

**Florida Academy of Family Physicians  
2022 Legislative Session  
February 25, 2022 – Week 7**

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The seventh week of the nine-week legislative session concluded with social policy issues dominating House floor debate and hundreds of issues receiving a final vetting in the few remaining days of Senate committee meetings.

Legislation pertaining to Individual Freedom ([HB 7](#)) and Parental Rights in Education ([HB 1557](#)) were debated on the House floor while the Senate held marathon committee hearings packed with policy issues such as energy, child welfare and health care. Negotiations on the House and Senate budget are expected to begin next week as the legislature works toward completing its work by March 11.

**2022 Doctor of the Day Program**



FAFP was well represented this week with Drs. Dominique DiLorenzo (sponsored by Rep. Anna Eskamani, Orange) and FAFP Government Relations Committee Vice Chair Dan Montero (sponsored by Rep. Cyndi Stevenson, St. Johns) traveling to Tallahassee to serve. All remaining DoD slots for the year have been reserved, but anyone with interest for future years should contact Jay Millson ([jmillson@fafp.org](mailto:jmillson@fafp.org)) so requests for the 2023 session can be planned accordingly.



**Legislation Moving This Week** (alphabetically - \*FAFP Priorities)

**Abortion Rights | MONITOR**

[HB 5](#) by Rep. Erin Grall (R-Vero Beach) and [SB 146](#) by Sen. Kelli Stargel (R-Lakeland) prohibit physicians from performing an abortion if the gestational age of fetus is determined to be more than 15 weeks. The bills also require certain physician and directors of certain medical facilities to submit a monthly report to the Agency for Health Care Administration (AHCA) regarding the number of abortions performed. They also require the Department of Health (DOH) to contract with local healthy start coalitions to create fetal and infant mortality review committees.

*HB 5 was approved by the House on a vote of 78 to 39 on 2/17/22. The bill was approved by Senate Appropriations on 2/21/22.*

**Department of Health | MONITOR**

[SB 768](#) by Sen. Ana Maria Rodriguez (R-Doral) and [HB 693](#) by Rep. Brad Drake (R-Defuniak Springs) update the Targeted Outreach for Pregnant Women Act (TOPWA) Program to account for medication options, information on HIV, and mental health issues that may lead

to a high-risk pregnancy. The bills also require medical marijuana treatment centers (MMTCs) to recall marijuana not meeting safety and potency requirements and authorize DOH to test samples from MMTCs. Further, the bills authorize DOH to deny a nursing application or discipline a nurse under certain circumstances; revise education, training, and temporary certification requirement for midwives; revise educational requirements for psychologists applying for licensure by endorsement; allow DOH to continue issuing marriage and family therapy licensed until July 1, 2026; and, require allopathic and osteopathic physicians to provide proof of payment of NICA assessments as a condition of licensure. Lastly, the bills designate DOH, rather than CMS, as the lead coordinator of local health care providers in developing a plan for staffing and medical management of pediatric special needs shelters.

HB 693 was amended to increase the number of members on the Rare Disease Advisory Council. It was also amended to enact an information sharing agreement with the U.S. Food and Drug Administration (FDA) to monitor compounded drug products. It requires, annually, and within 90 days after the beginning of the calendar year, all licensees shipping compounded human drug products interstate to report to the National Association of Boards of Pharmacy Information-Sharing Network (NABPISN) the information required by the Memorandum of Understanding Addressing Certain Distributions of Compounded Human Drug Products between the department and the U.S. Food and Drug Administration  
*SB 768 is scheduled to be considered by Senate Appropriations on 2/28/22.*

**\*Emergency Medical Care & Treatment of Minors - Parental Consent | SUPPORT**

[HB 817](#) by Rep. Ralph Massullo (R-Lecanto) and [SB 1114](#) by Sen. Jennifer Bradley (R-Orange Park) allow physicians to render emergency medical care without parental consent.  
*SB 1114 was approved by Senate Rules on 2/23/22. HB 817 was unanimously approved by the House on 2/25/22.*

**\*Medical Education Reimbursement and Loan Repayment Program | SUPPORT**

[HB 657](#) by Rep. Kamia Brown (D-Ocoee) and [SB 1442](#) by Sen. Shevrin Jones (D-Miami Gardens) revises the purpose of Medical Education Reimbursement and Loan Repayment Program and expands the eligibility criteria for the program to include medical professional who provide primary care to racial and ethnic minority populations that experience health disparities due to quality health care.

