

1 A bill to be entitled

2 An act relating to the medical use of marijuana;
3 amending s. 381.986; prohibiting a physician from
4 certifying certain patients for marijuana other than
5 low-THC cannabis under certain conditions; revising a
6 provision requiring certain information to be entered
7 into the medical marijuana use registry; revising a
8 provision relating to the informed consent form to
9 include the negative health effects of marijuana use
10 on certain persons; providing daily dose amount limits
11 for edibles and marijuana in a form for smoking;
12 waiving the medical marijuana identification card fee
13 for certain qualified patients who can demonstrate
14 veteran status; authorizing the Department of Health
15 to possess and test marijuana samples from medical
16 marijuana treatment centers; authorizing medical
17 marijuana treatment centers to contract with certain
18 medical marijuana testing laboratories; providing
19 limits on the amount of tetrahydrocannabinol content
20 in the dried leaves and flowers of marijuana and
21 edibles dispensed by a medical marijuana treatment
22 center; authorizing the department and certain
23 employees to acquire, possess, test, transport, and
24 dispose of marijuana; amending s. 381.988, F.S.;
25 prohibiting a certified medical marijuana testing

26 | laboratory from having an economic interest in or
 27 | financial relationship with a medical marijuana
 28 | treatment center; providing construction; amending ch.
 29 | 2017-232, Laws of Florida; revising provisions
 30 | authorizing emergency rulemaking; providing an
 31 | effective date.

32 |

33 | Be It Enacted by the Legislature of the State of Florida:

34 |

35 | Section 1. Paragraphs (a) and (f) of subsection (4),
 36 | paragraph (e) of subsection (8), and paragraph (a) of subsection
 37 | (14) of section 381.986, Florida Statutes, as amended by section
 38 | 1 of chapter 2019-1, Laws of Florida, are amended, and paragraph
 39 | (f) is added to subsection (7) and paragraph (h) is added to
 40 | subsection (14) of that section, to read:

41 | 381.986 Medical use of marijuana.—

42 | (4) PHYSICIAN CERTIFICATION.—

43 | (a) A qualified physician may issue a physician
 44 | certification only if the qualified physician:

45 | 1. Conducted a physical examination while physically
 46 | present in the same room as the patient and a full assessment of
 47 | the medical history of the patient.

48 | 2. Diagnosed the patient with at least one qualifying
 49 | medical condition.

50 | 3. Determined that the medical use of marijuana would

51 likely outweigh the potential health risks for the patient, and
52 such determination must be documented in the patient's medical
53 record. A physician may not issue a physician certification,
54 except for low-THC cannabis, to a patient younger than 18 years
55 of age, unless the qualified physician determines that marijuana
56 other than low-THC cannabis is the most effective treatment for
57 the patient, and a second physician who is a board-certified
58 pediatrician concurs with such determination. Such determination
59 and concurrence must be documented in the patient's medical
60 record and in the medical marijuana use registry ~~If a patient is~~
61 ~~younger than 18 years of age, a second physician must concur~~
62 ~~with this determination, and such concurrence must be documented~~
63 ~~in the patient's medical record.~~

64 4. Determined whether the patient is pregnant and
65 documented such determination in the patient's medical record. A
66 physician may not issue a physician certification, except for
67 low-THC cannabis, to a patient who is pregnant.

68 5. Reviewed the patient's controlled drug prescription
69 history in the prescription drug monitoring program database
70 established pursuant to s. 893.055.

71 6. Reviews the medical marijuana use registry and
72 confirmed that the patient does not have an active physician
73 certification from another qualified physician.

74 7. Registers as the issuer of the physician certification
75 for the named qualified patient on the medical marijuana use

76 registry in an electronic manner determined by the department,
77 and:

78 a. Enters into the registry the contents of the physician
79 certification, including all of the patient's qualifying
80 conditions ~~condition~~ and the dosage not to exceed the daily dose
81 amount authorized under paragraph (f) ~~determined by the~~
82 ~~department~~, the amount and forms of marijuana authorized for the
83 patient, and any types of marijuana delivery devices needed by
84 the patient for the medical use of marijuana.

