1 A bill to be entitled 2 An act relating to the Department of Health; amending 3 s. 381.0045, F.S.; revising the purpose of the 4 department's targeted outreach program for certain 5 preqnant women; requiring the department to encourage 6 high-risk pregnant women of unknown status to be 7 tested for sexually transmissible diseases; requiring 8 the department to provide specified information to 9 preqnant women who have human immunodeficiency virus (HIV); requiring the department to link women with 10 11 mental health services when available; requiring the 12 department to educate pregnant women who have HIV on 13 certain information; requiring the department to 14 provide, for a specified purpose, continued oversight 15 of newborns exposed to HIV; amending s. 381.0303, 16 F.S.; removing the Children's Medical Services office 17 from parties required to coordinate in the development 18 of local emergency management plans for special needs 19 shelters; amending s. 381.986, F.S.; authorizing the department to select samples of marijuana from medical 20 21 marijuana treatment center facilities for certain 22 testing; authorizing the department to select samples 23 of marijuana delivery devices from medical marijuana 24 treatment centers to determine whether the device is safe for use; requiring medical marijuana treatment 25

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26 centers to recall marijuana and marijuana delivery 27 devices, instead of just edibles, under certain 28 circumstances; exempting the department and its 29 employees from criminal provisions if they acquire, 30 possess, test, transport, or lawfully dispose of marijuana and marijuana delivery devices under certain 31 32 circumstances; amending s. 401.23, F.S.; revising 33 definitions; amending s. 401.25, F.S.; conforming a 34 provision to changes made by the act; amending s. 401.27, F.S.; revising certification and 35 recertification requirements for emergency medical 36 37 technicians and paramedics; amending s. 401.2701, 38 F.S.; revising requirements for emergency medical 39 services training programs; authorizing certain site visits to be conducted either in person or through 40 41 electronic means; authorizing programs to substitute 42 certain simulated, remote videoconferencing options 43 for in-person training and related requirements; 44 specifying requirements for requests for department approval of such options; providing for the renewal of 45 46 program certification; providing for initial and 47 ongoing department site visits of programs; revising 48 program application procedures; amending s. 401.272, 49 F.S.; revising functions paramedics and emergency medical technicians may perform in nonemergency 50

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51 environments; authorizing paramedics to administer 52 public health countermeasures in nonemergency 53 environments under certain circumstances; conforming 54 provisions to changes made by the act; amending s. 401.30, F.S.; revising recordkeeping requirements for 55 56 emergency medical services providers; authorizing 57 records to be in either written or electronic formats; 58 revising the list of individuals and entities that may 59 receive limited disclosure of certain otherwise confidential and exempt records; requiring the release 60 of such records to be in compliance with specified 61 provisions; amending s. 401.34, F.S.; deleting 62 63 provisions and fees related to an obsolete examination; amending s. 401.425, F.S.; authorizing 64 65 emergency medical review committees to review the 66 performances of emergency medical technicians, 67 paramedics, and emergency medical services providers 68 to make recommendations for improvement; amending s. 69 401.435, F.S.; relabeling "first responder agencies" 70 as "emergency medical responder agencies"; revising 71 minimum standards for emergency medical first 72 responder training; amending s. 460.406, F.S.; 73 revising provisions related to chiropractic physician 74 licensing; amending s. 464.008, F.S.; deleting a 75 requirement that certain nursing program graduates

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76 complete a specified preparatory course; amending s. 77 464.018, F.S.; revising grounds for disciplinary 78 action against licensed nurses; amending s. 467.003, 79 F.S.; revising and defining terms; amending s. 467.009, F.S.; revising provisions related to approved 80 midwifery programs; amending s. 467.011, F.S.; 81 82 revising requirements for licensure of midwives; 83 amending s. 467.0125, F.S.; revising requirements for 84 licensure by endorsement of midwives; revising requirements for temporary certificates to practice 85 midwifery in this state; amending s. 467.205, F.S.; 86 revising provisions relating to approval, continued 87 monitoring, probationary status, provisional approval, 88 89 and approval rescission of midwifery programs; amending s. 468.803, F.S.; revising provisions related 90 91 to orthotist and prosthetist registration, examination, and licensing; amending s. 483.824, F.S.; 92 93 revising educational requirements for clinical 94 laboratory directors; amending s. 490.003, F.S.; 95 defining the terms "doctoral degree from an American 96 Psychological Association accredited program" and "doctoral degree in psychology"; amending ss. 490.005 97 98 and 490.0051, F.S.; revising education requirements 99 for psychologist licensure and provisional licensure, respectively; amending s. 491.005, F.S.; revising 100

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101 requirements for licensure of clinical social workers, 102 marriage and family therapists, and mental health 103 counselors; requiring that a licensed mental health 104 professional be accessible through certain means when 105 a registered intern provides clinical services through telehealth; amending s. 766.314, F.S.; deleting 106 107 obsolete language and updating provisions to conform 108 to current law; revising the frequency with which the 109 department must submit certain reports to the Florida Birth-Related Neurological Injury Compensation 110 111 Association; revising the content of such reports; providing an effective date. 112 113 114 Be It Enacted by the Legislature of the State of Florida: 115 116 Section 1. Subsections (2) and (3) of section 381.0045, 117 Florida Statutes, are amended to read: 118 381.0045 Targeted outreach for pregnant women.-119 It is the purpose of this section to establish a (2)120 targeted outreach program for high-risk pregnant women who may 121 not seek proper prenatal care, who suffer from substance abuse 122 or mental health problems, or who have acquired are infected 123 with human immunodeficiency virus (HIV), and to provide these 124 women with links to much-needed much needed services and 125 information.

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126 (3) The department shall: 127 Conduct outreach programs through contracts with, (a) 128 grants to, or other working relationships with persons or 129 entities where the target population is likely to be found. 130 Provide outreach that is peer-based, culturally (b) sensitive, and performed in a nonjudgmental manner. 131 132 (C) Encourage high-risk pregnant women of unknown status to be tested for HIV and other sexually transmissible diseases 133 134 as specified by department rule. 135 (d) Educate women not receiving prenatal care as to the 136 benefits of such care. 137 (e) Provide HIV-infected pregnant women who have HIV with information on the need for antiretroviral medication for their 138 139 newborn, their medication options, and how they can access the 140 medication after their discharge from the hospital so they can 141 make an informed decision about the use of Zidovudine (AZT). Link women with substance abuse treatment and mental 142 (f) 143 health services, when available, and act as a liaison with Healthy Start coalitions, children's medical services, Ryan 144 145 White-funded providers, and other services of the Department of 146 Health. 147 Educate pregnant women who have HIV on the importance (q) 148 of engaging in and continuing HIV care. 149 Provide continued oversight of any newborn exposed to (h) HIV to determine the newborn's final HIV status and ensure 150 Page 6 of 85

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| 151 | continued linkage to care if the newborn is diagnosed with HIV |
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| 152 | to HIV-exposed newborns. |
| 153 | Section 2. Paragraphs (a) and (c) of subsection (2) of |
| 154 | section 381.0303, Florida Statutes, are amended to read: |
| 155 | 381.0303 Special needs shelters |
| 156 | (2) SPECIAL NEEDS SHELTER PLAN; STAFFING; STATE AGENCY |
| 157 | ASSISTANCEIf funds have been appropriated to support disaster |
| 158 | coordinator positions in county health departments: |
| 159 | (a) The department shall assume lead responsibility for |
| 160 | the coordination of local medical and health care providers, the |
| 161 | American Red Cross, and other interested parties in developing a |
| 162 | plan for the staffing and medical management of special needs |
| 163 | shelters <u>and</u> . The local Children's Medical Services offices |
| 164 | shall assume lead responsibility for the coordination of local |
| 165 | medical and health care providers, the American Red Cross, and |
| 166 | other interested parties in developing a plan for the staffing |
| 167 | and medical management of pediatric special needs shelters. |
| 168 | Plans must conform to the local comprehensive emergency |
| 169 | management plan. |
| 170 | (c) The appropriate county health department, Children's |
| 171 | Medical Services office, and local emergency management agency |
| 172 | shall jointly decide who has responsibility for medical |
| 173 | supervision in each special needs shelter. |
| 174 | Section 3. Present paragraphs (e) through (h) of |
| 175 | subsection (14) of section 381.986, Florida Statutes, are |
| | |

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176 redesignated as paragraphs (f) through (i), respectively, a new 177 paragraph (e) is added to that subsection, and paragraph (e) of 178 subsection (8) of that section is amended, to read: 381.986 Medical use of marijuana.-179 180 MEDICAL MARIJUANA TREATMENT CENTERS.-(8) 181 (e) A licensed medical marijuana treatment center shall 182 cultivate, process, transport, and dispense marijuana for 183 medical use. A licensed medical marijuana treatment center may 184 not contract for services directly related to the cultivation, processing, and dispensing of marijuana or marijuana delivery 185 devices, except that a medical marijuana treatment center 186 licensed pursuant to subparagraph (a)1. may contract with a 187 single entity for the cultivation, processing, transporting, and 188 189 dispensing of marijuana and marijuana delivery devices. A 190 licensed medical marijuana treatment center must, at all times, 191 maintain compliance with the criteria demonstrated and 192 representations made in the initial application and the criteria 193 established in this subsection. Upon request, the department may 194 grant a medical marijuana treatment center a variance from the 195 representations made in the initial application. Consideration 196 of such a request shall be based upon the individual facts and 197 circumstances surrounding the request. A variance may not be 198 granted unless the requesting medical marijuana treatment center 199 can demonstrate to the department that it has a proposed alternative to the specific representation made in its 200

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201 application which fulfills the same or a similar purpose as the 202 specific representation in a way that the department can 203 reasonably determine will not be a lower standard than the 204 specific representation in the application. A variance may not 205 be granted from the requirements in subparagraph 2. and 206 subparagraphs (b) 1. and 2.

207 1. A licensed medical marijuana treatment center may 208 transfer ownership to an individual or entity who meets the 209 requirements of this section. A publicly traded corporation or 210 publicly traded company that meets the requirements of this 211 section is not precluded from ownership of a medical marijuana 212 treatment center. To accommodate a change in ownership:

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

216 b. The individual or entity applying for initial licensure 217 due to a change of ownership must submit an application that 218 must be received by the department at least 60 days before the 219 date of change of ownership.

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

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d. Requested information omitted from an application for

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226 licensure must be filed with the department within 21 days after 227 the department's request for omitted information or the 228 application shall be deemed incomplete and shall be withdrawn 229 from further consideration and the fees shall be forfeited.

230 <u>e.</u> Within 30 days after the receipt of a complete
231 application, the department shall approve or deny the
232 application.

233 2. A medical marijuana treatment center, and any 234 individual or entity who directly or indirectly owns, controls, 235 or holds with power to vote 5 percent or more of the voting 236 shares of a medical marijuana treatment center, may not acquire 237 direct or indirect ownership or control of any voting shares or 238 other form of ownership of any other medical marijuana treatment 239 center.

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

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

5. Each medical marijuana treatment center must adopt and enforce policies and procedures to ensure employees and volunteers receive training on the legal requirements to

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251 dispense marijuana to qualified patients.

252 6. When growing marijuana, a medical marijuana treatment253 center:

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

b. Must grow marijuana within an enclosed structure and ina room separate from any other plant.

261 c. Must inspect seeds and growing plants for plant pests 262 that endanger or threaten the horticultural and agricultural 263 interests of the state in accordance with chapter 581 and any 264 rules adopted thereunder.

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

268 7. Each medical marijuana treatment center must produce 269 and make available for purchase at least one low-THC cannabis 270 product.

8. A medical marijuana treatment center that produces edibles must hold a permit to operate as a food establishment pursuant to chapter 500, the Florida Food Safety Act, and must comply with all the requirements for food establishments pursuant to chapter 500 and any rules adopted thereunder.

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276 Edibles may not contain more than 200 milligrams of 277 tetrahydrocannabinol, and a single serving portion of an edible 278 may not exceed 10 milligrams of tetrahydrocannabinol. Edibles 279 may have a potency variance of no greater than 15 percent. 280 Edibles may not be attractive to children; be manufactured in 281 the shape of humans, cartoons, or animals; be manufactured in a 282 form that bears any reasonable resemblance to products available 283 for consumption as commercially available candy; or contain any 284 color additives. To discourage consumption of edibles by 285 children, the department shall determine by rule any shapes, 286 forms, and ingredients allowed and prohibited for edibles. 287 Medical marijuana treatment centers may not begin processing or dispensing edibles until after the effective date of the rule. 288 289 The department shall also adopt sanitation rules providing the 290 standards and requirements for the storage, display, or 291 dispensing of edibles.