**Medical Specialty Designations | MONITOR**

[HB 861](#) by Rep. Ralph Massullo (R-Lecanto) and [SB 1192](#) by Sen. Anna Maria Rodriguez (R-Doral) provide that using a term that designates a medical specialty is grounds for disciplinary action.

*HB 861 was approved by the House by a vote of 95 to 19 on 2/24/22.*

**Newborn Screening | MONITOR**

[SB 292](#) by Sen. Tina Polsky (D-Boca Raton) and [HB 1073](#) by Rep. Vance Aloupis (R-Miami) require a hospital or other state-licensed birthing facility to administer a test on a newborn to screen for congenital CMV should the newborn fail his or her screening for hearing loss.

The congenital CMV test must be administered before the newborn becomes 21 days of age or before discharge, whichever occurs earlier. The bills also require licensed birth centers and the health care provider in attendance at-home births to refer newborns for hearing screenings within 7 days after discharge. If a health care provider is not in attendance at a home birth, the newborn's primary care physician is required to refer the newborn for a hearing screening. If the child fails the screening, their primary health care provider must refer them for congenital CMV testing. Lastly, the bills require the results of a newborn hearing screening and congenital CMV and any related diagnostic testing to be reported to DOH within 7 days after receipt of such results.

*HB 1073 was approved by House Health and Human Services on 2/23/22.*

### **Recovery of Damages in Medical Negligence Claims | OPPOSE**

[HB 6011](#) by Rep. Spencer Roach (R-North Fort Myers) and [SB 262](#) by Sen. Ana Maria Rodriquez (R-Doral) authorize parents of adult children to recover damages for mental pain and suffering in medical negligence suits.

*HB 6011 was approved by House Judiciary on 2/23/22 and is scheduled to be considered by the House on 3/1/22.*

### **Special Persons Registry | SUPPORT**

[SB 1040](#) by Sen. Jason Brodeur (R-Lake Mary) and [HB 733](#) by Rep. Rene Plasencia (R-Orlando) provide a local law enforcement agency may develop and maintain a database listing people with developmental, psychological or other disabilities or condition that may be relevant to their interactions with law enforcement. The disability must be certified by a physician, physician assistant (PA), or an advanced practice registered nurse (ARNP). For psychological conditions, certification is required by a mental health counselor, psychologist, or psychiatrist. Further, an adult may enroll on their own. A person who has been declared incapacitated must be enrolled by a parent or legal guardian. Further, a parent or legal guardian may enroll a minor. Information on the registry may include contact and personal identifying information, information about the disability or condition. [SB 1042](#) and [HB 735](#), are the accompanying public records exemption bills.

*SB 1040 and SB 1042 were approved, as amended, by Senate Appropriations Subcommittee on Health and Human Services on 2/22/22. Both bills are scheduled to be considered by Senate Appropriations on 2/28/22. Action on HB 733 and HB 735 was postponed by House Health and Human Services on 2/23/22.*

### **Statewide Medicaid Managed Care Program | MONITOR**

[SB 1950](#) by Sen. Jason Brodeur (R-Lake Mary) [HB 7047](#) by House Finance and Facilities amend the Statewide Medicaid Managed Care Program (SMMC). The current managed care contracts under the SMMC are scheduled to expire December 2024. The Agency for Health Care Administration will conduct a procurement in 2022-23 for new contracts that commence at the end of 2024.

