A bill to be entitled 1 2 An act relating to physician orders for life-3 sustaining treatment; creating s. 408.064, F.S.; 4 providing definitions; requiring the Agency for Health 5 Care Administration to act as the state clearinghouse 6 for compassionate and palliative care plans and 7 information on such plans; requiring that such plans 8 and information be electronically accessible to 9 specified health care providers; requiring the agency 10 to develop and maintain an electronic database for the submission of a resident's compassionate and 11 12 palliative care plan, including advance directives, 13 the electronic storage and retrieval of such plans, and access to such plans by specified health care 14 15 providers; requiring the agency to consult with advisers and experts to develop and implement the 16 database; authorizing the agency to subscribe to or 17 participate in a local or national public or private 18 19 clearinghouse in lieu of establishing and maintaining 20 an independent database; requiring the agency to 21 publish and disseminate certain information and 2.2 provide certain training relating to the database; amending ss. 395.1041, 400.142, and 400.487, F.S.; 23 authorizing specified personnel to withhold or 24 25 withdraw cardiopulmonary resuscitation if a patient 26 has a POLST form that contains such an order;

Page 1 of 25

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27 providing immunity from civil and criminal liability 28 to such personnel for such actions; providing that the 29 absence of a POLST form does not preclude a physician 30 from withholding or withdrawing cardiopulmonary 31 resuscitation; amending s. 400.605, F.S.; requiring the Department of Elderly Affairs, in consultation 32 33 with the agency, to adopt by rule procedures for the 34 implementation of POLST forms in hospice care; 35 amending s. 400.6095, F.S.; authorizing a hospice care team to withhold or withdraw cardiopulmonary 36 resuscitation if a patient has a POLST form that 37 38 contains such an order; providing immunity from civil and criminal liability to a provider for such actions; 39 providing that the absence of a POLST form does not 40 preclude a physician from withholding or withdrawing 41 42 cardiopulmonary resuscitation; amending s. 401.35, F.S.; requiring the Department of Health to establish 43 circumstances and procedures for honoring a POLST 44 45 form; amending s. 401.45, F.S.; authorizing emergency 46 medical transportation providers to withhold or 47 withdraw cardiopulmonary resuscitation or other medical interventions if a patient has a POLST form 48 49 that contains such an order; creating s. 401.455, 50 F.S.; requiring the Department of Health to develop, 51 and adopt by rule, a physician orders for life-52 sustaining treatment (POLST) form; providing

Page 2 of 25

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HB 957

2016

53	requirements for the POLST form; requiring the
54	
	signature and attestation of a physician on a POLST
55	form; providing requirements for a POLST form to be
56	valid; providing for compliance with an out-of-state
57	POLST form; prohibiting a POLST form from being
58	required as a condition for treatment; requiring the
59	review of a POLST form in certain circumstances;
60	providing for transferability; providing procedures in
61	cases of conflicting directives; providing
62	requirements for execution of a POLST for minors;
63	providing for effect of a POLST on insurance policies
64	and annuities; providing for the revocation of a POLST
65	form; providing for construction; amending s. 429.255,
66	F.S.; authorizing assisted living facility personnel
67	to withhold or withdraw cardiopulmonary resuscitation
68	if a patient has a POLST form that contains such an
69	order; providing immunity from civil and criminal
70	liability to facility staff and facilities for such
71	actions; providing that the absence of a POLST form
72	does not preclude a physician from withholding or
73	withdrawing cardiopulmonary resuscitation; amending s.
74	429.73, F.S.; requiring the Department of Elderly
75	Affairs to adopt rules for the implementation of POLST
76	forms in adult family-care homes; authorizing a
77	provider of such home to withhold or withdraw
78	cardiopulmonary resuscitation if a patient has a POLST
	Dage 2 of 25

