



FOMA Legislative Update - Week 8

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The 2020 Legislative Session is almost over, but the last couple of weeks are often the most active for our legislative team. The House and Senate budgets are over \$1 billion apart, and it looks like the end date, sine die, for this session will be extended by at least two days. As it stands, the budget negotiations are intertwined with policy negotiations as each chamber fights for its priorities. It appears that both Independent Practice for APRNs and Test and Treat for Pharmacists will be sent to the Governor in some form. The Senate has attempted to place some restrictions on these issues, but House Speaker Jose Oliva has drawn a line in the sand and it looks like the budget will not move forward unless the Senate agrees to these policy initiatives. Both of these bills have passed on the House Floor, and have been sent to the Senate.

- Paul D. Seltzer, DO, FOMA Legislative Chairman



Former FOMA President, Richard Thacker, DO, FACOI, Assistant Dean of Clinical Sciences and Clinical Resources, with students from ACOM at the

ACGME Language on the Senate Floor

FOMA's top priority bill, SB 218/HB 221, which updates Florida Statute to allow osteopathic medical students to take advantage of the national merger of the ACGME and AOA's accreditation programs, **was heard today on the Senate's Special Order Calendar**, and will now go to Third Reading on Monday. The bill has passed all of its committee stops on the House side and is awaiting a vote on the House Floor. We are hopeful that, once the bill passes the Senate, the House will take up the bill and pass it off the House Floor. Our legislative team has worked tirelessly to get this bill across the finish line and enacted into law for our osteopathic medical students.

Legislative
Links



Independent Practice

HB 607 by Representative Cary Pigman, MD, passed off the House Floor this week and will now be sent to the Senate to be considered. The bill authorizes autonomous practice for APRNs and PAs, requires the Board of Health or DOH to register physician assistant or advanced practice registered nurse if applicant meets criteria, and authorizes such autonomous health care practitioners to perform specified acts without physician supervision or supervisory protocol.



Earlier this week, the Senate companion, SB 1676 by Sen Albritton, which expands scope of practice for APRNs only was heard in the Senate Appropriations Committee and passed 16-4. The bill will now go to the Senate Floor. Prior to the Appropriations Committee, the bill included several limitations, including limiting independent practice to rural and underserved communities, and requiring participating APRNs to have 10,000 hours of supervised practice. The bill was amended in committee to reduce the required hours to 2,000 supervised hours, and reduced the rural and underserved restriction to the first three years of independent practice. After the initial three-year period, an independent APRN could then practice independently anywhere

in the state.

The FOMA, with Board Member Dr. Richard Thacker, was joined by several ACOM students in opposing the bill in the Senate Appropriations Committee. Elizabeth Saunders and Kirk Naugher, students of ACOM spoke against the bill.

The House companion to SB 1676, HB 7053, by Representative Josie Tomkow, also passed off the House Floor. Both House bills will now go to the Senate for consideration, and the FOMA will continue to watch this issue and provide updates.

Pharmacist Test and Treat

HB 389 by Representative Tyler Sirois, would authorize pharmacists to test for and treat lice, skin conditions (like athlete's foot and ringworm), and minor infections in addition to influenza and streptococcus. The bill also includes the treatment of certain chronic conditions such as asthma, diabetes, and congestive heart failure, pursuant to a written protocol with a supervising physician. The bill would also create a requirement for these pharmacists to report diseases of public health significance to the Department of Health. The House Bill passed off the House Floor this week and will be sent to the Senate for consideration. As negotiations move forward, the House and Senate bill have some significant differences. The Senate Bill, SB 714 by Senator Travis Hutson, is now waiting to be heard on the Senate Floor. **The Senate Bill currently does not include anything aside from influenza testing and treatment, and restrictions such testing and treatment to adults age 18-75.** Senator Hutson has indicated a desire to keep the Senate version, however, there is still a chance that some of the more expansive House language will be added to the bill. Our legislative team is keeping a close eye on this piece of legislation, and will continue to provide updates.

Non-opioid Alternatives Heading to the Governor

Senator Perry presented HB 743/SB 1080 on the Senate Floor this week, where it received a final, unanimous vote. **The bill will now be sent to the Governor**, who will have 7 days to sign it into law. The bill makes some adjustments to the requirement that healthcare practitioners provide a pamphlet of non-opioid alternatives when prescribing, ordering, administering, or dispensing opioids. Specifically, the bill:

- Exempts hospice services and any care provided in a hospital critical care unit or emergency department from the requirement to discuss non-opioid alternatives with a patient;
- Removes the requirement to address non-opioid alternatives when a drug is dispensed or administered;
- Authorizes a health care practitioner to discuss non-opioid alternatives with the patient's representative rather than the

patient; and

- Requires that the pamphlet provided to the patient be printed and authorizing a health care practitioner to provide the pamphlet to the patient's representative in lieu of the patient.

