

2022 Legislative Session Summary



FMA

Florida Medical Association



After last year's locked down session, when public attendance in a committee was prohibited and meeting with legislators nearly impossible, the FMA legislative team hit the ground running for the 2022 Legislative Session.

We are proud to report that not one scope-of-practice expansion bill that the FMA opposed received a single committee hearing. By not having to allocate resources to fight the typical onslaught of scope-of-practice legislation, the FMA was able to make great strides in getting legislation passed that will help physicians practice medicine.

Session concluded on Monday, March 14th, at 1:03 pm, accounting for a three-day extension to finalize the state budget. Your FMA team of lobbyists tracked 310 bills and numerous amendments that either directly or indirectly concerned the practice of medicine in Florida. The following is a summary of key legislative issues that the FMA worked on during session to help our members practice medicine.

LEGISLATION THAT PASSED

COVID-19 Liability Protection Extension

(SB 7014 by Sen. Burgess and HB 7021 by Rep. Burton)

Last year, the FMA succeeded in getting legislation passed that provided liability protection for COVID-19 related healthcare claims. This legislation has been incredibly effective. However, the protections granted in last year's legislation are only effective until 2022. The FMA was able to secure a one-year extension through SB 7014, extending liability protections on claims occurring before June 1, 2023. The Governor signed SB 7014 on February 24, 2022.

Expansion of Telehealth

(HB 17 by Rep. Fabricio and SB 312 by Sen. Diaz)

In the era of COVID-19, telehealth emerged as an essential tool for access to healthcare, particularly for the medically vulnerable. Currently, there is a general prohibition on prescribing controlled substances via telehealth, with few exceptions. Effective July 1, 2022, authorized prescribers will be able to prescribe Schedule III, IV, and V controlled substances via telehealth. While this expansion of telehealth prescriptive authority is a significant victory for Florida physicians and their patients, the FMA will continue to work toward payment parity for telehealth services.

LEGISLATION THAT PASSED *(continued)*

Emergency Medical Care for Minors

(HB 817 by Rep. Masullo and SB 1114 by Sen. Bradley)

After the Parental Bill of Rights passed during the previous session, physicians were left feeling uneasy about when it is appropriate to treat minors without written parental consent, specifically in an emergency setting. The FMA was successful in passing HB 817, expanding the emergency care protections in §743.064 of the Florida Statutes. Currently, this statute provides that physicians may provide emergency medical care without parental consent in an emergency if a delay in providing care to obtain parental consent would endanger the health or physical well-being of the minor. This exception, however, only applies to emergency medical care or treatment provided in a hospital or in a college health service. Effective July 1, 2022, physicians will be able to provide emergency medical treatment to minors anywhere such treatment is needed – not just in hospitals and college health services. It is imperative that physicians feel protected in order to keep Florida's minors safe.

Medical Education Loan Forgiveness

In a huge victory for Florida physicians, the FMA was able to secure an appropriation of \$6 million for medical education student loan reimbursement. While the repayment program is already in statute, the Florida Legislature has never funded the program. Physicians practicing primary care in rural or underserved areas, as determined by the Department of Health, will be eligible for payments up to \$20,000 per year for educational expenses. This type of incentive program will alleviate physician shortages in underserved communities, encourage more physicians to practice family and general medicine, and promote team-based medicine in rural communities, which will help safeguard patient safety and quality of care. The FMA will send out more information once the Governor signs the budget and the Department establishes the procedures and guidelines for eligibility.

Step-Therapy Protocol

(HB 459 by Rep. Willhite and SB 730 by Sen. Harrell)

In one step closer to transparency, the FMA successfully advocated for the passage of HB 459, which will give physicians more power in fighting insurance mandated step-therapy protocols. This legislation defines a step-therapy protocol as “a written protocol that specifies the order in which certain prescription drugs, medical procedures, or courses of treatment must be used to treat an insured's condition.” Step-therapy protocols undermine physicians and the practice of medicine while delaying appropriate care for patients. Effective July 1, 2022, this legislation mandates that a health insurer must publish on its website, and provide in writing, the procedure to request a step-therapy protocol exemption or the process to appeal the health insurer's denial of a request. Requesting an exemption and appealing a step-therapy protocol is notoriously difficult to navigate. This legislation begins to turn that tide.