Page 3 of 25

79 form that contains such an order; providing immunity from civil and criminal liability to a provider for 80 such actions; amending s. 456.072, F.S.; providing 81 82 that a licensee may withhold or withdraw 83 cardiopulmonary resuscitation or the use of an external defibrillator if presented with an order not 84 85 to resuscitate or a POLST form that contains an order 86 not to resuscitate; requiring the Department of Health 87 to adopt rules providing for the implementation of such orders; providing immunity to licensees for 88 withholding or withdrawing cardiopulmonary 89 90 resuscitation or the use of an automated defibrillator pursuant to such orders; amending s. 765.205, F.S.; 91 92 requiring a health care surrogate to provide written 93 consent for a POLST form under certain circumstances; 94 providing an effective date. 95 Be It Enacted by the Legislature of the State of Florida: 96 97 Section 408.064, Florida Statutes, is created 98 Section 1. 99 to read: 100 408.064 Clearinghouse for compassionate and palliative 101 care plans.-102 DEFINITIONS.-As used in this section, the term: (1)"Advance directive" has the same meaning as in s. 103 (a) 104 765.101.

Page 4 of 25

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105 (b) "Compassionate and palliative care plan" or "plan" means an end-of-life document or a medical directive document 106 107 recognized by this state and executed by a resident of this 108 state, including, but not limited to, an advance directive, donot-resuscitate order, physician orders for life-sustaining 109 110 treatment, or health care surrogate designation. 111 "Department" means the Department of Health. (C) "Do-not-resuscitate order" means an order issued 112 (d) 113 pursuant to s. 401.45(3). 114 "End-stage condition" has the same meaning as in s. (e) 115 765.101. 116 (f) "Physician orders for life-sustaining treatment" or 117 "POLST" means an order issued pursuant to s. 401.455. (2) INFORMATION CLEARINGHOUSE AND ESTABLISHMENT OF 118 ELECTRONIC DATABASE. - The agency shall act as a clearinghouse of 119 120 information on compassionate and palliative care plans, which 121 must be accessible to health care providers. The agency shall 122 develop and maintain as part of the clearinghouse a reliable and 123 secure electronic database that allows the submission, storage, 124 indexing, and retrieval of plans submitted by residents of this 125 state, which plans may be accessed by a resident's treating 126 health care provider. The agency shall consult with 127 compassionate and palliative care providers, health care 128 facilities, and residents of this state as necessary and 129 appropriate to facilitate the development and implementation of 130 the database. The agency may subscribe to or otherwise

Page 5 of 25

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2016

131	participate in a local or national public or private
132	clearinghouse to meet the requirements of this subsection. The
133	agency shall publish and disseminate to residents of this state
134	information regarding its role as a clearinghouse and the
135	availability of the database. The agency shall also provide
136	training to health care providers and health care facilities in
137	this state regarding how to access plans through the database.
138	Section 2. Paragraph (1) of subsection (3) of section
139	395.1041, Florida Statutes, is amended to read:
140	395.1041 Access to emergency services and care
141	(3) EMERGENCY SERVICES; DISCRIMINATION; LIABILITY OF
142	FACILITY OR HEALTH CARE PERSONNEL
143	(l) Hospital personnel may withhold or withdraw
144	cardiopulmonary resuscitation if presented with an order not to
145	resuscitate executed pursuant to s. 401.45 or a physician orders
146	for life-sustaining treatment (POLST) form executed pursuant to
147	s. 401.455 which contains an order not to resuscitate. Facility
148	staff and facilities <u>are</u> shall not be subject to criminal
149	prosecution or civil liability, <u>and may not</u> nor be considered to
150	have engaged in negligent or unprofessional conduct, for
151	withholding or withdrawing cardiopulmonary resuscitation
152	pursuant to such an order <u>or a POLST form</u> . The absence of an
153	order not to resuscitate executed pursuant to s. 401.45 <u>or a</u>
154	POLST form executed pursuant to s. 401.455 does not preclude a
155	physician from withholding or withdrawing cardiopulmonary
156	resuscitation as otherwise <u>allowed</u> permitted by law.
	Dago 6 of 25

Page 6 of 25

157 Section 3. Subsection (3) of section 400.142, Florida158 Statutes, is amended to read:

159 400.142 Emergency medication kits; orders not to 160 resuscitate.-

161 (3) Facility staff may withhold or withdraw 162 cardiopulmonary resuscitation if presented with an order not to 163 resuscitate executed pursuant to s. 401.45 or a physician orders 164 for life-sustaining treatment (POLST) form executed pursuant to 165 s. 401.455 which contains an order not to resuscitate. Facility 166 staff and facilities are not subject to criminal prosecution or 167 civil liability, and may not be or considered to have engaged in 168 negligent or unprofessional conduct, for withholding or 169 withdrawing cardiopulmonary resuscitation pursuant to such an order or a POLST form. The absence of an order not to 170 171 resuscitate executed pursuant to s. 401.45 or a POLST form 172 executed pursuant to s. 401.455 does not preclude a physician 173 from withholding or withdrawing cardiopulmonary resuscitation as 174 otherwise allowed permitted by law.