292 Within 12 months after licensure, a medical marijuana 9. 293 treatment center must demonstrate to the department that all of 294 its processing facilities have passed a Food Safety Good 295 Manufacturing Practices, such as Global Food Safety Initiative 296 or equivalent, inspection by a nationally accredited certifying 297 body. A medical marijuana treatment center must immediately stop 298 processing at any facility which fails to pass this inspection 299 until it demonstrates to the department that such facility has met this requirement. 300

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301 10. A medical marijuana treatment center that produces 302 prerolled marijuana cigarettes may not use wrapping paper made 303 with tobacco or hemp.

304 11. When processing marijuana, a medical marijuana 305 treatment center must:

306 a. Process the marijuana within an enclosed structure and307 in a room separate from other plants or products.

308 b. Comply with department rules when processing marijuana 309 with hydrocarbon solvents or other solvents or gases exhibiting 310 potential toxicity to humans. The department shall determine by 311 rule the requirements for medical marijuana treatment centers to 312 use such solvents or gases exhibiting potential toxicity to 313 humans.

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

321 d. Test the processed marijuana using a medical marijuana 322 testing laboratory before it is dispensed. Results must be 323 verified and signed by two medical marijuana treatment center 324 employees. Before dispensing, the medical marijuana treatment 325 center must determine that the test results indicate that low-

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326 THC cannabis meets the definition of low-THC cannabis, the 327 concentration of tetrahydrocannabinol meets the potency 328 requirements of this section, the labeling of the concentration 329 of tetrahydrocannabinol and cannabidiol is accurate, and all 330 marijuana is safe for human consumption and free from 331 contaminants that are unsafe for human consumption. The 332 department shall determine by rule which contaminants must be 333 tested for and the maximum levels of each contaminant which are 334 safe for human consumption. The Department of Agriculture and 335 Consumer Services shall assist the department in developing the 336 testing requirements for contaminants that are unsafe for human 337 consumption in edibles. The department shall also determine by 338 rule the procedures for the treatment of marijuana that fails to 339 meet the testing requirements of this section, s. 381.988, or 340 department rule. The department may select samples of marijuana 341 a random sample from edibles available for purchase in a medical 342 marijuana treatment center dispensing facility which shall be 343 tested by the department to determine whether that the marijuana 344 edible meets the potency requirements of this section, is safe 345 for human consumption, and is accurately labeled with the 346 labeling of the tetrahydrocannabinol and cannabidiol 347 concentration or to verify the result of marijuana testing 348 conducted by a marijuana testing laboratory. The department may 349 also select samples of marijuana delivery devices from a medical marijuana treatment center to determine whether the marijuana 350

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351 delivery device is safe for use by qualified patients is 352 accurate. A medical marijuana treatment center may not require 353 payment from the department for the sample. A medical marijuana 354 treatment center must recall marijuana edibles, including all 355 marijuana and marijuana products edibles made from the same 356 batch of marijuana, that fails which fail to meet the potency 357 requirements of this section, that is which are unsafe for human 358 consumption, or for which the labeling of the 359 tetrahydrocannabinol and cannabidiol concentration is 360 inaccurate. A medical marijuana treatment center must also recall all marijuana delivery devices determined to be unsafe 361 362 for use by qualified patients. The medical marijuana treatment 363 center must retain records of all testing and samples of each 364 homogenous batch of marijuana for at least 9 months. The medical 365 marijuana treatment center must contract with a marijuana 366 testing laboratory to perform audits on the medical marijuana 367 treatment center's standard operating procedures, testing 368 records, and samples and provide the results to the department 369 to confirm that the marijuana or low-THC cannabis meets the 370 requirements of this section and that the marijuana or low-THC 371 cannabis is safe for human consumption. A medical marijuana 372 treatment center shall reserve two processed samples from each 373 batch and retain such samples for at least 9 months for the 374 purpose of such audits. A medical marijuana treatment center may 375 use a laboratory that has not been certified by the department

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376 under s. 381.988 until such time as at least one laboratory 377 holds the required certification, but in no event later than 378 July 1, 2018. 379 e. Package the marijuana in compliance with the United 380 States Poison Prevention Packaging Act of 1970, 15 U.S.C. ss. 381 1471 et seq. 382 f. Package the marijuana in a receptacle that has a firmly affixed and legible label stating the following information: 383 384 (I) The marijuana or low-THC cannabis meets the 385 requirements of sub-subparagraph d. 386 (II)The name of the medical marijuana treatment center 387 from which the marijuana originates. The batch number and harvest number from which the 388 (III) 389 marijuana originates and the date dispensed. 390 (IV) The name of the physician who issued the physician 391 certification. 392 The name of the patient. (V) The product name, if applicable, and dosage form, 393 (VI) 394 including concentration of tetrahydrocannabinol and cannabidiol. 395 The product name may not contain wording commonly associated 396 with products marketed by or to children. 397 (VII) The recommended dose. 398 (VIII) A warning that it is illegal to transfer medical 399 marijuana to another person. 400 (IX) A marijuana universal symbol developed by the Page 16 of 85

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| 401 | department. |
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| 402 | 12. The medical marijuana treatment center shall include |
| 403 | in each package a patient package insert with information on the |
| 404 | specific product dispensed related to: |
| 405 | a. Clinical pharmacology. |
| 406 | b. Indications and use. |
| 407 | c. Dosage and administration. |
| 408 | d. Dosage forms and strengths. |
| 409 | e. Contraindications. |
| 410 | f. Warnings and precautions. |
| 411 | g. Adverse reactions. |
| 412 | 13. In addition to the packaging and labeling requirements |
| 413 | specified in subparagraphs 11. and 12., marijuana in a form for |
| 414 | smoking must be packaged in a sealed receptacle with a legible |
| 415 | and prominent warning to keep away from children and a warning |
| 416 | that states marijuana smoke contains carcinogens and may |
| 417 | negatively affect health. Such receptacles for marijuana in a |
| 418 | form for smoking must be plain, opaque, and white without |
| 419 | depictions of the product or images other than the medical |
| 420 | marijuana treatment center's department-approved logo and the |
| 421 | marijuana universal symbol. |
| 422 | 14. The department shall adopt rules to regulate the |
| 423 | types, appearance, and labeling of marijuana delivery devices |
| 424 | dispensed from a medical marijuana treatment center. The rules |
| 425 | must require marijuana delivery devices to have an appearance |

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426 consistent with medical use.

427 Each edible shall be individually sealed in plain, 15. 428 opaque wrapping marked only with the marijuana universal symbol. Where practical, each edible shall be marked with the marijuana 429 430 universal symbol. In addition to the packaging and labeling 431 requirements in subparagraphs 11. and 12., edible receptacles 432 must be plain, opaque, and white without depictions of the 433 product or images other than the medical marijuana treatment 434 center's department-approved logo and the marijuana universal 435 symbol. The receptacle must also include a list of all the 436 edible's ingredients, storage instructions, an expiration date, 437 a legible and prominent warning to keep away from children and pets, and a warning that the edible has not been produced or 438 439 inspected pursuant to federal food safety laws.

440 16. When dispensing marijuana or a marijuana delivery441 device, a medical marijuana treatment center:

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

b. May not dispense more than a 70-day supply of marijuana
within any 70-day period to a qualified patient or caregiver.
May not dispense more than one 35-day supply of marijuana in a
form for smoking within any 35-day period to a qualified patient

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451 or caregiver. A 35-day supply of marijuana in a form for smoking 452 may not exceed 2.5 ounces unless an exception to this amount is 453 approved by the department pursuant to paragraph (4)(f).

454 c. Must have the medical marijuana treatment center's 455 employee who dispenses the marijuana or a marijuana delivery 456 device enter into the medical marijuana use registry his or her 457 name or unique employee identifier.

458 Must verify that the qualified patient and the d. 459 caregiver, if applicable, each have an active registration in 460 the medical marijuana use registry and an active and valid medical marijuana use registry identification card, the amount 461 462 and type of marijuana dispensed matches the physician 463 certification in the medical marijuana use registry for that 464 qualified patient, and the physician certification has not 465 already been filled.

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

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

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476 delivery device, record in the registry the date, time, 477 quantity, and form of marijuana dispensed; the type of marijuana 478 delivery device dispensed; and the name and medical marijuana 479 use registry identification number of the qualified patient or 480 caregiver to whom the marijuana delivery device was dispensed.

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

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(14) EXCEPTIONS TO OTHER LAWS.-

(e) Notwithstanding s. 893.13, s. 893.135, s. 893.147, or any other law, but subject to the requirements of this section, the department, including an employee of the department acting within the scope of his or her employment, may acquire, possess, test, transport, and lawfully dispose of marijuana and marijuana delivery devices as provided in this section, in s. 381.988, and by department rule.

492 Section 4. Section 401.23, Florida Statutes, is amended to 493 read:

494 401.23 Definitions.—As used in this part, the term:
495 (1) "Advanced life support" means assessment or treatment
496 by a person <u>certified</u> qualified under this part <u>to perform</u>
497 through the use of techniques such as endotracheal intubation,
498 the administration of drugs or intravenous fluids, telemetry,
499 cardiac monitoring, cardiac defibrillation, and other techniques
500 described <u>for the paramedic level</u> in the EMT-Paramedic National

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Standard Curriculum or the United States Department of Transportation's National EMS Education Standards and approved by, pursuant to rules of the department rule. "Advanced life support service" means any emergency (2)medical services provider that offers or provides transport or nontransport service which uses advanced life support techniques. "Air ambulance" means any fixed-wing or rotary-wing (3) aircraft used for, or intended to be used by an emergency medical services provider to provide, advanced life support services and transportation of individuals receiving such services for, air transportation of sick or injured persons requiring or likely to require medical attention during transport. "Air ambulance service" means any emergency medical (4) services provider that offers or provides advanced life support from or onboard an air ambulance publicly or privately owned service, licensed in accordance with the provisions of this part, which operates air ambulances to transport persons requiring or likely to require medical attention during transport. (5) "Ambulance" or "emergency medical services vehicle" means any privately or publicly owned land or water vehicle or air ambulance that is designed, constructed, reconstructed, maintained, equipped, or operated for, and is used by for, or Page 21 of 85

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526 intended to be used by an emergency medical services provider to 527 provide basic or advanced life support services for, land or 528 water transportation of sick or injured persons requiring or 529 likely to require medical attention during transport. 530 "Ambulance driver" means any person who meets the (6) 531 requirements of s. 401.281. 532 (7)"Basic life support" means the assessment or treatment 533 by a person certified qualified under this part to perform 534 through the use of techniques described in the United States 535 Department of Transportation's EMT-Basic National Standard 536 Curriculum or the National EMS Education Standards of the United 537 States Department of Transportation and approved by the 538 department rule. The term includes the administration of oxygen 539 and other techniques that have been approved and are performed 540 under conditions specified by rules of the department. 541 (8) "Basic life support service" means any emergency 542 medical services provider that offers or provides service which 543 uses only basic life support techniques. 544 "Certification" means any authorization issued under (9) 545 pursuant to this part to a person to provide basic life support 546 act as an emergency medical technician or to provide basic and 547 advanced life support as a paramedic. 548 (10)"Department" means the Department of Health. 549 (11)"Emergency medical technician" means a person who is certified by the department under this part to provide perform 550

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551 basic life support under medical direction in any of the 552 following settings: pursuant to this part 553 (a) Local communities. 554 (b) Hospitals as defined in s. 395.002. 555 Urgent care centers as defined in s. 395.002. (C) 556 (d) Any other location specified by department rule. 557 (12)"Interfacility transfer" means the transportation by ambulance of a patient between two facilities licensed under 558 559 chapter 393, chapter 395, chapter 400, or chapter 429 or other 560 facilities as specified by department rule, pursuant to this 561 part. 562 (13)"Licensee" means any basic life support service, 563 advanced life support service, or air ambulance service licensed 564 under pursuant to this part. 565 "Medical direction" means oral instruction direct (14)566 supervision by a physician in person or through two-way voice 567 communication or, when such voice communication is unavailable, 568 through established standing orders, pursuant to rules of the 569 department. "Medical director" means a physician who is employed 570 (15)571 or contracted by a licensee and who provides medical direction supervision, including appropriate quality assurance but not 572 573 including administrative and managerial functions, for daily 574 operations and training under pursuant to this part. 575 "Mutual aid agreement" means a written agreement (16)

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576 between two or more entities whereby the signing parties agree 577 to lend aid to one another under conditions specified in the 578 agreement and as authorized sanctioned by the governing body of 579 each affected county.

