) (a) Each licensed facility shall establish rules and 1348 procedures for consideration of an application for clinical privileges submitted by an independent advanced practice 1349 1350 registered nurse registered, or an advanced practice registered 1351 nurse practitioner licensed and certified, under part I of 1352 chapter 464, in accordance with the provisions of this section. A No licensed facility may not shall deny such application 1353

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 53 of 161

Bill No. HB 547

(2015)

Amendment No.

1354 solely because the applicant is <u>registered or certified</u> licensed 1355 under part I of chapter 464 or because the applicant is not a 1356 participant in the Florida Birth-Related Neurological Injury 1357 Compensation Plan.

An advanced practice registered nurse practitioner who 1358 (b) 1359 is a certified as a registered nurse anesthetist licensed under part I of chapter 464 shall administer anesthesia under the 1360 1361 onsite medical direction of a professional licensed under chapter 458, chapter 459, or chapter 466, and in accordance with 1362 1363 an established protocol approved by the medical staff. The 1364 medical direction shall specifically address the needs of the individual patient. This paragraph does not apply to an 1365 1366 independent advanced practice registered nurse who is a 1367 certified registered nurse anesthetist under part I of chapter 1368 464.

1369 Nothing herein shall restrict in any way the authority (4) 1370 of the medical staff of a licensed facility to review for 1371 approval or disapproval all applications for appointment and reappointment to all categories of staff and to make 1372 1373 recommendations on each applicant to the governing board, 1374 including the delineation of privileges to be granted in each case. In making such recommendations and in the delineation of 1375 1376 privileges, each applicant shall be considered individually 1377 pursuant to criteria for a doctor licensed under chapter 458, 1378 chapter 459, chapter 461, or chapter 466; τ or for an independent 1379 advanced practice registered nurse registered, or an advanced

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 54 of 161

Bill No. HB 547 (2015)

Amendment No.

1380 practice registered nurse practitioner licensed and certified, 1381 under part I of chapter 464; τ or for a psychologist licensed 1382 under chapter 490, as applicable. The applicant's eligibility 1383 for staff membership or clinical privileges shall be determined 1384 by the applicant's background, experience, health, training, and 1385 demonstrated competency; the applicant's adherence to applicable 1386 professional ethics; the applicant's reputation; and the 1387 applicant's ability to work with others and by such other elements as determined by the governing board, consistent with 1388 1389 this part.

Section 30. Subsection (3) of section 395.602, Florida
Statutes, is amended to read:

1392

395.602 Rural hospitals.-

1393 USE OF FUNDS.-It is the intent of the Legislature that (3) 1394 funds as appropriated shall be utilized by the department for 1395 the purpose of increasing the number of primary care physicians, 1396 physician assistants, certified nurse midwives, certified nurse practitioners, and nurses in rural areas, either through the 1397 1398 Medical Education Reimbursement and Loan Repayment Program as 1399 defined by s. 1009.65 or through a federal loan repayment 1400 program which requires state matching funds. The department may use funds appropriated for the Medical Education Reimbursement 1401 1402 and Loan Repayment Program as matching funds for federal loan 1403 repayment programs for health care personnel, such as that authorized in Pub. L. No. 100-177, s. 203. If the department 1404 1405 receives federal matching funds, the department shall only

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 55 of 161

Bill No. HB 547

(2015)

Amendment No.

1422

1406 implement the federal program. Reimbursement through either 1407 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:

1417 1. In a county with a population density of no greater 1418 than 100 persons per square mile; or

1419 2. Within the boundaries of a hospital tax district which 1420 encompasses a population of no greater than 100 persons per 1421 square mile.

1423 If the department administers a federal loan repayment program, priority shall be given to obligating state and federal matching 1424 1425 funds pursuant to paragraphs (a) and (b). The department may use 1426 federal matching funds in other health workforce shortage areas and medically underserved areas in the state for loan repayment 1427 programs for primary care physicians, physician assistants, 1428 1429 certified nurse midwives, certified nurse practitioners, and 1430 nurses who are employed by publicly financed health care 1431 programs that serve medically indigent persons.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 56 of 161

Bill No. HB 547 (2015)

Amendment No.

1432 Section 31. Paragraphs (b) and (c) of subsection (8) of 1433 section 395.605, Florida Statutes, are amended to read: 1434 395.605 Emergency care hospitals.-1435 (8) 1436 All patients shall be under the care of a physician or (b) 1437 an independent advanced practice registered nurse or under the 1438 care of an advanced practice registered a nurse practitioner or 1439 physician assistant supervised by a physician. 1440 A physician, an independent advanced practice (C) 1441 registered nurse, an advanced practice registered nurse practitioner, or a physician assistant shall be on duty at all 1442 1443 times, or a physician shall be on call and available within 30 1444 minutes at all times. 1445 Section 32. Subsection (26) of section 397.311, Florida 1446 Statutes, is amended to read: 1447 397.311 Definitions.-As used in this chapter, except part 1448 VIII, the term: "Qualified professional" means a physician or a 1449 (26)physician assistant licensed under chapter 458 or chapter 459; a 1450 1451 professional licensed under chapter 490 or chapter 491; an 1452 independent advanced practice registered nurse or advanced practice registered nurse, who has practitioner having a 1453 1454 specialty in psychiatry and is registered or certified licensed 1455 under part I of chapter 464; or a person who is certified 1456 through a department-recognized certification process for substance abuse treatment services and who holds, at a minimum, 1457 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 57 of 161

Bill No. HB 547 (2015)

Amendment No. 1458 a bachelor's degree. A person who is certified in substance 1459 abuse treatment services by a state-recognized certification 1460 process in another state at the time of employment with a 1461 licensed substance abuse provider in this state may perform the 1462 functions of a qualified professional as defined in this chapter 1463 but must meet certification requirements contained in this 1464 subsection no later than 1 year after his or her date of 1465 employment. 1466 Section 33. Section 397.405, Florida Statutes, is amended 1467 to read: 1468 397.405 Exemptions from licensure.-The following are 1469 exempt from the licensing provisions of this chapter: 1470 (1) A hospital or hospital-based component licensed under 1471 chapter 395. 1472 A nursing home facility as defined in s. 400.021. (2)1473 A substance abuse education program established (3) 1474 pursuant to s. 1003.42. A facility or institution operated by the Federal 1475 (4) 1476 Government. 1477 A physician or physician assistant licensed under (5) 1478 chapter 458 or chapter 459. (6) A psychologist licensed under chapter 490. 1479 1480 A social worker, marriage and family therapist, or (7)1481 mental health counselor licensed under chapter 491. 1482 A legally cognizable church or nonprofit religious (8) organization or denomination providing substance abuse services, 1483 706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 58 of 161

Bill No. HB 547 (2015)

Amendment No.

1484 including prevention services, which are solely religious, 1485 spiritual, or ecclesiastical in nature. A church or nonprofit 1486 religious organization or denomination providing any of the 1487 licensed service components itemized under s. 397.311(18) is not 1488 exempt from substance abuse licensure but retains its exemption 1489 with respect to all services which are solely religious, 1490 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.

1501 (11) A facility licensed under s. 394.875 as a crisis 1502 stabilization unit.

1504 The exemptions from licensure in this section do not apply to 1505 any service provider that receives an appropriation, grant, or 1506 contract from the state to operate as a service provider as 1507 defined in this chapter or to any substance abuse program 1508 regulated pursuant to s. 397.406. Furthermore, this chapter may 1509 not be construed to limit the practice of a physician or

706771 - h0547-strike.docx

1503

Published On: 3/17/2015 5:45:31 PM

Page 59 of 161

Amendment No.

Bill No. HB 547 (2015)

1510 physician assistant licensed under chapter 458 or chapter 459, a 1511 psychologist licensed under chapter 490, a psychotherapist 1512 licensed under chapter 491, or an independent advanced practice registered nurse registered, or an advanced practice registered 1513 nurse certified, practitioner licensed under part I of chapter 1514 1515 $464_{\overline{r}}$ who provides substance abuse treatment, unless a 1516 practitioner represents so long as the physician, physician assistant, psychologist, psychotherapist, or advanced registered 1517 1518 nurse practitioner does not represent to the public that the 1519 practitioner he or she is a licensed service provider and 1520 provides does not provide services to individuals pursuant to 1521 part V of this chapter. Failure to comply with any requirement 1522 necessary to maintain an exempt status under this section is a 1523 misdemeanor of the first degree, punishable as provided in s. 775.082 or s. 775.083. 1524

1525 Section 34. Subsections (5), (9), and (10) of section 1526 397.427, Florida Statutes, are amended to read:

1527 397.427 Medication-assisted treatment service providers; 1528 rehabilitation program; needs assessment and provision of 1529 services; persons authorized to issue takeout medication; 1530 unlawful operation; penalty.-

(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

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 60 of 161

Bill No. HB 547

(2015)

Amendment No.

1536 program for medication-assisted treatment for opiate addiction 1537 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;

1549 Each licensed provider adopts written protocols which (d) 1550 provide for supervision of the physician assistant, registered 1551 nurse, advanced practice registered nurse practitioner, or 1552 licensed practical nurse by a physician licensed pursuant to 1553 chapter 458 or chapter 459 and for the procedures by which patients' medications may be delivered by the physician 1554 1555 assistant, registered nurse, advanced practice registered nurse 1556 practitioner, or licensed practical nurse. Such protocols shall be signed by the supervising physician and either the 1557 1558 administering registered nurse, the advanced practice registered 1559 nurse practitioner, or the licensed practical nurse.

(e) Each licensed service provider maintains and hasavailable for inspection by representatives of the Board of

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 61 of 161

Bill No. HB 547 (2015)

Amendment No.

1562 Pharmacy all medical records and patient care protocols, 1563 including records of medications delivered to patients, in 1564 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:

(a) The service provider is authorized to providemedication-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

1574 (c) The medication ordered appears on a formulary or meets1575 federal requirements for medication-assisted treatment.

1576 Each licensed service provider that provides (10)1577 medication-assisted treatment must adopt written protocols as 1578 specified by the department and in accordance with federally 1579 required rules, regulations, or procedures. The protocol shall 1580 provide for the supervision of the physician assistant, 1581 registered nurse, advanced practice registered nurse 1582 practitioner, or licensed practical nurse working under the supervision of a physician who is licensed under chapter 458 or 1583 1584 chapter 459. The protocol must specify how the medication will 1585 be used in conjunction with counseling or psychosocial treatment 1586 and that the services provided will be included on the treatment 1587 plan. The protocol must specify the procedures by which

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 62 of 161

Bill No. HB 547 (2015)

Amendment No.

1588 medication-assisted treatment may be administered by the 1589 <u>supervised</u> physician assistant, registered nurse, advanced 1590 registered nurse practitioner, or licensed practical nurse. 1591 These protocols shall be signed by the supervising physician and 1592 the <u>supervised</u> administering physician assistant, registered 1593 nurse, advanced registered nurse practitioner, or licensed 1594 practical nurse.

1595 Section 35. Paragraph (a) of subsection (2) of section 1596 397.501, Florida Statutes, is amended to read:

1597 397.501 Rights of individuals.-Individuals receiving 1598 substance abuse services from any service provider are 1599 guaranteed protection of the rights specified in this section, 1600 unless otherwise expressly provided, and service providers must 1601 ensure the protection of such rights.

1602

(2) RIGHT TO NONDISCRIMINATORY SERVICES.-

1603 Service providers may not deny an individual access to (a) 1604 substance abuse services solely on the basis of race, gender, 1605 ethnicity, age, sexual preference, human immunodeficiency virus 1606 status, prior service departures against medical advice, 1607 disability, or number of relapse episodes. Service providers may 1608 not deny an individual who takes medication prescribed by a physician, a physician assistant, an independent advanced 1609 1610 practice registered nurse, or an advanced practice registered 1611 nurse access to substance abuse services solely on that basis. 1612 Service providers who receive state funds to provide substance abuse services may not, if space and sufficient state resources 1613

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 63 of 161

Bill No. HB 547 (2015)

Amendment No.

1614 are available, deny access to services based solely on inability 1615 to pay.

1616 Section 36. Subsection (8) of section 400.021, Florida
1617 Statutes, is amended to read:

1618 400.021 Definitions.—When used in this part, unless the 1619 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>an independent advanced</u>
<u>practice registered nurse</u>, <u>an</u> advanced <u>practice</u> registered nurse
<u>practitioner</u>, <u>a</u> physician assistant, or <u>a</u> physician.

1627 Section 37. Subsection (3) of section 400.0255, Florida 1628 Statutes, is amended to read:

1629 400.0255 Resident transfer or discharge; requirements and 1630 procedures; hearings.-

When a discharge or transfer is initiated by the 1631 (3)1632 nursing home, the nursing home administrator employed by the 1633 nursing home that is discharging or transferring the resident, 1634 or an individual employed by the nursing home who is designated by the nursing home administrator to act on behalf of the 1635 administration, must sign the notice of discharge or transfer. 1636 1637 Any notice indicating a medical reason for transfer or discharge 1638 must either be signed by the resident's attending physician or the medical director of the facility, or include an attached 1639

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 64 of 161

Bill No. HB 547 (2015)

Amendment No.

1640 written order for the discharge or transfer. The notice or the 1641 order must be signed by the resident's physician, medical 1642 director, treating physician, <u>independent advanced practice</u> 1643 <u>registered nurse, advanced practice registered</u> nurse 1644 <u>practitioner</u>, or physician assistant.

1645 Section 38. Subsection (3) of section 400.172, Florida 1646 Statutes, is amended to read:

1647

400.172 Respite care provided in nursing home facilities.-

1648 A prospective respite care resident must provide (3) 1649 medical information from a physician, a physician assistant, an independent advanced practice registered nurse, or an advanced 1650 1651 practice registered nurse practitioner and any other information 1652 provided by the primary caregiver required by the facility 1653 before or when the person is admitted to receive respite care. 1654 The medical information must include a physician's or an 1655 independent advanced practice registered nurse's order for 1656 respite care and proof of a physical examination by a licensed physician, a physician assistant, an independent advanced 1657 1658 practice registered nurse, or an advanced practice registered 1659 nurse practitioner. The physician's order and physical 1660 examination may be used to provide intermittent respite care for up to 12 months after the date the order is written. 1661

Section 39. Subsections (20) through (29) of section 400.462, Florida Statutes, are renumbered as subsections (21) through (30), respectively, subsection (3) is amended, and a new subsection (20) is added to that section, to read:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 65 of 161

Bill No. HB 547 (2015)

Amendment No.

1666 400.462 Definitions.—As used in this part, the term: 1667 (3) "Advanced <u>practice</u> registered nurse practitioner" 1668 means a person licensed in this state to practice professional 1669 nursing and certified in advanced or specialized nursing 1670 practice, as defined in s. 464.003.

1671 (20) "Independent advanced practice registered nurse" 1672 means a person licensed in this state to practice professional 1673 nursing as defined in s. 464.003 and registered to practice 1674 advanced or specialized nursing independently and without 1675 physician supervision or a protocol.

1676 Section 40. Subsection (2) of section 400.487, Florida
1677 Statutes, is amended to read:

1678 400.487 Home health service agreements; physician's, 1679 physician assistant's, <u>independent advanced practice registered</u> 1680 <u>nurse's</u>, and advanced <u>practice</u> registered <u>nurse's</u> nurse 1681 practitioner's treatment orders; patient assessment; 1682 establishment and review of plan of care; provision of services; 1683 orders not to resuscitate.-

(2) When required by the provisions of chapter 464; part 1684 I, part III, or part V of chapter 468; or chapter 486, the 1685 1686 attending physician, physician assistant, independent advanced practice registered nurse, or advanced practice registered nurse 1687 practitioner, acting within his or her respective scope of 1688 1689 practice, shall establish treatment orders for a patient who is 1690 to receive skilled care. The treatment orders must be signed by the physician, physician assistant, independent advanced 1691

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 66 of 161

Bill No. HB 547 (2015)

Amendment No.

1692 practice registered nurse, or advanced practice registered nurse 1693 practitioner before a claim for payment for the skilled services 1694 is submitted by the home health agency. If the claim is 1695 submitted to a managed care organization, the treatment orders 1696 must be signed within the time allowed under the provider 1697 agreement. The treatment orders shall be reviewed, as frequently 1698 as the patient's illness requires, by the physician, physician 1699 assistant, independent advanced practice registered nurse, or 1700 advanced practice registered nurse practitioner in consultation 1701 with the home health agency.

1702Section 41. Paragraph (a) of subsection (13) of section1703400.506, Florida Statutes, is amended to read:

1704 400.506 Licensure of nurse registries; requirements; 1705 penalties.-

1706 (13) All persons referred for contract in private 1707 residences by a nurse registry must comply with the following 1708 requirements for a plan of treatment:

1709 When, in accordance with the privileges and (a) restrictions imposed upon a nurse under part I of chapter 464, 1710 1711 the delivery of care to a patient is under the direction or 1712 supervision of a physician or when a physician is responsible for the medical care of the patient, a medical plan of treatment 1713 must be established for each patient receiving care or treatment 1714 1715 provided by a licensed nurse in the home. The original medical 1716 plan of treatment must be timely signed by the physician, 1717 physician assistant, independent advanced practice registered

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 67 of 161

Amendment No.