Uterine Fibroid Research and Education

(HB 543 by Rep. Omphroy and SB 1010 by Sen. Gibson)

This legislation creates a centralized database within the Department of Health to collect information on uterine fibroids including prevalence, demographics of women with uterine fibroids, and treatments and procedures utilized by healthcare practitioners. Physicians, physician assistants, and advanced practice registered nurses who diagnose or treat women with uterine fibroids will have to submit certain information in a form and manner determined by the Department. The FMA will work with the Department to ensure a streamlined process and will communicate with our members once the reporting requirements are established.

LEGISLATION THAT WAS DEFEATED

Scope-of-Practice Legislation

This year, the FMA stopped several scope-of-practice expansion bills from receiving even a single committee hearing. The FMA defeated legislation that would have:

- Allowed CRNAs to reframe independent practice as “collaborative” practice by eliminating the protocol requirement with a supervising physician
- Granted prescriptive authority to psychologists, including controlled substances
- Removed the requirement that certified nurse midwives maintain a patient transfer agreement with a hospital and a referral agreement with a physician

The FMA's advocacy also prevented the filing of other scope initiatives that would have allowed unqualified optometrists to perform laser surgery and promote deceptive name changes such as physician assistant to “physician associate” and nurse anesthetist to “nurse anesthesiologist.” These dangerous initiatives only seek to lessen the quality of care delivered in Florida. As always, the FMA will work to defend against scope of practice expansion for non-physicians.

Wrongful Death

(SB 262 by Sen. A. Rodriguez and HB 6011 by Rep. Roach)

The FMA defeated legislation that would have increased rates for medical malpractice insurance, and healthcare costs in general. This legislation would have permitted the recovery of noneconomic damages by adult children for the loss of a parent, and by the parents for the loss of an adult child with no surviving spouse or children, in a medical malpractice wrongful death claim. This type of policy initiative is based on the offensive and erroneous premise that certain patients would receive a lower standard of care. This legislation did move further in the process than it has in the past and we expect the same legislation will be filed next year. The FMA will work assiduously to fight this legislation.

Personal Injury Protection

(HB 1525 by Rep. Grall and SB 150 by Sen. Burgess)

Last year, the Florida Legislature repealed Florida's no-fault automobile insurance system and replaced it with a mandatory bodily injury insurance requirement. This repeal eliminated the no-fault system's personal injury protection coverage (PIP), a major source of payment for those physicians who provide emergency and follow-up care to auto accident victims. The FMA sought to ensure that each policy sold included medical payments coverage unless specifically declined in writing by the applicant. Ultimately, the Governor vetoed SB 54 (2021), citing concerns over unintended consequences that would negatively impact both the market and consumers.

This year, the sponsors refiled the legislation with slight changes from SB 54(2021) hoping to ameliorate the Governor's concerns. Disappointingly, HB 1525/SB 150 would have had a worse impact on Florida physicians as it would have required applicants to opt-in to medical payments coverage, as opposed to last year's opt-out provision. However, the sponsors were unable to make significant enough changes to assuage the Governor and both bills died in their respective Judiciary Committees. The FMA will continue to advocate for physicians as the state looks to reform the PIP system.

Join the FMA PAC

With the conclusion of session, lawmakers are pivoting their focus from policy to their elections. The FMA Political Action Committee works for you by getting candidates elected who appreciate your role in protecting the health and well-being of their constituents. This election year is critical with Florida's Governor, Agriculture Commissioner, Chief Financial Officer and Attorney General up for re-election and all 160 state House and Senate seats on the ballot as well due to redistricting.

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