85 b. Updates the registry within 7 days after any change is
86 made to the original physician certification to reflect such
87 change.

88 c. Deactivates the registration of the qualified patient
89 and the patient's caregiver when the physician no longer
90 recommends the medical use of marijuana for the patient.

91 8. Obtains the voluntary and informed written consent of
92 the patient for medical use of marijuana each time the qualified
93 physician issues a physician certification for the patient,
94 which shall be maintained in the patient's medical record. The
95 patient, or the patient's parent or legal guardian if the
96 patient is a minor, must sign the informed consent acknowledging
97 that the qualified physician has sufficiently explained its
98 content. The qualified physician must use a standardized
99 informed consent form adopted in rule by the Board of Medicine
100 and the Board of Osteopathic Medicine, which must include, at a

101 | minimum, information related to:

102 | a. The Federal Government's classification of marijuana as
103 | a Schedule I controlled substance.

104 | b. The approval and oversight status of marijuana by the
105 | Food and Drug Administration.

106 | c. The current state of research on the efficacy of
107 | marijuana to treat the qualifying conditions set forth in this
108 | section.

109 | d. The potential for addiction.

110 | e. The potential effect that marijuana may have on a
111 | patient's coordination, motor skills, and cognition, including a
112 | warning against operating heavy machinery, operating a motor
113 | vehicle, or engaging in activities that require a person to be
114 | alert or respond quickly.

115 | f. The potential side effects of marijuana use, including
116 | the negative health risks associated with smoking and the
117 | negative health effects of marijuana use on persons under 18
118 | years of age.

119 | g. The risks, benefits, and drug interactions of
120 | marijuana.

121 | h. That the patient's de-identified health information
122 | contained in the physician certification and medical marijuana
123 | use registry may be used for research purposes.

124 | (f) A qualified physician may not issue a physician
125 | certification for more than three 70-day supply limits of

126 | marijuana, more than six 35-day supply limits of edibles, or
127 | more than six 35-day supply limits of marijuana in a form for
128 | smoking. The department shall quantify by rule a daily dose
129 | amount with equivalent dose amounts for each allowable form of
130 | marijuana, other than edibles and marijuana in a form for
131 | smoking, dispensed by a medical marijuana treatment center. The
132 | department shall use the daily dose amount to calculate a 70-day
133 | supply. The daily dose amount for edibles shall not exceed 200
134 | mg of tetrahydrocannabinol. The daily dose amount for marijuana
135 | in a form for smoking shall not exceed .08 ounces.

136 | 1. A qualified physician may request an exception to the
137 | daily dose amount limit, the 35-day supply limit for edibles,
138 | the 35-day supply limit of marijuana in a form for smoking, and
139 | the 4-ounce possession limit of marijuana in a form for smoking
140 | established in paragraph (14) (a). The request shall be made
141 | electronically on a form adopted by the department in rule and
142 | must include, at a minimum:

143 | a. The qualified patient's qualifying medical condition.

144 | b. The dosage and route of administration that was
145 | insufficient to provide relief to the qualified patient.

146 | c. A description of how the patient will benefit from an
147 | increased amount.

148 | d. The minimum daily dose amount of marijuana that would
149 | be sufficient for the treatment of the qualified patient's
150 | qualifying medical condition.

151 2. A qualified physician must provide the qualified
152 patient's records upon the request of the department.

153 3. The department shall approve or disapprove the request
154 within 14 days after receipt of the complete documentation
155 required by this paragraph. The request shall be deemed approved
156 if the department fails to act within this time period.

157 (7) IDENTIFICATION CARDS.—

158 (f) A qualified patient who is a veteran, as defined in s.
159 1.01(14), is not required to pay the fee for the issuance or
160 renewal of an identification card. To demonstrate veteran
161 status, a qualified patient must provide the department with a
162 copy of one of the following:

163 1. The qualified patient's DD Form 214, issued by the
164 United States Department of Defense;

165 2. The qualified patient's veteran health identification
166 card, issued by the United States Department of Veterans
167 Affairs; or

168 3. The qualified patient's veteran identification card,
169 issued by the United States Department of Veterans Affairs
170 pursuant to the Veterans Identification Card Act of 2015, Pub.
171 L. No. 114-31.

