By Senator Garcia

37-01668-22 20221392

A bill to be entitled

An act relating to patient identification and health care decisions; creating s. 395.1013, F.S.; authorizing the Department of Law Enforcement and other law enforcement agencies to assist hospitals in identifying otherwise unidentifiable patients; requiring such agencies to provide the hospital with specified information, upon a hospital's request; amending s. 765.401, F.S.; authorizing certain clinical social workers to make specified health care decisions and applications for public and private benefits for the continued care of certain patients; providing an effective date.

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

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Section 1. Section 395.1013, Florida Statutes, is created to read:

assistance.—Notwithstanding any other law, the Department of Law Enforcement or any other law enforcement agency may assist a hospital licensed under this chapter in identifying an otherwise unidentifiable patient through the use of fingerprints, palm prints, facial images, or other biometric information. Upon request by the hospital, the Department of Law Enforcement or other law enforcement agency shall provide the hospital with the available last known name, address, telephone number, or other identifying information of such patient to notify the patient's next of kin.

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Section 2. Paragraph (h) of subsection (1) of section 765.401, Florida Statutes, is amended to read:

765.401 The proxy.-

- (1) If an incapacitated or developmentally disabled patient has not executed an advance directive, or designated a surrogate to execute an advance directive, or the designated or alternate surrogate is no longer available to make health care decisions, health care decisions may be made for the patient by any of the following individuals, in the following order of priority, if no individual in a prior class is reasonably available, willing, or competent to act:
- (h) A clinical social worker licensed pursuant to chapter 491, or who is a graduate of a court-approved guardianship program. Such a proxy must be selected by the provider's bioethics committee and must not be employed by the provider. If the provider does not have a bioethics committee, then such a proxy may be chosen through an arrangement with the bioethics committee of another provider. The proxy will be notified that, upon request, the provider shall make available a second physician, not involved in the patient's care to assist the proxy in evaluating treatment.
- 1. A clinical social worker authorized to make health care decisions for a patient under this paragraph may:
- a. Consent to and authorize the placement, care, and treatment of the patient at a skilled nursing facility, assisted living facility, long-term care facility, or hospice following the patient's discharge from the hospital or the patient's transfer from one facility to another.
 - b. Apply for any public or private benefits for the patient

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following the patient's discharge from the hospital or the patient's transfer from one facility to another.

- $\underline{2.}$ Decisions to withhold or withdraw life-prolonging procedures will be reviewed by the facility's bioethics committee.
- $\underline{3.}$ Documentation of efforts to locate proxies from prior classes must be recorded in the patient record.
 - Section 3. This act shall take effect July 1, 2022.