175 Section 4. Section 400.487, Florida Statutes, is amended 176 to read:

177 400.487 Home health service agreements; physician's, 178 physician assistant's, and advanced registered nurse 179 practitioner's treatment orders; patient assessment; 180 establishment and review of plan of care; provision of services; 181 orders not to resuscitate; physician orders for life-sustaining 182 treatment.-

Page 7 of 25

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183 Services provided by a home health agency must be (1)covered by an agreement between the home health agency and the 184 185 patient or the patient's legal representative specifying the 186 home health services to be provided, the rates or charges for 187 services paid with private funds, and the sources of payment, 188 which may include Medicare, Medicaid, private insurance, 189 personal funds, or a combination thereof. A home health agency 190 providing skilled care must make an assessment of the patient's needs within 48 hours after the start of services. 191

192 (2) If When required by the provisions of chapter 464; 193 part I, part III, or part V of chapter 468; or chapter 486, the 194 attending physician, physician assistant, or advanced registered 195 nurse practitioner, acting within his or her respective scope of 196 practice, shall establish treatment orders for a patient who is 197 to receive skilled care. The treatment orders must be signed by 198 the physician, physician assistant, or advanced registered nurse 199 practitioner before a claim for payment for the skilled services 200 is submitted by the home health agency. If the claim is 201 submitted to a managed care organization, the treatment orders 202 must be signed within the time allowed under the provider 203 agreement. The treatment orders shall be reviewed, as frequently 204 as the patient's illness requires, by the physician, physician 205 assistant, or advanced registered nurse practitioner in 206 consultation with the home health agency.

207 (3) A home health agency shall arrange for supervisory208 visits by a registered nurse to the home of a patient receiving

Page 8 of 25

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209 home health aide services in accordance with the patient's 210 direction, approval, and agreement to pay the charge for the 211 visits.

(4) Each patient has the right to be informed of and to participate in the planning of his or her care. Each patient must be provided, upon request, a copy of the plan of care established and maintained for that patient by the home health agency.

217 (5) If When nursing services are ordered, the home health 218 agency to which a patient has been admitted for care must 219 provide the initial admission visit, all service evaluation 220 visits, and the discharge visit by a direct employee. Services 221 provided by others under contractual arrangements to a home 222 health agency must be monitored and managed by the admitting 223 home health agency. The admitting home health agency is fully 224 responsible for ensuring that all care provided through its 225 employees or contract staff is delivered in accordance with this 226 part and applicable rules.

(6) The skilled care services provided by a home health
agency, directly or under contract, must be supervised and
coordinated in accordance with the plan of care.

(7) Home health agency personnel may withhold or withdraw
 cardiopulmonary resuscitation if presented with an order not to
 resuscitate executed pursuant to s. 401.45 <u>or a physician orders</u>
 <u>for life-sustaining treatment (POLST) form executed pursuant to</u>
 s. 401.455 which contains an order not to resuscitate. The

Page 9 of 25

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agency shall adopt rules providing for the implementation of such orders. Home health personnel and agencies <u>are shall</u> not be subject to criminal prosecution or civil liability, <u>and may not</u> nor be considered to have engaged in negligent or unprofessional conduct, for withholding or withdrawing cardiopulmonary resuscitation pursuant to such an order <u>or a POLST form</u> and rules adopted by the agency.