172 (8) MEDICAL MARIJUANA TREATMENT CENTERS.—

173 (e) A licensed medical marijuana treatment center shall
174 cultivate, process, transport, and dispense marijuana for
175 medical use. A licensed medical marijuana treatment center may

176 | not contract for services directly related to the cultivation,
177 | processing, and dispensing of marijuana or marijuana delivery
178 | devices, except that a medical marijuana treatment center
179 | licensed pursuant to subparagraph (a)1. may contract with a
180 | single entity for the cultivation, processing, transporting, and
181 | dispensing of marijuana and marijuana delivery devices. A
182 | licensed medical marijuana treatment center must, at all times,
183 | maintain compliance with the criteria demonstrated and
184 | representations made in the initial application and the criteria
185 | established in this subsection. Upon request, the department may
186 | grant a medical marijuana treatment center a variance from the
187 | representations made in the initial application. Consideration
188 | of such a request shall be based upon the individual facts and
189 | circumstances surrounding the request. A variance may not be
190 | granted unless the requesting medical marijuana treatment center
191 | can demonstrate to the department that it has a proposed
192 | alternative to the specific representation made in its
193 | application which fulfills the same or a similar purpose as the
194 | specific representation in a way that the department can
195 | reasonably determine will not be a lower standard than the
196 | specific representation in the application. A variance may not
197 | be granted from the requirements in subparagraph 2. and
198 | subparagraphs (b)1. and 2.

199 | 1. A licensed medical marijuana treatment center may
200 | transfer ownership to an individual or entity who meets the

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201 requirements of this section. A publicly traded corporation or
202 publicly traded company that meets the requirements of this
203 section is not precluded from ownership of a medical marijuana
204 treatment center. To accommodate a change in ownership:

205 a. The licensed medical marijuana treatment center shall
206 notify the department in writing at least 60 days before the
207 anticipated date of the change of ownership.

208 b. The individual or entity applying for initial licensure
209 due to a change of ownership must submit an application that
210 must be received by the department at least 60 days before the
211 date of change of ownership.

212 c. Upon receipt of an application for a license, the
213 department shall examine the application and, within 30 days
214 after receipt, notify the applicant in writing of any apparent
215 errors or omissions and request any additional information
216 required.

217 d. Requested information omitted from an application for
218 licensure must be filed with the department within 21 days after
219 the department's request for omitted information or the
220 application shall be deemed incomplete and shall be withdrawn
221 from further consideration and the fees shall be forfeited.

222
223 Within 30 days after the receipt of a complete application, the
224 department shall approve or deny the application.

225 2. A medical marijuana treatment center, and any

226 individual or entity who directly or indirectly owns, controls,
227 or holds with power to vote 5 percent or more of the voting
228 shares of a medical marijuana treatment center, may not acquire
229 direct or indirect ownership or control of any voting shares or
230 other form of ownership of any other medical marijuana treatment
231 center.

232 3. A medical marijuana treatment center may not enter into
233 any form of profit-sharing arrangement with the property owner
234 or lessor of any of its facilities where cultivation,
235 processing, storing, or dispensing of marijuana and marijuana
236 delivery devices occurs.

237 4. All employees of a medical marijuana treatment center
238 must be 21 years of age or older and have passed a background
239 screening pursuant to subsection (9).

240 5. Each medical marijuana treatment center must adopt and
241 enforce policies and procedures to ensure employees and
242 volunteers receive training on the legal requirements to
243 dispense marijuana to qualified patients.

244 6. When growing marijuana, a medical marijuana treatment
245 center:

246 a. May use pesticides determined by the department, after
247 consultation with the Department of Agriculture and Consumer
248 Services, to be safely applied to plants intended for human
249 consumption, but may not use pesticides designated as
250 restricted-use pesticides pursuant to s. 487.042.