580 "Paramedic" means a person who is certified by the (17)department <u>under this part</u> to provide perform basic and advanced 581 582 life support <u>under medical direction in any of the following</u> 583 settings:

584

(a) Local communities.

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586

(c) Urgent care centers as defined in s. 395.002.

(b) Hospitals as defined in s. 395.002.

587 Any other location specified by department rule (d)

588 pursuant to this part.

589 "Permit" means any authorization issued under (18)pursuant to this part for a vehicle to be operated as a basic 590 591 life support or advanced life support transport vehicle or an 592 advanced life support nontransport vehicle providing basic or 593 advanced life support.

594 "Physician" means a person practitioner (19)595 licensed to practice medicine under the provisions of chapter 596 458 or osteopathic medicine under chapter 459. For the purpose 597 of providing "medical direction" as defined in subsection (14) 598 for the treatment of patients immediately before prior to or 599 during transportation to a United States Department of Veterans Affairs medical facility, "physician" also means a person 600

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601 appointed to a physician position practitioner employed by the 602 Secretary of the United States Department of Veterans Affairs. 603 "Registered nurse" means a person practitioner who is (20) 604 licensed to practice professional nursing under pursuant to part 605 I of chapter 464. 606 "Service location" means any permanent location in or (21)607 from which a licensee solicits, accepts, or conducts business 608 under this part. 609 (22)"Volunteer ambulance service" means a faith-based, not-for-profit charitable corporation registered under chapter 610 611 617 which is licensed under this part as a basic life support 612 service or an advanced life support service; which is not a parent, subsidiary, or affiliate of, or related to, any for-613 614 profit entity; and which uses only unpaid volunteers to provide 615 basic life support services or advanced life support services 616 free of charge, is not operating for pecuniary profit or 617 financial gain, and does not distribute to or inure to the 618 benefit of its directors, volunteers, members, or officers any 619 part of its assets or income. 620 Section 5. Paragraph (d) of subsection (2) of section 401.25, Florida Statutes, is amended to read: 621 622 401.25 Licensure as a basic life support or an advanced 623 life support service.-624 (2) The department shall issue a license for operation to 625 any applicant who complies with the following requirements:

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| 626 | (d) The applicant has obtained a certificate of public |
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| 627 | convenience and necessity from each county in which the |
| 628 | applicant will operate. In issuing the certificate of public |
| 629 | convenience and necessity, the governing body of each county |
| 630 | shall consider the recommendations of municipalities within its |
| 631 | jurisdiction. An applicant that is an active <u>emergency medical</u> |
| 632 | first responder agency is exempt from this requirement if it: |
| 633 | 1. Is a faith-based, not-for-profit charitable corporation |
| 634 | registered under chapter 617 which has been responding to |
| 635 | medical emergencies in this state for at least 10 consecutive |
| 636 | years. |
| 637 | 2. Is not a parent, subsidiary, or affiliate of, or |
| 638 | related to, any for-profit entity. |
| 639 | 3. Provides basic life support services or advanced life |
| 640 | support services solely through at least 50 unpaid licensed |
| 641 | emergency medical technician or paramedic volunteers. |
| 642 | 4. Is not operating for pecuniary profit or financial |
| 643 | gain. |
| 644 | 5. Does not distribute to or inure to the benefit of its |
| 645 | directors, members, or officers any part of its assets or |
| 646 | income. |
| 647 | 6. Does not receive any government funding. However, the |
| 648 | volunteer ambulance service may receive funding from specialty |
| 649 | license plate proceeds. |
| 650 | 7. Has never had a license denied, revoked, or suspended. |
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8.

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9. As part of its application for licensure, provides to the department a management plan that includes a training program, dispatch protocols, a complaint management system, an accident or injury handling system, a quality assurance program, and proof of adequate insurance coverage to meet state or county insurance requirements, whichever requirements are greater.

Provides services free of charge.

658 10. Provides a disclaimer on all written materials that 659 the volunteer ambulance service is not associated with the 660 state's 911 system.

662 The exemption under this paragraph may be granted to no more 663 than four counties. This exemption notwithstanding, an applicant 664 is not exempted from and must comply with all other requirements 665 for licensure. An applicant must also take all reasonable 666 efforts to enter into a memorandum of understanding with the 667 emergency medical services licensee within whose jurisdiction 668 the applicant will provide services in order to facilitate 669 communications and coordinate emergency services for situations 670 beyond the scope of the applicant's capacity and for situations 671 of advanced life support that are deemed priority 1 or priority 672 2 emergencies.

673 Section 6. Subsections (3), (4), and (5) of section
674 401.27, Florida Statutes, are amended to read:
675 401.27 Personnel; standards and certification.-

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676 Any person who desires to be certified or recertified (3) 677 as an emergency medical technician or paramedic must apply to 678 the department under oath on forms provided by the department 679 which shall contain such information as the department 680 reasonably requires, which may include affirmative evidence of 681 ability to comply with applicable laws and rules. The department 682 shall determine whether the applicant meets the requirements 683 specified in this section and in rules of the department and 684 shall issue a certificate to any person who meets such 685 requirements.

686 (4) An applicant for certification or recertification as687 an emergency medical technician or paramedic must:

688 (a) Have completed an appropriate training program as689 follows:

For an emergency medical technician, an emergency
 medical technician training program approved by the department
 as equivalent to the most recent EMT-Basic National Standard
 Curriculum or the National EMS Education Standards of the United
 States Department of Transportation;

For a paramedic, a paramedic training program approved
 by the department as equivalent to the most recent EMT-Paramedic
 National Standard Curriculum or the National EMS Education
 Standards of the United States Department of Transportation;

(b) <u>Confirm</u> Certify under oath that he or she is not
addicted to alcohol or any controlled substance;

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(c) <u>Confirm</u> Certify under oath that he or she is free from any physical or mental defect or disease that might impair the applicant's ability to perform his or her duties;

(d) Within 2 years after program completion have passed an
examination developed or required by the department;

(e)1. For an emergency medical technician, hold a current American Heart Association cardiopulmonary resuscitation course card or an American Red Cross cardiopulmonary resuscitation course card or its equivalent as defined by department rule;

710 2. For a paramedic, hold a certificate of successful 711 course completion in advanced cardiac life support from the 712 American Heart Association or its equivalent as defined by 713 department rule;

(f) Submit to the department the application the certification fee and the nonrefundable examination fee prescribed in s. 401.34, and submit to the examination provider the nonrefundable which examination fee will be required for each examination administered to an applicant; and

(g) Submit a completed application to the department, which application documents compliance with paragraphs (a), (b), (c), (e), (f), and this paragraph, and, if applicable, paragraph (d). The application must be submitted so as to be received by the department at least 30 calendar days before the next regularly scheduled examination for which the applicant desires to be scheduled.

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(5) The certification examination must be offered monthly.

The department shall issue an examination admission notice to

HB 693

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to read:

(1)

the applicant advising him or her of the time and place of the examination for which he or she is scheduled. Individuals achieving a passing score on the certification examination may be issued a temporary certificate with their examination grade report. The department must issue an original certification within 45 days after the examination. Examination questions and answers are not subject to discovery but may be introduced into evidence and considered only in camera in any administrative proceeding under chapter 120. If an administrative hearing is held, the department shall provide challenged examination questions and answers to the administrative law judge. The department shall establish by rule the procedure by which an applicant, and the applicant's attorney, may review examination questions and answers in accordance with s. 119.071(1)(a). Section 7. Section 401.2701, Florida Statutes, is amended 401.2701 Emergency medical services training programs.-Any private or public institution in Florida desiring

746 to conduct an approved program for the education of emergency 747 medical technicians and paramedics must shall:

748 Submit a completed application on a form adopted (a) 749 provided by the department rule, which must include: 750 Evidence that the institution is in compliance with all 1.

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751 applicable requirements of the Department of Education.

752 2. Evidence of an affiliation agreement with a hospital
753 that has an emergency department staffed by at least one
754 physician and one registered nurse.

3. Evidence of an affiliation agreement with a current emergency medical services provider that is licensed in this state. Such agreement shall include, at a minimum, a commitment by the provider to conduct the field experience portion of the education program. Evidence of an affiliation agreement is not required if the applicant is licensed by the department as an advanced life support service.

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4. Documentation verifying faculty, including:

A medical director who is a licensed physician meeting
the applicable requirements for emergency medical services
medical directors as outlined in this chapter and rules of the
department. The medical director shall have the duty and
responsibility of certifying that graduates have successfully
completed all phases of the education program and are proficient
in basic or advanced life support techniques, as applicable.

b. A program director responsible for the operation,
organization, periodic review, administration, development, and
approval of the program.

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5. Documentation verifying that the curriculum:

774 a. Meets the most recent Emergency Medical Technician 775 Basic National Standard Curriculum or the National EMS Education

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776 Standards approved by the department for emergency medical 777 technician programs and Emergency Medical Technician-Paramedic 778 National Standard Curriculum or the National EMS Education 779 Standards approved by the department for paramedic programs. 780 Includes 2 hours of instruction on the trauma scorecard b. 781 methodologies for assessment of adult trauma patients and 782 pediatric trauma patients as specified by the department by 783 rule. 784 6. Evidence of sufficient medical and educational 785 equipment to meet emergency medical services training program 786 needs. 787 Receive a scheduled in-person or department-approved (b) 788 remote audio-visual site visit from the department to the 789 applicant's institution. Such site visit shall be conducted 790 within 30 days after the department's notification to the 791 institution that the application was accepted for onsite review. 792 During the site visit, the department must determine the 793 applicant's compliance with the following criteria: 794 1. Emergency medical technician programs must be a minimum 795 of 300 110 hours, with at least 20 hours of supervised clinical 796 supervision, including 10 hours in a hospital emergency 797 department. 798 2. Paramedic programs must be available only to Florida-799 certified emergency medical technicians or an emergency medical 800 technicians, active duty and reserve military-trained emergency

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| 801 | medical technicians, and emergency medical technician applicants |
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| 802 | applicant who will obtain Florida certification <u>before</u> prior to |
| 803 | completion of phase one of the paramedic program. Paramedic |
| 804 | programs must be a minimum of $\underline{1,100}$ $\overline{700}$ hours of didactic and |
| 805 | skills practice components, with the skills laboratory student- |
| 806 | to-instructor ratio not exceeding six to one. Paramedic programs |
| 807 | must provide a field internship experience aboard an advanced |
| 808 | life support permitted ambulance. However, a portion of the |
| 809 | field internship experience may be satisfied aboard an advanced |
| 810 | life support permitted vehicle other than an ambulance <u>or by</u> |
| 811 | supervised, remote live videoconferencing together with |
| 812 | simulated direct patient contact in a simulated advanced life |
| 813 | support ambulance as provided determined by rule of the |
| 814 | department <u>rule</u> . |
| 815 | (2) A program may request department approval to |
| 816 | substitute simulation and remote, live videoconferencing for |
| 817 | supervised in-person clinical instruction and direct patient- |
| 818 | contact skills laboratory requirements. Requests must be made in |
| 819 | writing and include the following: |
| 820 | (a) The written approval of the training program medical |
| 821 | director. |
| 822 | (b) Documentation that all hospitals or emergency medical |
| 823 | services providers with whom the program has an existing |
| 824 | affiliation agreement have suspended in-person access for |
| 825 | purposes of supervised clinical instruction and direct patient- |
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826 contact field internships. 827 (c) The time period during which in-person access has been 828 suspended. 829 (d) Documentation of the design, development, and 830 implementation of simulation and videoconferencing training. 831 (e) Documentation of the inclusion of simulation and 832 videoconferencing within the curriculum, the efficacy of 833 simulation and videoconferencing, and student evaluations of 834 simulation, debriefing, and videoconferencing. 835 (3) After completion of the site visit, the department 836 shall prepare a report that must which shall be provided to the 837 institution. Upon completion of the report, <u>an</u> the application 838 from a program that meets the criteria in paragraph (1)(b) is 839 shall be deemed complete, and the provisions of s. 120.60 840 applies. An application from a program that does not meet the 841 criteria in paragraph (1) (b) is deemed incomplete, and 842 subsection (5) applies shall apply. 843 (4) (4) (3) If the program is approved, the department must 844 issue the institution a 2-year certificate of approval as an 845 emergency medical technician training program or a paramedic 846 training program. The department shall renew the certificate of 847 approval upon receipt of a written statement from the program 848 attesting that the training program continues to meet the 849 requirements of the Department of Education and remains accredited by a national organization recognized by the 850

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851 department. The department shall perform a site visit for all 852 initial nonaccredited programs. The department may periodically 853 and randomly perform in-person and remote telecommunication 854 inspection site visits to ensure compliance with this part and 855 department rules. 856 If an the application is deemed incomplete denied, the (5) 857 department must notify the applicant of any errors, omissions, 858 and areas of strength, areas needing improvement, and any 859 suggested means of improving improvement of the program. The 860 applicant must respond within 5 days after receiving the department's notice either with a notice of intent to provide a 861 862 plan of correction or a request for the department to proceed 863 with a final determination on the application without a plan of 864 correction. A denial notification shall be provided to the 865 applicant so as to allow the applicant 5 days prior to the 866 expiration of the application processing time in s. 120.60 to 867 advise the department in writing of its intent to submit a plan 868 of correction. Such intent notification shall provide the time 869 for application processing in s. 120.60. The plan of correction 870 must be received by submitted to the department within 30 days 871 after the date of the applicant's notice of intent and must specify the date by which the applicant intends to complete the 872 873 application of the notice. The department shall notify advise the applicant of its approval or denial of the plan of 874 875 correction within 30 days after of receipt. The denial of the

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876 plan of correction or denial of the application may be reviewed 877 as provided in chapter 120.