242 Section 5. Paragraph (e) of subsection (1) of section 243 400.605, Florida Statutes, is amended to read:

244 400.605 Administration; forms; fees; rules; inspections; 245 fines.-

(1) The agency, in consultation with the department, may
adopt rules to administer the requirements of part II of chapter
408. The department, in consultation with the agency, shall by
rule establish minimum standards and procedures for a hospice
pursuant to this part. The rules must include:

(e) Procedures relating to the implementation of <u>advance</u>
 advanced directives; physician orders for life-sustaining
 treatment (POLST) forms executed pursuant to s. 401.455; and an
 order not to resuscitate executed pursuant to s. 401.45
 and do not-resuscitate orders.

256 Section 6. Subsection (8) of section 400.6095, Florida 257 Statutes, is amended to read:

400.6095 Patient admission; assessment; plan of care; discharge; death.-

260

(8) The hospice care team may withhold or withdraw

Page 10 of 25

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261 cardiopulmonary resuscitation if presented with an order not to resuscitate executed pursuant to s. 401.45 or a physician orders 262 263 for life-sustaining treatment (POLST) form executed pursuant to s. 401.455 which contains an order not to resuscitate. The 264 265 department shall adopt rules providing for the implementation of 266 such orders. Hospice staff are shall not be subject to criminal 267 prosecution or civil liability, and may not nor be considered to 268 have engaged in negligent or unprofessional conduct, for 269 withholding or withdrawing cardiopulmonary resuscitation 270 pursuant to such an order or a POLST form and applicable rules. 271 The absence of an order to resuscitate executed pursuant to s. 272 401.45 or a POLST form executed pursuant to s. 401.455 does not 273 preclude a physician from withholding or withdrawing 274 cardiopulmonary resuscitation as otherwise allowed permitted by 275 law.

276 Section 7. Subsection (4) of section 401.35, Florida 277 Statutes, is amended to read:

401.35 Rules.—The department shall adopt rules, including definitions of terms, necessary to carry out the purposes of this part.

(4) The rules must establish circumstances and procedures
under which emergency medical technicians and paramedics may
honor orders by the patient's physician not to resuscitate
<u>executed pursuant to s. 401.45 or a physician orders for life-</u>
<u>sustaining treatment (POLST) form executed pursuant to s.</u>
<u>401.455 which contains an order not to resuscitate</u> and the

Page 11 of 25

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287 documentation and reporting requirements for handling such 288 requests.

289 Section 8. Paragraph (a) of subsection (3) of section 290 401.45, Florida Statutes, is amended to read:

291

401.45 Denial of emergency treatment; civil liability.-292 (3) (a) Resuscitation or other forms of medical 293 intervention may be withheld or withdrawn from a patient by an 294 emergency medical technician, or paramedic, or other health care 295 professional if he or she is presented with if evidence of a 296 physician orders for life-sustaining treatment (POLST) form as defined in s. 401.455 or an order not to resuscitate executed 297 298 pursuant to s. 401.45 by the patient's physician is presented to 299 the emergency medical technician or paramedic. To be valid, an 300 order not to resuscitate, to be valid, must be on the form 301 adopted by rule of the department. The form must be signed by 302 the patient's physician and by the patient or, if the patient is incapacitated, the patient's health care surrogate or proxy as 303 304 provided in chapter 765, court-appointed guardian as provided in 305 chapter 744, or attorney in fact under a durable power of 306 attorney as provided in chapter 709. The court-appointed 307 guardian or attorney in fact must have been delegated authority 308 to make health care decisions on behalf of the patient. 309 Section 9. Section 401.455, Florida Statutes, is created

310 to read:

(1)