251 b. Must grow marijuana within an enclosed structure and in
252 a room separate from any other plant.

253 c. Must inspect seeds and growing plants for plant pests
254 that endanger or threaten the horticultural and agricultural
255 interests of the state in accordance with chapter 581 and any
256 rules adopted thereunder.

257 d. Must perform fumigation or treatment of plants, or
258 remove and destroy infested or infected plants, in accordance
259 with chapter 581 and any rules adopted thereunder.

260 7. Each medical marijuana treatment center must produce
261 and make available for purchase at least one low-THC cannabis
262 product.

263 8. A medical marijuana treatment center that produces
264 edibles must hold a permit to operate as a food establishment
265 pursuant to chapter 500, the Florida Food Safety Act, and must
266 comply with all the requirements for food establishments
267 pursuant to chapter 500 and any rules adopted thereunder.
268 Edibles may not contain more than 200 milligrams of
269 tetrahydrocannabinol, and a single serving portion of an edible
270 may not exceed 10 milligrams of tetrahydrocannabinol. Edibles
271 may have a potency variance of no greater than 15 percent.
272 Edibles may not be attractive to children; be manufactured in
273 the shape of humans, cartoons, or animals; be manufactured in a
274 form that bears any reasonable resemblance to products available
275 for consumption as commercially available candy; or contain any

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276 | color additives. To discourage consumption of edibles by
277 | children, the department shall determine by rule any shapes,
278 | forms, and ingredients allowed and prohibited for edibles.
279 | Medical marijuana treatment centers may not begin processing or
280 | dispensing edibles until after the effective date of the rule.
281 | The department shall also adopt sanitation rules providing the
282 | standards and requirements for the storage, display, or
283 | dispensing of edibles.

284 | 9. Within 12 months after licensure, a medical marijuana
285 | treatment center must demonstrate to the department that all of
286 | its processing facilities have passed a Food Safety Good
287 | Manufacturing Practices, such as Global Food Safety Initiative
288 | or equivalent, inspection by a nationally accredited certifying
289 | body. A medical marijuana treatment center must immediately stop
290 | processing at any facility which fails to pass this inspection
291 | until it demonstrates to the department that such facility has
292 | met this requirement.

293 | 10. A medical marijuana treatment center that produces
294 | prerolled marijuana cigarettes may not use wrapping paper made
295 | with tobacco or hemp.

296 | 11. When processing marijuana, a medical marijuana
297 | treatment center must:

298 | a. Process the marijuana within an enclosed structure and
299 | in a room separate from other plants or products.

300 | b. Comply with department rules when processing marijuana

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301 with hydrocarbon solvents or other solvents or gases exhibiting
302 potential toxicity to humans. The department shall determine by
303 rule the requirements for medical marijuana treatment centers to
304 use such solvents or gases exhibiting potential toxicity to
305 humans.

306 c. Comply with federal and state laws and regulations and
307 department rules for solid and liquid wastes. The department
308 shall determine by rule procedures for the storage, handling,
309 transportation, management, and disposal of solid and liquid
310 waste generated during marijuana production and processing. The
311 Department of Environmental Protection shall assist the
312 department in developing such rules.

313 12.d. A medical marijuana treatment center must test ~~the~~
314 ~~processed~~ marijuana using a medical marijuana testing laboratory
315 before it is dispensed. Results must be verified and signed by
316 two medical marijuana treatment center employees. Before
317 dispensing, the medical marijuana treatment center must
318 determine that the test results indicate that low-THC cannabis
319 meets the definition of low-THC cannabis, the concentration of
320 tetrahydrocannabinol meets the potency requirements of this
321 section, the labeling of the concentration of
322 tetrahydrocannabinol and cannabidiol is accurate, and all
323 marijuana is safe for human consumption and free from
324 contaminants that are unsafe for human consumption. The
325 department shall determine by rule which contaminants must be