Bill No. HB 547 (2015)

1718 nurse, or advanced practice registered nurse practitioner, 1719 acting within his or her respective scope of practice, and 1720 reviewed in consultation with the licensed nurse at least every 1721 2 months. Any additional order or change in orders must be obtained from, reduced to writing by, and timely signed by the 1722 1723 physician, physician assistant, independent advanced practice 1724 registered nurse, or advanced practice registered nurse 1725 practitioner and reduced to writing and timely signed by the physician, physician assistant, or advanced registered nurse 1726 1727 practitioner. The delivery of care under a medical plan of 1728 treatment must be substantiated by the appropriate nursing notes 1729 or documentation made by the nurse in compliance with nursing 1730 practices established under part I of chapter 464.

1731Section 42. Paragraph (g) of subsection (4) of section1732400.9905, Florida Statutes, is amended to read:

1733

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:

(g) A sole proprietorship, group practice, partnership, or
corporation that provides health care services by licensed
health care practitioners under chapter 457, chapter 458,
chapter 459, chapter 460, chapter 461, chapter 462, chapter 463,

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 68 of 161

Amendment No.

1760

Bill No. HB 547 (2015)

1744 chapter 466, chapter 467, chapter 480, chapter 484, chapter 486, 1745 chapter 490, chapter 491, or part I, part III, part X, part 1746 XIII, or part XIV of chapter 468, or s. 464.012 or s. 464.0125, 1747 and that is wholly owned by one or more licensed health care 1748 practitioners, or the licensed health care practitioners set 1749 forth in this paragraph and the spouse, parent, child, or 1750 sibling of a licensed health care practitioner if one of the 1751 owners who is a licensed health care practitioner is supervising the business activities and is legally responsible for the 1752 1753 entity's compliance with all federal and state laws. However, a 1754 health care practitioner may not supervise services beyond the 1755 scope of the practitioner's license, except that, for the 1756 purposes of this part, a clinic owned by a licensee in s. 1757 456.053(3)(b) which provides only services authorized pursuant 1758 to s. 456.053(3)(b) may be supervised by a licensee specified in 1759 s. 456.053(3)(b).

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

1765 Section 43. Subsections (1) and (2) of section 401.445, 1766 Florida Statutes, are amended to read:

1767 401.445 Emergency examination and treatment of 1768 incapacitated persons.—

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 69 of 161

Bill No. HB 547 (2015)

Amendment No.

1769 No Recovery is not shall be allowed in any court in (1)1770 this state against any emergency medical technician, paramedic, 1771 or physician as defined in this chapter; any independent 1772 advanced practice registered nurse registered under s. 464.0125; r any advanced practice registered nurse practitioner 1773 1774 certified under s. 464.012; $_{\tau}$ or any physician assistant licensed under s. 458.347 or s. 459.022, or any person acting under the 1775 1776 direct medical supervision of a physician, in an action brought 1777 for examining or treating a patient without his or her informed 1778 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;

(b) The patient at the time of examination or treatment isexperiencing 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> advanced practice registered nurse, advanced <u>practice</u> registered nurse <u>practitioner</u>, or physician assistant in accordance with s. 766.103(3).

1792

1793 Examination and treatment provided under this subsection shall 1794 be limited to reasonable examination of the patient to determine

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 70 of 161

Bill No. HB 547

(2015)

Amendment No.

1795 the medical condition of the patient and treatment reasonably 1796 necessary to alleviate the emergency medical condition or to 1797 stabilize the patient.

1798 In examining and treating a person who is apparently (2)1799 intoxicated, under the influence of drugs, or otherwise 1800 incapable of providing informed consent, the emergency medical 1801 technician, paramedic, physician, independent advanced practice 1802 registered nurse, advanced practice registered nurse 1803 practitioner, or physician assistant, or any person acting under 1804 the direct medical supervision of a physician, shall proceed 1805 wherever possible with the consent of the person. If the person 1806 reasonably appears to be incapacitated and refuses his or her 1807 consent, the person may be examined, treated, or taken to a 1808 hospital or other appropriate treatment resource if he or she is 1809 in need of emergency attention, without his or her consent, but 1810 unreasonable force shall not be used.

1811 Section 44. Subsections (1) and (11) of section 409.905, 1812 Florida Statutes, are amended to read:

1813 409.905 Mandatory Medicaid services.-The agency may make payments for the following services, which are required of the 1814 1815 state by Title XIX of the Social Security Act, furnished by Medicaid providers to recipients who are determined to be 1816 eligible on the dates on which the services were provided. Any 1817 1818 service under this section shall be provided only when medically 1819 necessary and in accordance with state and federal law. 1820 Mandatory services rendered by providers in mobile units to

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 71 of 161

Bill No. HB 547 (2015)

Amendment No.

Medicaid recipients may be restricted by the agency. Nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, number of services, or any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216.

1828 INDEPENDENT ADVANCED PRACTICE REGISTERED NURSE AND (1)1829 ADVANCED PRACTICE REGISTERED NURSE PRACTITIONER SERVICES.-The 1830 agency shall pay for services provided to a recipient by a 1831 registered independent advanced practice registered nurse, a 1832 certified licensed advanced practice registered nurse 1833 practitioner who has a valid collaboration agreement with a 1834 licensed physician on file with the Department of Health, or a 1835 certified registered nurse anesthetist who provides anesthesia 1836 services in accordance with established protocol required by 1837 state law and approved by the medical staff of the facility in which the anesthetic service is performed. Reimbursement for 1838 1839 such services must be provided in an amount that equals at least not less than 80 percent of the reimbursement to a physician who 1840 1841 provides the same services, unless otherwise provided for in the General Appropriations Act. 1842

1843 (11) RURAL HEALTH CLINIC SERVICES.—The agency shall pay 1844 for outpatient primary health care services for a recipient 1845 provided by a clinic certified by and participating in the 1846 Medicare program which is located in a federally designated,

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 72 of 161
Amendment No.

Bill No. HB 547 (2015)

1847 rural, medically underserved area and has on its staff one or 1848 more <u>certified</u> licensed primary care nurse practitioners or 1849 physician assistants, and a licensed staff supervising 1850 physician, or a consulting supervising physician, or an 1851 <u>independent advanced practice registered nurse</u>.

1852Section 45. Paragraph (a) of subsection (3) and subsection1853(7) of section 409.908, Florida Statutes, are amended to read:

1854 409.908 Reimbursement of Medicaid providers.-Subject to 1855 specific appropriations, the agency shall reimburse Medicaid 1856 providers, in accordance with state and federal law, according 1857 to methodologies set forth in the rules of the agency and in 1858 policy manuals and handbooks incorporated by reference therein. 1859 These methodologies may include fee schedules, reimbursement 1860 methods based on cost reporting, negotiated fees, competitive 1861 bidding pursuant to s. 287.057, and other mechanisms the agency 1862 considers efficient and effective for purchasing services or 1863 goods on behalf of recipients. If a provider is reimbursed based on cost reporting and submits a cost report late and that cost 1864 report would have been used to set a lower reimbursement rate 1865 1866 for a rate semester, then the provider's rate for that semester 1867 shall be retroactively calculated using the new cost report, and full payment at the recalculated rate shall be effected 1868 1869 retroactively. Medicare-granted extensions for filing cost 1870 reports, if applicable, shall also apply to Medicaid cost 1871 reports. Payment for Medicaid compensable services made on 1872 behalf of Medicaid eligible persons is subject to the

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 73 of 161

Bill No. HB 547 (2015)

Amendment No.

1873 availability of moneys and any limitations or directions 1874 provided for in the General Appropriations Act or chapter 216. 1875 Further, nothing in this section shall be construed to prevent 1876 or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or 1877 1878 making any other adjustments necessary to comply with the availability of moneys and any limitations or directions 1879 1880 provided for in the General Appropriations Act, provided the 1881 adjustment is consistent with legislative intent.

1882 (3) Subject to any limitations or directions provided for 1883 in the General Appropriations Act, the following Medicaid 1884 services and goods may be reimbursed on a fee-for-service basis. 1885 For each allowable service or goods furnished in accordance with 1886 Medicaid rules, policy manuals, handbooks, and state and federal law, the payment shall be the amount billed by the provider, the 1887 provider's usual and customary charge, or the maximum allowable 1888 1889 fee established by the agency, whichever amount is less, with the exception of those services or goods for which the agency 1890 1891 makes payment using a methodology based on capitation rates, 1892 average costs, or negotiated fees.

1893(a) Independent advanced practice registered nurse or1894advanced practice registered nurse practitioner services.

1895 (7) A provider of family planning services shall be
1896 reimbursed the lesser of the amount billed by the provider or an
1897 all-inclusive amount per type of visit for physicians,
1898 independent advanced practice registered nurses, and advanced

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 74 of 161

Bill No. HB 547 (2015)

Amendment No.

1899 <u>practice</u> registered <u>nurses</u> nurse practitioners, as established 1900 by the agency in a fee schedule.

1901 Section 46. Subsection (2) of section 409.9081, Florida 1902 Statutes, is amended to read:

1903

409.9081 Copayments.-

1904 The agency shall, subject to federal regulations and (2) 1905 any directions or limitations provided for in the General 1906 Appropriations Act, require copayments for the following 1907 additional services: hospital inpatient, laboratory and X-ray 1908 services, transportation services, home health care services, community mental health services, rural health services, 1909 1910 federally qualified health clinic services, and independent 1911 advanced practice registered nurse or advanced practice 1912 registered nurse practitioner services. The agency may only 1913 establish copayments for prescribed drugs or for any other 1914 federally authorized service if such copayment is specifically 1915 provided for in the General Appropriations Act or other law.

1916Section 47. Paragraph (a) of subsection (1) of section1917409.973, Florida Statutes, is amended to read:

1918 409.973 Benefits.-

1919 (1) MINIMUM BENEFITS.-Managed care plans shall cover, at a 1920 minimum, the following services:

(a) <u>Independent advanced practice registered nurse and</u>
advanced <u>practice</u> registered nurse practitioner services.
Section 48. Subsections (2), (4), and (5) of section
429.26, Florida Statutes, are amended to read:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 75 of 161

Bill No. HB 547

(2015)

Amendment No.

1925 429.26 Appropriateness of placements; examinations of 1926 residents.-

1927 (2) A physician, <u>a physician assistant</u>, <u>an independent</u>
1928 <u>advanced practice registered nurse</u>, or <u>an advanced practice</u>
1929 <u>registered nurse practitioner</u> who is employed by an assisted
1930 living facility to provide an initial examination for admission
1931 purposes may not have financial interest in the facility.

1932 If possible, each resident shall have been examined by (4) 1933 a licensed physician, a licensed physician assistant, a 1934 registered independent advanced practice registered nurse, or a certified advanced practice registered licensed nurse 1935 1936 practitioner within 60 days before admission to the facility. 1937 The signed and completed medical examination report shall be 1938 submitted to the owner or administrator of the facility who 1939 shall use the information contained therein to assist in the 1940 determination of the appropriateness of the resident's admission 1941 and continued stay in the facility. The medical examination report shall become a permanent part of the record of the 1942 resident at the facility and shall be made available to the 1943 1944 agency during inspection or upon request. An assessment that has 1945 been completed through the Comprehensive Assessment and Review for Long-Term Care Services (CARES) Program fulfills the 1946 1947 requirements for a medical examination under this subsection and 1948 s. 429.07(3)(b)6.

1949 (5) Except as provided in s. 429.07, if a medical1950 examination has not been completed within 60 days before the

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 76 of 161

Amendment No.

Bill No. HB 547 (2015)

1951 admission of the resident to the facility, a licensed physician, 1952 licensed physician assistant, registered independent advanced 1953 practice registered nurse, or certified advanced practice 1954 registered licensed nurse practitioner shall examine the 1955 resident and complete a medical examination form provided by the 1956 agency within 30 days following the admission to the facility to 1957 enable the facility owner or administrator to determine the 1958 appropriateness of the admission. The medical examination form 1959 shall become a permanent part of the record of the resident at 1960 the facility and shall be made available to the agency during 1961 inspection by the agency or upon request.

Section 49. Paragraph (a) of subsection (2) and paragraph (a) of subsection (7) of section 429.918, Florida Statutes, are amended to read:

1965 429.918 Licensure designation as a specialized Alzheimer's 1966 services adult day care center.—

1967

(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, registered independent advanced practice
registered nurse, or certified a licensed advanced practice
registered nurse practitioner.

(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:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 77 of 161

Bill No. HB 547 (2015)

Amendment No.

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

1981 2. Not actively demonstrate aggressive behavior that 1982 places himself, herself, or others at risk of harm.

1983 3. Provide the following medical documentation signed by a
 1984 licensed physician, licensed physician assistant, <u>registered</u>
 1985 <u>independent advanced practice registered nurse</u>, or <u>certified a</u>
 1986 <u>licensed</u> advanced <u>practice</u> registered nurse <u>practitioner</u>:

1987 a. Any physical, health, or emotional conditions that1988 require medical care.

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

1992 4. Provide documentation signed by a health care provider
1993 licensed in this state which indicates that the ADRD participant
1994 is free of the communicable form of tuberculosis and free of
1995 signs and symptoms of other communicable diseases.

1996Section 50. Paragraph (e) of subsection (5) of section1997440.102, Florida Statutes, is amended to read:

1998 440.102 Drug-free workplace program requirements.—The 1999 following provisions apply to a drug-free workplace program 2000 implemented pursuant to law or to rules adopted by the Agency 2001 for Health Care Administration:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 78 of 161

Bill No. HB 547 (2015)

Amendment No.

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

2005 (e) A specimen for a drug test may be taken or collected 2006 by 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.

2013 2. A qualified person employed by a licensed or certified2014 laboratory as described in subsection (9).

2015Section 51. Subsection (2) and paragraph (d) of subsection2016(4) of section 456.0391, Florida Statutes, are amended to read:

2017456.0391Advanced practice registered nurses2018practitioners; 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.

2025 (4)

2026 (d) Any applicant for initial certification or renewal of 2027 certification as an advanced <u>practice</u> registered nurse

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 79 of 161

Amendment No.

Bill No. HB 547 (2015)

2028 practitioner who submits to the Department of Health a set of 2029 fingerprints and information required for the criminal history 2030 check required under this section shall not be required to 2031 provide a subsequent set of fingerprints or other duplicate 2032 information required for a criminal history check to the Agency 2033 for Health Care Administration, the Department of Juvenile 2034 Justice, or the Department of Children and Families for 2035 employment or licensure with such agency or department, if the 2036 applicant has undergone a criminal history check as a condition 2037 of initial certification or renewal of certification as an 2038 advanced practice registered nurse practitioner with the 2039 Department of Health, notwithstanding any other provision of law 2040 to the contrary. In lieu of such duplicate submission, the 2041 Agency for Health Care Administration, the Department of 2042 Juvenile Justice, and the Department of Children and Families 2043 shall obtain criminal history information for employment or 2044 licensure of persons certified under s. 464.012 by such agency 2045 or department from the Department of Health's health care 2046 practitioner credentialing system.

2047 Section 52. Subsection (2) of section 456.0392, Florida 2048 Statutes, is amended to read:

2049

456.0392 Prescription labeling.-

(2) A prescription for a drug that is not listed as a controlled substance in chapter 893 which is written by an advanced practice registered nurse practitioner certified under s. 464.012 is presumed, subject to rebuttal, to be valid and

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 80 of 161

Bill No. HB 547

(2015)

Amendment No.

2059

2054 within the parameters of the prescriptive authority delegated by 2055 a practitioner licensed under chapter 458, chapter 459, or 2056 chapter 466.

2057Section 53. Paragraph (a) of subsection (1) and subsection2058(6) of section 456.041, Florida Statutes, are amended to read:

456.041 Practitioner profile; creation.-

2060 (1)(a) The Department of Health shall compile the 2061 information submitted pursuant to s. 456.039 into a practitioner 2062 profile of the applicant submitting the information, except that 2063 the Department of Health shall develop a format to compile 2064 uniformly any information submitted under s. 456.039(4)(b). 2065 Beginning July 1, 2001, the Department of Health may compile the 2066 information submitted pursuant to s. 456.0391 into a 2067 practitioner profile of the applicant submitting the 2068 information. The protocol submitted pursuant to s. 464.012(3) must be included in the practitioner profile of the advanced 2069 2070 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.

706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 81 of 161

Bill No. HB 547 (2015)

Amendment No.

2078 Section 54. Subsection (1) and paragraphs (a), (d), and 2079 (e) of subsection (2) of section 456.048, Florida Statutes, are 2080 amended to read:

2081 456.048 Financial responsibility requirements for certain 2082 health care practitioners.—

2083 As a prerequisite for licensure or license renewal, (1)2084 the Board of Acupuncture, the Board of Chiropractic Medicine, 2085 the Board of Podiatric Medicine, and the Board of Dentistry 2086 shall, by rule, require that all health care practitioners 2087 licensed under the respective board, and the Board of Medicine 2088 and the Board of Osteopathic Medicine shall, by rule, require 2089 that all anesthesiologist assistants licensed pursuant to s. 2090 458.3475 or s. 459.023, and the Board of Nursing shall, by rule, 2091 require that independent advanced practice registered nurses 2092 registered under s. 464.0125 and advanced practice registered 2093 nurses nurse practitioners certified under s. 464.012, and the 2094 department shall, by rule, require that midwives maintain medical malpractice insurance or provide proof of financial 2095 responsibility in an amount and in a manner determined by the 2096 2097 board or department to be sufficient to cover claims arising out 2098 of the rendering of or failure to render professional care and 2099 services in this state.

