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Subj: Capitol Update #3

The 3<sup>rd</sup> week of the 2019 Legislative Session has wrapped up putting Session about one third of the way finished. The House and Senate have both released their respective budgets and the chambers are expected to take them up next week.

The Senate released their proposed budget of roughly \$90.3 billion and the House has a proposed budget of \$89.9 billion. Both proposed budgets are less than the Governor's recommended budget of \$91.3 billion. The two chambers will have to settle a difference of over \$400 million. Both proposed budgets are higher than last year's budget of \$88.7 billion.

The biggest differences in the chamber's budgets that have to be settled include: public school funding, health care, tourism marketing, environmental projects, and funding for Northwest Florida from damages caused by Hurricane Michael. The chambers must also find a common ground on one of the Governor's priorities of improved water quality throughout the state.

**Smokable Medical Marijuana signed by Governor – now legal**

Just days after Governor DeSantis signed SB 182 into law, a Florida citizen became the first patient in the state to receive medical marijuana in the form of smoking. Under the new law, patients can purchase up to 2.5 ounces of smokable medical marijuana every 35 days and may possess up to 4 ounces at any time.

**A bill tracking list is attached for all the bills we are following.**

**FOMA Member alert:** On Tuesday, FOMA Member, **John Bailey, DO**, testified in the House Health Care Appropriations Subcommittee against a bill that would expand the scope of practice of psychologists to prescribe, discontinue, or distribute drugs or controlled substances for the diagnosis, treatment, or management of a person with emotional and/or behavioral disorders. Despite Dr. Bailey's testimony, the bill passed out of committee.

**If you would like to become more involved in the legislative process like Dr. Bailey, please email Ryan Kimmey, Director of Governmental Relations at [ryan@foma.org](mailto:ryan@foma.org).**

Surgeon General Update: another week goes by WITHOUT a secretary of the Department of Health, who serves as the state's top doctor, Surgeon General.

***To view the legislation below and all other bills the FOMA Legislative Team is tracking please visit [foma.org](http://foma.org), click the “Legislative” tab at the top, then the first bullet labeled “FOMA Bill Tracking.”***

Some more legislation of interest to the FOMA we are following:

***FOMA's position on bills: M – Monitor; S – Support; O – Oppose in current form***

**S - Department of Health/ACGME – SB 188 passed Senate chamber**

SB 188 by Harrell and HB 7031 by the Health Quality Subcommittee and Rep. Rodriguez (AM) are the Department of Health's bills and includes the FOMA's ACGME language of revising licensure requirements for a person seeking licensure or certification as an osteopathic physician. The bill also revises licensure requirements for other health care professionals such as dental hygienists, as well as athletic trainers, massage therapists, etc.

- *SB 188 passed the Senate 39-0.*
- *HB 7031 passed its committees and is awaiting a full chamber vote.*

**O - Prescription Drug Importation Program – HB 19 passes Appropriations Committee, SB 1528 scheduled for Monday 3/25**

HB 19 by Rep. Leek and SB 1452 by Sen. Gruters would allow pharmacies and wholesale drug distributors located outside the United States to export drugs to pharmacists, pharmacies and wholesale drug distributors who would be registered with the Florida Department of Business and Professional Regulation. The importing pharmacists would be precluded from selling or dispensing prescription drugs imported under the program to anyone who isn't a state resident. Some drugs could not be imported including anything that is intravenously injected or inhaled during surgery, controlled substances and biological products. Sen. Bean has filed similar legislation, SB 1528, which only establishes a Canadian Prescription Drug Importation Drug Program.

- *HB 19 passed its 2<sup>nd</sup> committee 20-8 and must pass 1 more committee.*
- *SB 1528 has been referred to 3 committees and is scheduled to be heard by Health Policy on Monday March 25<sup>th</sup>.*
- *SB 1452 has been referred to 3 committees and is currently waiting to be heard by Health Policy.*

**M – Senate Health Care Package – SB 7078 passed Health Policy**

SB 7078 by the Health Policy Committee and Sen. Harrell is a comprehensive health care bill that includes the following provisions: provides patient access to medical records and patient medical record charges; requires that hospitals provide non-emergency patients with information on the rate of hospital-acquired infections, the overall rating of the Hospital Consumer Assessment of Healthcare Providers and Systems survey, and the 15-day readmission rate; requires that a hospital inform the patient's primary care provider within 24 hours after the

patient's admission to the hospital; requires that a hospital notify a patient of observation status.; expands direct primary care agreements to include direct health care agreements; prohibits step therapy for a new health care plan when the patient had been approved for the medication in the last 180 days; provides for price transparency in health insurance contracts/gag prohibition; establishes an Interstate Medical Licensure Compact for physicians.