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326 | tested for and the maximum levels of each contaminant which are
327 | safe for human consumption. The Department of Agriculture and
328 | Consumer Services shall assist the department in developing the
329 | testing requirements for contaminants that are unsafe for human
330 | consumption in edibles. The department shall also determine by
331 | rule the procedures for the treatment of marijuana that fails to
332 | meet the testing requirements of this section, s. 381.988, or
333 | department rule. The department may select ~~a~~ random samples of
334 | marijuana, sample from edibles, available in a cultivation
335 | facility, processing facility, or for purchase in a dispensing
336 | facility, which shall be tested by the department to determine
337 | that the marijuana edible meets the potency requirements of this
338 | section, is safe for human consumption, and the labeling of the
339 | tetrahydrocannabinol and cannabidiol concentration is accurate.
340 | A medical marijuana treatment center may not require payment
341 | from the department for the sample. A medical marijuana
342 | treatment center must recall edibles, including all edibles made
343 | from the same batch of marijuana, which fail to meet the potency
344 | requirements of this section, which are unsafe for human
345 | consumption, or for which the labeling of the
346 | tetrahydrocannabinol and cannabidiol concentration is
347 | inaccurate. The medical marijuana treatment center must retain
348 | records of all testing and samples of each homogenous batch of
349 | marijuana for at least 9 months. The medical marijuana treatment
350 | center must contract with a marijuana testing laboratory to

351 perform audits on the medical marijuana treatment center's
352 standard operating procedures, testing records, and samples and
353 provide the results to the department to confirm that the
354 marijuana or low-THC cannabis meets the requirements of this
355 section and that the marijuana or low-THC cannabis is safe for
356 human consumption. A medical marijuana treatment center shall
357 reserve two processed samples from each batch and retain such
358 samples for at least 9 months for the purpose of such audits. A
359 medical marijuana treatment center may use a laboratory that has
360 not been certified by the department under s. 381.988 until such
361 time as at least one laboratory holds the required
362 certification, but in no event later than July 1, 2020 ~~2018~~.

363 13. When packaging marijuana, a medical marijuana
364 treatment center must:

365 a.e. Package the marijuana in compliance with the United
366 States Poison Prevention Packaging Act of 1970, 15 U.S.C. ss.
367 1471 et seq.

368 b.f. Package the marijuana in a receptacle that has a
369 firmly affixed and legible label stating the following
370 information:

371 (I) The marijuana or low-THC cannabis meets the
372 requirements of sub-subparagraph d.

373 (II) The name of the medical marijuana treatment center
374 from which the marijuana originates.

375 (III) The batch number and harvest number from which the

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376 marijuana originates and the date dispensed.

377 (IV) The name of the physician who issued the physician
378 certification.

379 (V) The name of the patient.

380 (VI) The product name, if applicable, and dosage form,
381 including concentration of tetrahydrocannabinol and cannabidiol.
382 The product name may not contain wording commonly associated
383 with products marketed by or to children.

384 (VII) The recommended dose.

385 (VIII) A warning that it is illegal to transfer medical
386 marijuana to another person.

387 (IX) A marijuana universal symbol developed by the
388 department.

389 ~~14.12.~~ The medical marijuana treatment center shall
390 include in each package a patient package insert with
391 information on the specific product dispensed related to:

- 392 a. Clinical pharmacology.
- 393 b. Indications and use.
- 394 c. Dosage and administration.
- 395 d. Dosage forms and strengths.
- 396 e. Contraindications.
- 397 f. Warnings and precautions.
- 398 g. Adverse reactions.

399 ~~15.13.~~ In addition to the packaging and labeling
400 requirements specified in subparagraphs 13. and 14. ~~11. and 12.,~~

401 marijuana in a form for smoking must be packaged in a sealed
402 receptacle with a legible and prominent warning to keep away
403 from children and a warning that states marijuana smoke contains
404 carcinogens and may negatively affect health. Such receptacles
405 for marijuana in a form for smoking must be plain, opaque, and
406 white without depictions of the product or images other than the
407 medical marijuana treatment center's department-approved logo
408 and the marijuana universal symbol.