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

706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 82 of 161

Bill No. HB 547 (2015)

Amendment No.

2103 Any person licensed under chapter 457, s. 458.3475, s. (a) 2104 459.023, chapter 460, chapter 461, s. 464.012, s. 464.0125, 2105 chapter 466, or chapter 467 who practices exclusively as an 2106 officer, employee, or agent of the Federal Government or of the 2107 state or its agencies or its subdivisions. For the purposes of 2108 this subsection, an agent of the state, its agencies, or its 2109 subdivisions is a person who is eligible for coverage under any 2110 self-insurance or insurance program authorized by the provisions of s. 768.28(16) or who is a volunteer under s. 110.501(1). 2111

2112 (d) Any person licensed or certified under chapter 457, s. 2113 458.3475, s. 459.023, chapter 460, chapter 461, s. 464.012, s. 2114 464.0125, chapter 466, or chapter 467 who practices only in 2115 conjunction with his or her teaching duties at an accredited 2116 school or in its main teaching hospitals. Such person may engage 2117 in the practice of medicine to the extent that such practice is incidental to and a necessary part of duties in connection with 2118 2119 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.

2126 Section 55. Paragraphs (a), (i), (o), and (r) of 2127 subsection (3) and paragraph (g) of subsection (5) of section 2128 456.053, Florida Statutes, are amended to read:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 83 of 161

Bill No. HB 547

(2015)

Amendment No.

456.053 Financial arrangements between referring healthcare providers and providers of health care services.-

2131 (3) DEFINITIONS.—For the purpose of this section, the 2132 word, phrase, or term:

(a) "Board" means any of the following boards relating to 2133 2134 the respective professions: the Board of Medicine as created in 2135 s. 458.307; the Board of Osteopathic Medicine as created in s. 2136 459.004; the Board of Chiropractic Medicine as created in s. 460.404; the Board of Podiatric Medicine as created in s. 2137 2138 461.004; the Board of Optometry as created in s. 463.003; the 2139 Board of Pharmacy as created in s. 465.004; and the Board of 2140 Dentistry as created in s. 466.004; and the Board of Nursing as 2141 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:

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

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 84 of 161

Bill No. HB 547 (2015)

Amendment No.

2154 2. The request or establishment of a plan of care by a 2155 health care provider, which includes the provision of designated 2156 health services or other health care item or service.

3. The following orders, recommendations, or plans of careshall 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.

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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.

2172 f. By a health care provider who is the sole provider or 2173 member of a group practice for designated health services or 2174 other health care items or services that are prescribed or provided solely for such referring health care provider's or 2175 group practice's own patients, and that are provided or 2176 2177 performed by or under the direct supervision of such referring 2178 health care provider or group practice; provided, however, that 2179 effective July 1, 1999, a physician licensed pursuant to chapter

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 85 of 161

Amendment No.

Bill No. HB 547 (2015)

2180 458, chapter 459, chapter 460, or chapter 461 or an independent 2181 advanced practice registered nurse registered under s. 464.0125 2182 may refer a patient to a sole provider or group practice for 2183 diagnostic imaging services, excluding radiation therapy services, for which the sole provider or group practice billed 2184 2185 both the technical and the professional fee for or on behalf of 2186 the patient, if the referring physician or independent advanced 2187 practice registered nurse has no investment interest in the practice. The diagnostic imaging service referred to a group 2188 2189 practice or sole provider must be a diagnostic imaging service 2190 normally provided within the scope of practice to the patients 2191 of the group practice or sole provider. The group practice or 2192 sole provider may accept no more than 15 percent of their 2193 patients receiving diagnostic imaging services from outside 2194 referrals, excluding radiation therapy services.

2195 g. By a health care provider for services provided by an 2196 ambulatory surgical center licensed under chapter 395.

2197

h. By a urologist for lithotripsy services.

2198 i. By a dentist for dental services performed by an 2199 employee of or health care provider who is an independent 2200 contractor with the dentist or group practice of which the 2201 dentist is a member.

j. By a physician for infusion therapy services to a patient of that physician or a member of that physician's group practice.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 86 of 161

Bill No. HB 547 (2015)

Amendment No.

k. By a nephrologist for renal dialysis services andsupplies, except laboratory services.

2207 1. By a health care provider whose principal professional 2208 practice consists of treating patients in their private 2209 residences for services to be rendered in such private 2210 residences, except for services rendered by a home health agency 2211 licensed under chapter 400. For purposes of this sub-2212 subparagraph, the term "private residences" includes patients' private homes, independent living centers, and assisted living 2213 2214 facilities, but does not include skilled nursing facilities.

2215

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

2216 "Sole provider" means one health care provider (r) 2217 licensed under chapter 458, chapter 459, chapter 460, or chapter 2218 461, or s. 464.0125, who maintains a separate medical office and 2219 a medical practice separate from any other health care provider and who bills for his or her services separately from the 2220 2221 services provided by any other health care provider. A sole 2222 provider shall not share overhead expenses or professional 2223 income with any other person or group practice.

2224 (5) PROHIBITED REFERRALS AND CLAIMS FOR PAYMENT.-Except as 2225 provided in this section:

(g) A violation of this section by a health care provider shall constitute grounds for disciplinary action to be taken by 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.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 87 of 161

Bill No. HB 547 (2015)

Amendment No.

466.028(2). Any hospital licensed under chapter 395 found in
violation of this section shall be subject to s. 395.0185(2).
Section 56. Subsection (7) of section 456.072, Florida
Statutes, is amended to read:

2234 456.072 Grounds for discipline; penalties; enforcement.-2235 Notwithstanding subsection (2), upon a finding that a (7) 2236 physician, a physician assistant, an independent advanced 2237 practice registered nurse, or an advanced practice registered nurse has prescribed or dispensed a controlled substance, or 2238 2239 caused a controlled substance to be prescribed or dispensed, in 2240 a manner that violates the standard of practice set forth in s. 2241 458.331(1)(q) or (t), s. 459.015(1)(t) or (x), s. 461.013(1)(o) 2242 or (s), s. 464.018(1)(p), or s. 466.028(1)(p) or (x), the 2243 practitioner physician shall be suspended for a period of at 2244 least not less than 6 months and pay a fine of at least not less 2245 than \$10,000 per count. Repeated violations shall result in 2246 increased penalties.

Section 57. Paragraph (a) of subsection (2) and subsection
(3) of section 456.44, Florida Statutes, are amended to read:
456.44 Controlled substance prescribing.-

(2) REGISTRATION. Effective January 1, 2012, A physician
licensed under chapter 458, chapter 459, chapter 461, or chapter
466; a physician assistant licensed under chapter 458 or chapter
459; or an independent advanced practice registered nurse
registered, or an advanced practice registered nurse certified,
under part I of chapter 464, who prescribes any controlled

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 88 of 161

Bill No. HB 547 (2015)

Amendment No.

substance, listed in Schedule II, Schedule III, or Schedule IV as defined in s. 893.03, for the treatment of chronic nonmalignant pain, must:

(a) Designate himself or herself as a controlled substance prescribing practitioner on the <u>practitioner's</u> physician's practitioner profile.

(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.

2266 A complete medical history and a physical examination (a) 2267 must be conducted before beginning any treatment and must be 2268 documented in the medical record. The exact components of the 2269 physical examination shall be left to the judgment of the 2270 clinician who is expected to perform a physical examination 2271 proportionate to the diagnosis that justifies a treatment. The 2272 medical record must, at a minimum, document the nature and 2273 intensity of the pain, current and past treatments for pain, 2274 underlying or coexisting diseases or conditions, the effect of 2275 the pain on physical and psychological function, a review of 2276 previous medical records, previous diagnostic studies, and 2277 history of alcohol and substance abuse. The medical record shall also document the presence of one or more recognized medical 2278 2279 indications for the use of a controlled substance. Each 2280 registrant must develop a written plan for assessing each 2281 patient's risk of aberrant drug-related behavior, which may

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 89 of 161

Amendment No.

Bill No. HB 547 (2015)

include patient drug testing. Registrants must assess each patient's risk for aberrant drug-related behavior and monitor that risk on an ongoing basis in accordance with the plan.

Each registrant must develop a written individualized 2285 (b) 2286 treatment plan for each patient. The treatment plan shall state 2287 objectives that will be used to determine treatment success, 2288 such as pain relief and improved physical and psychosocial 2289 function, and shall indicate if any further diagnostic 2290 evaluations or other treatments are planned. After treatment 2291 begins, the practitioner physician shall adjust drug therapy to 2292 the individual medical needs of each patient. Other treatment 2293 modalities, including a rehabilitation program, shall be 2294 considered depending on the etiology of the pain and the extent 2295 to which the pain is associated with physical and psychosocial 2296 impairment. The interdisciplinary nature of the treatment plan shall be documented. 2297

2298 (C) The practitioner physician shall discuss the risks and 2299 benefits of the use of controlled substances, including the risks of abuse and addiction, as well as physical dependence and 2300 2301 its consequences, with the patient, persons designated by the 2302 patient, or the patient's surrogate or guardian if the patient is incompetent. The practitioner physician shall use a written 2303 2304 controlled substance agreement between the practitioner 2305 physician and the patient outlining the patient's 2306 responsibilities, including, but not limited to:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 90 of 161

Bill No. HB 547

(2015)

Amendment No.

Number and frequency of controlled substance
 prescriptions and refills.

2309 2. Patient compliance and reasons for which drug therapy2310 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 authorized by the treating <u>practitioner</u> physician and documented in the medical record.

2316 (d) The patient shall be seen by the practitioner physician at regular intervals, not to exceed 3 months, to 2317 assess the efficacy of treatment, ensure that controlled 2318 2319 substance therapy remains indicated, evaluate the patient's 2320 progress toward treatment objectives, consider adverse drug 2321 effects, and review the etiology of the pain. Continuation or modification of therapy shall depend on the practitioner's 2322 2323 physician's evaluation of the patient's progress. If treatment goals are not being achieved, despite medication adjustments, 2324 the practitioner physician shall reevaluate the appropriateness 2325 2326 of continued treatment. The practitioner physician shall monitor 2327 patient compliance in medication usage, related treatment plans, controlled substance agreements, and indications of substance 2328 abuse or diversion at a minimum of 3-month intervals. 2329

(e) The <u>practitioner</u> physician shall refer the patient as
 necessary for additional evaluation and treatment in order to
 achieve treatment objectives. Special attention shall be given

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 91 of 161

Bill No. HB 547

(2015)

Amendment No.

to those patients who are at risk for misusing their medications and those whose living arrangements pose a risk for medication misuse or diversion. The management of pain in patients with a history of substance abuse or with a comorbid psychiatric disorder requires extra care, monitoring, and documentation and requires consultation with or referral to an addiction medicine specialist or psychiatrist.

(f) A <u>practitioner</u> physician registered under this section must maintain accurate, current, and complete records that are accessible and readily available for review and comply with the requirements of this section, the applicable practice act, and applicable board rules. The medical records must include, but are not limited to:

The complete medical history and a physical
 examination, including history of drug abuse or dependence.

2348 2. Diagnostic, therapeutic, and laboratory results.

- 2349 3. Evaluations and consultations.
- 2350 4. Treatment objectives.

2351 5. Discussion of risks and benefits.

2352 6. Treatments.

2353 7. Medications, including date, type, dosage, and quantity2354 prescribed.

- 2355 8. Instructions and agreements.
- 2356 9. Periodic reviews.
- 2357 10. Results of any drug testing.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 92 of 161

Bill No. HB 547

(2015)

Amendment No.

2358 11. A photocopy of the patient's government-issued photo 2359 identification.

2360 12. If a written prescription for a controlled substance2361 is given to the patient, a duplicate of the prescription.

2362 13. The <u>practitioner's</u> physician's full name presented in 2363 a legible manner.

2364 (q) Patients with signs or symptoms of substance abuse 2365 shall be immediately referred to a board-certified pain 2366 management physician, an addiction medicine specialist, or a 2367 mental health addiction facility as it pertains to drug abuse or 2368 addiction unless the practitioner is a physician who is board-2369 certified or board-eligible in pain management. Throughout the 2370 period of time before receiving the consultant's report, a 2371 prescribing practitioner physician shall clearly and completely 2372 document medical justification for continued treatment with 2373 controlled substances and those steps taken to ensure medically 2374 appropriate use of controlled substances by the patient. Upon 2375 receipt of the consultant's written report, the prescribing practitioner physician shall incorporate the consultant's 2376 2377 recommendations for continuing, modifying, or discontinuing 2378 controlled substance therapy. The resulting changes in treatment shall be specifically documented in the patient's medical 2379 record. Evidence or behavioral indications of diversion shall be 2380 2381 followed by discontinuation of controlled substance therapy, and the patient shall be discharged, and all results of testing and 2382

706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 93 of 161

Bill No. HB 547

(2015)

Amendment No.

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2383 actions taken by the <u>practitioner</u> physician shall be documented 2384 in the patient's medical record.

2386 This subsection does not apply to a board-eligible or board-2387 certified anesthesiologist, physiatrist, rheumatologist, or 2388 neurologist, or to a board-certified physician who has surgical 2389 privileges at a hospital or ambulatory surgery center and 2390 primarily provides surgical services. This subsection does not 2391 apply to a board-eligible or board-certified medical specialist 2392 who has also completed a fellowship in pain medicine approved by 2393 the Accreditation Council for Graduate Medical Education or the 2394 American Osteopathic Association, or who is board eligible or 2395 board certified in pain medicine by the American Board of Pain 2396 Medicine or a board approved by the American Board of Medical 2397 Specialties or the American Osteopathic Association and performs 2398 interventional pain procedures of the type routinely billed 2399 using surgical codes. This subsection does not apply to a 2400 practitioner physician who prescribes medically necessary 2401 controlled substances for a patient during an inpatient stay in 2402 a hospital licensed under chapter 395.

2403Section 58. Paragraph (c) of subsection (2) of section2404458.3265, Florida Statutes, is amended to read:

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2385

458.3265 Pain-management clinics.-

2406 (2) PHYSICIAN RESPONSIBILITIES.—These responsibilities2407 apply to any physician who provides professional services in a

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 94 of 161

Bill No. HB 547

(2015)

Amendment No.

2408 pain-management clinic that is required to be registered in 2409 subsection (1).

2410 (c) A physician, a physician assistant, an independent 2411 advanced practice registered nurse, or an advanced practice 2412 registered nurse practitioner must perform a physical 2413 examination of a patient on the same day that the physician 2414 prescribes a controlled substance to a patient at a pain-2415 management clinic. If the physician prescribes more than a 72-2416 hour dose of controlled substances for the treatment of chronic 2417 nonmalignant pain, the physician must document in the patient's 2418 record the reason for prescribing that quantity.

2419 Section 59. Paragraph (dd) of subsection (1) of section 2420 458.331, Florida Statutes, is amended to read:

2421 458.331 Grounds for disciplinary action; action by the 2422 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.

2430 Section 60. Paragraph (f) of subsection (4) of section 2431 458.347, Florida Statutes, is amended to read:

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458.347 Physician assistants.-

2433

(4) PERFORMANCE OF PHYSICIAN ASSISTANTS.-

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 95 of 161

Bill No. HB 547

(2015)

Amendment No.

(f)1. The council shall establish a formulary of medicinal drugs that a fully licensed physician assistant having prescribing authority under this section or s. 459.022 may not prescribe. The formulary must include controlled substances as defined in chapter 893, general anesthetics, and radiographic contrast materials.

2440 2. In establishing the formulary, the council shall 2441 consult with a pharmacist licensed under chapter 465, but not 2442 licensed under this chapter or chapter 459, who shall be 2443 selected by the State Surgeon General.

3. Only the council shall add to, delete from, or modify the formulary. Any person who requests an addition, deletion, or modification of a medicinal drug listed on such formulary has the burden of proof to show cause why such addition, deletion, or modification should be made.

2449 The boards shall adopt the formulary required by this 4. 2450 paragraph, and each addition, deletion, or modification to the formulary, by rule. Notwithstanding any provision of chapter 120 2451 to the contrary, the formulary rule shall be effective 60 days 2452 2453 after the date it is filed with the Secretary of State. Upon 2454 adoption of the formulary, the department shall mail a copy of such formulary to each fully licensed physician assistant having 2455 2456 prescribing authority under this section or s. 459.022, and to 2457 each pharmacy licensed by the state. The boards shall establish, 2458 by rule, a fee not to exceed \$200 to fund the provisions of this 2459 paragraph and paragraph (e).

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 96 of 161

Bill No. HB 547 (2015)

Amendment No.