- 311
- 312

Page 12 of 25

401.455 Physician orders for life-sustaining treatment.-

POLST FORM.-Physician orders for life-sustaining

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313	treatment (POLST) must be on a form adopted by department rule
314	and executed as required by this section.
315	(a) A POLST form may be used only by or for a patient
316	determined by the patient's physician to have an end-stage
317	condition as defined in s. 765.101(4) or a patient who, in the
318	good faith clinical judgment of his or her physician, is
319	suffering from at least one terminal medical condition that will
320	likely result in his or her death within 1 year.
321	(b) A POLST form must be signed by the patient's physician
322	and must contain a certification by the physician indicating
323	that the physician consulted with the patient signing the POLST
324	form, or, if the patient is incapable of making health care
325	decisions for herself or himself or is incapacitated, with the
326	patient's health care surrogate, proxy, court-appointed
327	guardian, or attorney in fact who is permitted to execute a
328	POLST form on behalf of the patient as provided in paragraph
329	(c), about the use of and the effect of the removal or refusal
330	of life-sustaining medical treatment. The physician who signs
331	the POLST form must indicate the medical circumstance that
332	justifies the execution of the POLST.
333	(c) A POLST form must also be signed by the patient. If
334	the patient is incapable of making health care decisions for
335	herself or himself or is incapacitated, the POLST form must be
336	signed by the patient's health care surrogate or proxy pursuant
337	to chapter 765. If the patient does not have a health care
338	surrogate or proxy, the POLST form must be signed by the
	Page 13 of 25

Page 13 of 25

2016

339	patient's court-appointed guardian pursuant to chapter 744. If
340	the patient does not have a court-appointed guardian, the POLST
341	form must be signed by the patient's attorney in fact under a
342	durable power of attorney pursuant to chapter 709. If a POLST
343	form is signed by a health care surrogate, proxy, court-
344	appointed guardian, or attorney in fact, the patient's physician
345	must certify the basis for the authority of the appropriate
346	person to execute the POLST form on behalf of the patient,
347	including compliance with the relevant provisions of chapter
348	765, chapter 744, or chapter 709.
349	(d) A POLST form subsequently executed by the patient
350	shall revoke any prior POLST form executed by the patient.
351	(e) A patient's health care surrogate, proxy, court-
352	appointed guardian, or attorney in fact permitted to execute a
353	POLST form on behalf of a patient as provided in paragraph (b)
354	may subsequently revoke a POLST form for the patient, unless a
355	valid advance directive or prior POLST form executed by the
356	patient expressly forbids changes by a surrogate, proxy, court-
357	appointed guardian, or attorney in fact.
358	(f) A person acting in good faith as health care
359	surrogate, proxy, court-appointed guardian, or attorney in fact
360	under this section is not subject to civil liability or criminal
361	prosecution for executing a POLST form as provided in paragraph
362	(b) on behalf of a patient who lacks the capacity to make health
363	care decisions for himself or herself or is incapacitated.
364	(g) The patient's family, the health care facility, or the
	Page 14 of 25

Page 14 of 25

2016

365	attending physician, or any other interested person who may										
366	reasonably be expected to be directly affected by the decisions										
367	indicated on a POLST form executed by a health care surrogate,										
368	proxy, court-appointed guardian, or attorney in fact on behalf										
369	of the patient as provided in paragraph (b) may seek expedited										
370	judicial intervention pursuant to Rule 5.900 of the Florida										
371	Probate Rules if that person believes:										
372	1. The decisions of the health care surrogate, proxy,										
373	court-appointed guardian, or attorney in fact are not in accord										
374	with the patient's known desires or chapter 765, chapter 744, or										
375	chapter 709;										
376	2. The advance directive or POLST form regarding the										
377	patient's wishes regarding life-sustaining treatment is										
378	ambiguous or the patient has changed his or her mind after										
379	execution of the advance directive or POLST form;										
380	3. The health care surrogate, proxy, court-appointed										
381	guardian, or attorney in fact was improperly designated or										
382	appointed, or the designation of the health care surrogate,										
383	proxy, court-appointed guardian, or attorney in fact is no										
384	longer effective or has been removed;										
385	4. The health care surrogate, proxy, court-appointed										
386	guardian, or attorney in fact has failed to discharge his or her										
387	duties, or incapacity or illness renders him or her incapable of										
388	discharging his or her duties;										
389	5. The health care surrogate, proxy, court-appointed										
390	guardian, or attorney in fact has abused his or her powers; or										
ļ	Page 15 of 25										

