Health Care General Committee

Tuesday, April 4, 2006
10:15 AM – 11:00 AM
306 HOB

COMMITTEE MEETING PACKET

Revised

Allan G. Bense
Speaker

Gayle B. Harrell
Chair

AGENDA
Health Care General Committee
April 4, 2006
10:15 a.m. – 11:00 a.m.
306 HOB

I. Call to order/Roll Call

II. Opening Remarks

III. Consideration of the following bills:

- **HB 679 CS** - - Health-Related Education in the Public Schools by Sobel
- **HB 1027 CS** - - Biomedical Research by Hasner, Coley
- **HB 1337 CS** - - Driver Licenses by Ambler
- **HB 1561** - - Expert Witnesses by Brummer

IV. Closing Remarks and Adjournment

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 679 CS Health-Related Education in the Public Schools
SPONSOR(S): Sobel and others
TIED BILLS: **IDEN./SIM. BILLS:** SB 2602

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) PreK-12 Committee	8 Y, 1 N, w/CS	Hassell	Mizereck
2) Health Care General Committee		Ciccone	Brown-Barrios
3) Education Appropriations Committee			
4) Education Council			
5)			

SUMMARY ANALYSIS

House Bill 679 w/CS requires each school district to submit a copy of the wellness policy required by federal law and its physical education policy to the Department of Education (DOE), who shall post online links to each district's policy on its website. The bill requires the DOE to post health and nutrition resources on its website.

The bill encourages school districts to provide training on first aid and CPR, and to provide 150 minutes of physical education a week for students in K-5 and 225 minutes each week for students in grades 6-8. The bill requires a certified physical education instructor to review all physical education programs and curricula.

The bill requires that districts annually provide parents with information on ways to help their children be physically active and eat healthy foods. It also revises the membership of the school health advisory committee so that members represent the eight component areas of the coordinated school health model.

The bill does not appear to have a fiscal impact.

The bill provides for an effective date of July 1, 2006.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Provide limited government- The bill increases the responsibilities of the Department of Education.

Empower families – The bill increases the amount of available information to parents and families regarding school district's wellness and physical education policies.

B. EFFECT OF PROPOSED CHANGES:

Background

Presently, section 1003.42, Florida Statutes, provides that each school board shall provide appropriate instruction that meets State Board of Education standards, also known as the Sunshine State Standards, in specific subject areas including health and physical education.

In 2004, the Legislature enacted CS/CS/SB 354 which included several requirements regarding physical education. The 2004 bill directed the Department of Education (DOE) to conduct a study to determine the status of physical education instruction in the public schools and to develop recommendations for changes. The study did not recommend any Legislative action.

In 2004, the Legislature enacted s.1003.455, F.S., which required district school boards to adopt written physical education policies by December 1, 2004, that detailed the district's physical education program and expected program outcomes. Districts that did not adopt physical education policies by the deadline were required to implement a program requiring, at a minimum, 30 minutes of physical education for kindergarten through fifth-graders for three days a week.

The federal Child Nutrition and WIC Reauthorization Act (PL 108-265-June 30, 2004) requires each local education agency participating in the National School Lunch Act or the Child Nutrition Act of 1966 to establish a local school wellness policy, which must include nutritional education, physical activity, and other school based efforts to promote wellness.

Effects of Proposed Changes

The bill requires each school district to submit a copy of the wellness policy and its physical education policy to the Florida Department of Education. The bill requires each district to annually review its policies, provide a procedure for public input and revisions, and send any updated policies to the Department. By December 1, 2006, the Department is required to post online links to each district's policies.

The bill requires the Department to post on its website online links to resources that include information regarding:

- Classroom instruction on the benefits of exercise and healthy eating.
- Classroom instruction on health hazards related to tobacco.
- The 8 components of a coordinated school health program.[1]
- The core measures for school health and wellness.
- Access to the nutritional content of foods and beverages and healthy food choices.
- Multiple examples of school wellness policies.

[1] http://www.cdc.gov/healthyyouth/CSHP/. The eight components of a coordinated school health model include healthy school environment, counseling, psychological and social services, nutrition services, health services, health promotion for staff, family/community involvement, health education, and physical education.