2460 Section 61. Paragraph (a) of subsection (1) and 2461 subsections (2) and (4) of section 458.348, Florida Statutes, 2462 are amended to read:

2463 458.348 Formal supervisory relationships, standing orders, 2464 and established protocols; notice; standards.-

(1) NOTICE.-

2465

2466 (a) When a physician enters into a formal supervisory 2467 relationship or standing orders with an emergency medical 2468 technician or paramedic licensed pursuant to s. 401.27, which 2469 relationship or orders contemplate the performance of medical 2470 acts, or when a physician enters into an established protocol 2471 with an advanced practice registered nurse practitioner, which 2472 protocol contemplates the performance of medical acts identified 2473 and approved by the joint committee pursuant to s. 464.003(2) or 2474 acts set forth in s. 464.012(3) and (4), the physician shall submit notice to the board. The notice shall contain a statement 2475 2476 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>.

2484 (2) ESTABLISHMENT OF STANDARDS BY JOINT COMMITTEE.—The 2485 joint committee created under s. 464.003(2) shall determine

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 97 of 161

Bill No. HB 547

(2015)

Amendment No.

2486 minimum standards for the content of established protocols 2487 pursuant to which an advanced practice registered nurse 2488 practitioner may perform medical acts identified and approved by 2489 the joint committee pursuant to s. 464.003(2) or acts set forth 2490 in s. 464.012(3) and (4) and shall determine minimum standards 2491 for supervision of such acts by the physician, unless the joint committee determines that any act set forth in s. 464.012(3) or 2492 2493 (4) is not a medical act. Such standards shall be based on risk 2494 to the patient and acceptable standards of medical care and 2495 shall take into account the special problems of medically 2496 underserved areas. The standards developed by the joint 2497 committee shall be adopted as rules by the Board of Nursing and 2498 the Board of Medicine for purposes of carrying out their 2499 responsibilities pursuant to part I of chapter 464 and this 2500 chapter, respectively, but neither board shall have disciplinary 2501 powers over the licensees of the other board.

2502 (4) SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.-2503 A physician who supervises an advanced practice registered nurse practitioner or physician assistant at a medical office other 2504 2505 than the physician's primary practice location, where the 2506 advanced practice registered nurse practitioner or physician 2507 assistant is not under the onsite supervision of a supervising 2508 physician, must comply with the standards set forth in this 2509 subsection. For the purpose of this subsection, a physician's "primary practice location" means the address reflected on the 2510 2511 physician's profile published pursuant to s. 456.041.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 98 of 161

Bill No. HB 547

(2015)

Amendment No.

2512 A physician who is engaged in providing primary health (a) 2513 care services may not supervise more than four offices in 2514 addition to the physician's primary practice location. For the 2515 purpose of this subsection, "primary health care" means health 2516 care services that are commonly provided to patients without 2517 referral from another practitioner, including obstetrical and 2518 gynecological services, and excludes practices providing 2519 primarily dermatologic and skin care services, which include 2520 aesthetic skin care services.

2521 (b) A physician who is engaged in providing specialty 2522 health care services may not supervise more than two offices in 2523 addition to the physician's primary practice location. For the 2524 purpose of this subsection, "specialty health care" means health 2525 care services that are commonly provided to patients with a 2526 referral from another practitioner and excludes practices 2527 providing primarily dermatologic and skin care services, which 2528 include aesthetic skin care services.

2529 A physician who supervises an advanced practice (C) 2530 registered nurse practitioner or physician assistant at a 2531 medical office other than the physician's primary practice 2532 location, where the advanced practice registered nurse practitioner or physician assistant is not under the onsite 2533 2534 supervision of a supervising physician and the services offered 2535 at the office are primarily dermatologic or skin care services, 2536 which include aesthetic skin care services other than plastic 2537 surgery, must comply with the standards listed in subparagraphs

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 99 of 161

Bill No. HB 547 (2015)

Amendment No.

2538 1.-4. Notwithstanding s. 458.347(4)(e)6., a physician 2539 supervising a physician assistant pursuant to this paragraph may 2540 not be required to review and cosign charts or medical records 2541 prepared by such physician assistant.

2542 1. The physician shall submit to the board the addresses 2543 of all offices where <u>the physician</u> he or she is supervising an 2544 advanced <u>practice</u> registered nurse practitioner or a <u>physician</u> 2545 physician's assistant which are not the physician's primary 2546 practice location.

2547 2. The physician must be board certified or board eligible 2548 in dermatology or plastic surgery as recognized by the board 2549 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.

4. The physician may supervise only one office other than the physician's primary place of practice except that until July 1, 2011, the physician may supervise up to two medical offices other than the physician's primary place of practice if the addresses of the offices are submitted to the board before July 1, 2006. Effective July 1, 2011, the physician may supervise only one office other than the physician's primary place of

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 100 of 161

Bill No. HB 547

(2015)

Amendment No.

2563 practice, regardless of when the addresses of the offices were 2564 submitted to the board.

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

2571 This subsection does not apply to health care services (e) 2572 provided in facilities licensed under chapter 395 or in 2573 conjunction with a college of medicine, a college of nursing, an 2574 accredited graduate medical program, or a nursing education 2575 program; not-for-profit, family-planning clinics that are not 2576 licensed pursuant to chapter 390; rural and federally qualified 2577 health centers; health care services provided in a nursing home 2578 licensed under part II of chapter 400, an assisted living 2579 facility licensed under part I of chapter 429, a continuing care facility licensed under chapter 651, or a retirement community 2580 consisting of independent living units and a licensed nursing 2581 2582 home or assisted living facility; anesthesia services provided 2583 in accordance with law; health care services provided in a 2584 designated rural health clinic; health care services provided to 2585 persons enrolled in a program designed to maintain elderly 2586 persons and persons with disabilities in a home or community-2587 based setting; university primary care student health centers; 2588 school health clinics; or health care services provided in

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 101 of 161

Bill No. HB 547 (2015)

Amendment No.

2589 federal, state, or local government facilities. Subsection (3) 2590 and this subsection do not apply to offices at which the 2591 exclusive service being performed is laser hair removal by an 2592 advanced <u>practice</u> registered nurse practitioner or physician 2593 assistant.

2594 Section 62. Paragraph (c) of subsection (2) of section 2595 459.0137, Florida Statutes, is amended to read:

2596

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).

2601 An osteopathic physician, a physician assistant, an (C) 2602 independent advanced practice registered nurse, or an advanced 2603 practice registered nurse practitioner must perform a physical 2604 examination of a patient on the same day that the physician 2605 prescribes a controlled substance to a patient at a pain-2606 management clinic. If the osteopathic physician prescribes more 2607 than a 72-hour dose of controlled substances for the treatment 2608 of chronic nonmalignant pain, the osteopathic physician must 2609 document in the patient's record the reason for prescribing that 2610 quantity.

2611 Section 63. Paragraph (hh) of subsection (1) of section 2612 459.015, Florida Statutes, is amended to read:

2613 459.015 Grounds for disciplinary action; action by the 2614 board and department.-

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 102 of 161

Bill No. HB 547

(2015)

Amendment No.

2615 (1)The following acts constitute grounds for denial of a 2616 license or disciplinary action, as specified in s. 456.072(2): 2617 Failing to supervise adequately the activities of (hh) those physician assistants, paramedics, emergency medical 2618 2619 technicians, advanced practice registered nurses nurse 2620 practitioners, anesthesiologist assistants, or other persons 2621 acting under the supervision of the osteopathic physician. 2622 Section 64. Paragraph (a) of subsection (1) and subsection 2623 (3) of section 459.025, Florida Statutes, are amended to read: 2624 459.025 Formal supervisory relationships, standing orders, 2625 and established protocols; notice; standards.-2626 (1) NOTICE.-2627 When an osteopathic physician enters into a formal (a) 2628 supervisory relationship or standing orders with an emergency 2629 medical technician or paramedic licensed pursuant to s. 401.27, 2630 which relationship or orders contemplate the performance of 2631 medical acts, or when an osteopathic physician enters into an established protocol with an advanced practice registered nurse 2632 2633 practitioner, which protocol contemplates the performance of 2634 medical acts identified and approved by the joint committee 2635 pursuant to s. 464.003(2) or acts set forth in s. 464.012(3) and (4), the osteopathic physician shall submit notice to the board. 2636 2637 The notice must contain a statement in substantially the 2638 following form:

2639 I, ... (name and professional license number of osteopathic 2640 physician)..., of ... (address of osteopathic physician)... have

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 103 of 161

Amendment No.

Bill No. HB 547 (2015)

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 practice registered <u>nurse(s)</u> nurse practitioner(s).

2646 SUPERVISORY RELATIONSHIPS IN MEDICAL OFFICE SETTINGS.-(3) 2647 An osteopathic physician who supervises an advanced practice 2648 registered nurse practitioner or physician assistant at a 2649 medical office other than the osteopathic physician's primary 2650 practice location, where the advanced practice registered nurse 2651 practitioner or physician assistant is not under the onsite 2652 supervision of a supervising osteopathic physician, must comply 2653 with the standards set forth in this subsection. For the purpose 2654 of this subsection, an osteopathic physician's "primary practice 2655 location" means the address reflected on the physician's profile 2656 published pursuant to s. 456.041.

2657 (a) An osteopathic physician who is engaged in providing 2658 primary health care services may not supervise more than four offices in addition to the osteopathic physician's primary 2659 2660 practice location. For the purpose of this subsection, "primary 2661 health care" means health care services that are commonly provided to patients without referral from another practitioner, 2662 2663 including obstetrical and gynecological services, and excludes 2664 practices providing primarily dermatologic and skin care 2665 services, which include aesthetic skin care services.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 104 of 161

Bill No. HB 547 (2015)

Amendment No.

2666 An osteopathic physician who is engaged in providing (b) 2667 specialty health care services may not supervise more than two 2668 offices in addition to the osteopathic physician's primary 2669 practice location. For the purpose of this subsection, 2670 "specialty health care" means health care services that are 2671 commonly provided to patients with a referral from another 2672 practitioner and excludes practices providing primarily 2673 dermatologic and skin care services, which include aesthetic 2674 skin care services.

2675 (C) An osteopathic physician who supervises an advanced 2676 practice registered nurse practitioner or physician assistant at 2677 a medical office other than the osteopathic physician's primary 2678 practice location, where the advanced practice registered nurse 2679 practitioner or physician assistant is not under the onsite 2680 supervision of a supervising osteopathic physician and the 2681 services offered at the office are primarily dermatologic or 2682 skin care services, which include aesthetic skin care services other than plastic surgery, must comply with the standards 2683 listed in subparagraphs 1.-4. Notwithstanding s. 2684 2685 459.022(4)(e)6., an osteopathic physician supervising a 2686 physician assistant pursuant to this paragraph may not be 2687 required to review and cosign charts or medical records prepared 2688 by such physician assistant.

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

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 105 of 161

Bill No. HB 547 (2015)

Amendment No.

with an advanced <u>practice</u> registered nurse practitioner or a <u>physician</u> physician's assistant which are not the osteopathic physician's primary practice location.

2695 2. The osteopathic physician must be board certified or 2696 board eligible in dermatology or plastic surgery as recognized 2697 by the Board of Osteopathic Medicine pursuant to s. 459.0152.

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

2704 The osteopathic physician may supervise only one office 4. 2705 other than the osteopathic physician's primary place of practice 2706 except that until July 1, 2011, the osteopathic physician may 2707 supervise up to two medical offices other than the osteopathic 2708 physician's primary place of practice if the addresses of the 2709 offices are submitted to the Board of Osteopathic Medicine before July 1, 2006. Effective July 1, 2011, the osteopathic 2710 2711 physician may supervise only one office other than the 2712 osteopathic physician's primary place of practice, regardless of when the addresses of the offices were submitted to the Board of 2713 2714 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

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 106 of 161

Bill No. HB 547

(2015)

Amendment No.

2718 physician's offices a current schedule of the regular hours when 2719 the osteopathic physician is present in that office and the 2720 hours when the office is open while the osteopathic physician is 2721 not present.

This subsection does not apply to health care services 2722 (e) 2723 provided in facilities licensed under chapter 395 or in 2724 conjunction with a college of medicine or college of nursing or 2725 an accredited graduate medical or nursing education program; offices where the only service being performed is hair removal 2726 2727 by an advanced practice registered nurse practitioner or 2728 physician assistant; not-for-profit, family-planning clinics 2729 that are not licensed pursuant to chapter 390; rural and 2730 federally qualified health centers; health care services 2731 provided in a nursing home licensed under part II of chapter 2732 400, an assisted living facility licensed under part I of chapter 429, a continuing care facility licensed under chapter 2733 2734 651, or a retirement community consisting of independent living units and either a licensed nursing home or assisted living 2735 2736 facility; anesthesia services provided in accordance with law; 2737 health care services provided in a designated rural health 2738 clinic; health care services provided to persons enrolled in a program designed to maintain elderly persons and persons with 2739 2740 disabilities in a home or community-based setting; university 2741 primary care student health centers; school health clinics; or 2742 health care services provided in federal, state, or local 2743 government facilities.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 107 of 161

Bill No. HB 547 (2015)

Amendment No.

2744 Section 65. Subsection (2) of section 464.004, Florida 2745 Statutes, is amended to read:

2746

464.004 Board of Nursing; membership; appointment; terms.-

2747 Seven members of the board must be registered nurses (2)2748 who are residents of this state and who have been engaged in the 2749 practice of professional nursing for at least 4 years, including 2750 at least one advanced practice registered nurse practitioner, 2751 one nurse educator member of an approved program, and one nurse 2752 executive. These seven board members should be representative of 2753 the diverse areas of practice within the nursing profession. In 2754 addition, three members of the board must be licensed practical nurses who are residents of this state and who have been 2755 2756 actively engaged in the practice of practical nursing for at 2757 least 4 years prior to their appointment. The remaining three 2758 members must be residents of the state who have never been 2759 licensed as nurses and who are in no way connected with the 2760 practice of nursing. No person may be appointed as a lay member 2761 who is in any way connected with, or has any financial interest in, any health care facility, agency, or insurer. At least one 2762 2763 member of the board must be 60 years of age or older.

2764Section 66. Paragraph (a) of subsection (4) of section2765464.0205, Florida Statutes, is amended to read:

2766

464.0205 Retired volunteer nurse certificate.-

2767 (4) A retired volunteer nurse receiving certification from 2768 the board shall:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 108 of 161
Bill No. HB 547 (2015)

Amendment No.

2769 Work under the direct supervision of the director of a (a) 2770 county health department, a physician working under a limited 2771 license issued pursuant to s. 458.317 or s. 459.0075, a 2772 physician licensed under chapter 458 or chapter 459, an independent advanced practice registered nurse registered under 2773 2774 s. 464.0125, an advanced practice registered nurse practitioner 2775 certified under s. 464.012, or a registered nurse licensed under 2776 s. 464.008 or s. 464.009.

2777 Section 67. Subsection (2) of section 467.003, Florida 2778 Statutes, is amended to read:

2779 467.003 Definitions.—As used in this chapter, unless the 2780 context otherwise requires:

(2) "Certified nurse midwife" means a person who is
 <u>certified licensed</u> as an advanced <u>practice</u> registered nurse
 practitioner under part I of chapter 464 and who is certified to
 practice midwifery by the American College of Nurse Midwives.

2785 Section 68. Paragraph (b) of subsection (1) of section 2786 480.0475, Florida Statutes, is amended to read:

480.0475 Massage establishments; prohibited practices.-

(1) A person may not operate a massage establishment between the hours of midnight and 5 a.m. This subsection does not apply to a massage establishment:

(b) In which every massage performed between the hours of midnight and 5 a.m. is performed by a massage therapist acting under the prescription of a physician or physician assistant licensed under chapter 458, an osteopathic physician or

706771 - h0547-strike.docx

2787

Published On: 3/17/2015 5:45:31 PM

Page 109 of 161

Amendment No.

Bill No. HB 547 (2015)

2795 physician assistant licensed under chapter 459, a chiropractic 2796 physician licensed under chapter 460, a podiatric physician 2797 licensed under chapter 461, an independent advanced practice 2798 registered nurse registered, or an advanced practice registered 2799 nurse certified, practitioner licensed under part I of chapter 2800 464, or a dentist licensed under chapter 466; or 2801 Section 69. Subsection (7) of section 483.041, Florida 2802 Statutes, is amended to read: 2803 483.041 Definitions.-As used in this part, the term: 2804 (7) "Licensed practitioner" means a physician licensed 2805 under chapter 458, chapter 459, chapter 460, or chapter 461; a 2806 physician assistant licensed under chapter 458 or chapter 459; a 2807 certified optometrist licensed under chapter 463; a dentist 2808 licensed under chapter 466; a person licensed under chapter 462; 2809 an independent advanced practice registered nurse registered, or an advanced practice registered nurse certified, practitioner 2810 2811 licensed under part I of chapter 464; or a duly licensed practitioner from another state licensed under similar statutes 2812 2813 who orders examinations on materials or specimens for 2814 nonresidents of the State of Florida, but who reside in the same 2815 state as the requesting licensed practitioner. Section 70. Subsection (5) of section 483.181, Florida 2816 2817 Statutes, is amended to read: 2818 483.181 Acceptance, collection, identification, and 2819 examination of specimens.-

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 110 of 161

Bill No. HB 547 (2015)

Amendment No.