409 16.14. The department shall adopt rules to regulate the
410 types, appearance, and labeling of marijuana delivery devices
411 dispensed from a medical marijuana treatment center. The rules
412 must require marijuana delivery devices to have an appearance
413 consistent with medical use.

414 17.15. Each edible shall be individually sealed in plain,
415 opaque wrapping marked only with the marijuana universal symbol.
416 Where practical, each edible shall be marked with the marijuana
417 universal symbol. In addition to the packaging and labeling
418 requirements in subparagraphs 13. and 14. ~~10. and 11.~~, edible
419 receptacles must be plain, opaque, and white without depictions
420 of the product or images other than the medical marijuana
421 treatment center's department-approved logo and the marijuana
422 universal symbol. The receptacle must also include a list all of
423 the edible's ingredients, storage instructions, an expiration
424 date, a legible and prominent warning to keep away from children
425 and pets, and a warning that the edible has not been produced or

426 inspected pursuant to federal food safety laws.

427 ~~18.16.~~ When dispensing marijuana or a marijuana delivery
428 device, a medical marijuana treatment center:

429 a. May dispense any active, valid order for low-THC
430 cannabis, medical cannabis and cannabis delivery devices issued
431 pursuant to former s. 381.986, Florida Statutes 2016, which was
432 entered into the medical marijuana use registry before July 1,
433 2017.

434 b. May not dispense more than a 70-day supply of marijuana
435 within any 70-day period to a qualified patient or caregiver.
436 May not dispense more than a 35-day supply of edibles within any
437 35-day period to a qualified patient or caregiver. A 35-day
438 supply of edibles may not exceed 7000 mg of tetrahydrocannabinol
439 unless an exception to this amount is approved by the department
440 pursuant to paragraph (4) (f). May not dispense more than one 35-
441 day supply of marijuana in a form for smoking within any 35-day
442 period to a qualified patient or caregiver. A 35-day supply of
443 marijuana in a form for smoking may not exceed 2.5 ounces unless
444 an exception to this amount is approved by the department
445 pursuant to paragraph (4) (f).

446 c. Beginning January 1, 2020, may not dispense dried
447 leaves and flowers of marijuana with a tetrahydrocannabinol
448 concentration greater than 10 percent.

449 ~~d.e.~~ Must have the medical marijuana treatment center's
450 employee who dispenses the marijuana or a marijuana delivery

451 device enter into the medical marijuana use registry his or her
452 name or unique employee identifier.

453 ~~e.d.~~ Must verify that the qualified patient and the
454 caregiver, if applicable, each have an active registration in
455 the medical marijuana use registry and an active and valid
456 medical marijuana use registry identification card, the amount
457 and type of marijuana dispensed matches the physician
458 certification in the medical marijuana use registry for that
459 qualified patient, and the physician certification has not
460 already been filled.

461 ~~f.e.~~ May not dispense marijuana to a qualified patient who
462 is younger than 18 years of age. If the qualified patient is
463 younger than 18 years of age, marijuana may only be dispensed to
464 the qualified patient's caregiver.

465 ~~g.f.~~ May not dispense or sell any other type of cannabis,
466 alcohol, or illicit drug-related product, including pipes or
467 wrapping papers made with tobacco or hemp, other than a
468 marijuana delivery device required for the medical use of
469 marijuana and which is specified in a physician certification.

470 ~~h.g.~~ Must, upon dispensing the marijuana or marijuana
471 delivery device, record in the registry the date, time,
472 quantity, and form of marijuana dispensed; the type of marijuana
473 delivery device dispensed; and the name and medical marijuana
474 use registry identification number of the qualified patient or
475 caregiver to whom the marijuana delivery device was dispensed.

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476 ~~i.h.~~ Must ensure that patient records are not visible to
477 anyone other than the qualified patient, his or her caregiver,
478 and authorized medical marijuana treatment center employees.