- *SB 7078 passed its 1<sup>st</sup> committee and must pass 2 more committees.*
- *There is currently no House companion, however there are many different House bills that include SB 7078's language.*

### **S - Bait and Switch – SB 1180 passes Banking and Insurance, HB 1363 scheduled for Health Market Reform Subcommittee Tuesday 3/26**

SB 1180 by Sen. Mayfield and HB 1363 by Rep. Williamson, both bills titled Consumer Protection from Nonmedical Changes to Prescription Drug Formularies, would prohibit specified changes to certain insurance policy prescription drug formularies; requires small employer carriers to limit specified changes to prescription drug formularies under certain health benefit plans; prohibits certain health maintenance organizations from making specified changes to health maintenance contract prescription drug formularies.

- *SB 1180 passed its 1<sup>st</sup> committee 6-0 and must pass 2 more committees.*
- *HB 1363 has been referred to 3 committees and is scheduled to be heard by the Health Market Subcommittee Tuesday March 26<sup>th</sup>.*

### **S - Prior Authorization/Fail-First Protocols – no movement**

SB 650 – Health Insurer Authorization by Sen. Mayfield would redefine the term “health insurer” and define the term “urgent care situation”; require health insurers and pharmacy benefits managers on behalf of health insurers to provide, by specified means, certain information relating to prior authorization; require health insurers to publish on their websites and provide to insureds in writing a procedure for insureds and health care providers to request protocol exceptions.

- *SB 650 has been referred to 3 committees and is currently waiting to be heard by the Banking and Insurance Committee.*
- *No House companion has been filed yet.*

SB 906 and HB 271 – Prescribed Drug Services and Audits by Sen. Wright and Rep. Santiago partly deal with the prior authorization process and fail-first protocols as well as many other provisions including PBM's.

- *SB 906 has been referred to 3 committees and is currently waiting to be heard by the Banking and Insurance Committee.*
- *HB 271 has been referred to 3 committees and is currently waiting to be heard by the Health Market Reform Subcommittee.*

### **S – Prescription Drug Utilization Management – HB 559 passes Health Market Reform**

HB 559 by Rep. Massullo, MD, would require health insurers to provide access on its website to process for step therapy protocol exception determination requests made by insureds & health care providers; require health insurers to expeditiously grant step therapy override determination requests under certain circumstances; require health insurers to authorize coverage for prescription drug prescribed by insured's health care provider under certain circumstances.

- *HB 559 passed its 1<sup>st</sup> committee 14-0 and must pass 2 more committees.*
- *No Senate companion has been filed yet.*

**S - Prescription Drug Monitoring Program – HB 375 passes Health and Human Services, SB 592 scheduled for Wednesday 3/27**

SB 592 by Sen. Albritton and HB 375 by Rep. Pigman, MD, would expand the exceptions of the requirement that a prescriber or dispenser must consult the PDMP to review a patient’s controlled substance dispensing history before prescribing or dispensing a controlled substance for a patient receiving palliative care for the relief of symptoms related to an incurable, progressive illness or injury.

- *SB 592 has passed 2 committees and is scheduled for Appropriations Wednesday March 27<sup>th</sup>.*
- *HB 375 passed its 2<sup>nd</sup> and last committee 17-0 and is awaiting a full chamber vote*

**O - Repeal of PIP – no movement**

Sen. Brandes filed SB 896 – Motor Vehicle Insurance which would eliminate Florida’s no-fault law insurance law and the requirement that motorists carry \$10,000 in personal-injury protection (PIP). Rep. Grall filed a similar bill, HB 733. Sen. Lee has also filed his version of motor vehicle insurance legislation, SB 1052.

- *SB 896 has been referred to 3 committees and is currently waiting to be heard by the Infrastructure and Security Committee.*
- *SB 1052 passed its 1<sup>st</sup> committee 8-0 and is must pass 2 more committees.*
- *HB 733 has been referred to 3 committees and is currently waiting to be heard by the Insurance and Baking Subcommittee.*

**S - SB/O HB - Telehealth – HB 23 passed Ways and Means, SB 1526 scheduled for Monday 3/25**

HB 947, HB 23 and SB 1526 would set the practice standards for telehealth care in the state of Florida. HB 947 by Rep. Ausley defines a telehealth provider as a practitioner who is **licensed** in the state of Florida. HB 23 by Rep. Yarborough defines a telehealth provider as a practitioner who is **licensed or certified** in the state of Florida. SB 1526 would limit telehealth providers to only **licensed physicians**.