878 (6) (4) Approved emergency medical services training 879 programs must maintain records and reports that must be made 880 available to the department, upon written request. Such records 881 must include student applications, records of attendance, 882 records of participation in hospital clinic and field training, 883 medical records, course objectives and outlines, class 884 schedules, learning objectives, lesson plans, number of 885 applicants, number of students accepted, admission requirements, 886 description of qualifications, duties and responsibilities of 887 faculty, and correspondence.

888 (7) (5) Each approved program must notify the department 889 within 30 days after any change in the professional or 890 employment status of faculty. Each approved program must require 891 its students to pass a comprehensive final written and practical 892 examination evaluating the skills described in the current 893 United States Department of Transportation EMT-Basic or EMT-894 Paramedic National Standard Curriculum or the National EMS 895 Education Standards and approved by the department. Each 896 approved program must issue a certificate of completion to 897 program graduates within 14 days after completion.

898 Section 8. Section 401.272, Florida Statutes, is amended 899 to read:

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401.272 Emergency medical services community health care.-

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901 (1) The purpose of this section is to encourage more 902 effective <u>use</u> utilization of the skills of emergency medical 903 technicians and paramedics by enabling them to perform, in 904 partnership with local county health departments, specific 905 additional health care tasks that are consistent with the public 906 health and welfare.

907 (2) Notwithstanding any other provision of law to the 908 contrary:

909 (a) Paramedics or emergency medical technicians may perform health promotion and wellness activities and blood 910 911 pressure screenings in a nonemergency environment, within the 912 scope of their training, and under medical direction the 913 direction of a medical director. As used in this paragraph, the 914 term "health promotion and wellness" means the provision of 915 public health programs pertaining to the prevention of illness 916 and injury.

917 (b) Paramedics may administer immunizations and other 918 public health countermeasures in a nonemergency environment, 919 within the scope of their training, and under medical the 920 direction of a medical director. There must be a written agreement between the paramedic's medical director and the 921 922 department or the county health department located in each 923 county in which the paramedic administers immunizations or other 924 public health countermeasures. This agreement must establish the 925 protocols, policies, and procedures under which the paramedic

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926 must operate. 927 Each medical director under whose direction a (3) 928 paramedic administers immunizations or other public health 929 countermeasures must verify and document that the paramedic has 930 received sufficient training and experience to administer the 931 immunizations or other public health countermeasures, as 932 applicable. The verification must be documented on forms 933 developed by the department, and the completed forms must be 934 maintained at the service location of the licensee and made 935 available to the department upon request. 936 (4) The department may adopt and enforce all rules 937 necessary to enforce the provisions relating to a paramedic's 938 administration of immunizations and other public health 939 countermeasures and the performance of health promotion and 940 wellness activities and blood pressure screenings by a paramedic 941 or emergency medical technician in a nonemergency environment. 942 Section 9. Subsections (1), (2), and (4) of section 943 401.30, Florida Statutes, are amended to read: 944 401.30 Records.-945 (1) Each licensee must maintain accurate records of 946 emergency calls on written or electronic forms that contain such 947 information as is required by the department. The written or 948 electronic These records must be available for inspection by the 949 department at any reasonable time, and paper or electronic 950 copies thereof must be furnished to the department upon request.

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951 The department shall prescribe by rule the give each licensee 952 notice of what information such forms must contain. 953 (2) Each licensee must provide the receiving facility 954 hospital with a copy of an individual patient care record for 955 each patient who is transported to the receiving facility 956 hospital. The information contained in the patient care record 957 and the method and timeframe for providing the record shall be 958 prescribed by department rule of the department. 959 (4) Records of emergency calls which contain patient 960 examination or treatment information are confidential and exempt from the provisions of s. 119.07(1) and may not be disclosed 961 962 without the consent of the person to whom they pertain, but 963 appropriate limited disclosure may be made without such consent: 964 To the person's guardian as defined in s. 744.102, to (a) 965 the person's designated surrogate as defined in s. 765.101, to 966 the person's personal representative or trustee as those terms 967 are defined in s. 731.201 to the next of kin if the person is 968 deceased, or to a minor's principal as defined in s. 765.101 969 if the person is a minor; parent To <u>facility</u> hospital personnel for use in conjunction 970 (b) 971 with the treatment of the patient; 972 (C) To the department; 973 (d) To the emergency medical services provider service 974 medical director; 975 For use in a critical incident stress debriefing. Any (e) Page 39 of 85

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| 976 | such discussions during a critical incident stress debriefing |
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| 977 | shall be considered privileged communication under s. 90.503; |
| 978 | (f) In any civil or criminal action, unless otherwise |
| 979 | prohibited by law, upon the issuance of a subpoena from a court |
| 980 | of competent jurisdiction and proper notice by the party seeking |
| 981 | such records, to the patient or his or her legal representative; |
| 982 | or |
| 983 | (g) To a local trauma agency or a regional trauma agency, |
| 984 | or a panel or committee assembled by such an agency to assist |
| 985 | the agency in performing quality assurance activities in |
| 986 | accordance with a plan approved under s. 395.401. Records |
| 987 | obtained under this paragraph are confidential and exempt from |
| 988 | s. 119.07(1) and s. 24(a), Art. I of the State Constitution. |
| 989 | |
| 990 | Notwithstanding any other law to the contrary, the release of |
| 991 | patient care records or data from patient care records must be |
| 992 | in accordance with s. 401.425 and chapter 405. This subsection |
| 993 | does not prohibit the department or a licensee from providing |
| 994 | information to any law enforcement agency or any other |
| 995 | regulatory agency responsible for the regulation or supervision |
| 996 | of emergency medical services and personnel. |
| 997 | Section 10. Subsections (4) through (7) of section 401.34, |
| 998 | Florida Statutes, are amended to read: |
| 999 | 401.34 Fees |
| 1000 | (4)(a) If a certificate, license, or permit issued under |
| | |

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1001 this part is lost or destroyed, the person or entity to whom the 1002 certificate, license, or permit was issued may, upon payment of 1003 a fee to be set by the department not to exceed \$10, obtain a 1004 duplicate, or substitute thereof.

(b) Upon surrender of the original emergency medical technician or paramedic certificate and receipt of a replacement fee to be set by the department not to exceed \$10, the department shall issue a replacement certificate to make a change in name.

1010 (5) The department may provide same-day grading of the 1011 examination for an applicant for emergency medical technician or 1012 paramedic certification.

1013 (6) The department may offer walk-in eligibility 1014 determination and examination to applicants for emergency 1015 medical technician or paramedic certification who pay to the 1016 department a nonrefundable fee to be set by the department not 1017 to exceed \$65. The fee is in addition to the certification fee 1018 and examination fee. The department must establish locations and 1019 for eligibility determination and examination. times-

1020 (7) The cost of emergency medical technician or paramedic 1021 certification examination review may not exceed \$50.

Section 11. Subsection (5) of section 401.425, Florida Statutes, is amended, and subsection (8) is added to that section, to read:

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401.425 Emergency medical services quality assurance;

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1026 immunity from liability.-

1027 The records or reports obtained or produced by a (5)1028 committee providing quality assurance or quality improvement 1029 activities as described in subsections (1) - (4) are exempt from 1030 the provisions of s. 119.07(1) and s. 24(a), Art. I of the State 1031 Constitution, and committee proceedings and meetings regarding 1032 quality assurance or quality improvement activities are exempt 1033 from the provisions of s. 286.011 and s. 24(b), Art. I of the 1034 State Constitution. The investigations, proceedings, and records 1035 of a committee providing quality assurance activities as described in subsections (1) - (4) are shall not be subject to 1036 1037 discovery or introduction into evidence in any civil action or disciplinary proceeding by the department or employing agency 1038 1039 arising out of matters that which are the subject of evaluation 1040 and review by the committee, and a no person who was in 1041 attendance at a meeting of such committee may not shall be permitted or required to testify in any such civil action or 1042 1043 disciplinary proceeding as to any evidence or other matters 1044 produced or presented during the proceedings of such committee 1045 or as to any findings, recommendations, evaluations, opinions, 1046 or other actions of such committee or any members thereof. 1047 However, information, documents, or records provided to the 1048 committee from sources external to the committee are not immune 1049 from discovery or use in any such civil action or disciplinary proceeding merely because they were presented during proceedings 1050

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1051 of such committee, nor <u>may</u> should any person who testifies 1052 before a committee or who is a member of such committee be 1053 prevented from testifying as to matters within the person's 1054 knowledge, but, such witness <u>may</u> shall not be asked about his or 1055 her testimony before a committee or information obtained from or 1056 opinions formed by him or her as a result of participating in 1057 activities conducted by a committee.

1058 <u>(8) An emergency medical review committee may review the</u> 1059 performance of an emergency medical technician, a paramedic, or 1060 <u>an emergency medical services provider and make recommendations</u> 1061 for performance improvement.

1062 Section 12. Section 401.435, Florida Statutes, is amended 1063 to read:

1064 401.435 <u>Emergency medical</u> First responder agencies and 1065 training.-

1066 (1)The department must adopt by rule the United States 1067 Department of Transportation National EMS Education Standards 1068 for the Emergency Medical Responder level Services: First 1069 Responder Training Course as the minimum standard for emergency 1070 medical first responder training. In addition, the department 1071 must adopt rules establishing minimum emergency medical first 1072 responder instructor qualifications. For purposes of this 1073 section, an emergency medical a first responder includes any 1074 individual who receives training to render initial care to an ill or injured person, other than an individual trained and 1075

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1076 certified pursuant to s. 943.1395(1), but who does not have the 1077 primary responsibility of treating and transporting ill or 1078 injured persons.

1079 (2)Each emergency medical first responder agency must 1080 take all reasonable efforts to enter into a memorandum of 1081 understanding with the emergency medical services licensee 1082 within whose territory the agency operates in order to 1083 coordinate emergency services at an emergency scene. The 1084 department must provide a model memorandum of understanding for 1085 this purpose. The memorandum of understanding must should 1086 include dispatch protocols, the roles and responsibilities of 1087 emergency medical first responder personnel at an emergency 1088 scene, and the documentation required for patient care rendered. 1089 For purposes of this section, the term "emergency medical first 1090 responder agency" includes a law enforcement agency, a fire 1091 service agency not licensed under this part, a lifequard agency, 1092 and a volunteer organization that renders, as part of its 1093 routine functions, on-scene patient care before emergency 1094 medical technicians or paramedics arrive.

1095 Section 13. Subsection (1) of section 460.406, Florida 1096 Statutes, is amended to read:

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460.406 Licensure by examination.-

(1) Any person desiring to be licensed as a chiropractic
physician must apply to the department to take the licensure
examination. There shall be an application fee set by the board

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1101 not to exceed \$100 which shall be nonrefundable. There shall 1102 also be an examination fee not to exceed \$500 plus the actual 1103 per applicant cost to the department for purchase of portions of 1104 the examination from the National Board of Chiropractic 1105 Examiners or a similar national organization, which may be 1106 refundable if the applicant is found ineligible to take the 1107 examination. The department shall examine each applicant whom 1108 who the board certifies has met all of the following criteria:

(a) Completed the application form and remitted the appropriate fee.

(b) Submitted proof satisfactory to the department that he or she is not less than 18 years of age.