- Examples of wellness classes to support staff wellness.

The bill encourages school districts to provide basic first aid training to students, including CPR, beginning in grade 6 and every two years thereafter and to provide 150 minutes of physical education a week for students in K-5 and 225 minutes each week for students in grades 6-8.

The bill requires a certified physical education instructor to review all physical education programs and curricula.

The bill requires that districts annually provide parents with information on ways to help their children be physically active and eat healthy foods. Lastly, it revises the membership of the school health advisory committee so that members represent the eight component areas of the coordinated school health model as defined by the Centers for Disease Control and Prevention.[2] It also encourages the committees to address the school health model in the school district's school wellness policy.

C. SECTION DIRECTORY:

Section 1. Creates s. 1003.453, F.S., requiring each school district to submit copies of the school district's wellness policy and physical education policy; requiring the department to post online links to policies and health and nutrition resources on its website.

Section 2. Amends s. 1003.455, F.S., requiring approval of physical education programs and curricula; encouraging districts to provide physical education for a specified amount of time; deleting obsolete language.

Section 3. Amends s. 381.0056, F.S., revising the composition of the school health advisory council.

Section 4. Provides for an effective date.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

None.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

   This bill does not appear to have a fiscal impact on local government revenues.

2. Expenditures:

   This bill does not appear to have a fiscal impact on local government expenditures.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

This bill does not appear to have a fiscal impact on the private sector.

D. FISCAL COMMENTS:

None.

[2] Id.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

   The bill does not require a municipality or county to spend funds or to take any action requiring the expenditure of funds.

2. Other:

   None.

B. RULE-MAKING AUTHORITY:

None.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On March 28, 2006 the PreK-12 Committee adopted a strike-all amendment to the bill.

- The strike-all removes the "whereas clauses" from the bill.
- The original bill required DOE to post each school's wellness policy on its website. Instead, the strike-all requires DOE to post online links to district policies.
- The original bill required DOE to provide a model wellness policy on its website that contained specified components. The strike-all removes this requirement, and states that DOE must provide online links to resources to information addressing items formerly listed as policy components.
- The original bill required DOE to provide nutritional information in rubric format on its website. The strike-all removes this requirement.
- The original bill required school districts to provide first aid training to students. The strike-all encourages that such training be provided.

This bill analysis reflects the bill as amended.

CHAMBER ACTION

1 The PreK-12 Committee recommends the following:
2
3 **Council/Committee Substitute**
4 Remove the entire bill and insert:
5 A bill to be entitled
6 An act relating to health-related education in the public
7 schools; creating s. 1003.453, F.S.; requiring each school
8 district to submit to the Department of Education, by a
9 specified deadline, copies of the district's school
10 wellness policy and physical education policy; requiring
11 the school district to review those policies annually;
12 requiring the department and school districts to post
13 links to those policies on their websites; requiring the
14 department to provide website links to certain resources
15 and prescribing the types of information those resources
16 must provide; encouraging school districts to provide
17 basic training in first aid to students in certain grade
18 levels; amending s. 1003.455, F.S.; requiring that school
19 district physical education programs and curricula be
20 reviewed by a certified physical education instructor;
21 encouraging school districts to provide physical education
22 for a specified amount of time; deleting obsolete
23 language; amending s. 381.0056, F.S., the "School Health

24 Services Act"; requiring schools to annually provide
25 certain information to students' parents; providing
26 requirements relating to membership of school health
27 advisory committees; encouraging the committees to address
28 specified matters; providing an effective date.
29
30 Be It Enacted by the Legislature of the State of Florida:
31
32 Section 1. Section 1003.453, Florida Statutes, is created
33 to read:
34 1003.453 School wellness and physical education policies;
35 nutrition guidelines.--
36 (1) By September 1, 2006, each school district shall
37 submit to the Department of Education a copy of its school
38 wellness policy as required by the Child Nutrition and WIC
39 Reauthorization Act of 2004 and a copy of its physical education
40 policy required under s. 1003.455. Each school district shall
41 annually review its school wellness policy and physical
42 education policy and provide a procedure for public input and
43 revisions. In addition, each school district shall send an
44 updated copy of its wellness policy and physical education
45 policy to the department when a change or revision is made.
46 (2) By December 1, 2006, the department shall post links
47 to each school district's school wellness policy and physical
48 education policy on its website so that the policies can be
49 accessed and reviewed by the public. Each school district shall
50 provide the most current versions of its school wellness policy
51 and physical education policy on the district's website.