2016

6. The patient has sufficient capacity to make his or her
ealth care decisions.
(2) DUTIES OF THE DEPARTMENTThe department shall:
(a) Consult with health care professional licensing
es, provider advocacy groups, patient advocacy groups,
al ethicists, and other appropriate stakeholders when
lating rules that prescribe the contents of and contain
cols for the implementation of a standardized POLST form.
OLST form shall be available in electronic format on the
tment website for downloading by patients and health care
ders. To the extent possible, the standardized POLST form
rotocols shall be used consistently across all health care
ngs and reflect nationally recognized standards for end-of-
care. The POLST form shall include:
1. The patient's directives concerning:
a. The administration of life-sustaining treatment.
b. The administration of measures to relieve pain and
ring through the use of medication by any route, wound
or related measures.
c. Transfer to a setting able to provide comfort or
ative care, such as a hospice.
2. The dated signature of the patient or, if applicable,
lated signature of the patient's health care surrogate,
, court-appointed guardian, or attorney in fact.
3. The name, address, and telephone number of the
ent's primary health care provider.
 Dago 16 of 25

Page 16 of 25

417 The dated signature of the primary health care provider 4. 418 entering medical orders on the POLST form, a certification by 419 the signing provider that he or she discussed the patient's care 420 goals and preferences as reflected on the POLST form with the 421 patient or the patient's health care surrogate, proxy, courtappointed guardian, or attorney in fact. 422 423 5. A statement printed in a conspicuous location that if 424 the patient has the capacity to make informed decisions about 425 health care options, the patient's presently expressed health 426 care treatment decisions shall determine the patient's 427 treatment, even if those decisions conflict the directives indicated on the POLST form. Decisions to supply or withhold 428 429 hydration may only be made in the context of a patient's actual condition at the time of such a decision. Therefore, the POLST 430 431 form may not include a directive regarding hydration. (b) 432 Recommend a uniform method for identifying persons who 433 have executed a POLST form and providing health care providers 434 with contact information for the person's primary health care 435 provider. 436 (c) Oversee the education of health care providers 437 regarding the POLST form. 438 Develop a process for collecting feedback from health (d) 439 care providers to enable periodic redesign of the POLST form in 440 accordance with current health care best practices. 441 (e) Adopt and enforce all rules necessary to implement 442 this section.

Page 17 of 25

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443	(3) DUTY TO COMPLY WITH POLST FORM AND OUT-OF-STATE POLST
444	DIRECTIVES; LIMITED IMMUNITY
445	(a) Notwithstanding notice of revocation or termination of
446	a POLST form, emergency medical service personnel, health care
447	providers, physicians, and health care facilities may comply
448	with the orders on a person's POLST form without regard to
449	whether the provider ordering the POLST is on the medical staff
450	of the treating health care facility. If the provider ordering
451	the POLST is not on the medical staff of the treating health
452	care facility, the POLST form shall be reviewed by the treating
453	health care professional at the receiving facility with the
454	patient, or the patient's health care surrogate, proxy, court-
455	appointed guardian, or attorney in fact, and made into a medical
456	order at the receiving facility.
457	(b) Notwithstanding notice of revocation or termination of
458	a POLST form, a POLST form from another state is presumed valid,
459	shall be effective in this state, and shall be complied with to
460	the same extent as a POLST form executed in this state.
461	(c) Any licensee, physician, medical director, or
462	emergency medical technician or paramedic who acts in good faith
463	on a POLST is not subject to criminal prosecution or civil
464	liability, and has not engaged in negligent or unprofessional
465	conduct, as a result of carrying out the directives of the
466	POLST.
467	(4) PATIENT TRANSFER; POLST TRANSFERABILITY
468	Notwithstanding notice of revocation or termination of a POLST
	Page 18 of 25

Page 18 of 25

2016

469	form, if a patient whose goals and preferences for care have
470	been entered on a POLST form is transferred from one health care
471	facility to another health care facility, the health care
472	facility initiating the transfer shall communicate the existence
473	of the POLST form to the receiving facility before the patient
474	is transferred. The POLST form shall accompany the patient to
475	the receiving facility and shall remain in effect for the
476	duration of the patient's stay at such facility. The POLST form
477	shall be reviewed by the treating health care professional at
478	the receiving facility with the patient, or the patient's health
479	care surrogate, proxy, court-appointed guardian, or attorney in
480	fact, and made into a medical order at the receiving facility.
481	(5) CONFLICTS WITH OTHER ADVANCE DIRECTIVESTo the extent
482	that the orders on a POLST form conflict with an advance
483	directive made under chapter 765, the document most recently
484	signed by the patient takes precedence, unless the patient lacks
485	the capacity to make such medical decisions and the patient's
486	health care surrogate, proxy, court-appointed guardian, or
487	attorney in fact believes it is consistent with the patient's
488	wishes to alter the most recently signed document, in which case
489	the patient's health care surrogate, proxy, court-appointed
490	guardian, or attorney-in-fact may amend or revoke a prior POLST
491	form or execute a new POLST form, unless a valid advance
492	directive or prior POLST form executed by the patient expressly
493	forbids changes by a health care surrogate, proxy, court-
494	appointed guardian, or attorney in fact.
	Page 10 of 25