1113 Submitted proof satisfactory to the department that he (C) or she is a graduate of a chiropractic college which is 1114 accredited by or has status with the Council on Chiropractic 1115 1116 Education or its predecessor agency. However, any applicant who is a graduate of a chiropractic college that was initially 1117 1118 accredited by the Council on Chiropractic Education in 1995, who 1119 graduated from such college within the 4 years immediately 1120 preceding such accreditation, and who is otherwise qualified is 1121 shall be eligible to take the examination. An No application for 1122 a license to practice chiropractic medicine may not shall be 1123 denied solely because the applicant is a graduate of a 1124 chiropractic college that subscribes to one philosophy of chiropractic medicine as distinguished from another. 1125

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1126 (d)1. For an applicant who has matriculated in a 1127 chiropractic college before prior to July 2, 1990, completed at 1128 least 2 years of residence college work, consisting of a minimum 1129 of one-half the work acceptable for a bachelor's degree granted on the basis of a 4-year period of study, in a college or 1130 1131 university accredited by an institutional accrediting agency 1132 recognized and approved by the United States Department of 1133 Education. However, before prior to being certified by the board 1134 to sit for the examination, each applicant who has matriculated in a chiropractic college after July 1, 1990, must shall have 1135 1136 been granted a bachelor's degree, based upon 4 academic years of study, by a college or university accredited by an institutional 1137 a regional accrediting agency that which is a member of the 1138 1139 Commission on Recognition of Postsecondary Accreditation.

Effective July 1, 2000, completed, before prior to 1140 2. 1141 matriculation in a chiropractic college, at least 3 years of residence college work, consisting of a minimum of 90 semester 1142 1143 hours leading to a bachelor's degree in a liberal arts college 1144 or university accredited by an institutional accrediting agency 1145 recognized and approved by the United States Department of 1146 Education. However, before prior to being certified by the board to sit for the examination, each applicant who has matriculated 1147 1148 in a chiropractic college after July 1, 2000, must shall have 1149 been granted a bachelor's degree from an institution holding accreditation for that degree from an institutional a regional 1150

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1151 accrediting agency <u>that</u> which is recognized by the United States 1152 Department of Education. The applicant's chiropractic degree 1153 must consist of credits earned in the chiropractic program and 1154 may not include academic credit for courses from the bachelor's 1155 degree.

(e) Successfully completed the National Board of Chiropractic Examiners certification examination in parts I, II, III, and IV, and the physiotherapy examination of the National Board of Chiropractic Examiners, with a score approved by the board.

(f) Submitted to the department a set of fingerprints on a form and under procedures specified by the department, along with payment in an amount equal to the costs incurred by the Department of Health for the criminal background check of the applicant.

1167 The board may require an applicant who graduated from an 1168 institution accredited by the Council on Chiropractic Education 1169 more than 10 years before the date of application to the board 1170 to take the National Board of Chiropractic Examiners Special 1171 Purposes Examination for Chiropractic, or its equivalent, as 1172 determined by the board. The board shall establish by rule a 1173 passing score.

1174 Section 14. Subsection (4) of section 464.008, Florida 1175 Statutes, is amended to read:

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464.008 Licensure by examination.-

1177 (4) If an applicant who graduates from an approved program 1178 does not take the licensure examination within 6 months after 1179 graduation, he or she must enroll in and successfully complete a 1180 board-approved licensure examination preparatory course. The 1181 applicant is responsible for all costs associated with the 1182 course and may not use state or federal financial aid for such 1183 costs. The board shall by rule establish guidelines for 1184 licensure examination preparatory courses.

1185Section 15. Paragraph (e) of subsection (1) of section1186464.018, Florida Statutes, is amended to read:

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1176

464.018 Disciplinary actions.-

(1) The following acts constitute grounds for denial of a license or disciplinary action, as specified in ss. 456.072(2) and 464.0095:

(e) Having been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, regardless of adjudication, any offense prohibited under s. 435.04 or similar statute of another jurisdiction; or having committed an act which constitutes domestic violence as defined in s. 741.28.

1197 Section 16. Present subsections (13) and (14) of section 1198 467.003, Florida Statutes, are redesignated as subsections (14) 1199 and (15), respectively, a new subsection (13) is added to that 1200 section, and subsections (1) and (12) of that section are

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1201 amended, to read: 1202 467.003 Definitions.-As used in this chapter, unless the 1203 context otherwise requires: 1204 (1)"Approved midwifery program" means a midwifery school 1205 or a midwifery training program which is approved by the 1206 department pursuant to s. 467.205. 1207 (12)"Preceptor" means a physician licensed under chapter 1208 458 or chapter 459, a licensed midwife licensed under this 1209 chapter, or a certified nurse midwife licensed under chapter 1210 464 $_{\tau}$ who has a minimum of 3 years' professional experience $_{\tau}$ and 1211 who directs, teaches, supervises, and evaluates the learning 1212 experiences of a the student midwife as part of an approved 1213 midwifery program. 1214 (13) "Prelicensure course" means a course of study, 1215 offered by an approved midwifery program and approved by the 1216 department, which an applicant for licensure must complete 1217 before a license may be issued and which provides instruction in 1218 the laws and rules of this state and demonstrates the student's 1219 competency to practice midwifery under this chapter. 1220 Section 17. Section 467.009, Florida Statutes, is amended 1221 to read: 1222 467.009 Approved midwifery programs; education and 1223 training requirements.-1224 The department shall adopt standards for approved (1) midwifery programs which must include, but need not be limited 1225

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| 1226 | to, standards for all of the following: |
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| 1227 | (a) . The standards shall encompass Clinical and classroom |
| 1228 | instruction in all aspects of prenatal, intrapartal, and |
| 1229 | postpartal care, including all of the following: |
| 1230 | <u>1.</u> Obstetrics <u>.</u> ; |
| 1231 | <u>2.</u> Neonatal pediatrics <u>.</u> ; |
| 1232 | <u>3.</u> Basic sciences <u>.</u> + |
| 1233 | <u>4.</u> Female reproductive anatomy and physiology. $\dot{\cdot}$ |
| 1234 | <u>5.</u> Behavioral sciences <u>.</u> + |
| 1235 | <u>6.</u> Childbirth education <u>.</u> + |
| 1236 | 7. Community care.+ |
| 1237 | <u>8.</u> Epidemiology <u>.</u> + |
| 1238 | <u>9.</u> Genetics <u>.</u> |
| 1239 | <u>10.</u> Embryology <u>.</u> + |
| 1240 | <u>11.</u> Neonatology <u>.</u> + |
| 1241 | <u>12.</u> Applied pharmacology <u>.</u> + |
| 1242 | <u>13.</u> The medical and legal aspects of midwifery \cdot ; |
| 1243 | <u>14.</u> Gynecology and women's health. $\dot{\cdot}$ |
| 1244 | <u>15.</u> Family planning <u>.</u> |
| 1245 | <u>16.</u> Nutrition during pregnancy and lactation \cdot |
| 1246 | <u>17.</u> Breastfeeding. ; and |
| 1247 | 18. Basic nursing skills; and any other instruction |
| 1248 | determined by the department and council to be necessary. |
| 1249 | (b) The standards shall incorporate the Core competencies, |
| 1250 | incorporating those established by the American College of Nurse |
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| 1251 | Midwives and the Midwives Alliance of North America, including |
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| 1252 | knowledge, skills, and professional behavior in <u>all of</u> the |
| 1253 | following areas: |
| 1254 | 1. Primary management, collaborative management, referral, |
| 1255 | and medical consultation.+ |
| 1256 | 2. Antepartal, intrapartal, postpartal, and neonatal |
| 1257 | care <u>.</u> + |
| 1258 | 3. Family planning and gynecological care. $\dot{-}$ |
| 1259 | <u>4.</u> Common complications. ; and |
| 1260 | 5. Professional responsibilities. |
| 1261 | (c) Noncurricular The standards shall include |
| 1262 | noncurriculum matters under this section, including, but not |
| 1263 | limited to, staffing and teacher qualifications. |
| 1264 | (2) An approved midwifery program <u>must offer</u> shall include |
| 1265 | a course of study and clinical training for a minimum of 3 years |
| 1266 | which incorporates all of the standards, curriculum guidelines, |
| 1267 | and educational objectives provided in this section and the |
| 1268 | rules adopted hereunder. |
| 1269 | (3) An approved midwifery program may reduce If the |
| 1270 | applicant is a registered nurse or a licensed practical nurse or |
| 1271 | has previous nursing or midwifery education, the required period |
| 1272 | of training may be reduced to the extent of the <u>student's</u> |
| 1273 | applicant's qualifications as a registered nurse or licensed |
| 1274 | practical nurse or based on prior completion of equivalent |
| 1275 | nursing or midwifery education, as determined under rules |
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1276 adopted by the department rule. In no case shall the training be reduced to a period of less than 2 years. 1277 1278 (4) (4) (3) An approved midwifery program may accept students 1279 who To be accepted into an approved midwifery program, an 1280 applicant shall have both: 1281 A high school diploma or its equivalent. (a) 1282 (b) Taken three college-level credits each of math and 1283 English or demonstrated competencies in communication and 1284 computation. 1285 (5)(4) As part of its course of study, an approved 1286 midwifery program must require clinical training that includes 1287 all of the following: (a) A student midwife, during training, shall undertake, 1288 1289 under the supervision of a preceptor, The care of 50 women in each of the prenatal, intrapartal, and postpartal periods under 1290 1291 the supervision of a preceptor. - but The same women need not be 1292 seen through all three periods. 1293 (b) (5) Observation of The student midwife shall observe an 1294 additional 25 women in the intrapartal period before qualify 1295 for a license. 1296 (6) Clinical The training required under this section must 1297 include all of the following: 1298 (a) shall include Training in either hospitals or 1299 alternative birth settings, or both. 1300 (b) A requirement that students demonstrate competency in

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1301 the assessment of and differentiation, with particular emphasis on learning the ability to differentiate between low-risk 1302 1303 pregnancies and high-risk pregnancies. 1304 (7) A hospital or birthing center receiving public funds 1305 shall be required to provide student midwives access to observe 1306 labor, delivery, and postpartal procedures, provided the woman 1307 in labor has given informed consent. The Department of Health 1308 shall assist in facilitating access to hospital training for 1309 approved midwifery programs. 1310 (8) (7) The Department of Education shall adopt curricular 1311 frameworks for midwifery programs offered by conducted within 1312 public educational institutions under pursuant to this section. 1313 (8) Nonpublic educational institutions that conduct 1314 approved midwifery programs shall be accredited by a member of the Commission on Recognition of Postsecondary Accreditation and 1315 1316 shall be licensed by the Commission for Independent Education. Section 18. Section 467.011, Florida Statutes, is amended 1317 1318 to read: 1319 467.011 Licensed midwives; qualifications; examination 1320 Licensure by examination. -1321 (1) The department shall administer an examination to test 1322 the proficiency of applicants in the core competencies required 1323 to practice midwifery as specified in s. 467.009. 1324 (2) The department shall develop, publish, and make available to interested parties at a reasonable cost a 1325

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1326 bibliography and guide for the examination. 1327 (3) The department shall issue a license to practice 1328 midwifery to an applicant who meets all of the following 1329 criteria: 1330 (1) Demonstrates that he or she has graduated from one of 1331 the following: 1332 (a) An approved midwifery program. 1333 (b) A medical or midwifery program offered in another state, jurisdiction, territory, or country whose graduation 1334 1335 requirements were equivalent to or exceeded those required by s. 1336 467.009 and the rules adopted thereunder at the time of 1337 graduation. (2) Demonstrates that he or she has and successfully 1338 1339 completed a prelicensure course offered by an approved midwifery 1340 program. Students graduating from an approved midwifery program 1341 may meet this requirement by showing that the content 1342 requirements for the prelicensure course were covered as part of 1343 their course of study. 1344 (3) Submits an application for licensure on a form 1345 approved by the department and pays the appropriate fee. 1346 (4) Demonstrates that he or she has received a passing 1347 score on an the examination specified by the department, upon 1348 payment of the required licensure fee. Section 19. Section 467.0125, Florida Statutes, is amended 1349 1350 to read:

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1351 467.0125 Licensed midwives; qualifications; Licensure by 1352 endorsement; temporary certificates.-1353 The department shall issue a license by endorsement to (1)1354 practice midwifery to an applicant who, upon applying to the 1355 department, demonstrates to the department that she or he meets 1356 all of the following criteria: 1357 (a) 1. Holds a valid certificate or diploma from a foreign 1358 institution of medicine or midwifery or from a midwifery program 1359 offered in another state, bearing the seal of the institution or 1360 otherwise authenticated, which renders the individual eligible 1361 to practice midwifery in the country or state in which it was 1362 issued, provided the requirements therefor are deemed by the 1363 department to be substantially equivalent to, or to exceed, 1364 those established under this chapter and rules adopted under 1365 this chapter, and submits therewith a certified translation of 1366 the foreign certificate or diploma; or 1367 2. Holds an active, unencumbered a valid certificate or 1368 license to practice midwifery in another state, jurisdiction, or 1369 territory issued by that state, provided the licensing 1370 requirements of that state, jurisdiction, or territory at the time the license was issued were therefor are deemed by the 1371 1372 department to be substantially equivalent to τ or exceeded to

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(b) Has successfully completed a 4-month prelicensure

 $exceed_r$ those established under this chapter and the rules

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adopted hereunder under this chapter.