2820 (5)A clinical laboratory licensed under this part must 2821 accept a human specimen submitted for examination by a 2822 practitioner licensed under chapter 458, chapter 459, chapter 2823 460, chapter 461, chapter 462, chapter 463, s. 464.012, s. 464.0125, or chapter 466, if the specimen and test are the type 2824 2825 performed by the clinical laboratory. A clinical laboratory may 2826 only refuse a specimen based upon a history of nonpayment for 2827 services by the practitioner. A clinical laboratory shall not 2828 charge different prices for tests based upon the chapter under 2829 which a practitioner submitting a specimen for testing is 2830 licensed.

2831 Section 71. Subsection (5) of section 483.801, Florida 2832 Statutes, is amended to read:

2833 483.801 Exemptions.—This part applies to all clinical 2834 laboratories and clinical laboratory personnel within this 2835 state, except:

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

2840 Section 72. Paragraph (a) of subsection (11) of section 2841 486.021, Florida Statutes, is amended to read:

2842 486.021 Definitions.-In this chapter, unless the context 2843 otherwise requires, the term:

(11) "Practice of physical therapy" means the performance of physical therapy assessments and the treatment of any

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 111 of 161

Amendment No.

Bill No. HB 547 (2015)

2846 disability, injury, disease, or other health condition of human 2847 beings, or the prevention of such disability, injury, disease, 2848 or other condition of health, and rehabilitation as related 2849 thereto by the use of the physical, chemical, and other 2850 properties of air; electricity; exercise; massage; the 2851 performance of acupuncture only upon compliance with the 2852 criteria set forth by the Board of Medicine, when no penetration 2853 of the skin occurs; the use of radiant energy, including 2854 ultraviolet, visible, and infrared rays; ultrasound; water; the 2855 use of apparatus and equipment in the application of the 2856 foregoing or related thereto; the performance of tests of 2857 neuromuscular functions as an aid to the diagnosis or treatment 2858 of any human condition; or the performance of electromyography 2859 as an aid to the diagnosis of any human condition only upon 2860 compliance with the criteria set forth by the Board of Medicine.

A physical therapist may implement a plan of treatment 2861 (a) 2862 developed by the physical therapist for a patient or provided 2863 for a patient by a practitioner of record or by an independent advanced practice registered nurse registered under s. 464.0125 2864 2865 or an advanced practice registered nurse certified practitioner 2866 licensed under s. 464.012. The physical therapist shall refer the patient to or consult with a practitioner of record if the 2867 2868 patient's condition is found to be outside the scope of physical 2869 therapy. If physical therapy treatment for a patient is required 2870 beyond 21 days for a condition not previously assessed by a 2871 practitioner of record, the physical therapist shall obtain a

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 112 of 161

Bill No. HB 547 (2015)

Amendment No.

(1)

2872 practitioner of record who will review and sign the plan. For 2873 purposes of this paragraph, a health care practitioner licensed 2874 under chapter 458, chapter 459, chapter 460, chapter 461, or 2875 chapter 466 and engaged in active practice is eligible to serve 2876 as a practitioner of record.

2877 Section 73. Paragraph (d) of subsection (1) of section 2878 490.012, Florida Statutes, is amended to read:

2879 490.012 Violations; penalties; injunction.-

2880

2881 (d) No person shall hold herself or himself out by any 2882 title or description incorporating the word, or a permutation of 2883 the word, "psychotherapy" unless such person holds a valid, 2884 active license under chapter 458, chapter 459, chapter 490, or 2885 chapter 491, or such person is registered as an independent 2886 advanced practice registered nurse under s. 464.0125 or certified as an advanced practice registered nurse under 2887 2888 practitioner, pursuant to s. 464.012 and, who has been 2889 determined by the Board of Nursing to be as a specialist in 2890 psychiatric mental health.

2891 Section 74. Subsection (1) of section 491.0057, Florida 2892 Statutes, is amended to read:

2893 491.0057 Dual licensure as a marriage and family 2894 therapist.—The department shall license as a marriage and family 2895 therapist any person who demonstrates to the board that he or 2896 she:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 113 of 161

Bill No. HB 547 (2015)

Amendment No.

2897 (1)Holds a valid, active license as a psychologist under 2898 chapter 490 or as a clinical social worker or mental health 2899 counselor under this chapter, or is registered under s. 464.0125 2900 as an independent advanced practice registered nurse or 2901 certified under s. 464.012 as an advanced practice registered 2902 nurse and practitioner who has been determined by the Board of Nursing to be as a specialist in psychiatric mental health. 2903 2904 Section 75. Paragraph (d) of subsection (1) and subsection 2905 (2) of section 491.012, Florida Statutes, are amended to read: 2906 491.012 Violations; penalty; injunction.-2907 It is unlawful and a violation of this chapter for any (1)2908 person to: 2909 Use the terms "psychotherapist," "sex therapist," or (d) "juvenile sexual offender therapist" unless such person is 2910 2911 licensed pursuant to this chapter or chapter 490, or is 2912 registered under s. 464.0125 as an independent advanced practice 2913 registered nurse or certified under s. 464.012 as an advanced 2914 practice registered nurse and practitioner who has been determined by the Board of Nursing to be as a specialist in 2915 2916 psychiatric mental health and the use of such terms is within 2917 the scope of her or his practice based on education, training, 2918 and licensure. 2919 (2) It is unlawful and a violation of this chapter for any

2920 person to describe her or his services using the following terms 2921 or any derivative thereof, unless such person holds a valid, 2922 active license under this chapter or chapter 490, or <u>is</u>

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 114 of 161

Bill No. HB 547 (2015)

Amendment No.

2923	registered under s. 464.0125 as an independent advanced practice	
2924	registered nurse or is certified under s. 464.012 as an advanced	
2925	<u>practice</u> registered nurse <u>and</u> practitioner who has been	
2926	determined by the Board of Nursing <u>to be</u> as a specialist in	
2927	psychiatric mental health and the use of such terms is within	
2928	the scope of her or his practice based on education, training,	
2929	and licensure:	
2930	(a) "Psychotherapy."	
2931	(b) "Sex therapy."	
2932	(c) "Sex counseling."	
2933	(d) "Clinical social work."	
2934	(e) "Psychiatric social work."	
2935	(f) "Marriage and family therapy."	
2936	(g) "Marriage and family counseling."	
2937	(h) "Marriage counseling."	
2938	(i) "Family counseling."	
2939	(j) "Mental health counseling."	
2940	Section 76. Subsection (2) of section 493.6108, Florida	
2941	Statutes, is amended to read:	
2942	493.6108 Investigation of applicants by Department of	
2943	Agriculture and Consumer Services	
2944	(2) In addition to subsection (1), the department shall	
2945	make an investigation of the general physical fitness of the	
2946	Class "G" applicant to bear a weapon or firearm. Determination	
2947	of physical fitness shall be certified by a physician or	
2948	physician assistant currently licensed pursuant to chapter 458,	
	06771 - h0547-strike.docx	
Published On: 3/17/2015 5:45:31 PM		

Page 115 of 161

Bill No. HB 547 (2015)

Amendment No.

2949 chapter 459, or any similar law of another state or authorized 2950 to act as a licensed physician by a federal agency or 2951 department, or by <u>an independent advanced practice registered</u> 2952 <u>nurse registered, or an advanced practice</u> registered nurse 2953 <u>certified, under part I of practitioner currently licensed</u> 2954 <u>pursuant to chapter 464. Such certification shall be submitted</u> 2955 on a form provided by the department.

2956 Section 77. Subsection (1) of section 626.9707, Florida 2957 Statutes, is amended to read:

2958 626.9707 Disability insurance; discrimination on basis of 2959 sickle-cell trait prohibited.—

2960 An $\frac{N\Theta}{N}$ insurer authorized to transact insurance in this (1) 2961 state may not shall refuse to issue and deliver in this state 2962 any policy of disability insurance, whether such policy is 2963 defined as individual, group, blanket, franchise, industrial, or otherwise, which is currently being issued for delivery in this 2964 2965 state and which affords benefits and coverage for any medical 2966 treatment or service authorized and permitted to be furnished by 2967 a hospital, a clinic, a health clinic, a neighborhood health clinic, a health maintenance organization, a physician, a 2968 2969 physician physician's assistant, an independent advanced 2970 practice registered nurse, an advanced practice registered nurse 2971 practitioner, or a medical service facility or personnel solely 2972 because the person to be insured has the sickle-cell trait. 2973 Section 78. Paragraph (b) of subsection (1) of section 2974 627.357, Florida Statutes, is amended to read:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 116 of 161

Bill No. HB 547 (2015)

Amendment No.

	Allendilent no.
2975	627.357 Medical malpractice self-insurance
2976	(1) DEFINITIONSAs used in this section, the term:
2977	(b) "Health care provider" means any:
2978	1. Hospital licensed under chapter 395.
2979	2. Physician licensed, or physician assistant licensed,
2980	under chapter 458.
2981	3. Osteopathic physician or physician assistant licensed
2982	under chapter 459.
2983	4. Podiatric physician licensed under chapter 461.
2984	5. Health maintenance organization certificated under part
2985	I of chapter 641.
2986	6. Ambulatory surgical center licensed under chapter 395.
2987	7. Chiropractic physician licensed under chapter 460.
2988	8. Psychologist licensed under chapter 490.
2989	9. Optometrist licensed under chapter 463.
2990	10. Dentist licensed under chapter 466.
2991	11. Pharmacist licensed under chapter 465.
2992	12. Registered nurse, licensed practical nurse,
2993	independent advanced practice registered nurse, or advanced
2994	practice registered nurse practitioner licensed, registered, or
2995	<u>certified</u> registered under part I of chapter 464.
2996	13. Other medical facility.
2997	14. Professional association, partnership, corporation,
2998	joint venture, or other association established by the
2999	individuals set forth in subparagraphs 2., 3., 4., 7., 8., 9.,
3000	10., 11., and 12. for professional activity.
	706771 - h0547-strike.docx
	Published On: 3/17/2015 5:45:31 PM

Page 117 of 161

Bill No. HB 547 (2015)

Amendment No.

3001 Section 79. Subsection (6) of section 627.6471, Florida 3002 Statutes, is amended to read:

3003 627.6471 Contracts for reduced rates of payment; 3004 limitations; coinsurance and deductibles.-

3005 If psychotherapeutic services are covered by a policy (6) 3006 issued by the insurer, the insurer shall provide eligibility 3007 criteria for each group of health care providers licensed under 3008 chapter 458, chapter 459, chapter 490, or chapter 491, which 3009 include psychotherapy within the scope of their practice as 3010 provided by law, or for any person who is registered as an 3011 independent advanced practice registered nurse under s. 464.0125 3012 or certified as an advanced practice registered nurse 3013 practitioner in psychiatric mental health under s. 464.012 and 3014 who specializes in psychiatric mental health. When 3015 psychotherapeutic services are covered, eligibility criteria shall be established by the insurer to be included in the 3016 3017 insurer's criteria for selection of network providers. The 3018 insurer may not discriminate against a health care provider by excluding such practitioner from its provider network solely on 3019 3020 the basis of the practitioner's license.

3021 Section 80. Subsections (15) and (17) of section 627.6472, 3022 Florida Statutes, are amended to read:

3023

627.6472 Exclusive provider organizations.-

3024 (15) If psychotherapeutic services are covered by a policy
3025 issued by the insurer, the insurer shall provide eligibility
3026 criteria for all groups of health care providers licensed under

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 118 of 161

Amendment No.

Bill No. HB 547 (2015)

3027 chapter 458, chapter 459, chapter 490, or chapter 491, which 3028 include psychotherapy within the scope of their practice as 3029 provided by law, or for any person who is registered as an 3030 independent advanced practice registered nurse under s. 464.0125 3031 or certified as an advanced practice registered nurse 3032 practitioner in psychiatric mental health under s. 464.012 and 3033 who specializes in psychiatric mental health. When 3034 psychotherapeutic services are covered, eligibility criteria 3035 shall be established by the insurer to be included in the 3036 insurer's criteria for selection of network providers. The 3037 insurer may not discriminate against a health care provider by 3038 excluding such practitioner from its provider network solely on 3039 the basis of the practitioner's license.

3040 (17) An exclusive provider organization may shall not 3041 discriminate with respect to participation as to any independent 3042 advanced practice registered nurse registered pursuant to s. 3043 464.0125 or advanced practice registered nurse practitioner 3044 licensed and certified pursuant to s. 464.012, who is acting within the scope of such registration or license and 3045 3046 certification, solely on the basis of such registration license or certification. This subsection shall not be construed to 3047 prohibit a plan from including providers only to the extent 3048 3049 necessary to meet the needs of the plan's enrollees or from 3050 establishing any measure designed to maintain quality and 3051 control costs consistent with the responsibilities of the plan.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 119 of 161

Bill No. HB 547 (2015)

Amendment No.

3052 Section 81. Paragraph (a) of subsection (1) of section 3053 627.736, Florida Statutes, is amended to read:

3054 627.736 Required personal injury protection benefits; 3055 exclusions; priority; claims.-

REQUIRED BENEFITS. - An insurance policy complying with 3056 (1)3057 the security requirements of s. 627.733 must provide personal 3058 injury protection to the named insured, relatives residing in 3059 the same household, persons operating the insured motor vehicle, passengers in the motor vehicle, and other persons struck by the 3060 3061 motor vehicle and suffering bodily injury while not an occupant 3062 of a self-propelled vehicle, subject to subsection (2) and 3063 paragraph (4)(e), to a limit of \$10,000 in medical and 3064 disability benefits and \$5,000 in death benefits resulting from 3065 bodily injury, sickness, disease, or death arising out of the 3066 ownership, maintenance, or use of a motor vehicle as follows:

3067 Medical benefits.-Eighty percent of all reasonable (a) 3068 expenses for medically necessary medical, surgical, X-ray, 3069 dental, and rehabilitative services, including prosthetic devices and medically necessary ambulance, hospital, and nursing 3070 3071 services if the individual receives initial services and care 3072 pursuant to subparagraph 1. within 14 days after the motor vehicle accident. The medical benefits provide reimbursement 3073 3074 only for:

3075 1. Initial services and care that are lawfully provided, 3076 supervised, ordered, or prescribed by a physician licensed under 3077 chapter 458 or chapter 459, a dentist licensed under chapter

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 120 of 161

Bill No. HB 547

(2015)

Amendment No.

3078 466, or a chiropractic physician licensed under chapter 460, or 3079 <u>an independent advanced practice registered nurse registered</u> 3080 <u>under s. 464.0125</u>, or that are provided in a hospital or in a 3081 facility that owns, or is wholly owned by, a hospital. Initial 3082 services and care may also be provided by a person or entity 3083 licensed under part III of chapter 401 which provides emergency 3084 transportation and treatment.

3085 2. Upon referral by a provider described in subparagraph 3086 1., followup services and care consistent with the underlying 3087 medical diagnosis rendered pursuant to subparagraph 1. which may 3088 be provided, supervised, ordered, or prescribed only by a 3089 physician licensed under chapter 458 or chapter 459, a 3090 chiropractic physician licensed under chapter 460, a dentist licensed under chapter 466, an independent advanced practice 3091 3092 registered nurse registered under s. 464.0125, or, to the extent 3093 permitted by applicable law and under the supervision of such 3094 physician, osteopathic physician, chiropractic physician, or dentist, or independent advanced practice registered nurse, by a 3095 physician assistant licensed under chapter 458 or chapter 459 or 3096 3097 an advanced practice registered nurse certified practitioner 3098 licensed under s. 464.012 chapter 464. Followup services and care may also be provided by the following persons or entities: 3099 3100 A hospital or ambulatory surgical center licensed under a. 3101 chapter 395.

3102 b. An entity wholly owned by one or more physicians3103 licensed under chapter 458 or chapter 459, chiropractic

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 121 of 161

Bill No. HB 547 (2015)

Amendment No.

3104 physicians licensed under chapter 460, <u>independent advanced</u> 3105 <u>practice registered nurses registered under s. 464.0125</u>, or 3106 dentists licensed under chapter 466 or by such practitioners and 3107 the spouse, parent, child, or sibling of such practitioners.

3108 c. An entity that owns or is wholly owned, directly or 3109 indirectly, by a hospital or hospitals.

3110 d. A physical therapist licensed under chapter 486, based 3111 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

3116 (I) Has a medical director licensed under chapter 458, 3117 chapter 459, or chapter 460;

3118 (II) Has been continuously licensed for more than 3 years 3119 or is a publicly traded corporation that issues securities 3120 traded on an exchange registered with the United States 3121 Securities and Exchange Commission as a national securities 3122 exchange; and

3123 (III) Provides at least four of the following medical 3124 specialties:

- 3125 (A) General medicine.
- (B) Radiography.
- 3127 (C) Orthopedic medicine.
- 3128 (D) Physical medicine.
- 3129 (E) Physical therapy.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 122 of 161

Bill No. HB 547 (2015)

Amendment No.

3130

(F) Physical rehabilitation.

3131 (G) Prescribing or dispensing outpatient prescription 3132 medication.

3133

(H) Laboratory services.