52 (3) By December 1, 2006, the department must provide on
53 its website links to resources that include information
54 regarding:
55 (a) Classroom instruction on the benefits of exercise and
56 healthful eating.
57 (b) Classroom instruction on the health hazards of using
58 tobacco and being exposed to tobacco smoke.
59 (c) The eight components of a coordinated school health
60 program, including health education, physical education, health
61 services, and nutrition services.
62 (d) The core measures for school health and wellness, such
63 as the School Health Index.
64 (e) Access for each student to the nutritional content of
65 foods and beverages and to healthful food choices in accordance
66 with the dietary guidelines of the United States Department of
67 Agriculture.
68 (f) Multiple examples of school wellness policies for
69 school districts.
70 (g) Examples of wellness classes that provide nutrition
71 education for teachers and school support staff, including
72 encouragement to provide classes that are taught by a licensed
73 nutrition professional from the school nutrition department.
74 (4) School districts are encouraged to provide basic
75 training in first aid, including cardiopulmonary resuscitation,
76 for all students, beginning in grade 6 and every 2 years
77 thereafter. Private and public partnerships for providing
78 training or necessary funding are encouraged.

79 Section 2. Section 1003.455, Florida Statutes, is amended
80 to read:
81 1003.455 Physical education; assessment.--
82 (1) It is the responsibility of each district school board
83 to develop a physical education program that stresses physical
84 fitness and encourages healthful ~~healthy~~, active lifestyles and
85 to encourage all students in prekindergarten through grade 12 to
86 participate in physical education. Physical education shall
87 consist of physical activities of at least a moderate intensity
88 level and for a duration sufficient to provide a significant
89 health benefit to students, subject to the differing
90 capabilities of students. All physical education programs and
91 curricula must be reviewed by a certified physical education
92 instructor.
93 (2) Each district school board shall~~, no later than~~
94 ~~December 1, 2004,~~ adopt a written physical education policy that
95 details the school district's physical education program and
96 expected program outcomes. ~~Each district school board shall~~
97 ~~provide a copy of its written policy to the Department of~~
98 ~~Education by December 15, 2004.~~
99 (3) Each district school board is encouraged to provide
100 150 minutes of physical education each week for students in
101 kindergarten through grade 5 and 225 minutes each week for
102 students in grades 6 through 8. ~~Any district that does not adopt~~
103 ~~a physical education policy by December 1, 2004, shall, at a~~
104 ~~minimum, implement a mandatory physical education program for~~
105 ~~kindergarten through grade 5 which provides students with 30~~
106 ~~minutes of physical education each day, 3 days a week.~~

107 Section 3. Subsections (2) and (5) of section 381.0056,
108 Florida Statutes, are amended to read:
109 381.0056 School health services program.--
110 (2) The Legislature finds that health services conducted
111 as a part of the total school health program should be carried
112 out to appraise, protect, and promote the health of students.
113 School health services supplement, rather than replace, parental
114 responsibility and are designed to encourage parents to devote
115 attention to child health, to discover health problems, and to
116 encourage use of the services of their physicians, dentists, and
117 community health agencies. Each school shall annually provide
118 parents with information on ways that they can help their
119 children to be physically active and to eat healthful foods.
120 (5)(a) Each county health department shall develop,
121 jointly with the district school board and the local school
122 health advisory committee, a school health services plan; and
123 the plan must ~~shall~~ include, at a minimum, provisions for:
124 1.~~(a)~~ Health appraisal;
125 2.~~(b)~~ Records review;
126 3.~~(c)~~ Nurse assessment;
127 4.~~(d)~~ Nutrition assessment;
128 5.~~(e)~~ A preventive dental program;
129 6.~~(f)~~ Vision screening;
130 7.~~(g)~~ Hearing screening;
131 8.~~(h)~~ Scoliosis screening;
132 9.~~(i)~~ Growth and development screening;
133 10.~~(j)~~ Health counseling;