1376 course conducted by an approved midwifery program and has submitted documentation to the department of successful 1377 1378 completion. 1379 (C) Submits an application for licensure on a form 1380 approved by the department and pays the appropriate fee Has 1381 successfully passed the licensed midwifery examination. 1382 The department may issue a temporary certificate to (2)1383 practice in areas of critical need to an applicant any midwife 1384 who is qualifying for a midwifery license licensure by 1385 endorsement under subsection (1) and who meets all of the 1386 following criteria, with the following restrictions: 1387 Submits an application for a temporary certificate on (a) 1388 a form approved by the department and pays the appropriate fee, 1389 which may not exceed \$50 and is in addition to the fee required 1390 for licensure by endorsement under subsection (1). 1391 Specifies on the application that he or she will The (b) 1392 Department of Health shall determine the areas of critical need, 1393 and the midwife so certified shall practice only in one or more 1394 of the following locations: 1395 1. A county health department. 1396 2. A correctional facility. 1397 3. A United States Department of Veterans Affairs clinic. 1398 4. A community health center funded by s. 329, s. 330, or 1399 s. 340 of the Public Health Service Act. 1400 5. Any other agency or institution that is approved by the

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| 1401 | State Surgeon General and provides health care to meet the needs |
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| 1402 | of an underserved population in this state. |
| 1403 | (c) Will practice only those specific areas, under the |
| 1404 | supervision auspices of a physician licensed under pursuant to |
| 1405 | chapter 458 or chapter 459, a certified nurse midwife licensed |
| 1406 | <u>under</u> pursuant to part I of chapter 464, or a midwife licensed |
| 1407 | under this chapter $_{m{	au}}$ who has a minimum of 3 years' professional |
| 1408 | experience. |
| 1409 | (3) The department may issue a temporary certificate under |
| 1410 | this section with the following restrictions: |
| 1411 | (a) A requirement that a temporary certificateholder |
| 1412 | practice only in areas of critical need. The State Surgeon |
| 1413 | General shall determine the areas of critical need, which Such |
| 1414 | areas shall include, but <u>are</u> not be limited to, health |
| 1415 | professional shortage areas designated by the United States |
| 1416 | Department of Health and Human Services. |
| 1417 | (b) <u>A requirement that if a temporary certificateholder's</u> |
| 1418 | practice area ceases to be an area of critical need, within 30 |
| 1419 | days after such change the certificateholder must either: |
| 1420 | 1. Report a new practice area of critical need to the |
| 1421 | department; or |
| 1422 | 2. Voluntarily relinquish the temporary certificate. |
| 1423 | (4) The department shall review a temporary |
| 1424 | certificateholder's practice at least annually to determine |
| 1425 | whether the certificateholder is meeting the requirements of |
| | |

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1426 subsections (2) and (3) and the rules adopted thereunder. If the 1427 department determines that a certificateholder is not meeting 1428 these requirements, the department must revoke the temporary 1429 certificate. 1430 A temporary certificate issued under this section is (5) 1431 shall be valid only as long as an area for which it is issued remains an area of critical need, but no longer than 2 years, 1432 1433 and is shall not be renewable. 1434 (c) The department may administer an abbreviated oral 1435 examination to determine the midwife's competency, but no 1436 written regular examination shall be necessary. 1437 (d) The department shall not issue a temporary certificate 1438 to any midwife who is under investigation in another state for 1439 an act which would constitute a violation of this chapter until 1440 such time as the investigation is complete, at which time the 1441 provisions of this section shall apply. 1442 (c) The department shall review the practice under a 1443 temporary certificate at least annually to ascertain that the 1444 minimum requirements of the midwifery rules promulgated under 1445 this chapter are being met. If it is determined that the minimum 1446 requirements are not being met, the department shall immediately 1447 revoke the temporary certificate. 1448 (f) The fee for a temporary certificate shall not exceed 1449 \$50 and shall be in addition to the fee required for licensure. Section 20. Section 467.205, Florida Statutes, is amended 1450

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1451 to read: 1452 467.205 Approval of midwifery programs.-1453 (1)The department must approve an accredited or state-1454 licensed public or private institution seeking to provide 1455 midwifery education and training as an approved midwifery 1456 program in this state if the institution meets all of the 1457 following criteria: 1458 (a) Submits an application for approval on a form approved 1459 by the department. 1460 Demonstrates to the department's satisfaction that the (b) 1461 proposed midwifery program complies with s. 467.009 and the 1462 rules adopted thereunder. 1463 (c) For a private institution, demonstrates its 1464 accreditation by a member of the Council for Higher Education 1465 Accreditation or an accrediting agency approved by the United 1466 States Department of Education and its licensing or provisional 1467 licensing by the Commission for Independent Education An 1468 organization desiring to conduct an approved program for the 1469 midwives shall apply to the department 1470 such evidence as may be required to show that it complies with s. 467.009 and with the rules of the department. Any accredited 1471 1472 or state-licensed institution of higher learning, public or 1473 private, may provide midwifery education and training. 1474 The department shall adopt rules regarding educational (2)objectives, faculty qualifications, curriculum quidelines, 1475

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1476 administrative procedures, and other training requirements 1477 are necessary to ensure that approved programs graduate midwives 1478 competent to practice under this chapter. 1479 (3) The department shall survey each organization applying 1480 for approval. If the department is satisfied that the program 1481 meets the requirements of s. 467.009 and rules adopted pursuant 1482 to that section, it shall approve the program. 1483 (2) (4) The department shall, at least once every 3 years, 1484 certify whether each approved midwifery program is currently 1485 compliant, and has maintained compliance, complies with the 1486 requirements of standards developed under s. 467.009 and the 1487 rules adopted thereunder. (3) (3) (5) If the department finds that an approved midwifery 1488 1489 program is not in compliance with the requirements of s. 467.009 1490 or the rules adopted thereunder, or has lost its accreditation 1491 status, the department must provide its finding to the program 1492 in writing and no longer meets the required standards, it may 1493 place the program on probationary status for a specified period 1494 of time, which may not exceed <u>3 years</u> until such 1495 standards are restored. 1496 (4) If a program on probationary status does not come into compliance with the requirements of s. 467.009 or the rules 1497 1498 adopted thereunder, or regain its accreditation status, as 1499 applicable, within the period specified by the department fails to correct these conditions within a specified period of time, 1500

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| 1501 | the department may rescind the program's approval. |
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| 1502 | <u>(5) A</u> Any program <u>that has</u> having its approval rescinded |
| 1503 | has shall have the right to reapply for approval. |
| 1504 | (6) <u>The department may grant</u> provisional approval of a new |
| 1505 | program seeking accreditation status, for a period not to exceed |
| 1506 | 5 years, provided that all other requirements of this section |
| 1507 | are met. |
| 1508 | (7) The department may rescind provisional approval of a |
| 1509 | program that fails to meet the requirements of s. 467.009, this |
| 1510 | section, or the rules adopted thereunder, in accordance with |
| 1511 | procedures provided in subsections (3) and (4) may be granted |
| 1512 | pending the licensure results of the first graduating class. |
| 1513 | Section 21. Subsections (2), (3), and (4) and paragraphs |
| 1514 | (a) and (b) of subsection (5) of section 468.803, Florida |
| 1515 | Statutes, are amended to read: |
| 1516 | 468.803 License, registration, and examination |
| 1517 | requirements |
| 1518 | (2) An applicant for registration, examination, or |
| 1519 | licensure must apply to the department on a form prescribed by |
| 1520 | the board for consideration of board approval. Each initial |
| 1521 | applicant shall submit a set of fingerprints to the department |
| 1522 | <u>in accordance with</u> on a form and under procedures specified by |
| 1523 | the department, along with payment in an amount equal to the |
| 1524 | costs incurred by the department for state and national criminal |
| 1525 | history checks of the applicant. The department shall submit the |
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1526 fingerprints provided by an applicant to the Department of Law 1527 Enforcement for a statewide criminal history check, and the 1528 Department of Law Enforcement shall forward the fingerprints to 1529 the Federal Bureau of Investigation for a national criminal 1530 history check of the applicant. The board shall screen the 1531 results to determine if an applicant meets licensure 1532 requirements. The board shall consider for examination, 1533 registration, or licensure each applicant whom who the board 1534 verifies: 1535 Has submitted the completed application and completed (a) 1536 the fingerprinting requirements fingerprint forms and has paid 1537 the applicable application fee, not to exceed \$500, and the cost 1538 of the state and national criminal history checks. The 1539 application fee is and cost of the criminal history checks shall 1540 be nonrefundable; 1541 (b) Is of good moral character; 1542 (C) Is 18 years of age or older; and Has completed the appropriate educational preparation. 1543 (d) 1544 (3) A person seeking to attain the orthotics or 1545 prosthetics experience required for licensure in this state must 1546 be approved by the board and registered as a resident by the 1547 department. Although a registration may be held in both 1548 disciplines, for independent registrations the board may not 1549 approve a second registration until at least 1 year after the issuance of the first registration. Notwithstanding subsection 1550

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1561 1562 (2), a person who has been approved by the board and registered by the department in one discipline may apply for registration in the second discipline without an additional state or national criminal history check during the period in which the first registration is valid. Each independent registration or dual registration is valid for 2 years after the date of issuance unless otherwise revoked by the department upon recommendation of the board. The board shall set a registration fee not to exceed \$500 to be paid by the applicant. A registration may be renewed once by the department upon recommendation of the board for a period no longer than 1 year, as such renewal is defined by the board by rule. The renewal fee may not exceed one-half the current registration fee. To be considered by the board for

1563 the current registration fee. To be considered by the board for 1564 approval of registration as a resident, the applicant must have 1565 one of the following:

(a) A Bachelor of Science or higher-level postgraduate
degree in orthotics and prosthetics from <u>an</u> a regionally
accredited college or university recognized by the Commission on
Accreditation of Allied Health Education Programs.

(b) A minimum of a bachelor's degree from <u>an</u>
<u>institutionally</u> a regionally accredited college or university
and a certificate in orthotics or prosthetics from a program
recognized by the Commission on Accreditation of Allied Health
Education Programs, or its equivalent, as determined by the
board.

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(c) A minimum of a bachelor's degree from <u>an</u>
<u>institutionally</u> a regionally accredited college or university
and a dual certificate in both orthotics and prosthetics from
programs recognized by the Commission on Accreditation of Allied
Health Education Programs, or its equivalent, as determined by
the board.

1582 (4) The department may develop and administer a state 1583 examination for an orthotist or a prosthetist license, or the 1584 board may approve the existing examination of a national 1585 standards organization. The examination must be predicated on a minimum of a baccalaureate-level education and formalized 1586 1587 specialized training in the appropriate field. Each examination 1588 must demonstrate a minimum level of competence in basic 1589 scientific knowledge, written problem solving, and practical 1590 clinical patient management. The board shall require an 1591 examination fee not to exceed the actual cost to the board in 1592 developing, administering, and approving the examination, which 1593 fee must be paid by the applicant. To be considered by the board 1594 for examination, the applicant must have:

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(a) For an examination in orthotics:

1596 1. A Bachelor of Science or higher-level postgraduate 1597 degree in orthotics and prosthetics from <u>an institutionally</u> a 1598 regionally accredited college or university recognized by the 1599 Commission on Accreditation of Allied Health Education Programs 1600 or, at a minimum, a bachelor's degree from <u>an institutionally</u> a

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1601 regionally accredited college or university and a certificate in 1602 orthotics from a program recognized by the Commission on 1603 Accreditation of Allied Health Education Programs, or its 1604 equivalent, as determined by the board; and

1605 2. An approved orthotics internship of 1 year of qualified
1606 experience, as determined by the board, or an orthotic residency
1607 or dual residency program recognized by the board.