Page 19 of 25

495 POLST FOR MINORS.-If medical orders on a POLST form (6) 496 relate to a minor and direct that life-sustaining treatment be 497 withheld from the minor, the order shall include a certification 498 by two health care providers in addition to the physician 499 executing the POLST that, in their clinical judgment, an order 500 to withhold treatment is in the best interests of the minor. Any 501 POLST form for a minor must also be signed by the minor's proxy, 502 natural guardian, or court-appointed guardian, and the minor's 503 physician must certify the basis for the authority of the 504 appropriate person to execute the POLST form on behalf of the 505 minor, including compliance with the relevant statutory 506 provisions of chapter 765 or chapter 744. 507 (7) POLST FORM; VOLUNTARY OPTION.-A facility or provider may not require a person to complete a POLST form as a 508 509 prerequisite or condition for the provision of services or 510 treatment. The execution of a POLST form must be a voluntary 511 decision. 512 (8) POLST FORM; EFFECT ON LIFE OR HEALTH INSURANCE.-A 513 person's execution of or refusal or failure to execute a POLST 514 form does not affect, impair, or modify a life insurance or 515 health insurance policy or an annuity to which the person is a 516 party, may not be the basis for any delay in issuing or refusing 517 to issue a life insurance or health insurance policy or an 518 annuity, and may not be the basis for an increase or decrease in 519 the premium charged to the person for a life insurance or health 520 insurance policy or an annuity.

Page 20 of 25

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521	(9) REVOCATION OF A POLST FORM
522	(a) A POLST form may be revoked at any time by a patient
523	deemed to have the capacity to make his or her own health care
524	decisions:
525	1. By means of a signed and dated written document;
526	2. By means of the physical cancellation or destruction of
527	the POLST form by the patient or by another person in the
528	patient's presence and at the patient's direction;
529	3. By means of an oral expression of intent to revoke; or
530	4. By means of a subsequently executed POLST or advance
531	directive that is materially different from a previously
532	executed POLST or advance directive.
533	(b) A health care surrogate, proxy, court-appointed
534	guardian, or attorney in fact who created a POLST form for a
535	patient may revoke all or part of the POLST form at any time in
536	a written document signed and dated by the health care
537	surrogate, proxy, court-appointed guardian, or attorney in fact.
538	(c) An amendment to or revocation of a POLST shall be
539	promptly communicated to the patient's primary health care
540	provider, primary care physician, and any health care facility
541	at which the patient is receiving care. A health care
542	professional, health care surrogate, proxy, court-appointed
543	guardian, or attorney-in-fact who is informed of an amendment to
544	or revocation of a POLST shall promptly communicate such fact to
545	the patient's primary health care provider, the patient's
546	primary care physician, the current supervising health care
	Dere 21 of 25