479 (14) EXCEPTIONS TO OTHER LAWS.—

480 (a) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
481 any other provision of law, but subject to the requirements of
482 this section, a qualified patient and the qualified patient's
483 caregiver may purchase from a medical marijuana treatment center
484 for the patient's medical use a marijuana delivery device and up
485 to the amount of marijuana authorized in the physician
486 certification, but may not possess more than a 35-day supply of
487 edibles, a 70-day supply of marijuana, or the greater of 4
488 ounces of marijuana in a form for smoking or an amount of
489 marijuana in a form for smoking approved by the department
490 pursuant to paragraph (4) (f), at any given time and all
491 marijuana purchased must remain in its original packaging.

492 (h) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or
493 any other provision of law, but subject to the requirements of
494 this section, the department, including an employee of the
495 department acting within the scope of his or her employment, may
496 acquire, possess, test, transport, and lawfully dispose of
497 marijuana as provided in this section.

498 Section 2. Subsection (12) is added to section 381.988,
499 Florida Statutes, to read:

500 381.988 Medical marijuana testing laboratories; marijuana

501 tests conducted by a certified laboratory.-

502 (12) A certified medical marijuana testing laboratory and
503 its officers, directors, and employees may not have a direct or
504 indirect economic interest in, or financial relationship with, a
505 medical marijuana treatment center. Nothing in this subsection
506 may be construed to prohibit a certified medical marijuana
507 testing laboratory from contracting with a medical marijuana
508 treatment center to provide testing services.

509 Section 3. Subsection (1) of section 14 of chapter 2017-
510 232, Laws of Florida, is amended to read:

511 Section 14. Department of Health; authority to adopt
512 rules; cause of action.-

513 (1) EMERGENCY RULEMAKING.-

514 (a) The Department of Health and the applicable boards
515 shall adopt emergency rules pursuant to s. 120.54(4), Florida
516 Statutes, and this section necessary to implement ss. 381.986
517 and 381.988, Florida Statutes. If an emergency rule adopted
518 under this section is held to be unconstitutional or an invalid
519 exercise of delegated legislative authority, and becomes void,
520 the department or the applicable boards may adopt an emergency
521 rule pursuant to this section to replace the rule that has
522 become void. If the emergency rule adopted to replace the void
523 emergency rule is also held to be unconstitutional or an invalid
524 exercise of delegated legislative authority and becomes void,
525 the department and the applicable boards must follow the

526 nonemergency rulemaking procedures of the Administrative
 527 Procedures Act to replace the rule that has become void.

528 (b) For emergency rules adopted under this section, the
 529 department and the applicable boards need not make the findings
 530 required by s. 120.54(4)(a), Florida Statutes. Emergency rules
 531 adopted under this section are exempt from ss. 120.54(3)(b) and
 532 120.541, Florida Statutes. The department and the applicable
 533 boards shall meet the procedural requirements in s. 120.54(a),
 534 Florida Statutes, if the department or the applicable boards
 535 have, before July 1, 2019 ~~the effective date of this act~~, held
 536 any public workshops or hearings on the subject matter of the
 537 emergency rules adopted under this subsection. Challenges to
 538 emergency rules adopted under this subsection are subject to the
 539 time schedules provided in s. 120.56(5), Florida Statutes.

540 (c) Emergency rules adopted under this section are exempt
 541 from s. 120.54(4)(c), Florida Statutes, and shall remain in
 542 effect until replaced by rules adopted under the nonemergency
 543 rulemaking procedures of the Administrative Procedures Act.
 544 Rules adopted under the nonemergency rulemaking procedures of
 545 the Administrative Procedures Act to replace emergency rules
 546 adopted under this section are exempt from ss. 120.54(3)(b) and
 547 120.541, Florida Statutes. By July 1, 2020 ~~January 1, 2018~~, the
 548 department and the applicable boards shall initiate nonemergency
 549 rulemaking pursuant to the Administrative Procedures Act to
 550 replace all emergency rules adopted under this section by

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551 publishing a notice of rule development in the Florida
552 Administrative Register. Except as provided in paragraph (a),
553 after July 1, 2020 ~~January 1, 2018~~, the department and
554 applicable boards may not adopt rules pursuant to the emergency
555 rulemaking procedures provided in this section.

556 Section 4. This act shall take effect July 1, 2019.