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**How To Access Bills We Are Tracking:**

Please visit [www.foma.org](http://www.foma.org). Once there, scroll down the page and click on “Capitol Updates.” Then scroll down to “Quicklinks” and click on “Bill Tracking.” Look for your bill number and click on it for the most current information. If you have any questions, please call the FOMA Office of Governmental Relations at (850) 878-7364 and we will be glad to help you.

**2018 FOMA Capitol Updates:**

To access the FOMA’s 2018 Capitol Updates, please visit: <http://www.foma.org/capitol-updates.html>

**How to Find Your Legislators:**

Please use the following link and input your respective information,  
<https://www.myfloridahouse.gov/Sections/Representatives/myrepresentative.aspx>

The 2018 Regular Legislative Session came to an end on Sunday, March 11, 2018. Due to unresolved budget issues, the Legislature failed to make the deadline for the “72 Hour Cooling Off Period” to finish on Friday and had to be extended to Sunday.

Legislative budget chairs Rep. Trujillo and Sen. Bradley met and closed out the remaining budget issues in the latter half of last week. Health & Human Services was the major holdup, and the Senate accepted the House position on hospital funding while the House agreed to the Senate position of more funding for nursing homes.

The official budget was distributed to legislators at 1:40pm on Thursday. The 72-hour cooling off period started then, which means the earliest a vote on the budget would be 2:40 pm on Sunday (Daylight Savings Time starts Sunday at 2:00 am).

**Session was extended to Sunday to vote on the largest budget in the state's history and a tax-cut package bill. The final vote of the \$88.7 billion budget was 31-5 in the Senate and 95-12 in the House at 4:16 pm.**

For more details on the budget please click [here](#).

## **Marjory Stoneman Douglas High School Public Safety Act**

The Florida House and Senate passed the legislature's response to the Parkland high school shooting. Governor Scott signed the bill Friday. For a summary of the bill please click [here](#).

Below are a number of key issues the FOMA is following that occurred this week.

## Wednesday

### **PASSED/MONITOR SB 510 – Reporting of Adverse Incidents in Planned out-of-hospital Births by Young**

SB 510 requires physicians, certified advanced registered nurse midwives (ARNPCNMs), and licensed midwives (LMs) to report to the Department of Health (DOH) adverse incidents occurring as a result of an attempted or completed, planned birthing center or out-of-hospital birth. The bill defines an adverse incident and, beginning July 1, 2018, requires the reporting within 15 days after the occurrence of the adverse incident. It further requires the DOH to review each adverse incident report and determine whether the incident involves conduct by the health care practitioner which is subject to disciplinary action, and to take disciplinary action if appropriate.

**Action:** Passed House and Senate, waiting to be sent to Governor for further action

**Link:** <http://www.flsenate.gov/Session/Bill/2018/510>

**Companion:** HB 673 – Reporting of Adverse Incidents in Planned Out-of-Hospital Births; refer to SB 510

## Thursday

### **PASSED/SUPPORT HB 37 – Direct Primary Care by Burgess**

HB 37 provides that a direct primary care agreement (agreement) and the act of entering into such an agreement are not insurance and not subject to regulation under the Florida Insurance Code (Code), including chapter 636, F.S. The bill also exempts a primary care provider, which includes a primary care group practice, or his or her agent, from any certification or licensure requirements in the Code for marketing, selling, or offering to sell an agreement.

**Action:** Passed House and Senate; waiting to be sent to Governor for further action

**Link:** <http://www.flsenate.gov/Session/Bill/2018/37>

**Companion:** SB 150 – Direct Primary Care by Lee; refer to HB 37

### **PASSED/SUPPORT HB 351 – Prescription Drug Pricing Transparency by Santiago**

HB 351 requires PBMs that conduct business in Florida to register with the Office of Insurance Regulation (OIR) by providing identifying organizational information, submitting an application for registration, and submitting an annual registration fee. An expanded definition of the term “pharmacy benefit manager” is included in the bill.

The bill requires that a contract between a PBM and a health plan include prohibitions on certain practices that limit patient access to pricing information. The bill specifies that a contract must require the PBM to update maximum allowable cost pricing information at least once every seven days. This requirement was previously in the Pharmacy Practice Act; the bill moves this language to the Insurance Code, which gives OIR enforcement authority. The bill also requires a contract to limit patient cost sharing for a drug to the lesser of the applicable cost sharing amount, the total submitted charges, or the retail price.