3134 3. Reimbursement for services and care provided in 3135 subparagraph 1. or subparagraph 2. up to \$10,000 if a physician 3136 licensed under chapter 458 or chapter 459, a dentist licensed 3137 under chapter 466, an independent advanced practice registered nurse registered under s. 464.0125, a physician assistant 3138 3139 licensed under chapter 458 or chapter 459, or an advanced 3140 practice registered nurse certified practitioner licensed under 3141 s. 464.012 chapter 464 has determined that the injured person 3142 had an emergency medical condition.

3143 4. Reimbursement for services and care provided in 3144 subparagraph 1. or subparagraph 2. is limited to \$2,500 if a 3145 provider listed in subparagraph 1. or subparagraph 2. determines 3146 that the injured person did not have an emergency medical 3147 condition.

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.

3154 6. The Financial Services Commission shall adopt by rule 3155 the form that must be used by an insurer and a health care

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 123 of 161

Bill No. HB 547

(2015)

Amendment No.

3156 provider specified in sub-subparagraph 2.b., sub-subparagraph 3157 2.c., or sub-subparagraph 2.e. to document that the health care 3158 provider meets the criteria of this paragraph. Such rule must 3159 include a requirement for a sworn statement or affidavit.

3161 Only insurers writing motor vehicle liability insurance in this 3162 state may provide the required benefits of this section, and 3163 such insurer may not require the purchase of any other motor 3164 vehicle coverage other than the purchase of property damage 3165 liability coverage as required by s. 627.7275 as a condition for 3166 providing such benefits. Insurers may not require that property 3167 damage liability insurance in an amount greater than \$10,000 be 3168 purchased in conjunction with personal injury protection. Such 3169 insurers shall make benefits and required property damage 3170 liability insurance coverage available through normal marketing 3171 channels. An insurer writing motor vehicle liability insurance 3172 in this state who fails to comply with such availability requirement as a general business practice violates part IX of 3173 3174 chapter 626, and such violation constitutes an unfair method of 3175 competition or an unfair or deceptive act or practice involving 3176 the business of insurance. An insurer committing such violation is subject to the penalties provided under that part, as well as 3177 those provided elsewhere in the insurance code. 3178

3179 Section 82. Paragraph (e) of subsection (1) of section 3180 633.412, Florida Statutes, is amended to read:

3181

3160

633.412 Firefighters; qualifications for certification.-

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 124 of 161

Bill No. HB 547

(2015)

Amendment No.

3182 (1) A person applying for certification as a firefighter 3183 must:

3184 Be in good physical condition as determined by a (e) medical examination given by a physician, surgeon, or physician 3185 3186 assistant licensed to practice in the state under pursuant to 3187 chapter 458; an osteopathic physician, surgeon, or physician 3188 assistant licensed to practice in the state under pursuant to 3189 chapter 459; an independent advanced practice registered nurse 3190 registered, or an advanced practice registered nurse certified, 3191 practitioner licensed to practice in the state under part I of 3192 pursuant to chapter 464. Such examination may include, but need 3193 not be limited to, the National Fire Protection Association 3194 Standard 1582. A medical examination evidencing good physical 3195 condition shall be submitted to the division, on a form as 3196 provided by rule, before an individual is eligible for admission into a course under s. 633.408. 3197

3198 Section 83. Section 641.3923, Florida Statutes, is amended 3199 to read:

641.3923 Discrimination against providers prohibited.-A 3200 3201 health maintenance organization may shall not discriminate with 3202 respect to participation as to any independent advanced practice 3203 registered nurse registered under s. 464.0125, advanced practice registered nurse practitioner licensed and certified under 3204 3205 pursuant to s. 464.012, or physician assistant licensed under chapter 458 or chapter 459, who is acting within the scope of 3206 such registration, license and certification, or license, solely 3207

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 125 of 161

Bill No. HB 547 (2015)

Amendment No.

3208 on the basis of such <u>registration</u>, license or certification, or 3209 <u>license</u>. This section shall not be construed to prohibit a plan 3210 from including providers only to the extent necessary to meet 3211 the needs of the plan's enrollees or from establishing any 3212 measure designed to maintain quality and control costs 3213 consistent with the responsibilities of the plan.

3214 Section 84. Subsection (8) of section 641.495, Florida 3215 Statutes, is amended to read:

3216 641.495 Requirements for issuance and maintenance of 3217 certificate.-

3218 (8) Each organization's contracts, certificates, and
3219 subscriber handbooks shall contain a provision, if applicable,
3220 disclosing that, for certain types of described medical
3221 procedures, services may be provided by physician assistants,
3222 <u>independent advanced practice registered nurses, advanced</u>
3223 <u>practice registered nurses nurse practitioners</u>, or other
3224 individuals who are not licensed physicians.

3225 Section 85. Paragraph (a) of subsection (3) of section 3226 744.331, Florida Statutes, is amended to read:

3227

744.331 Procedures to determine incapacity.-

3228

(3) EXAMINING COMMITTEE.-

(a) Within 5 days after a petition for determination of incapacity has been filed, the court shall appoint an examining committee consisting of three members. One member must be a psychiatrist or other physician. The remaining members must be either a psychologist, a gerontologist, a another psychiatrist,

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 126 of 161

Bill No. HB 547

(2015)

Amendment No.

a or other physician, a registered nurse, an advanced practice 3234 3235 registered nurse practitioner, a physician assistant, a licensed 3236 social worker, a person with an advanced degree in gerontology 3237 from an accredited institution of higher education, or another other person who by knowledge, skill, experience, training, or 3238 3239 education may, in the court's discretion, advise the court in 3240 the form of an expert opinion. One of three members of the 3241 committee must have knowledge of the type of incapacity alleged in the petition. Unless good cause is shown, the attending or 3242 3243 family physician may not be appointed to the committee. If the 3244 attending or family physician is available for consultation, the 3245 committee must consult with the physician. Members of the 3246 examining committee may not be related to or associated with one 3247 another, with the petitioner, with counsel for the petitioner or 3248 the proposed quardian, or with the person alleged to be totally or partially incapacitated. A member may not be employed by any 3249 3250 private or governmental agency that has custody of, or furnishes, services or subsidies, directly or indirectly, to the 3251 person or the family of the person alleged to be incapacitated 3252 3253 or for whom a guardianship is sought. A petitioner may not serve 3254 as a member of the examining committee. Members of the examining 3255 committee must be able to communicate, either directly or 3256 through an interpreter, in the language that the alleged 3257 incapacitated person speaks or to communicate in a medium 3258 understandable to the alleged incapacitated person if she or he 3259 is able to communicate. The clerk of the court shall send notice

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 127 of 161

Bill No. HB 547 (2015)

Amendment No.

3260 of the appointment to each person appointed no later than 3 days 3261 after the court's appointment.

3262 Section 86. Subsection (1) of section 744.703, Florida 3263 Statutes, is amended to read:

3264 744.703 Office of public guardian; appointment, 3265 notification.-

The executive director of the Statewide Public 3266 (1)3267 Guardianship Office, after consultation with the chief judge and other circuit judges within the judicial circuit and with 3268 3269 appropriate advocacy groups and individuals and organizations 3270 who are knowledgeable about the needs of incapacitated persons, 3271 may establish, within a county in the judicial circuit or within 3272 the judicial circuit, one or more offices of public guardian and 3273 if so established, shall create a list of persons best qualified 3274 to serve as the public guardian, who have been investigated 3275 pursuant to s. 744.3135. The public guardian must have knowledge 3276 of the legal process and knowledge of social services available 3277 to meet the needs of incapacitated persons. The public guardian 3278 shall maintain a staff or contract with professionally qualified 3279 individuals to carry out the guardianship functions, including 3280 an attorney who has experience in probate areas and another person who has a master's degree in social work, or a 3281 gerontologist, a psychologist, a registered nurse, an 3282 3283 independent advanced practice registered nurse, or an advanced practice registered nurse practitioner. A public guardian that 32.84 3285 is a nonprofit corporate guardian under s. 744.309(5) must

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 128 of 161

Bill No. HB 547 (2015)

Amendment No.

3286 receive tax-exempt status from the United States Internal 3287 Revenue Service.

3288 Section 87. Subsection (6) of section 766.102, Florida 3289 Statutes, is amended to read:

3290 766.102 Medical negligence; standards of recovery; expert 3291 witness.-

3292 (6) A physician licensed under chapter 458 or chapter 459 3293 who qualifies as an expert witness under subsection (5) and who, 3294 by reason of active clinical practice or instruction of 3295 students, has knowledge of the applicable standard of care for 3296 nurses, independent advanced practice registered nurses, 3297 advanced practice registered nurses nurse practitioners, 3298 certified registered nurse anesthetists, certified registered 3299 nurse midwives, physician assistants, or other medical support 3300 staff may give expert testimony in a medical negligence action 3301 with respect to the standard of care of such medical support 3302 staff.

3303 Section 88. Subsection (3) of section 766.103, Florida 3304 Statutes, is amended to read:

3305

766.103 Florida Medical Consent Law.-

3306 (3) No Recovery <u>is not shall be</u> allowed in any court in
3307 this state against any physician licensed under chapter 458,
3308 osteopathic physician licensed under chapter 459, chiropractic
3309 physician licensed under chapter 460, podiatric physician
3310 licensed under chapter 461, dentist licensed under chapter 466,
3311 independent advanced practice registered nurse registered under

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 129 of 161

Bill No. HB 547 (2015)

Amendment No.

3312 <u>s. 464.0125</u>, advanced <u>practice</u> registered nurse practitioner 3313 certified under s. 464.012, or physician assistant licensed 3314 under s. 458.347 or s. 459.022 in an action brought for 3315 treating, examining, or operating on a patient without his or 3316 her informed consent when:

3317 (a)1. The action of the physician, osteopathic physician, 3318 chiropractic physician, podiatric physician, dentist, 3319 independent advanced practice registered nurse, advanced 3320 practice registered nurse practitioner, or physician assistant 3321 in obtaining the consent of the patient or another person 3322 authorized to give consent for the patient was in accordance 3323 with an accepted standard of medical practice among members of 3324 the medical profession with similar training and experience in 3325 the same or similar medical community as that of the person 3326 treating, examining, or operating on the patient for whom the consent is obtained; and 3327

3328 2. A reasonable individual, from the information provided by the physician, osteopathic physician, chiropractic physician, 3329 podiatric physician, dentist, independent advanced practice 3330 3331 registered nurse, advanced practice registered nurse 3332 practitioner, or physician assistant, under the circumstances, would have a general understanding of the procedure, the 3333 medically acceptable alternative procedures or treatments, and 3334 3335 the substantial risks and hazards inherent in the proposed 3336 treatment or procedures, which are recognized among other 3337 physicians, osteopathic physicians, chiropractic physicians,

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 130 of 161

Bill No. HB 547 (2015)

Amendment No.

Page 131 of 161

Bill No. HB 547 (2015)

Amendment No.

3364 8. A registered nurse, nurse midwife, a licensed practical 3365 nurse, an independent advanced practice registered nurse, or an 3366 advanced practice registered nurse practitioner licensed, 3367 registered, or certified registered under part I of chapter 464 or any facility that which employs nurses licensed, registered, 3368 3369 or certified registered under part I of chapter 464 to supply all or part of the care delivered under this section. 3370 3371 9. A midwife licensed under chapter 467. 3372 A health maintenance organization certificated under 10. part I of chapter 641. 3373 3374 A health care professional association and its 11. 3375 employees or a corporate medical group and its employees.

3376 12. Any other medical facility the primary purpose of 3377 which is to deliver human medical diagnostic services or which 3378 delivers nonsurgical human medical treatment, and which includes 3379 an office maintained by a provider.

3380 13. A dentist or dental hygienist licensed under chapter3381 466.

3382 14. A free clinic that delivers only medical diagnostic 3383 services or nonsurgical medical treatment free of charge to all 3384 low-income recipients.

3385 15. Any other health care professional, practitioner, 3386 provider, or facility under contract with a governmental 3387 contractor, including a student enrolled in an accredited 3388 program that prepares the student for licensure as any one of 3389 the professionals listed in subparagraphs 4.-9.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 132 of 161

Bill No. HB 547 (2015)

Amendment No.

3390	
3391	The term includes any nonprofit corporation qualified as exempt
3392	from federal income taxation under s. 501(a) of the Internal
3393	Revenue Code, and described in s. 501(c) of the Internal Revenue
3394	Code, which delivers health care services provided by licensed
3395	professionals listed in this paragraph, any federally funded
3396	community health center, and any volunteer corporation or
3397	volunteer health care provider that delivers health care
3398	services.
3399	Section 90. Subsection (1) of section 766.1116, Florida
3400	Statutes, is amended to read:
3401	766.1116 Health care practitioner; waiver of license
3402	renewal fees and continuing education requirements
3403	(1) As used in this section, the term "health care
3404	practitioner" means a physician or physician assistant licensed
3405	under chapter 458; an osteopathic physician or physician
3406	assistant licensed under chapter 459; a chiropractic physician
3407	licensed under chapter 460; a podiatric physician licensed under
3408	chapter 461; an independent advanced practice registered nurse,
3409	an advanced <u>practice</u> registered nurse practitioner , <u>a</u> registered
3410	nurse, or <u>a</u> licensed practical nurse licensed <u>, registered, or</u>
3411	certified under part I of chapter 464; a dentist or dental
3412	hygienist licensed under chapter 466; or a midwife licensed
3413	under chapter 467, who participates as a health care provider
3414	under s. 766.1115.

706771 - h0547-strike.docx Published On: 3/17/2015 5:45:31 PM

Page 133 of 161

Bill No. HB 547 (2015)

Amendment No.

3415 Section 91. Paragraph (c) of subsection (1) of section
3416 766.118, Florida Statutes, is amended to read:
3417 766.118 Determination of noneconomic damages.-

3418

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

3419 (C) "Practitioner" means any person licensed under chapter 3420 458, chapter 459, chapter 460, chapter 461, chapter 462, chapter 3421 463, chapter 466, chapter 467, or chapter 486; registered under 3422 s. 464.0125; or certified under s. 464.012. "Practitioner" also 3423 means any association, corporation, firm, partnership, or other 3424 business entity under which such practitioner practices or any 3425 employee of such practitioner or entity acting in the scope of 3426 his or her employment. For the purpose of determining the 3427 limitations on noneconomic damages set forth in this section, 3428 the term "practitioner" includes any person or entity for whom a 3429 practitioner is vicariously liable and any person or entity whose liability is based solely on such person or entity being 3430 3431 vicariously liable for the actions of a practitioner.

3432 Section 92. Subsection (3) of section 768.135, Florida 3433 Statutes, is amended to read:

3434 768.135 Volunteer team practitioners physicians; 3435 immunity.-

3436 (3) A practitioner licensed under chapter 458, chapter
3437 459, chapter 460, or s. 464.012, or s. 464.0125 who gratuitously
and in good faith conducts an evaluation pursuant to s.
3439 1006.20(2)(c) is not liable for any civil damages arising from

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 134 of 161

Bill No. HB 547 (2015)

Amendment No.

3440 that evaluation unless the evaluation was conducted in a 3441 wrongful manner.

3442 Section 93. Subsection (4) of section 782.071, Florida 3443 Statutes, is amended to read:

3444 782.071 Vehicular homicide.—"Vehicular homicide" is the 3445 killing of a human being, or the killing of an unborn child by 3446 any injury to the mother, caused by the operation of a motor 3447 vehicle by another in a reckless manner likely to cause the 3448 death of, or great bodily harm to, another.

3449 (4) In addition to any other punishment, the court may 3450 order the person to serve 120 community service hours in a trauma center or hospital that regularly receives victims of 3451 3452 vehicle accidents, under the supervision of an independent 3453 advanced practice registered nurse, an advanced practice 3454 registered nurse, a registered nurse, an emergency room 3455 physician, or an emergency medical technician pursuant to a 3456 voluntary community service program operated by the trauma 3457 center or hospital.

3458 Section 94. Subsection (5) of section 794.08, Florida 3459 Statutes, is amended to read:

3460

794.08 Female genital mutilation.-

3461 (5) This section does not apply to procedures performed by 3462 or under the direction of a physician licensed under chapter 3463 $458_{;\tau}$ an osteopathic physician licensed under chapter $459_{;\tau}$ a 3464 registered nurse licensed under part I of chapter 464, a 3465 practical nurse licensed under part I of chapter 464, an

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 135 of 161

Bill No. HB 547

(2015)

Amendment No.

3466 independent advanced practice registered nurse, or an advanced 3467 practice registered nurse licensed, registered, or certified 3468 practitioner licensed under part I of chapter 464; - a midwife 3469 licensed under chapter 467; $_{\tau}$ or a physician assistant licensed under chapter 458 or chapter 459, when necessary to preserve the 3470 3471 physical health of a female person. This section also does not 3472 apply to any autopsy or limited dissection conducted pursuant to 3473 chapter 406.