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(b) For an examination in prosthetics:

1609 1. A Bachelor of Science or higher-level postgraduate degree in orthotics and prosthetics from an institutionally a 1610 regionally accredited college or university recognized by the 1611 Commission on Accreditation of Allied Health Education Programs 1612 1613 or, at a minimum, a bachelor's degree from an institutionally a regionally accredited college or university and a certificate in 1614 prosthetics from a program recognized by the Commission on 1615 1616 Accreditation of Allied Health Education Programs, or its 1617 equivalent, as determined by the board; and

1618 2. An approved prosthetics internship of 1 year of 1619 qualified experience, as determined by the board, or a 1620 prosthetic residency or dual residency program recognized by the 1621 board.

1622 (5) In addition to the requirements in subsection (2), to 1623 be licensed as:

1624 (a) An orthotist, the applicant must pay a license fee not1625 to exceed \$500 and must have:

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1626 A Bachelor of Science or higher-level postgraduate 1. 1627 degree in orthotics and prosthetics from an institutionally a 1628 regionally accredited college or university recognized by the Commission on Accreditation of Allied Health Education Programs, 1629 1630 or a bachelor's degree from an institutionally accredited 1631 college or university and with a certificate in orthotics from a 1632 program recognized by the Commission on Accreditation of Allied 1633 Health Education Programs, or its equivalent, as determined by 1634 the board; 1635 2. An approved appropriate internship of 1 year of 1636 qualified experience, as determined by the board, or a residency 1637 program recognized by the board; 3. 1638 Completed the mandatory courses; and 1639 4. Passed the state orthotics examination or the board-1640 approved orthotics examination. 1641 (b) A prosthetist, the applicant must pay a license fee not to exceed \$500 and must have: 1642 1643 1. A Bachelor of Science or higher-level postgraduate 1644 degree in orthotics and prosthetics from an institutionally $\frac{1}{2}$ 1645 regionally accredited college or university recognized by the 1646 Commission on Accreditation of Allied Health Education Programs, or a bachelor's degree from an institutionally accredited 1647 1648 college or university and with a certificate in prosthetics from 1649 a program recognized by the Commission on Accreditation of Allied Health Education Programs, or its equivalent, as 1650

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1651 determined by the board; 1652 An internship of 1 year of qualified experience, as 2. 1653 determined by the board, or a residency program recognized by 1654 the board; 1655 3. Completed the mandatory courses; and 1656 Passed the state prosthetics examination or the board-4. 1657 approved prosthetics examination. 1658 Section 22. Section 483.824, Florida Statutes, is amended 1659 to read: 1660 483.824 Qualifications of clinical laboratory director.-A 1661 clinical laboratory director must have 4 years of clinical laboratory experience with 2 years of experience in the 1662 1663 specialty to be directed or be nationally board certified in the 1664 specialty to be directed, and must meet one of the following 1665 requirements: 1666 (1)Be a physician licensed under chapter 458 or chapter 1667 459; 1668 (2)Hold an earned doctoral degree in a chemical, 1669 physical, or biological science from an a regionally accredited 1670 institution and maintain national certification requirements 1671 equal to those required by the federal Health Care Financing Administration; or 1672 1673 For the subspecialty of oral pathology, be a physician (3) 1674 licensed under chapter 458 or chapter 459 or a dentist licensed under chapter 466. 1675

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1676 Section 23. Subsection (3) of section 490.003, Florida 1677 Statutes, is amended to read: 1678 490.003 Definitions.-As used in this chapter: 1679 (3) (a) "Doctoral degree from an American Psychological 1680 Association accredited program" means Effective July 1, 1999, 1681 "doctoral-level psychological education" and "doctoral degree in 1682 psychology" mean a Psy.D., an Ed.D. in psychology, or a Ph.D. in 1683 psychology from a psychology program at an educational 1684 institution that, at the time the applicant was enrolled and 1685 graduated: 1686 1. (a) Had institutional accreditation from an agency 1687 recognized and approved by the United States Department of 1688 Education or was recognized as a member in good standing with 1689 the Association of Universities and Colleges of Canada; and 1690 2. (b) Had programmatic accreditation from the American 1691 Psychological Association. 1692 (b) "Doctoral degree in psychology" means a Psy.D., an 1693 Ed.D. in psychology, or a Ph.D. in psychology from a psychology 1694 program at an educational institution that, at the time the 1695 applicant was enrolled and graduated, had institutional 1696 accreditation from an agency recognized and approved by the 1697 United States Department of Education or was recognized as a 1698 member in good standing with the Association of Universities and 1699 Colleges of Canada. 1700 Section 24. Subsection (1) of section 490.005, Florida Page 68 of 85

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1701 Statutes, is amended to read: 1702 490.005 Licensure by examination.-1703 Any person desiring to be licensed as a psychologist (1)1704 shall apply to the department to take the licensure examination. 1705 The department shall license each applicant whom who the board 1706 certifies has met all of the following requirements: 1707 (a) Completed the application form and remitted a 1708 nonrefundable application fee not to exceed \$500 and an 1709 examination fee set by the board sufficient to cover the actual 1710 per applicant cost to the department for development, purchase, 1711 and administration of the examination, but not to exceed \$500. 1712 Submitted proof satisfactory to the board that the (b) 1713 applicant has received: 1714 1. A doctoral degree from an American Psychological 1715 Association accredited program Doctoral-level psychological 1716 education; or The equivalent of a doctoral degree from an American 1717 2. Psychological Association accredited program doctoral-level 1718 1719 psychological education, as defined in s. 490.003(3), from a 1720 program at a school or university located outside the United 1721 States of America which was officially recognized by the 1722 government of the country in which it is located as an 1723 institution or program to train students to practice 1724 professional psychology. The applicant has the burden of establishing that this requirement has been met. 1725

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1726 Had at least 2 years or 4,000 hours of experience in (C) 1727 the field of psychology in association with or under the 1728 supervision of a licensed psychologist meeting the academic and 1729 experience requirements of this chapter or the equivalent as 1730 determined by the board. The experience requirement may be met by work performed on or off the premises of the supervising 1731 1732 psychologist if the off-premises work is not the independent, 1733 private practice rendering of psychological services that does 1734 not have a psychologist as a member of the group actually 1735 rendering psychological services on the premises. 1736 (d) Passed the examination. However, an applicant who has 1737 obtained a passing score, as established by the board by rule, on the psychology licensure examination designated by the board 1738 1739 as the national licensure examination need only pass the Florida 1740 law and rules portion of the examination. 1741 Section 25. Subsection (1) of section 490.0051, Florida 1742 Statutes, is amended to read: 1743 490.0051 Provisional licensure; requirements.-1744 The department shall issue a provisional psychology (1)1745 license to each applicant who the board certifies has: 1746 (a) Completed the application form and remitted a 1747 nonrefundable application fee not to exceed \$250, as set by 1748 board rule. 1749 (b) Earned a doctoral degree from an American Psychological Association accredited program in psychology as 1750

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1772

1751 defined in s. 490.003(3). 1752 (c) Met any additional requirements established by board 1753 rule. 1754 Section 26. Subsections (1), (3), and (4) of section 1755 491.005, Florida Statutes, are amended to read: 1756 491.005 Licensure by examination.-1757 CLINICAL SOCIAL WORK.-Upon verification of (1)1758 documentation and payment of a fee not to exceed \$200, as set by 1759 board rule, plus the actual per applicant cost to the department 1760 for purchase of the examination from the American Association of 1761 State Social Worker's Boards or a similar national organization, 1762 the department shall issue a license as a clinical social worker 1763 to an applicant whom who the board certifies has met all of the 1764 following criteria: 1765 Has Submitted an application and paid the appropriate (a) 1766 fee. 1767 (b)1. Has Received a doctoral degree in social work from a 1768 graduate school of social work which at the time the applicant 1769 graduated was accredited by an accrediting agency recognized by 1770 the United States Department of Education or has received a 1771 master's degree in social work from a graduate school of social

a. Was accredited by the Council on Social Work Education;
b. Was accredited by the Canadian Association of Schools
of Social Work; or

work which at the time the applicant graduated:

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1776 Has been determined to have been a program equivalent с. 1777 to programs approved by the Council on Social Work Education by 1778 the Foreign Equivalency Determination Service of the Council on 1779 Social Work Education. An applicant who graduated from a program 1780 at a university or college outside of the United States or 1781 Canada must present documentation of the equivalency 1782 determination from the council in order to qualify. 1783 The applicant's graduate program must have emphasized 2. 1784 direct clinical patient or client health care services, 1785 including, but not limited to, coursework in clinical social 1786 work, psychiatric social work, medical social work, social casework, psychotherapy, or group therapy. The applicant's 1787 1788 graduate program must have included all of the following 1789 coursework: 1790 a. A supervised field placement which was part of the applicant's advanced concentration in direct practice, during 1791 which the applicant provided clinical services directly to 1792 1793 clients. 1794 Completion of 24 semester hours or 32 quarter hours in b. 1795 theory of human behavior and practice methods as courses in clinically oriented services, including a minimum of one course 1796 1797 in psychopathology, and no more than one course in research, 1798 taken in a school of social work accredited or approved pursuant 1799 to subparagraph 1. 1800 If the course title which appears on the applicant's 3.

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1801 transcript does not clearly identify the content of the 1802 coursework, the applicant shall be required to provide 1803 additional documentation, including, but not limited to, a syllabus or catalog description published for the course. 1804 1805 Has Had at least 2 years of clinical social work (C) 1806 experience, which took place subsequent to completion of a 1807 graduate degree in social work at an institution meeting the 1808 accreditation requirements of this section, under the 1809 supervision of a licensed clinical social worker or the 1810 equivalent who is a qualified supervisor as determined by the 1811 board. An individual who intends to practice in Florida to 1812 satisfy clinical experience requirements must register pursuant to s. 491.0045 before commencing practice. If the applicant's 1813 1814 graduate program was not a program which emphasized direct 1815 clinical patient or client health care services as described in 1816 subparagraph (b)2., the supervised experience requirement must 1817 take place after the applicant has completed a minimum of 15 1818 semester hours or 22 quarter hours of the coursework required. A 1819 doctoral internship may be applied toward the clinical social 1820 work experience requirement. A licensed mental health 1821 professional must be on the premises when clinical services are 1822 provided by a registered intern in a private practice setting. When a registered intern provides clinical services through 1823 telehealth, a licensed mental health professional must be 1824 accessible by telephone or electronic means. 1825

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1826 Has Passed a theory and practice examination (d) 1827 designated by board rule provided by the department for 1828 purpose. 1829 (e) Has Demonstrated, in a manner designated by rule of 1830 the board, knowledge of the laws and rules governing the 1831 practice of clinical social work, marriage and family therapy, 1832 and mental health counseling. 1833 MARRIAGE AND FAMILY THERAPY.-Upon verification of (3) 1834 documentation and payment of a fee not to exceed \$200, as set by 1835 board rule, plus the actual cost of the purchase of the 1836 examination from the Association of Marital and Family Therapy 1837 Regulatory Board, or similar national organization, the 1838 department shall issue a license as a marriage and family 1839 therapist to an applicant whom $\frac{1}{2}$ where the board certifies has met all of the following criteria: 1840 1841 (a) Has Submitted an application and paid the appropriate fee. 1842 1843 (b)1. Obtained one of the following: 1844 a. Has A minimum of a master's degree with major emphasis 1845 in marriage and family therapy or a closely related field from a 1846 program accredited by the Commission on Accreditation for 1847 Marriage and Family Therapy Education or from a Florida 1848 university program accredited by the Council for Accreditation 1849 of Counseling and Related Educational Programs. b. A minimum of a master's degree with an emphasis in 1850

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| 1851 | marriage and family therapy with a degree conferred date before |
|------|--|
| 1852 | July 1, 2027, from an institutionally accredited college or |
| 1853 | university that is not yet accredited by the Commission on |
| 1854 | Accreditation for Marriage and Family Therapy Education or the |
| 1855 | Council for Accreditation of Counseling and Related Educational |
| 1856 | Programs. |
| 1857 | 2. Completed and graduate courses approved by the Board of |
| 1858 | Clinical Social Work, Marriage and Family Therapy, and Mental |
| 1859 | Health Counseling. |
| 1860 | |
| 1861 | If the course title that appears on the applicant's transcript |
| 1862 | does not clearly identify the content of the coursework, the |
| 1863 | applicant shall provide additional documentation, including, but |
| 1864 | not limited to, a syllabus or catalog description published for |
| 1865 | the course. The required master's degree must have been received |
| 1866 | in an institution of higher education that, at the time the |
| 1867 | applicant graduated, was fully accredited by <u>an institutional</u> $	extsf{a}$ |
| 1868 | regional accrediting body recognized by the Commission on |
| 1869 | Recognition of Postsecondary Accreditation or publicly |
| 1870 | recognized as a member in good standing with the Association of |
| 1871 | Universities and Colleges of Canada, or an institution of higher |
| 1872 | education located outside the United States and Canada which, at |
| 1873 | the time the applicant was enrolled and at the time the |
| 1874 | applicant graduated, maintained a standard of training |
| 1875 | substantially equivalent to the standards of training of those |
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1876 institutions in the United States which are accredited by an 1877 institutional a regional accrediting body recognized by the 1878 Commission on Recognition of Postsecondary Accreditation. Such 1879 foreign education and training must have been received in an 1880 institution or program of higher education officially recognized 1881 by the government of the country in which it is located as an 1882 institution or program to train students to practice as 1883 professional marriage and family therapists or psychotherapists. 1884 The applicant has the burden of establishing that the 1885 requirements of this provision have been met, and the board 1886 shall require documentation, such as an evaluation by a foreign 1887 equivalency determination service, as evidence that the 1888 applicant's graduate degree program and education were 1889 equivalent to an accredited program in this country. An 1890 applicant with a master's degree from a program that did not 1891 emphasize marriage and family therapy may complete the 1892 coursework requirement in a training institution fully 1893 accredited by the Commission on Accreditation for Marriage and 1894 Family Therapy Education recognized by the United States 1895 Department of Education.