Your legislative team will continue to watch the issue and will provide updates as the bill moves through the Governor's office.

Pharmacy Benefit Managers

HB 7045 was heard on the House Floor on Special Order this week. This piece of committee legislation by the House Health Market Reform Subcommittee (**HB 7045**) requires drug manufacturers to provide notification of upcoming price increases to every health insurer that covers the drug at least 60 days prior to the effective date of any manufacturer drug price increase that exceeds 15% from the previous year, or which amounts to a 25% increase from the preceding 12-month period. In addition, the drug manufacturer must submit a report to the Department of Business and Professional Regulation (DBPR) and the Office of Insurance Regulation (OIR) on each manufacturer drug price increase made during the previous calendar year. The committee bill also has several requirements around pharmacy audits and contracts between a health insurer and a pharmacy benefit manager (PBM). The bill requires a health insurer to submit a report to OIR information by its contracted PBM. Finally, the committee bill requires OIR to publish the reports on its internet website and publish an analysis of the reported information.

The Senate Companion, SB 1338 by Senator Tom Wright has not yet been heard in Senate Appropriations, which is currently not scheduled to meet again this session. In order to pass, the bill will need to be heard in Senate Appropriations or have the committee reference remove before reaching the Senate Floor. These are unlikely scenarios, but we will continue to monitor this bill. The bill revises provisions of the Florida Insurance Code relating to the oversight of pharmacy benefit managers by the Office of Insurance Regulation (OIR). Specifically the bill clarifies that OIR has the authority to conduct market conduct examinations of PBMs to determine compliance with the provisions of the code, requires insurers and their PBMs to comply with the pharmacy audit provisions, provides that a pharmacy may appeal audit findings, relating to the payment of a claim or the amount of a claim payment, through the Statewide Provider and Health Plan Claim dispute Resolution Program, clarifies that an insurer remains responsible for any violations of the prompt pay law by a PBM acting on its behalf, clarifies the OIR's authority to review contracts that an insurer has with a PBM, requires PBMs to pass through generic rebates to an insurer, requires the submission of an annual report to the OIR regarding rebates and other information, revises definition of the term, "maximum allowable cost;" and creates definitions of the terms, "brand drug," and "generic drug."

Consultant Pharmacists

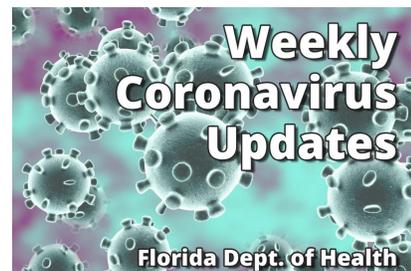
Senate Bill 1094, by Senator Manny Diaz Jr., allows pharmacists to receive a special certificate which allows them to perform additional services, under the supervision of a physician, such as adjusting prescriptions and ordering lab tests. A pharmacist seeking to be a consultant pharmacist must complete an additional 40 hours of training to qualify for certification. **The bill was amended in the Senate Appropriations Committee to allow pharmacists to enter a collaborative practice agreement with a physician to treat chronic health conditions, including:**

- Arthritis;
- Asthma;
- Chronic obstructive pulmonary diseases;
- Type 2 diabetes;
- Human immunodeficiency virus or acquired immune deficiency syndrome; or
- Obesity.

This would expand pharmacists' scope of practice and the FOMA opposes this legislation. The House companion does not include the chronic health treatment language, and has arrived in the Senate, but is unlikely to be heard because it has been referenced to three committees, which are not scheduled to meet again this session. The language included in SB 1094 is similar to the language featured in the other test and treat bills we have discussed. It is possible that the bill will be used as a vehicle to circumvent the restrictions Senator Hutson has placed on his test and treat bill. Our legislative team will continue to follow this issue and provide updates as it progresses.

Coronavirus

There have been 8 reported cases of coronavirus in Florida. As the virus spreads, Surgeon General Scott Rivkees, MD, has continued to provide weekly updates as the Department of Health works to address the virus and prepare healthcare providers to treat patients. These updates are open to the healthcare community and we would encourage our members to participate. The update is given each Wednesday at 2:00 PM EST, and the call in line is 888-585-9008. The PIN code for the call-in line is 208-305-233.



For more information, and a complete list of all the bills we are tracking, click the button below to visit our bill tracking website. With the 2020 Legislative Session heating up, and issues such as scope of practice coming to the

forefront, it is more important than ever to look ahead to the 2020 election cycle. The FOMA needs your help to continue supporting candidates that put patients first. Every dollar to our Political Action Committee goes towards supporting our mission of protecting Florida's patients. To donate, click the button below.

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