- *HB 947 has been referred to 3 committees and is currently waiting to be heard by the Health Quality Subcommittee.*
- *HB 23 was removed from Tuesday, March 12’s agenda but will be heard on Monday, March 18.*
- *SB 1526 has been referred to 3 committees and is currently scheduled for Health Policy Monday March 25<sup>th</sup>.*

**M - Physician Orders for Life-Sustaining Treatment (POLST) – no movement**

SB 206 by Sen. Brandes would: establish the Physician Orders for Life-Sustaining Treatment (POLST) Program within the Department of Health; specify which document takes precedence when directives in POLST forms conflict with other advance directives; require the Agency for Health Care Administration to establish and maintain a clearinghouse for compassionate and palliative care plans consisting of a database accessible to health care providers and facilities and other authorized individuals; authorize specified personnel to withhold or withdraw

cardiopulmonary resuscitation if presented with a POLST form that contains an order not to resuscitate the patient.

- *SB 206 has been referred to 3 committees and is currently waiting to be heard by the Health Policy Committee.*
- *No House companion has been filed yet.*

### **Scope of Practice - O**

#### **APRN/PA Independent Practice – HB 821 scheduled for Health Care Appropriations Subcommittee Tuesday 3/26**

SB 972 and HB 821 by Sen. Brandes and Rep. Pigman, MD, look to expand the scope of practice of Advanced Practice Registered Nurses and Physician Assistants. Amongst other things, the legislation would allow APRNs and Pas to practice without protocol.

- *SB 972 has been referred to 3 committees and is currently waiting to be heard by the Health Policy Committee*
- *HB 821 has passed its 1<sup>st</sup> committee 10-3 and must pass 2 more committees to be voted on by the entire chamber.*

#### **Practice of Pharmacy – HB 111 passes Health Care Appropriations**

SB 300 by Sen. Brandes and HB 111 by Rep. Plasencia would authorize pharmacists to test for & treat influenza & streptococcus within the framework of an established written protocol of a supervising physician. The House bill was amended to: authorize pharmacists who meet certain educational and experience criteria and who maintain at least \$250,000 personal liability coverage to enter into a collaborative pharmacy practice agreement with a physician to manage the chronic health conditions of that physician's patients and treat minor non-chronic health conditions; authorize pharmacists to test for and treat influenza and streptococcus; require the board to adopt a formulary of drugs a pharmacist may prescribe for minor, nonchronic illnesses; prohibit a pharmacist from initiating or prescribing a controlled substance.

- *SB 300 has been referred to 3 committees and is currently waiting to be heard by the Health Policy Committee.*
- *HB 111 passed its 2<sup>nd</sup> committee 7-3 and must pass 1 more committee to be voted on by the entire House.*

#### **Psychologists Prescribing – HB 373 passes Health Care Appropriations**

SB 304 by Sen. Brandes and HB 373 by Rep. Pigman, MD, would create certification for prescriptive authority for psychologists. "Prescriptive authority" for psychologists "means the authorization to prescribe, administer, discontinue, or distribute without charge drugs or controlled substances recognized or customarily used in the diagnosis, treatment, or management of an individual with a psychiatric, mental, cognitive, nervous, emotional, developmental, or behavioral disorder."

- *SB 304 has been referred to 3 committees and is currently waiting to be heard by the Health Policy Committee.*
- *HB 373 passed its 2<sup>nd</sup> committee 7-3 and must pass 1 more committee to be voted on by the entire House.*

#### **Consultant Pharmacists – HB 833 passes Health and Human Services Committee**

HB 833 by Rep. Byrd and SB 1050 by Sen. Diaz allow consultant pharmacists to provide medication management services, order and evaluate laboratory or clinical tests, conduct patient assessments, and administer drugs within the framework of a collaborative practice agreement between the pharmacist and a physician, podiatrist or dentist.

- *SB 1050 has been referred to 3 committees and is currently waiting to be heard by the Health Policy Committee.*
- *HB 833 passed its 2<sup>nd</sup> and last committee 18-0 is waiting to be voted on by the entire House.*