Page 21 of 25

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2016

547	professional, and any health care facility at which the patient										
548	is receiving care.										
549	(d) Upon revocation, a POLST form shall be void.										
550	(10) EFFECT OF SECTION ON EUTHANASIA; MERCY KILLING;										
551	CONSTRUCTIONThis section shall not be construed as condoning,										
552	authorizing, or approving euthanasia or mercy killing. In										
553	addition, the Legislature does not intend that this section be										
554	construed as permitting any affirmative or deliberate act to end										
555	a person's life, except to permit natural death as provided by										
556	this section.										
557	Section 10. Subsection (4) of section 429.255, Florida										
558	Statutes, is amended to read:										
559	429.255 Use of personnel; emergency care										
560	(4) Facility staff may withhold or withdraw										
561	cardiopulmonary resuscitation or the use of an automated										
562	external defibrillator if presented with an order not to										
563	resuscitate executed pursuant to s. 401.45 or a physician orders										
564	for life-sustaining treatment (POLST) form executed pursuant to										
565	s. 401.455 which contains an order not to resuscitate. The										
566	department shall adopt rules providing for the implementation of										
567	such orders. Facility staff and facilities <u>are</u> shall not be										
568	subject to criminal prosecution or civil liability, and may not										
569	nor be considered to have engaged in negligent or unprofessional										
570	conduct, for withholding or withdrawing cardiopulmonary										
571	resuscitation or use of an automated external defibrillator										
572	pursuant to such <u>orders</u> an order and rules adopted by the										

Page 22 of 25

573 department. The absence of an order to resuscitate executed 574 pursuant to s. 401.45 or a POLST form executed pursuant to s. 575 <u>401.455</u> does not preclude a physician from withholding or 576 withdrawing cardiopulmonary resuscitation or use of an automated 577 external defibrillator as otherwise <u>allowed</u> permitted by law.

578 Section 11. Subsection (3) of section 429.73, Florida 579 Statutes, is amended to read:

580 429.73 Rules and standards relating to adult family-care 581 homes.-

582 (3) The department shall adopt rules providing for the 583 implementation of orders not to resuscitate and physician orders 584 for life-sustaining treatment (POLST) forms executed pursuant to 585 s. 401.455. The provider may withhold or withdraw 586 cardiopulmonary resuscitation if presented with an order not to 587 resuscitate executed pursuant to s. 401.45 or a POLST form 588 executed pursuant to s. 401.455 which contains an order not to 589 resuscitate. The provider is shall not be subject to criminal 590 prosecution or civil liability, and may not nor be considered to 591 have engaged in negligent or unprofessional conduct, for 592 withholding or withdrawing cardiopulmonary resuscitation 593 pursuant to such orders an order and applicable rules.

594 Section 12. Subsections (7) and (8) of section 456.072, 595 Florida Statutes, are renumbered as subsections (8) and (9), 596 respectively, and a new subsection (7) is added to that section 597 to read:

598

456.072 Grounds for discipline; penalties; enforcement.-

Page 23 of 25

CODING: Words stricken are deletions; words underlined are additions.

2016

599	(7) A licensee may withhold or withdraw cardiopulmonary									
600	resuscitation or the use of an automated external defibrillator									
601	if presented with an order not to resuscitate executed pursuant									
602	to s. 401.45 or a physician orders for life-sustaining treatment									
603	(POLST) form executed pursuant to s. 401.455 which contains an									
604	order not to resuscitate. The department shall adopt rules									
605	providing for the implementation of such orders. Licensees are									
606	not subject to criminal prosecution or civil liability, and may									
607	not be considered to have engaged in negligent or unprofessional									
608	conduct, for withholding or withdrawing cardiopulmonary									
609	resuscitation or the use of an automated external defibrillator,									
610	or otherwise carrying out the orders in an order not to									
611	resuscitate or a POLST form, pursuant to such orders and rules									
612	adopted by the department. The absence of an order not to									
613	resuscitate executed pursuant to s. 401.45 or a POLST form									
614	executed pursuant to s. 401.455 does not preclude a licensee									
615	from withholding or withdrawing cardiopulmonary resuscitation or									
616	the use of an automated external defibrillator or otherwise									
617	carrying out medical orders allowed by law.									
618	Section 13. Paragraph (c) of subsection (1) of section									
619	765.205, Florida Statutes, is amended to read:									
620	765.205 Responsibility of the surrogate									
621	(1) The surrogate, in accordance with the principal's									
622	instructions, unless such authority has been expressly limited									
623	by the principal, shall:									
624	(c) Provide written consent using an appropriate form									
	Page 24 of 25									

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625	whenever conser	nt is	required,	including a physician's order not	
626	to resuscitate	or a	physician	orders for life-sustaining	

627 treatment (POLST) form executed pursuant to s. 401.455.

628	Section 14.	This act	shall take	effect	January 1,	2017.
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Page 25 of 25