134 11.~~(k)~~ Referral and followup of suspected or confirmed
135 health problems by the local county health department;
136 12.~~(l)~~ Meeting emergency health needs in each school;
137 13.~~(m)~~ County health department personnel to assist school
138 personnel in health education curriculum development;
139 14.~~(n)~~ Referral of students to appropriate health
140 treatment, in cooperation with the private health community
141 whenever possible;
142 15.~~(o)~~ Consultation with a student's parent or guardian
143 regarding the need for health attention by the family physician,
144 dentist, or other specialist when definitive diagnosis or
145 treatment is indicated;
146 16.~~(p)~~ Maintenance of records on incidents of health
147 problems, corrective measures taken, and such other information
148 as may be needed to plan and evaluate health programs; except,
149 however, that provisions in the plan for maintenance of health
150 records of individual students must be in accordance with s.
151 1002.22;
152 17.~~(q)~~ Health information which will be provided by the
153 school health nurses, when necessary, regarding the placement of
154 students in exceptional student programs and the reevaluation at
155 periodic intervals of students placed in such programs; and
156 18.~~(r)~~ Notification to the local nonpublic schools of the
157 school health services program and the opportunity for
158 representatives of the local nonpublic schools to participate in
159 the development of the cooperative health services plan.
160 (b) Each school health advisory committee must, at a
161 minimum, include members who represent the eight component areas

162 of the Coordinated School Health model as defined by the Centers
163 for Disease Control and Prevention. School health advisory
164 committees are encouraged to address the eight components of the
165 Coordinated School Health model in the school district's school
166 wellness policy pursuant to s. 1003.453.
167 Section 4. This act shall take effect July 1, 2006.

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1027 CS Biomedical Research
SPONSOR(S): Hasner, Coley and others
TIED BILLS: **IDEN./SIM. BILLS:** CS/CS/SB 1826

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) Health Care General Committee	9 Y, 0 N	Ciccone	Brown-Barrios
2) Health Care Appropriations Committee	15 Y, 0 N, w/CS	Massengale	Massengale
3) Health & Families Council	11 Y, 0 N, w/CS	Ciccone	Moore
4) Health Care General Committee		Ciccone	Brown-Barrios
5)			

SUMMARY ANALYSIS

House Bill 1027 w/CS provides legislative intent to provide funding for biomedical research grants in Florida with particular emphasis on cancer research and Alzheimer's disease research, and to promote economic development particularly in the biotechnology industry. The bill increases state funding for biomedical research, creates a new cancer research program, and amends several statutes that govern state-funding for biomedical research.

The bill establishes the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program within the Department of Health and provides grant monies to researchers seeking cures for cancer. The bill requires that state-funded biomedical research grants be awarded on a competitive basis after a peer review of proposals. The bill provides new and, in some cases, increased program reporting to the Governor and Legislature.

The bill revises the composition of the Florida Center for Universal Research to Eradicate Disease (CURED) advisory council and establishes four-year terms for advisory board members and requirements for the election of a chair.

The bill discontinues the automatic annual distribution of alcoholic beverage tax collections from the State Treasury for the Center for Universal Research to Eradicate Disease, the James and Esther King Biomedical Research Program, and the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute and authorizes the Legislature to annually appropriate funds for these centers and the program. The bill requires the Department of Health to submit an annual report on the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program. The bill requires the annual operating budget for the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute be submitted to the Governor and Cabinet, Senate President, House Speaker and State Board of Education chair and require additional information regarding the center's expenditure of funds and research.

The bill includes appropriations from the General Revenue Fund as follows:

- $6 million to the James and Esther King Biomedical Research Program.
- $9 million to William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program.
- $15 million to the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute.

The bill provides for an effective date of July 1, 2006.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Limited Government—The bill adds a new grant program and expands the administrative and oversight responsibility of the Department of Health.