3474 Section 95. Subsection (21) of section 893.02, Florida 3475 Statutes, is amended to read:

3476 893.02 Definitions.—The following words and phrases as 3477 used in this chapter shall have the following meanings, unless 3478 the context otherwise requires:

3479 "Practitioner" means a physician or physician (21)3480 assistant licensed under pursuant to chapter 458, a dentist licensed under pursuant to chapter 466, a veterinarian licensed 3481 3482 under pursuant to chapter 474, an osteopathic physician or physician assistant licensed under pursuant to chapter 459, a 3483 naturopath licensed under pursuant to chapter 462, a certified 3484 3485 optometrist licensed under pursuant to chapter 463, an 3486 independent advanced practice registered nurse registered under s. 464.0125, an advanced practice registered nurse certified 3487 3488 under s. 464.012, or a podiatric physician licensed under 3489 pursuant to chapter 461, provided such practitioner holds a 3490 valid federal controlled substance registry number.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 136 of 161

Bill No. HB 547

(2015)

Amendment No.

3491 Section 96. Subsection (6) of section 943.13, Florida 3492 Statutes, is amended to read:

3493 943.13 Officers' minimum qualifications for employment or 3494 appointment.-On or after October 1, 1984, any person employed or 3495 appointed as a full-time, part-time, or auxiliary law 3496 enforcement officer or correctional officer; on or after October 3497 1, 1986, any person employed as a full-time, part-time, or 3498 auxiliary correctional probation officer; and on or after 3499 October 1, 1986, any person employed as a full-time, part-time, 3500 or auxiliary correctional officer by a private entity under 3501 contract to the Department of Corrections, to a county 3502 commission, or to the Department of Management Services shall:

3503 (6) Have passed a physical examination by a licensed 3504 physician, a physician assistant, an independent advanced 3505 practice registered nurse, or a certified advanced practice 3506 registered nurse practitioner, based on specifications 3507 established by the commission. In order to be eligible for the 3508 presumption set forth in s. 112.18 while employed with an employing agency, a law enforcement officer, correctional 3509 3510 officer, or correctional probation officer must have 3511 successfully passed the physical examination required by this 3512 subsection upon entering into service as a law enforcement 3513 officer, correctional officer, or correctional probation officer 3514 with the employing agency, which examination must have failed to 3515 reveal any evidence of tuberculosis, heart disease, or hypertension. A law enforcement officer, correctional officer, 3516

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 137 of 161

Bill No. HB 547 (2015)

Amendment No.

3517 or correctional probation officer may not use a physical 3518 examination from a former employing agency for purposes of 3519 claiming the presumption set forth in s. 112.18 against the 3520 current employing agency.

3521 Section 97. Subsection (2) of section 945.603, Florida 3522 Statutes, is amended to read:

3523 945.603 Powers and duties of authority.-The purpose of the 3524 authority is to assist in the delivery of health care services 3525 for inmates in the Department of Corrections by advising the 3526 Secretary of Corrections on the professional conduct of primary, 3527 convalescent, dental, and mental health care and the management 3528 of costs consistent with quality care, by advising the Governor 3529 and the Legislature on the status of the Department of 3530 Corrections' health care delivery system, and by assuring that 3531 adequate standards of physical and mental health care for 3532 inmates are maintained at all Department of Corrections 3533 institutions. For this purpose, the authority has the authority 3534 to:

3535 (2)Review and make recommendations regarding health care 3536 for the delivery of health care services including, but not 3537 limited to, acute hospital-based services and facilities, primary and tertiary care services, ancillary and clinical 3538 3539 services, dental services, mental health services, intake and 3540 screening services, medical transportation services, and the use 3541 of advanced practice registered nurses nurse practitioner and 3542 physician assistants assistant personnel to act as physician

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 138 of 161

Bill No. HB 547 (2015)

Amendment No.

3543 extenders as these relate to inmates in the Department of 3544 Corrections.

3545 Section 98. Subsection (2) of section 960.28, Florida 3546 Statutes, is amended to read:

3547 960.28 Payment for victims' initial forensic physical 3548 examinations.-

The Crime Victims' Services Office of the department 3549 (2)3550 shall pay for medical expenses connected with an initial 3551 forensic physical examination of a victim of sexual battery as 3552 defined in chapter 794 or a lewd or lascivious offense as 3553 defined in chapter 800. Such payment shall be made regardless of 3554 whether the victim is covered by health or disability insurance 3555 and whether the victim participates in the criminal justice 3556 system or cooperates with law enforcement. The payment shall be 3557 made only out of moneys allocated to the Crime Victims' Services 3558 Office for the purposes of this section, and the payment may not 3559 exceed \$500 with respect to any violation. The department shall develop and maintain separate protocols for the initial forensic 3560 physical examination of adults and children. Payment under this 3561 3562 section is limited to medical expenses connected with the 3563 initial forensic physical examination, and payment may be made 3564 to a medical provider using an examiner qualified under part I 3565 of chapter 464, excluding s. 464.003(17) 464.003(16); chapter 3566 458; or chapter 459. Payment made to the medical provider by the 3567 department shall be considered by the provider as payment in full for the initial forensic physical examination associated 3568

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 139 of 161

Bill No. HB 547 (2015)

Amendment No.

3569 with the collection of evidence. The victim may not be required 3570 to pay, directly or indirectly, the cost of an initial forensic 3571 physical examination performed in accordance with this section.

3572 Section 99. Paragraph (i) of subsection (3) of section 3573 1002.20, Florida Statutes, is amended to read:

3574 1002.20 K-12 student and parent rights.-Parents of public 3575 school students must receive accurate and timely information 3576 regarding their child's academic progress and must be informed 3577 of ways they can help their child to succeed in school. K-12 3578 students and their parents are afforded numerous statutory 3579 rights including, but not limited to, the following:

3580

3581

(3) HEALTH ISSUES.-

(i) Epinephrine use and supply.-

3582 A student who has experienced or is at risk for life-1. 3583 threatening allergic reactions may carry an epinephrine auto-3584 injector and self-administer epinephrine by auto-injector while 3585 in school, participating in school-sponsored activities, or in 3586 transit to or from school or school-sponsored activities if the 3587 school has been provided with parental and physician 3588 authorization. The State Board of Education, in cooperation with 3589 the Department of Health, shall adopt rules for such use of 3590 epinephrine auto-injectors that shall include provisions to 3591 protect the safety of all students from the misuse or abuse of 3592 auto-injectors. A school district, county health department, 3593 public-private partner, and their employees and volunteers shall 3594 be indemnified by the parent of a student authorized to carry an

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 140 of 161

Bill No. HB 547

(2015)

Amendment No.

3595 epinephrine auto-injector for any and all liability with respect 3596 to the student's use of an epinephrine auto-injector pursuant to 3597 this paragraph.

2. A public school may purchase from a wholesale 3598 distributor as defined in s. 499.003 and maintain in a locked, 3599 3600 secure location on its premises a supply of epinephrine auto-3601 injectors for use if a student is having an anaphylactic 3602 reaction. The participating school district shall adopt a 3603 protocol developed by a licensed physician for the 3604 administration by school personnel who are trained to recognize 3605 an anaphylactic reaction and to administer an epinephrine auto-3606 injection. The supply of epinephrine auto-injectors may be 3607 provided to and used by a student authorized to self-administer 3608 epinephrine by auto-injector under subparagraph 1. or trained 3609 school personnel.

3610 3. The school district and its employees and agents, 3611 including the physician who provides the standing protocol for 3612 school epinephrine auto-injectors, are not liable for any injury 3613 arising from the use of an epinephrine auto-injector 3614 administered by trained school personnel who follow the adopted 3615 protocol and whose professional opinion is that the student is 3616 having an anaphylactic reaction:

3617 a. Unless the trained school personnel's action is willful 3618 and wanton;

3619 b. Notwithstanding that the parents or guardians of the 3620 student to whom the epinephrine is administered have not been

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 141 of 161

Bill No. HB 547 (2015)

Amendment No.

3621	provided notice or have not signed a statement acknowledging
3622	that the school district is not liable; and
3623	c. Regardless of whether authorization has been given by
3624	the student's parents or guardians or by the student's
3625	physician, <u>a physician</u> physician's assistant, <u>an independent</u>
3626	advanced practice registered nurse, or an advanced practice
3627	registered nurse practitioner .
3628	Section 100. Paragraph (b) of subsection (17) of section
3629	1002.42, Florida Statutes, is amended to read:
3630	1002.42 Private schools
3631	(17) EPINEPHRINE SUPPLY
3632	(b) The private school and its employees and agents,
3633	including the physician who provides the standing protocol for
3634	school epinephrine auto-injectors, are not liable for any injury
3635	arising from the use of an epinephrine auto-injector
3636	administered by trained school personnel who follow the adopted
3637	protocol and whose professional opinion is that the student is
3638	having an anaphylactic reaction:
3639	1. Unless the trained school personnel's action is willful
3640	and wanton;
3641	2. Notwithstanding that the parents or guardians of the
3642	student to whom the epinephrine is administered have not been
3643	provided notice or have not signed a statement acknowledging
3644	that the school district is not liable; and
3645	3. Regardless of whether authorization has been given by
3646	the student's parents or guardians or by the student's

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 142 of 161

Bill No. HB 547 (2015)

Amendment No.

3647 physician, <u>a physician physician's</u> assistant, <u>an independent</u> 3648 <u>advanced practice registered nurse</u>, or <u>an</u> advanced <u>practice</u> 3649 registered nurse practitioner.

3650 Section 101. Subsections (4) and (5) of section 1006.062, 3651 Florida Statutes, are amended to read:

3652 1006.062 Administration of medication and provision of 3653 medical services by district school board personnel.-

3654 Nonmedical assistive personnel shall be allowed to (4) 3655 perform health-related services upon successful completion of 3656 child-specific training by a registered nurse, an independent 3657 advanced practice registered nurse, or an advanced practice registered nurse practitioner licensed, registered, or certified 3658 3659 under part I of chapter 464; $_{\tau}$ a physician licensed pursuant to chapter 458 or chapter 459; \overline{r} or a physician assistant licensed 3660 3661 pursuant to chapter 458 or chapter 459. All procedures shall be 3662 monitored periodically by a nurse, an independent advanced 3663 practice registered nurse, an advanced practice registered nurse practitioner, a physician assistant, or a physician, including, 3664 but not limited to: 3665

3666

(a) Intermittent clean catheterization.

3667 (b) Gastrostomy tube feeding.

3668 (c) Monitoring blood glucose.

(d) Administering emergency injectable medication.

3670 (5) For all other invasive medical services not listed in
3671 this subsection, a registered nurse, an independent advanced
3672 practice registered nurse, or an advanced practice registered

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 143 of 161

(2015)

Bill No. HB 547

Amendment No.

3673 nurse practitioner licensed, registered, or certified under part 3674 <u>I of chapter 464;</u> a physician licensed pursuant to chapter 458 3675 or chapter $459_{;\tau}$ or a physician assistant licensed pursuant to 3676 chapter 458 or chapter 459 shall determine if nonmedical 3677 district school board personnel shall be allowed to perform such 3678 service.

3679 Section 102. Paragraph (c) of subsection (2) of section 3680 1006.20, Florida Statutes, is amended to read:

3681

1006.20 Athletics in public K-12 schools.-

3682

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

3683 The FHSAA shall adopt bylaws that require all students (C) 3684 participating in interscholastic athletic competition or who are 3685 candidates for an interscholastic athletic team to 3686 satisfactorily pass a medical evaluation each year prior to 3687 participating in interscholastic athletic competition or engaging in any practice, tryout, workout, or other physical 3688 3689 activity associated with the student's candidacy for an interscholastic athletic team. Such medical evaluation may be 3690 administered only by a practitioner licensed under chapter 458, 3691 3692 chapter 459, chapter 460, or s. 464.012, or s. 464.0125, and in 3693 good standing with the practitioner's regulatory board. The bylaws shall establish requirements for eliciting a student's 3694 3695 medical history and performing the medical evaluation required 3696 under this paragraph, which shall include a physical assessment 3697 of the student's physical capabilities to participate in 3698 interscholastic athletic competition as contained in a uniform

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 144 of 161
Bill No. HB 547

(2015)

Amendment No.

3699 preparticipation physical evaluation and history form. The 3700 evaluation form shall incorporate the recommendations of the 3701 American Heart Association for participation cardiovascular 3702 screening and shall provide a place for the signature of the 3703 practitioner performing the evaluation with an attestation that 3704 each examination procedure listed on the form was performed by 3705 the practitioner or by someone under the direct supervision of 3706 the practitioner. The form shall also contain a place for the 3707 practitioner to indicate if a referral to another practitioner 3708 was made in lieu of completion of a certain examination 3709 procedure. The form shall provide a place for the practitioner 3710 to whom the student was referred to complete the remaining 3711 sections and attest to that portion of the examination. The 3712 preparticipation physical evaluation form shall advise students 3713 to complete a cardiovascular assessment and shall include information concerning alternative cardiovascular evaluation and 3714 3715 diagnostic tests. Results of such medical evaluation must be 3716 provided to the school. No student shall be eligible to participate in any interscholastic athletic competition or 3717 3718 engage in any practice, tryout, workout, or other physical 3719 activity associated with the student's candidacy for an 3720 interscholastic athletic team until the results of the medical 3721 evaluation have been received and approved by the school.

3722 Section 103. Subsection (1) and paragraph (a) of 3723 subsection (2) of section 1009.65, Florida Statutes, are amended 3724 to read:

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 145 of 161

Bill No. HB 547

(2015)

Amendment No.

3725 1009.65 Medical Education Reimbursement and Loan Repayment 3726 Program.-

3727 To encourage qualified medical professionals to (1)3728 practice in underserved locations where there are shortages of such personnel, there is established the Medical Education 3729 3730 Reimbursement and Loan Repayment Program. The function of the 3731 program is to make payments that offset loans and educational 3732 expenses incurred by students for studies leading to a medical or nursing degree, medical or nursing licensure, or advanced 3733 3734 practice registered nurse practitioner certification or 3735 physician assistant licensure. The following licensed or 3736 certified health care professionals are eligible to participate 3737 in this program: medical doctors with primary care specialties, 3738 doctors of osteopathic medicine with primary care specialties, physician physician's assistants, licensed practical nurses and 3739 3740 registered nurses, and advanced practice registered nurses nurse 3741 practitioners with primary care specialties such as certified nurse midwives. Primary care medical specialties for physicians 3742 include obstetrics, gynecology, general and family practice, 3743 3744 internal medicine, pediatrics, and other specialties which may 3745 be identified by the Department of Health.

3746 (2) From the funds available, the Department of Health 3747 shall make payments to selected medical professionals as 3748 follows:

3749 (a) Up to \$4,000 per year for licensed practical nurses3750 and registered nurses, up to \$10,000 per year for advanced

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 146 of 161

Bill No. HB 547 (2015)

Amendment No.

3751 practice registered nurses nurse practitioners and physician 3752 physician's assistants, and up to \$20,000 per year for 3753 physicians. Penalties for noncompliance shall be the same as those in the National Health Services Corps Loan Repayment 3754 3755 Program. Educational expenses include costs for tuition, 3756 matriculation, registration, books, laboratory and other fees, 3757 other educational costs, and reasonable living expenses as 3758 determined by the Department of Health.

3759 Section 104. Subsection (2) of section 1009.66, Florida3760 Statutes, is amended to read:

3761

1009.66 Nursing Student Loan Forgiveness Program.-

3762 (2) To be eligible, a candidate must have graduated from 3763 an accredited or approved nursing program and have received a 3764 Florida license as a licensed practical nurse or a registered 3765 nurse or a Florida certificate as an advanced <u>practice</u> 3766 registered nurse <u>practitioner</u>.

3767 Section 105. Subsection (3) of section 1009.67, Florida3768 Statutes, is amended to read:

3769

1009.67 Nursing scholarship program.-

(3) A scholarship may be awarded for no more than 2 years, in an amount not to exceed \$8,000 per year. However, registered nurses pursuing a graduate degree for a faculty position or to practice as an advanced <u>practice</u> registered nurse practitioner may receive up to \$12,000 per year. These amounts shall be adjusted by the amount of increase or decrease in the Consumer

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 147 of 161

Bill No. HB 547 (2015)

Amendment No.

3776	Price Index for All Urban Consumers published by the United
3777	States Department of Commerce.
3778	Section 106. This act shall take effect July 1, 2015.
3779	
3780	
3781	TITLE AMENDMENT
3782	Remove everything before the enacting clause and insert:
3783	A bill to be entitled
3784	An act relating to scope of practice of advanced
3785	practice registered nurses and physician assistants;
3786	amending s. 464.003, F.S.; revising and providing
3787	definitions; redesignating advanced registered nurse
3788	practitioners as advanced practice registered nurses;
3789	providing for independent advanced practice registered
3790	nurses to practice advanced or specialized nursing;
3791	revising composition of a joint committee to include
3792	an independent advanced practice registered nurse;
3793	exempting an independent advanced practice registered
3794	nurse from a requirement that certain medical acts be
3795	supervised by a physician; amending s. 464.012, F.S.;
3796	revising advanced practice registered nurse
3797	certification requirements; authorizing advanced
3798	practice registered nurses to administer, dispense,
3799	and prescribe medicinal drugs pursuant to a protocol;
3800	creating s. 464.0125, F.S.; providing for the
3801	registration of independent advanced practice

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 148 of 161

Bill No. HB 547

(2015)

Amendment No.