(c) Has Had at least 2 years of clinical experience during which 50 percent of the applicant's clients were receiving marriage and family therapy services, which must <u>have been</u> be at the post-master's level under the supervision of a licensed marriage and family therapist with at least 5 years of

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1901 experience, or the equivalent, who is a qualified supervisor as 1902 determined by the board. An individual who intends to practice 1903 in Florida to satisfy the clinical experience requirements must register pursuant to s. 491.0045 before commencing practice. If 1904 1905 a graduate has a master's degree with a major emphasis in 1906 marriage and family therapy or a closely related field which did 1907 not include all of the coursework required by paragraph (b), 1908 credit for the post-master's level clinical experience may not 1909 commence until the applicant has completed a minimum of 10 of 1910 the courses required by paragraph (b), as determined by the 1911 board, and at least 6 semester hours or 9 quarter hours of the 1912 course credits must have been completed in the area of marriage and family systems, theories, or techniques. Within the 2 years 1913 1914 of required experience, the applicant must shall provide direct individual, group, or family therapy and counseling to cases 1915 1916 including those involving unmarried dyads, married couples, 1917 separating and divorcing couples, and family groups that include 1918 children. A doctoral internship may be applied toward the 1919 clinical experience requirement. A licensed mental health 1920 professional must be on the premises when clinical services are 1921 provided by a registered intern in a private practice setting. 1922 When a registered intern provides clinical services through 1923 telehealth, a licensed mental health professional must be 1924 accessible by telephone or other electronic means. 1925 (d) Has Passed a theory and practice examination

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| 1926 | designated by board rule provided by the department. |
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| 1927 | (e) Has Demonstrated, in a manner designated by board |
| 1928 | rule, knowledge of the laws and rules governing the practice of |
| 1929 | clinical social work, marriage and family therapy, and mental |
| 1930 | health counseling. |
| 1931 | |
| 1932 | For the purposes of dual licensure, the department shall license |
| 1933 | as a marriage and family therapist any person who meets the |
| 1934 | requirements of s. 491.0057. Fees for dual licensure may not |
| 1935 | exceed those stated in this subsection. |
| 1936 | (4) MENTAL HEALTH COUNSELINGUpon verification of |
| 1937 | documentation and payment of a fee not to exceed \$200, as set by |
| 1938 | board rule, plus the actual per applicant cost of purchase of |
| 1939 | the examination from the National Board for Certified Counselors |
| 1940 | or its successor organization, the department shall issue a |
| 1941 | license as a mental health counselor to an applicant whom who |
| 1942 | the board certifies has met all of the following criteria: |
| 1943 | (a) Has Submitted an application and paid the appropriate |
| 1944 | fee. |
| 1945 | (b)1. <u>Obtained</u> Has a minimum of an earned master's degree |
| 1946 | from a mental health counseling program accredited by the |
| 1947 | Council for the Accreditation of Counseling and Related |
| 1948 | Educational Programs which consists of at least 60 semester |
| 1949 | hours or 80 quarter hours of clinical and didactic instruction, |
| 1950 | including a course in human sexuality and a course in substance |
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abuse. If the master's degree is earned from a program related to the practice of mental health counseling which is not accredited by the Council for the Accreditation of Counseling and Related Educational Programs, then the coursework and practicum, internship, or fieldwork must consist of at least 60 semester hours or 80 quarter hours and meet all of the following requirements:

1958 Thirty-three semester hours or 44 quarter hours of a. 1959 graduate coursework, which must include a minimum of 3 semester 1960 hours or 4 quarter hours of graduate-level coursework in each of 1961 the following 11 content areas: counseling theories and 1962 practice; human growth and development; diagnosis and treatment 1963 of psychopathology; human sexuality; group theories and 1964 practice; individual evaluation and assessment; career and 1965 lifestyle assessment; research and program evaluation; social 1966 and cultural foundations; substance abuse; and legal, ethical, 1967 and professional standards issues in the practice of mental 1968 health counseling. Courses in research, thesis or dissertation 1969 work, practicums, internships, or fieldwork may not be applied 1970 toward this requirement.

b. A minimum of 3 semester hours or 4 quarter hours of
graduate-level coursework addressing diagnostic processes,
including differential diagnosis and the use of the current
diagnostic tools, such as the current edition of the American
Psychiatric Association's Diagnostic and Statistical Manual of

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1991

1976 Mental Disorders. The graduate program must have emphasized the 1977 common core curricular experience.

1978 The equivalent, as determined by the board, of at least с. 1979 700 hours of university-sponsored supervised clinical practicum, internship, or field experience that includes at least 280 hours 1980 1981 of direct client services, as required in the accrediting 1982 standards of the Council for Accreditation of Counseling and 1983 Related Educational Programs for mental health counseling 1984 programs. This experience may not be used to satisfy the post-1985 master's clinical experience requirement.

1986 2. Has Provided additional documentation if a course title 1987 that appears on the applicant's transcript does not clearly 1988 identify the content of the coursework. The documentation must 1989 include, but is not limited to, a syllabus or catalog 1990 description published for the course.

1992 Education and training in mental health counseling must have 1993 been received in an institution of higher education that, at the 1994 time the applicant graduated, was fully accredited by an 1995 institutional a regional accrediting body recognized by the 1996 Council for Higher Education Accreditation or its successor 1997 organization or publicly recognized as a member in good standing 1998 with the Association of Universities and Colleges of Canada, or 1999 an institution of higher education located outside the United States and Canada which, at the time the applicant was enrolled 2000

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2001 and at the time the applicant graduated, maintained a standard 2002 of training substantially equivalent to the standards of 2003 training of those institutions in the United States which are 2004 accredited by an institutional a regional accrediting body 2005 recognized by the Council for Higher Education Accreditation or 2006 its successor organization. Such foreign education and training 2007 must have been received in an institution or program of higher 2008 education officially recognized by the government of the country 2009 in which it is located as an institution or program to train 2010 students to practice as mental health counselors. The applicant 2011 has the burden of establishing that the requirements of this 2012 provision have been met, and the board shall require 2013 documentation, such as an evaluation by a foreign equivalency 2014 determination service, as evidence that the applicant's graduate 2015 degree program and education were equivalent to an accredited 2016 program in this country. Beginning July 1, 2025, an applicant 2017 must have a master's degree from a program that is accredited by 2018 the Council for Accreditation of Counseling and Related 2019 Educational Programs which consists of at least 60 semester 2020 hours or 80 quarter hours to apply for licensure under this 2021 paragraph.

(c) Has Had at least 2 years of clinical experience in mental health counseling, which must be at the post-master's level under the supervision of a licensed mental health counselor or the equivalent who is a qualified supervisor as

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2026 determined by the board. An individual who intends to practice 2027 in Florida to satisfy the clinical experience requirements must 2028 register pursuant to s. 491.0045 before commencing practice. If 2029 a graduate has a master's degree with a major related to the 2030 practice of mental health counseling which did not include all 2031 the coursework required under sub-subparagraphs (b)1.a. and b., 2032 credit for the post-master's level clinical experience may not 2033 commence until the applicant has completed a minimum of seven of 2034 the courses required under sub-subparagraphs (b)1.a. and b., as 2035 determined by the board, one of which must be a course in 2036 psychopathology or abnormal psychology. A doctoral internship 2037 may be applied toward the clinical experience requirement. A 2038 licensed mental health professional must be on the premises when 2039 clinical services are provided by a registered intern in a 2040 private practice setting. When a registered intern provides 2041 clinical services through telehealth, a licensed mental health 2042 professional must be accessible by telephone or other electronic 2043 means. 2044 (d) Has Passed a theory and practice examination 2045 designated by department rule provided by the department for 2046 this purpose. 2047 Has Demonstrated, in a manner designated by board (e) 2048 rule, knowledge of the laws and rules governing the practice of

2049 clinical social work, marriage and family therapy, and mental 2050 health counseling.

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| 2051 | Section 27. Subsection (6) and paragraph (c) of subsection |
|------|--|
| 2052 | (9) of section 766.314, Florida Statutes, are amended to read: |
| 2053 | 766.314 Assessments; plan of operation |
| 2054 | (6)(a) The association shall make all assessments required |
| 2055 | by this section, except initial assessments of physicians |
| 2056 | licensed on or after October 1, 1988, which assessments will be |
| 2057 | made by the Department of <u>Health</u> Business and Professional |
| 2058 | Regulation, and except assessments of casualty insurers pursuant |
| 2059 | to subparagraph (5)(c)1., which assessments will be made by the |
| 2060 | Office of Insurance Regulation. Beginning October 1, 1989, for |
| 2061 | any physician licensed between October 1 and December 31 of any |
| 2062 | year, the Department of Business and Professional Regulation |
| 2063 | shall make the initial assessment plus the assessment for the |
| 2064 | following calendar year. The Department of <u>Health</u> Business and |
| 2065 | Professional Regulation shall provide the association, in an |
| 2066 | electronic format, with a monthly report such frequency as |
| 2067 | determined to be necessary, a listing, in a computer-readable |
| 2068 | form, of the names and <u>license numbers</u> addresses of all |
| 2069 | physicians licensed under chapter 458 or chapter 459. |
| 2070 | (b)1. The association may enforce collection of |
| 2071 | assessments required to be paid pursuant to ss. 766.301-766.316 |
| 2072 | by suit filed in county court. The association <u>is</u> shall be |
| 2073 | entitled to an award of attorney's fees, costs, and interest |
| 2074 | upon the entry of a judgment against a physician for failure to |
| 2075 | pay such assessment, with such interest accruing until paid. |
| | |

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2076 Notwithstanding the provisions of chapters 47 and 48, the 2077 association may file such suit in either Leon County or the 2078 county of the residence of the defendant.

2079 2. The Department of Health Business and Professional 2080 Regulation, upon notification by the association that an 2081 assessment has not been paid and that there is an unsatisfied 2082 judgment against a physician, shall refuse to not renew any 2083 license issued to practice for such physician under issued 2084 pursuant to chapter 458 or chapter 459 until the association 2085 notifies the Department of Health that such time as the judgment 2086 is satisfied in full.

(c) The Agency for Health Care Administration shall, upon notification by the association that an assessment has not been timely paid, enforce collection of such assessments required to be paid by hospitals pursuant to ss. 766.301-766.316. Failure of a hospital to pay such assessment is grounds for disciplinary action pursuant to s. 395.1065 notwithstanding any provision of law to the contrary.

(9)

2094

(c) <u>If</u> In the event the total of all current estimates equals 80 percent of the funds on hand and the funds that will become available to the association within the next 12 months from all sources described in subsections (4) and (5) and paragraph (7)(a), the association <u>may</u> shall not accept any new claims without express authority from the Legislature. Nothing

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| 2101 | in this section precludes herein shall preclude the association |
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| 2102 | from accepting any claim if the injury occurred 18 months or |
| 2103 | more <u>before</u> prior to the effective date of this suspension. |
| 2104 | Within 30 days <u>after</u> of the effective date of this suspension, |
| 2105 | the association shall notify the Governor, the Speaker of the |
| 2106 | House of Representatives, the President of the Senate, the |
| 2107 | Office of Insurance Regulation, the Agency for Health Care |
| 2108 | Administration, and the Department of Health, and the Department |
| 2109 | of Business and Professional Regulation of this suspension. |
| 2110 | Section 28. This act shall take effect July 1, 2022. |

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