Empower families—Florida families should benefit from greater access to information and health care services derived from cancer and Alzheimer's disease clinical trials and resultant new therapies.

B. EFFECT OF PROPOSED CHANGES:

The bill revises state funding for biomedical research to end automatic distributions from the State Treasury for a specified program and centers and instead authorizes annual appropriations for the program and centers. The bill increases accountability requirements in awarding biomedical research grants and revises several statutes governing state-funded biomedical research.

The Biomedical Research Trust Fund (s. 20.435, F.S.)

Currently the Biomedical Research Trust Fund expends monies for the purposes of the James and Esther King Biomedical Research Program. The bill expands the use of Biomedical Research Trust Fund money to include the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program. The funds awarded in grants from these programs can be expended over a period of up to three years.

The James and Esther King Biomedical Research Program (s.215.5602, F.S.)

The James and Esther King Biomedical Research Program is located within the Department of Health. The Biomedical Research Advisory Council (BRAC) is created within the James and Esther King Biomedical Research Program and carries out the mission of the program. This bill reduces the number of Governor's appointments to the council from six to four and requires two appointments by the President of the Senate and two by the Speaker of the House of Representatives. The council's duties are expanded to award cancer research grants under the newly-created Bankhead-Coley Program. The bill replaces the automatic $6 million distribution from alcoholic beverage tax collections with a $6 million annual appropriation from the General Revenue Fund to the Biomedical Research Trust Fund.

The Florida Center for Universal Research to Eradicate Disease (CURED) (s.381.855, F.S.)

The Florida Center for Universal Research to Eradicate Disease (CURED) is located within the Department of Health. The CURED advisory council carries out the mission of the center. The bill revises the composition of the center's advisory council to provide for a 16-member board instead of the current 60 member board by requiring one member from the Florida Research Consortium rather than all 43 members of the consortium board of directors. The bill deletes two members representing entities that no longer exist. The bill establishes 4-year terms for advisory board members and requirements to elect a chair and for periodic board meetings. The bill replaces the automatic distribution of up to $250,000 of alcoholic beverage tax collections from the $6 million appropriated to the James and Esther King Biomedical Research Program for the center's operating costs with an annual appropriation.

The William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program (created in s. 381.922, F.S.)

The bill creates the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program within the Department of Health, and provides that grants be awarded towards cures for cancer by the Biomedical Research Advisory Council. The bill establishes application procedures for research grants

including that grant proposals be awarded on the basis of scientific merit by a peer-review panel. The bill appropriates $9 million to the Biomedical Research Trust Fund for grants.

The School of Chiropractic Medicine at Florida State University

The bill deletes the $9 million dollar annual appropriation to the Florida State University for the School of Chiropractic Medicine.

The Florida Cancer Council (s.381.921, F.S.)

The Florida Cancer Council is located within the Department of Health. The purpose of the council is to establish the state as a center of excellence for cancer research. The bill provides that the council will identify ways to attract new research talent and national grant-producing researchers to cancer research facilities "in this state" rather than "Florida-based" facilities. The effect of this change is to expand the types of facilities that may be awarded grants. Grant-funding decisions would be based on a peer-review system according to specific criteria.

The Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute (S. 1004.445, F.S.)

The Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute is located at the University of South Florida. The purpose of the center is to encourage research, education, treatment, prevention and the early detection of Alzheimer's disease. The bill revises the information contained within the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute's annual report to include a description of the expenditure of all funds, information concerning research conducted or funded by the center, and the expected or actual result of such research. The bill requires the center's chief executive officer to submit an annual operating budget to the Governor, Cabinet, President of the Senate, Speaker of the House of Representatives, and State Board of Education chair. The bill establishes procedures that the center must follow when awarding research grants including that proposals be awarded on the basis of scientific merit by a peer-review panel. The bill limits the membership of the board of directors to 16 from the current possible 21 members. The bill replaces the automatic $15 million distribution from alcoholic beverage tax collection with a $15 million annual appropriation from the General Revenue Fund to the Grants and Donations Trust Fund within the Department of Elder Affairs.