3802 registered nurses who meet certain requirements; 3803 specifying acts that independent advanced practice 3804 registered nurses are authorized to perform without 3805 physician supervision or protocol; providing for 3806 biennial renewal of registration, including continuing 3807 education requirements; providing for application and 3808 biennial renewal fees; providing rulemaking authority; 3809 amending s. 464.015, F.S.; providing title protection 3810 for independent advanced practice registered nurses; 3811 creating s. 464.0155, F.S.; requiring independent 3812 advanced practice registered nurses to report adverse 3813 incidents to the Department of Health in a certain 3814 manner; providing for department review of adverse 3815 incidents; authorizing the department to take 3816 disciplinary action in cases of adverse incidents; 3817 amending s. 464.016, F.S.; providing penalties for 3818 illegally using certain titles; amending s. 464.018, F.S.; adding grounds for disciplinary actions against 3819 nurses; amending s. 39.303, F.S.; revising 3820 3821 requirements relating to review of certain cases of 3822 abuse or neglect and standards for face-to-face 3823 medical evaluations by a child protection team; 3824 amending s. 39.304, F.S.; authorizing a physician 3825 assistant and an independent advanced practice 3826 registered nurse to perform or order an examination 3827 and diagnose a child without parental consent under

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 149 of 161

Bill No. HB 547 (2015)

Amendment No.

3828 certain circumstances; amending s. 90.503, F.S.; 3829 redefining the term "psychotherapist" to include an 3830 independent advanced practice registered nurse with a 3831 specified scope of practice; amending s. 112.0455, 3832 F.S.; authorizing an independent advanced practice 3833 registered nurse to collect specimens for drug 3834 testing; amending s. 121.0515, F.S.; designating an 3835 advanced practice registered nurse as a special risk 3836 member under certain conditions; amending ss. 310.071, 3837 310.073, and 310.081, F.S.; authorizing a physician 3838 assistant and an independent advanced practice 3839 registered nurse to administer the physical 3840 examination required for deputy pilot certification 3841 and state pilot licensure; broadening an exception to 3842 the prohibition against the use of controlled 3843 substances by an applicant for a deputy pilot 3844 certificate or a state pilot license to allow the use 3845 of controlled substances prescribed by a physician 3846 assistant, an independent advanced practice registered 3847 nurse, or an advanced practice registered nurse; 3848 requiring a physician assistant or an independent 3849 advanced practice registered nurse performing the 3850 physical examination to know the minimum licensure 3851 standards and certify that such standards are met; 3852 amending s. 320.0848, F.S.; authorizing an independent 3853 advanced practice registered nurse to certify that a

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 150 of 161

Bill No. HB 547 (2015)

Amendment No.

3854	person is disabled; amending s. 381.00315, F.S.;
3855	authorizing the reactivation of an independent
3856	advanced practice registered nurse license in a public
3857	health emergency; amending s. 381.00593, F.S.;
3858	redefining the term "health care practitioner" to
3859	include a physician assistant and an independent
3860	advanced practice registered nurse; amending s.
3861	381.026, F.S.; revising the definition of the term
3862	"health care provider" to include a physician
3863	assistant and an independent advanced practice
3864	registered nurse; amending s. 382.008, F.S.;
3865	authorizing a physician assistant, an independent
3866	advanced practice nurse, or an advanced practice
3867	registered nurse to file a certificate of death or
3868	fetal death under certain circumstances; authorizing a
3869	certified nurse midwife to provide certain information
3870	to a funeral director within a specified time period;
3871	revising the definition of the term "primary or
3872	attending physician"; amending s. 383.14, F.S.;
3873	authorizing the release of certain newborn tests and
3874	screening results to an independent advanced practice
3875	registered nurse; amending ss. 383.141, 627.357, and
3876	766.1115, F.S.; revising the definition of the term
3877	"health care provider" to include an independent
3878	advanced practice registered nurse; amending s.
3879	390.0111, F.S.; including an independent advanced

| 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 151 of 161

Bill No. HB 547 (2015)

Amendment No.

3880 practice registered nurse in a list of health care 3881 practitioners authorized to review an ultrasound with 3882 a woman prior to an abortion procedure; amending s. 3883 390.012, F.S.; including an independent advanced 3884 practice registered nurse in a list of health care 3885 practitioners authorized to provide postoperative 3886 monitoring and required to be available throughout an 3887 abortion procedure, remain at the abortion clinic 3888 until all patients are discharged, and attempt to 3889 assess the patient's recovery within a specified time; 3890 amending s. 394.455, F.S.; revising the definition of 3891 the term "psychiatric nurse" to include an independent 3892 advanced practice registered nurse certified in a 3893 specified specialty; amending s. 394.463, F.S.; 3894 authorizing a physician assistant, an independent 3895 advanced practice registered nurse, or an advanced 3896 practice registered nurse to initiate an involuntary examination for mental illness under certain 3897 circumstances; providing for examination of a patient 3898 3899 by a physician assistant or psychiatric nurse; 3900 authorizing a psychiatric nurse to approve the release 3901 of a patient under certain conditions; amending s. 3902 395.0191, F.S.; authorizing an independent advanced 3903 practice registered nurse to apply for clinical 3904 privileges; providing an exception to the requirement 3905 for onsite medical direction for certain independent

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 152 of 161

Bill No. HB 547

(2015)

Amendment No.

3906 advanced practice registered nurses; amending s. 3907 395.605, F.S.; including independent advanced practice 3908 registered nurses in a list of health care 3909 practitioners who must supervise the care of a patient 3910 or be on duty for a specified duration in an emergency 3911 care setting; amending s. 397.311, F.S.; revising the definition of the term "qualified professional" to 3912 3913 include an independent advanced practice registered 3914 nurse; conforming terminology; amending s. 397.405, 3915 F.S.; providing that an independent advanced practice 3916 registered nurse's practice may not be limited under 3917 certain circumstances; amending s. 397.501, F.S.; 3918 prohibiting the denial of certain services to an 3919 individual who takes medication prescribed by a 3920 physician assistant, an independent advanced practice 3921 registered nurse, or an advanced practice registered 3922 nurse; amending s. 400.021, F.S.; revising the 3923 definition of the term "geriatric outpatient clinic" to include a site staffed by an independent advanced 3924 3925 practice registered nurse; amending s. 400.0255, F.S.; 3926 including independent advanced practice registered 3927 nurses in a list of health care practitioners who must 3928 sign a notice of discharge or transfer; amending s. 3929 400.172, F.S.; including independent advanced practice 3930 registered nurses and advanced practice registered 3931 nurses in a list of health care practitioners who may

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 153 of 161

Bill No. HB 547 (2015)

Amendment No.

3932	provide a prospective respite care resident with
3933	certain medical information; amending s. 400.462,
3934	F.S.; defining the term "independent advanced practice
3935	registered nurse"; amending s. 400.487, F.S.;
3936	including independent advanced practice registered
3937	nurses in a list of health care practitioners who must
3938	establish treatment orders for certain patients under
3939	certain circumstances; amending s. 400.506, F.S.;
3940	applying medical treatment plan requirements to
3941	independent advanced practice registered nurses;
3942	amending s. 400.9905, F.S.; exempting entities where
3943	health care services are provided by independent
3944	advanced practice registered nurses from clinic
3945	licensure requirements; amending s. 401.445, F.S.;
3946	prohibiting recovery of damages in court against an
3947	independent advanced practice registered nurse under
3948	certain circumstances; requiring an independent
3949	advanced practice registered nurse to attempt to
3950	obtain a person's consent prior to providing emergency
3951	services; amending ss. 409.905 and 409.908, F.S.;
3952	requiring the agency to reimburse independent advanced
3953	practice registered nurses for providing certain
3954	mandatory Medicaid services; amending s. 409.9081,
3955	F.S.; requiring copayments under the Medicaid program
3956	to be paid for independent advanced practice
3957	registered nurse services; amending s. 409.973, F.S.;

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 154 of 161

Bill No. HB 547

(2015)

Amendment No.

3958 requiring managed care plans to cover independent 3959 advanced practice registered nurse services; amending 3960 s. 429.26, F.S.; prohibiting independent advanced 3961 practice registered nurses from having a financial 3962 interest in the assisted living facility that employs 3963 them; including independent advanced practice 3964 registered nurses in a list of health care 3965 practitioners from whom an assisted living facility 3966 resident may obtain an examination prior to admission; 3967 amending s. 429.918, F.S.; revising the definition of 3968 the term "ADRD participant" to include participants 3969 who have a documented diagnosis of Alzheimer's disease 3970 or a dementia-related disorder from an independent 3971 advanced practice registered nurse; including 3972 independent advanced practice registered nurses in a 3973 list of health care practitioners from whom an ADRD participant may obtain signed medical documentation; 3974 3975 amending s. 440.102, F.S.; authorizing, for the 3976 purpose of drug-free workforce program requirements, 3977 an independent advanced practice registered nurse to 3978 collect a specimen for a drug test; amending s. 3979 456.048, F.S.; requiring independent advanced practice 3980 registered nurses to maintain medical malpractice 3981 insurance or provide proof of financial 3982 responsibility; exempting independent advanced 3983 practice registered nurses from such requirements

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 155 of 161

Bill No. HB 547 (2015)

Amendment No.

3984	under certain circumstances; amending s. 456.053,
3985	F.S.; revising the definition of the term "board" to
3986	include the Board of Nursing; revising the definitions
3987	of the terms "health care provider" and "sole
3988	provider" to include independent advanced practice
3989	registered nurses; authorizing an independent advanced
3990	practice registered nurse to make referrals under
3991	certain circumstances; conforming a reference;
3992	amending s. 456.072, F.S.; requiring the suspension
3993	and fining of a physician assistant, an independent
3994	advanced practice registered nurse, or an advanced
3995	practice registered nurse for prescribing or
3996	dispensing a controlled substance in a certain manner;
3997	amending s. 456.44, F.S.; providing certain
3998	requirements for physician assistants, independent
3999	advanced practice registered nurses, and advanced
4000	practice registered nurses who prescribe controlled
4001	substances for the treatment of chronic nonmalignant
4002	pain; amending ss. 458.3265 and 459.0137, F.S.;
4003	requiring an independent advanced practice registered
4004	nurse to perform a physical examination of a patient
4005	at a pain-management clinic under certain
4006	circumstances; amending s. 458.347, F.S.; deleting the
4007	requirement that a formulary list controlled
4008	substances that a physician assistant may not
4009	prescribe; amending ss. 458.348 and 459.025, F.S.;

| 706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 156 of 161

Bill No. HB 547

(2015)

Amendment No.

4010 deleting obsolete provisions; amending s. 464.0205, 4011 F.S.; authorizing an independent advanced practice 4012 registered nurse to directly supervise a certified 4013 retired volunteer nurse; amending s. 480.0475; 4014 authorizing the operation of a massage establishment 4015 during specified times if a massage is prescribed by 4016 an independent advanced practice registered nurse; 4017 amending s. 483.041, F.S.; revising the definition of 4018 the term "licensed practitioner" to include a 4019 physician assistant and an independent advanced 4020 practice registered nurse; amending s. 483.181, F.S.; 4021 requiring clinical laboratories to accept a human 4022 specimen submitted by an independent advanced practice 4023 registered nurse; amending s. 486.021, F.S.; 4024 authorizing a physical therapist to implement a plan 4025 of treatment provided by an independent advanced 4026 practice registered nurse; amending s. 490.012, F.S.; 4027 allowing certain qualified independent advanced 4028 practice registered nurses to use the word, or a form 4029 of the word, "psychotherapy"; amending s. 491.0057, 40.30 F.S.; authorizing certain qualified independent 4031 advanced practice registered nurses to be licensed as 4032 marriage and family therapists; amending s. 491.012, 4033 F.S.; authorizing certain qualified independent 4034 advanced practice registered nurses to use specified 4035 terms; amending s. 493.6108, F.S.; authorizing an

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 157 of 161

Amendment No.

Bill No. HB 547 (2015)

4036 independent advanced practice registered nurse to 4037 certify the physical fitness of a certain class of 4038 applicants to bear a weapon or firearm; amending s. 4039 626.9707, F.S.; including independent advanced 4040 practice registered nurses in a list of entities and 4041 individuals that are protected from insurer 4042 discrimination when providing services to a person 4043 with the sickle-cell trait; amending s. 627.6471, 4044 F.S.; requiring insurers to provide eligibility 4045 criteria for certain qualified independent advanced 4046 practice registered nurses under certain 4047 circumstances; amending s. 627.6472, F.S.; requiring 4048 insurers to provide eligibility criteria for certain 4049 qualified independent advanced practice registered 4050 nurses under certain circumstances; prohibiting an 4051 exclusive provider organization from discriminating 4052 against participation by an independent advanced 4053 practice registered nurse; amending s. 627.736, F.S.; 4054 requiring personal injury protection insurance to 4055 cover a certain percentage of medical services and 4056 care provided by an independent advanced practice 4057 registered nurse, a practitioner supervised by an 4058 independent advanced practice registered nurse, or an 4059 entity wholly owned by one or more independent 4060 advanced practice registered nurses; reimbursing 4061 independent advanced practice registered nurses up to

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 158 of 161

Bill No. HB 547

(2015)

Amendment No.

4062 a specified amount for providing medical services and 4063 care; amending s. 633.412, F.S.; authorizing an 4064 independent advanced practice registered nurse to 4065 medically examine an applicant for firefighter certification; amending s. 641.3923, F.S.; prohibiting 4066 4067 a health maintenance organization from discriminating 4068 against the participation of a physician assistant or 4069 an independent advanced practice registered nurse; 4070 amending s. 641.495, F.S.; requiring a health 4071 maintenance organization to disclose in certain 4072 documents that certain services may be provided by 4073 independent advanced practice registered nurses; 4074 amending s. 744.331, F.S.; including a physician 4075 assistant as an eligible member of an examining 4076 committee; conforming terminology; amending s. 4077 744.703, F.S.; adding independent advanced practice 4078 registered nurses to a list of authorized 4079 professionals with whom a public guardian may contract 4080 to carry out guardianship functions; amending s. 4081 766.102, F.S.; providing requirements for 4082 qualification as an expert witness in a medical 4083 negligence case concerning the standard of care for an 4084 independent advanced practice registered nurse and an 4085 advanced practice registered nurse; amending s. 4086 766.103, F.S.; prohibiting recovery of damages against 4087 an independent advanced practice registered nurse

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 159 of 161

Bill No. HB 547

(2015)

Amendment No.

4088 under certain conditions; amending s. 766.1116, F.S.; 4089 revising the definition of the term "health care 4090 practitioner" to include an independent advanced 4091 practice registered nurse; amending s. 766.118, F.S.; 4092 revising the definition of the term "practitioner" to 4093 include an independent advanced practice registered 4094 nurse; amending s. 768.135, F.S.; providing immunity 4095 from liability for an independent advanced practice 4096 registered nurse who provides volunteer services under 4097 certain circumstances; amending s. 782.071, F.S.; 4098 allowing an independent advanced practice registered 4099 nurse or an advanced practice registered nurse to 4100 supervise a person who is completing community service 4101 hours in a trauma center or hospital; amending s. 4102 794.08, F.S.; providing that the section does not apply to procedures conducted by an independent 4103 4104 advanced practice registered nurse under certain circumstances; amending s. 893.02, F.S.; revising the 4105 4106 definition of the term "practitioner" to include a 4107 physician assistant, an independent advanced practice 4108 registered nurse, and an advanced practice registered 4109 nurse; amending s. 943.13, F.S.; authorizing a law 4110 enforcement officer or correctional officer to satisfy 4111 qualifications for employment or appointment by 4112 passing a physical examination conducted by an independent advanced practice registered nurse; 4113

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 160 of 161

Bill No. HB 547

(2015)

Amendment No.

4114 amending s. 945.603, F.S.; authorizing the 4115 Correctional Medical Authority to review and make 4116 recommendations relating to the use of advanced 4117 practice registered nurses as physician extenders; 4118 amending ss. 1002.20 and 1002.42, F.S.; including 4119 independent advanced practice registered nurses in a 4120 list of individuals who have immunity relating to the 4121 use of epinephrine auto-injectors in public and 4122 private schools; amending s. 1006.062, F.S.; 4123 authorizing nonmedical assistive personnel to perform 4124 health services if trained by an independent advanced 4125 practice registered nurse; requiring monitoring of 4126 such personnel by an independent advanced practice 4127 registered nurse; including independent advanced 4128 practice registered nurses in a list of practitioners 4129 who must determine whether such personnel may perform 4130 certain invasive medical services; amending s. 4131 1006.20, F.S.; authorizing an independent advanced 4132 practice registered nurse to medically evaluate a 4133 student athlete; amending ss. 110.12315, 252.515, 4134 395.602, 397.427, 456.0391, 456.0392, 456.041, 4135 458.331, 459.015, 464.004, 467.003, 483.801, 960.28, 4136 1009.65, 1009.66, and 1009.67, F.S.; conforming 4137 terminology; providing an effective date.

706771 - h0547-strike.docx

Published On: 3/17/2015 5:45:31 PM

Page 161 of 161