The bill creates an affirmative duty for a pharmacist to communicate to a patient the availability of a lower cost, generically equivalent drug if one exists and whether the patient’s cost sharing obligation exceeds the retail price of a drug in the absence of prescription drug coverage.

**Action:** Passed House and Senate, waiting to be sent to Governor for further action

**Link:** <http://www.flsenate.gov/Session/Bill/2018/351>

**Companion:** SB 1494 – Prescription Drug Pricing Transparency by Montford; refer to HB 351

## Friday

### **PASSED/SUPPORT HB 937 – Perinatal Mental Health by Nunez**

The bill requires the Department of Health (DOH) to provide perinatal mental health information through its Family Health Line toll-free hotline. The bill requires the hotline to provide basic information on postpartum depression, and authorizes hotline operators to recommend that a caller be further evaluated by a qualified health care provider, or refer a caller to an appropriate health care provider in the caller's local area. The bill revises components that are included in postpartum evaluation and follow-up care provided by birth centers to include a mental health screening, provision of information on postpartum depression, and the telephone number of the Family Health Line.

**Action:** Passed House and Senate, waiting to be sent to Governor for further action

**Link:** <http://www.flsenate.gov/Session/Bill/2018/937>

**Companion:** SB 138 – Perinatal Mental Health by Book; on Senate floor awaiting full vote

### **PASSED/MONITOR HB 1337 – Nursing by Pigman**

HB 1337 repeals the separate certification for a clinical nurse specialist (CNS) and includes CNS as a category of ARNP. A person who is currently certified as a CNS would have to meet all the same licensure requirements as an ARNP, including maintaining professional liability coverage. The bill retains the current scope of practice of a CNS, but requires a CNS to practice pursuant to a written protocol with a physician.

**Action:** Passed House and Senate, waiting to be sent to Governor for further action

**Link:** <http://www.flsenate.gov/Session/Bill/2018/1337>

**Companion:** SB 1594 – Nursing by Brandes; refer to HB 1337

**PASSED/SUPPORT SB 1862 – Physician Fee Sharing Task Force by Broxson**

SB 1862 creates s. 456.0541, F.S., to establish the Physician Fee Sharing Task Force (task force) within the Department of Health (DOH). The bill specifies the make-up of the task force and requires the task force to develop and evaluate policy proposals to address barriers to innovation and modernization of provider payment models created by the federal Ethics in Patient Referrals Act of 1989, the Florida Patient Self-Referral Act of 1992, federal and state anti-kickback laws, and the state patient brokering law, including policy proposals for:

- Implementing and maintaining alternative payment models;
- Increasing or extending existing safe harbor provisions to include physician practice groups; and
- Reforming the liability standard for violations.

The task force must convene its first meeting by June 1, 2018, and must report its findings, conclusions, and recommendations to the Governor and the Legislature by December 1, 2018.

The bill's provisions take effect upon becoming law and s. 456.0541, F.S., expires on January 1, 2019.

**Action:** Passed House and Senate, waiting to be sent to Governor for further action

**Link:** <http://www.flsenate.gov/Session/Bill/2018/1862>

**Companion:** HB 425 – Physician Fee Sharing Task Force by Plasencia; refer to SB 1862

**PASSED/MONITOR HB 21 – Controlled Substances by Boyd**

The Senate and House passed HB 21 late Friday night. The House removed a provision passed by the Senate that would have banned insurers and HMOs from using prior authorization or step therapy as a prerequisite for the use of medication-assisted therapy (MAT) in treating substance abuse.

The bill continues to keep the limit of Schedule II opioid prescriptions to a 3-day supply or a 7-day supply if deemed medically necessary. Excluded from these limits are pain related to cancer, terminal illness, palliative care and serious traumatic injury. The bill also requires physicians to check with the PDMP before prescribing or dispensing prescription drugs. Physicians are also required to take a 2-hour, board-approved continuing education course on prescribing controlled substances.

Funding for the opioid crisis totals \$53.5 million. Also part of the bill is almost \$1 million for improvements to the PDMP to interface it with electronic health records.

**Action:** Passed House and Senate, waiting to be sent to Governor for further action

**Link:** <http://www.flsenate.gov/Session/Bill/2018/21>

**Companion:** HB 8 – Controlled Substance by Benacquisto; refer to HB 21

\*\*Please note that position on legislation is current of this publication and could change with amendments throughout the legislative process.