Background

Cancer Research:

The emphasis that Florida places on cancer research is evidenced in the high-profile cancer related programs and funding strategies that have been established over the years. In addition, Florida recognizes the importance of a coordinated and collaborative approach to biomedical research. The scientific, humanitarian and economic value that is derived from a coordinated state, federal, and academic and private effort can not be overstated. Ultimately, biomedical research contributes to a healthier population and biomedical discoveries and the resultant products or treatments contribute to the economy of the area in which they are produced. For both health and economic reasons, governments are interested in furthering the work of biomedical researchers and in helping researchers collaborate and share resources.

Efforts in Florida relating to the coordination and development of medical research and disease prevention include the James and Esther King Biomedical Research Program, the Florida Center for Universal Research to Eradicate Disease, the Florida Cancer Council, and the Florida Dialogue on Cancer.

The James and Esther King Biomedical Research Program

The 1999 Legislature established the Lawton Chiles Endowment Fund [1] as a result of its settlements with the tobacco industry to enhance or support expansions in children's health care programs, child welfare programs, community-based health and human service initiatives, and biomedical research. Section 215.5602, Florida Statutes, establishes the James and Esther King Biomedical Research Program funded from interest earnings on the endowment fund, and provides that funds appropriated to the program are to be devoted to competitive grants and fellowships in research relating to prevention, diagnosis, and treatment of tobacco-related illnesses, including cancer, cardiovascular disease, stroke and pulmonary disease. The Biomedical Research Advisory Council within the Department of Health assists the Secretary in establishing criteria and guidelines for the competitive grant programs. Grants and fellowships are awarded on the basis of scientific merit, as determined by an open, objective peer-review process.

The Florida Center for Universal Research to Eradicate Disease

Section 381.855, Florida Statutes, creates the Florida Center for Universal Research to Eradicate Disease within the Department of Health. The purpose of the center is to coordinate, improve, expand, and monitor all biomedical research programs within the state, facilitate funding opportunities, and foster improved technology transfer of research findings into clinical trials and widespread public use. The goal of the center is to find cures for diseases such as cancer, heart disease, lung disease, diabetes, autoimmune disorders, and neurological disorders, including Alzheimer's disease, epilepsy and Parkinson's disease.

The center must hold an annual biomedical technology summit in Florida to which biomedical researchers, biomedical technology companies, business incubators, pharmaceutical manufacturers, and others around the nation and world are invited to share biomedical research findings to expedite the discovery of cures for diseases. Summit attendees are required to cover, or obtain sponsorship for, the costs of their attendance.

An advisory council, established within the center, must meet at least annually. The council consists of the members of the board of directors of the Florida Research Consortium and at least one representative from each of the following:

- The Emerging Technology Commission.
- Enterprise Florida, Inc.
- BioFlorida.
- The Biomedical Research Advisory Council.
- The Florida Medical Foundation.
- Pharmaceutical Research and Manufacturers of America.
- The Florida Tri-Agency Coalition on Smoking OR Health.
- The Florida Cancer Research Council.
- The American Cancer Society, Florida Division, Inc.
- The American Heart Association.
- The American Lung Association of Florida.
- The American Diabetes Association, South Coastal Region.
- The Alzheimer's Association.
- The Epilepsy Foundation.
- The National Parkinson's Foundation.
- The Florida Public Health Foundation, Inc.
- Scripps Florida or the entity formed in this state by the Scripps Research Institute.

[1] Section 215.5601, F.S., ch. 99-167, Laws of Florida

Members of the council will serve without compensation and each organization represented must cover all expenses of its representative.

The Florida Cancer Council

In 2004, the Legislature created the Florida Cancer Council within the Department of Health for the purpose of making Florida a center of excellence for cancer research. [2] Section 381.921, Florida Statutes, provides the overall mission of the Florida Cancer Council and stipulates that the council must work in concert with the Florida Center for Universal Research to Eradicate Disease to ensure that the goals of the center are advanced, and must work toward dramatically improved cancer research and treatment in Florida through a number of specific efforts including expanding cancer research capacity in Florida, improving research and treatment through greater participation in clinical trials networks, and reducing the impact of cancer on disparate groups of persons.