*HB 7047 was approved by House Health and Human Services on 2/23/22. SB 1950 is scheduled to be considered by Senate Appropriations on 2/28/22.*

### **Step-therapy Protocols | SUPPORT**

[HB 459](#) by Rep. Matt Willhite (D-Wellington) and [SB 730](#) by Sen. Gayle Harrell (R-Stuart) require health insurers to publish on their websites and provide to their insureds step-therapy protocol exemption procedures.

*SB 730 was approved by Senate Rules on 2/23/22. HB 459 was unanimously approved by the House on 2/25/22.*

### **\*Telehealth Expansion |**

[SB 312](#) by Sen. Manny Diaz (R-Hialeah) allows a telehealth provider to issue a renewal prescription for a Schedule III, IV or V controlled substance through telehealth, within the scope of their practice. The House removed the audio only provisions from the bill.

*SB 312 was approved, as amended, by the House on 2/24/22. The adopted amendment removed audio-only provisions.*

## **Bills Approved by the Legislature** *(alphabetically)*

### **COVID-19-Related Claims Against Health Care Providers | SUPPORT - PASSED**

[SB 7014](#) by the Senate Judiciary Committee and [HB 7021](#) by the House Health and Human Services Committee extend the duration of the liability protections provided to health care providers against COVID-19-related claims from March 29, 2022, to June 1, 2023.

*The Governor signed HB 7014 on 2/24/22 and it took effective immediately.*

## **Other Bills of Interest to Family Physicians** *(alphabetically)*

Many of the FAFP’s “other bills of interest” are provided below, the ones highlighted in gray have not experienced any meaningful movement through the committee process and will likely not pass in 2022. Obviously, the ones **opposed** in gray show how FAFP’s advocacy efforts were successful.

### **ARNPs Autonomous Practice | OPPOSE**

[SB 1686](#) by Sen. Anna Maria Rodriguez (R-Doral) requires certified nurse midwives providing out-of-hospital birth services to have a written plan for the appropriate delivery of emergency care. The bill also deletes the requirement that certified nurse midwives have a written patient transfer agreement with a hospital and a written referral agreement with a licensed physician.

### **Collaborative Practice in Health Care | OPPOSE**

[SB 986](#) by Sen. Manny Diaz (R-Hialeah) and [HB 437](#) by Rep. Bob Rommel (R-Naples) allows certified registered nurse anesthetists (CRNAs) to work in collaboration with, rather than under the direction of, a health care practitioner.

**Electrocardiograms for Student Athletes | OPPOSE**

[HB 59](#) by Rep. Fred Hawkins (R-St. Cloud) and [SB 1590](#) by Sen. Dennis Baxley (R-Lady Lake) require students to receive electrocardiogram to participate in interscholastic athletic competitions.

**Free Speech of Health Care Practitioners | MONITOR**

[HB 687](#) by Rep. Brad Drake (R-Defuniak Springs) and [SB 1184](#) by Sen. Doug Broxson (R-Pensacola) prohibit health care provider governing Boards from reprimanding, sanctioning or revoking a license, certificate, or registration due to their right of free speech.

HB 687 also applies to recognizing agencies approved by the Board including the American Board of Medical Specialties, the American Osteopathic Association, the American Association of Physician Specialists, Inc., and the American Board of Interventional Pain Physicians. The DOH, Board or recognizing agency must provide the health care provider with all complaints that may result in licensure revocation within seven days after receiving the complaint.

**Health Care Cost Savings | SUPPORT**

[HB 1325](#) by Rep. Juan Fernandez-Barquin (R-Miami) and [SB 252](#) by Sen. Jason Brodeur (R-Sanford) authorize, but do not require, health insurers that offer a shared savings incentive program to include items and services listed in federal law, the Table 1-500 Items and Services List (List), as shoppable health care services for which the shared savings incentive is available. The List is added to the group of shoppable health care services from which a health insurer can select certain items and services for its program.

**In-Hospital Medical Staff Committees/Public Records | SUPPORT**

[HB 869](#) by Rep. Alex Rizo (Hialeah) and [SB 1350](#) by Sen. Manny Diaz (Hialeah Gardens) provide an exemption from public records requirements for certain confidential information held by in-hospital medical staff committees of public hospitals.

**Invalid Restrictive Covenants in Health Care | SUPPORT**

[SB 842](#) by Sen. Jason Brodeur (R-Lake Mary) specifies that certain restrictive covenants in employment agreements between physicians and hospitals do not support a legitimate business interest.

**Patient Specific Prescription Drug Coverage Transparency | OPPOSE**

[HB 947](#) by Rep. Alex Andrade (R-Pensacola) and [SB 1290](#) by Sen. Joe Gruters (R-Sarasota) provide patients are entitled to receive, upon request, information from a prescribing or ordering health care provider and specifies information insurers must provide to health care providers. The bills also authorize health care providers to designate third party to facilitate the exchange of information.

**PIP Repeal | MONITOR**

[HB 1525](#) by Rep. Erin Grall (R-Vero Beach) and [SB 150](#) by Sen. Danny Burgess (R-Zephyrhills) repeal Florida's Motor Vehicle No Fault Law. A similar measure was approved

during the 2021 session; however, the Governor vetoed it citing concerns about higher auto premiums. The House bill contains the following provisions:

- Repeals PIP and replaces it with mandatory - \$25,000/\$50,000 Bodily Injury and \$10,000 property damage.
- Allows auto policies to exclude liability coverage for a vehicle not designated as an insured vehicle if not newly acquired or as a temporary substitute vehicle.
- Creates a Medical Payments program which requires insurers to offer to consumers with limits of \$5000 and \$10,000 with a zero of \$500 deductible.
- Requires insureds to reserve \$5,000 for physicians providing emergency medical services.
- Provides there is no cause of action unless a person commits fraud.
- Expands uninsured motorist (UM) to include disability, impairment, disfigurement, loss of capacity for the enjoyment of life and creates a mandatory death benefit of \$5000.
- Provides a \$10,000 set-off of noneconomic damages if a person suffers an injury while uninsured for more than 30 days. This would not apply if the accident were due to DUI, reckless driving, gross negligence, felony offense or wrongful death.

The Senate companion contains many of the same provisions in HB 1525. However, the Senate bill creates a third-party bad faith statute, s.624.156 which is similar to what was included in the 2021 Senate legislation.

### **Protections of Medical Conscience | MONITOR**

[HB 747](#) by Rep. John Snyder (R-Stuart) and [SB 1820](#) by Sen. Dennis Baxley (R-Lady Lake) create the Healthcare Ethics and Liberty Protection Act. The bill provides that health care providers and health care payers should not be compelled to participate in or pay for any health care that they object to on the basis of conscience.

### **Psychologist Prescribing | OPPOSE**

[HB 319](#) by Rep. Ramon Alexander (D-Tallahassee) and [SB 540](#) by Sen. Jeff Brandes (R-St. Petersburg) allow certified, licensed psychologists to prescribe, administer, discontinue, and distribute prescription drugs, including controlled substances.

### **Telehealth Payment | SUPPORT**

[SB 726](#) by Sen. Loranne Ausley (D-Tallahassee) and [HB 1087](#) by Rep. Anthony Rodriguez (R-Miami) require health insurers to reimburse a telehealth provider for the diagnosis, consultation, or treatment of any insured person provided through telehealth on the same basis and at least at the same rate that the health insurer would reimburse if the covered service were delivered through an in-person encounter. It also prohibits health insurers from imposing copayments, coinsurance, deductibles as well as policy year, calendar year or lifetime limits for benefits provided through telehealth. Insurers also may not require a covered benefit to be provided through telehealth.