The Florida Cancer Council membership is representative of Florida cancer centers, hospitals, and patient groups. The council is authorized to create not-for-profit corporate subsidiaries to fulfill its mission and those subsidiaries could receive, hold, invest and administer property and any monies acquired from private, local, state and federal sources and technical and professional income from the mission-related activities of the council.

The council membership is as follows:

- The Chairman of the Florida Dialogue on Cancer, who serves as the council chairman.
- The Secretary of the Department of Health, or his or her designee.
- The Chief Executive Officer of the H. Lee Moffitt Cancer Center, or his or her designee.
- The President of the University of Florida Shands Cancer Center, or his or her designee.
- The Chief Executive Officer of the University of Miami Sylvester Comprehensive Cancer Center, or his or her designee.
- The Chief Executive Officer of the Mayo Clinic, Jacksonville, or his or her designee.
- The Chief Executive Officer of the American Cancer Society, Florida Division, or his or her designee.
- The President of the American Cancer Society, Florida Division Board of Directors, or his or her designee.
- The President of the Florida Society of Clinical Oncology, or his or her designee.
- The President of the American College of Surgeons, Florida Chapter, or his or her designee.
- The Chief Executive Officer of Enterprise Florida, Inc., or his or her designee.
- Five representatives from cancer programs approved by the American College of Surgeons, three of whom shall be appointed by the Governor, one by the Speaker of the House of Representatives and one by the President of the Senate.
- One member of the House of Representatives, to be appointed by the Speaker of the House of Representatives.
- One member of the Senate, to be appointed by the President of the Senate.

Appointments made by the Speaker of the House of Representatives and the President of the Senate are two-year terms concurrent with the terms of the presiding officers who make the appointments. Appointments made by the Governor are two-year terms, and the Governor may reappoint directors. Members of the council or any subsidiaries serve without compensation and each organization represented covers the expenses of its representatives.

The council issues an annual report to the Center for Universal Research to Eradicate Disease, the Governor, the Speaker of the House of Representatives, and the President of the Senate by December 15 of each year. The report contains policy and funding recommendations regarding cancer research capacity in Florida and related issues.

[2] Section 381.92, Florida Statutes, s.10, ch. 2004-2 Laws of Florida

The Florida Dialogue on Cancer

The Florida Dialogue on Cancer (FDOC) is a collaboration of Florida leaders of hospitals, research centers, universities, professional medical groups, community-based organizations, and private business groups, and government officials. FDOC is an initiative designed to expand the state's capacity to reduce the incidence and mortality rates of cancer. The goals of FDOC are the following:

- Create a coalition that speaks with one voice on major statewide cancer issues for Florida.
- Enhance and promote Florida's capacity to conduct cancer research, professional education, clinical trials and treatment programs.
- Identify and promote the replication of best practices in providing access to cancer prevention, education, and screening, diagnosis, and treatment programs for all Floridians to reduce the disparities that exist.

The Florida Division of the American Cancer Society sponsors FDOC, which is based on the work of the National Dialogue on Cancer.

Alzheimer's Disease

Alzheimer's disease is a progressive, irreversible brain disorder with no known cause or cure. Symptoms of the disease include memory loss, confusion, impaired judgment, personality changes, disorientation, and loss of language skills. Alzheimer's disease is the most common form of irreversible dementia—symptom escalation varies from person to person and includes confusion, personality and behavior changes and impaired judgment. Most people with Alzheimer's disease become unable to care for themselves.

There is no known cure for Alzheimer's disease; however, certain medications can help relieve symptoms or slow the progression of the disease. Approximately 100,000 victims die and 360,900 new cases of Alzheimer's disease are diagnosed each year in the United States. According to the Alzheimer's Association, the number of Americans with the disease has doubled since 1980 and current estimates reflect 4.5 million Americans have Alzheimer's disease. By 2050, it is estimated that 14 million Americans will have this disease. There are currently 396,000 people with Alzheimer's disease in Florida.

Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute

Section 1004.43, Florida Statutes, establishes the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute at the University of South Florida. The institute is governed by a not-for-profit corporation in accordance with an agreement with the State Board of Education. The corporation is managed by a board of directors consisting of the President of the University of South Florida and the chair of the State Board of Education, or his or her designee, five representatives of the state university system, and between 9-14 additional directors who are not medical doctors or state employees. The institute is administered by a chief executive officer, who serves at the pleasure of the board of directors.

The mission of the Byrd Alzheimer's Research Center is to collaborate with researchers throughout the State of Florida and the wider global research community to develop treatment to cure and prevent this disease. The Byrd Alzheimer's Research Center will conduct state of the art research in addition to serving as the site for coordinating and facilitating the state's various efforts to diagnose, treat and prevent the disease. Funding for the institute is generated through state and federal grants and other fundraising efforts.

C. SECTION DIRECTORY:

Section 1. Provides legislative intent.

Section 2. Amends s. 20.435, F.S., adding the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program to the list of purposes of the Biomedical Research Trust Fund.

Section 3. Amends s. 215.5602, F.S., relating to the membership of the Biomedical Research Advisory Council to create a new subsection (11) authorizing the council to award grants for cancer research through the Bankhead-Coley Cancer Research Program, and a new subsection (12) authorizing an annual appropriation to the James and Esther King Biomedical Research Program.

Section 4. Provides language regarding the expiration of certain appointments to the Biomedical Research Advisory Council; provides an effective date upon becoming law.

Section 5. Amends s. 381.855 (5) and creates new subsections (6), (7), and (8), F.S., relating to membership and term on the advisory council to the Center for Universal Research to Eradicate Disease (CURED); grant peer review process, and authorizing an annual appropriation to CURED for operating costs.

Section 6. Provides language regarding the expiration of certain appointments to the advisory council for the Center for Universal Research to Eradicate Disease (CURED).

Section 7. Amends s. 381.921 (1), F.S., relating to the mission and duties of the Florida Cancer Council.

Section 8. Creates s. 381.922, F.S., establishing the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program.

Section 9. Amends s. 561.121 (1), F.S., and deletes language relating to certain automatic annual distributions of alcoholic beverage tax collections from the State Treasury.

Section 10. Amends s. 1004.445 (2) and (6), F.S., revising board of directors membership to the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute and creates new subsections (8) and (12) relating to research funding and authorizes an annual appropriation to the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute.

Section 11. Provides language regarding the expiration of certain appointments to the board of directors of the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute.

Section 12. Provides a $6 million appropriation for fiscal year 2006-07 from the General Revenue Fund to be deposited into the Biomedical Research Trust Fund for the James and Esther King Biomedical Research Program; provides a $9 million appropriation for fiscal year 2006-07 from the General Revenue Fund to be deposited into the Biomedical Research Trust Fund for the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program, provides a $15 million appropriation for fiscal year 2006-07 from the General Revenue Fund to be deposited into the Grants and Donations Trust Fund for the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute; provides for specific use of such funds.

Section 13. Provides an effective date of July 1, 2006, except as expressly provided in the act.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

   None

2. Expenditures:

The bill includes appropriations from the General Revenue Fund as follows:

- $6 million to the Biomedical Research Trust Fund for the James and Esther King Biomedical Research Program., authorizing up to $250,000 of that amount to be used for operating expenses of the CURED program.
- $9 million to the Biomedical Research Trust Fund for the William G. "Bill" Bankhead, Jr., and David Coley Cancer Research Program, authorizing up to 10 percent to be used for administrative expenses, and
- $15 million to the Grants and Donations Trust Fund in the Department of Elderly Affairs for the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute, requiring not less than 80 percent of this amount to be distributed in research grants.

The Department of Health revised the original estimates to reflect the following:

Estimated Expenditures	1st Year	2nd Year (Annualized/Recur)
Salaries:		
1.0 Program Administrator @ $57,000	$77,805	$80,139
1.0 (0.5) Administrative Coordinator @ $32,000	21,840	22,495
1.0 (0.5) Administrative Assistant @ 28,000	19,110	19,683
0.20 Senior Attorney @ $55,000	15,015	15,465
0.15 Administrative Assistant @ $27,000	7,371	7,592
Expenses:		
1 Std DOH professional pkg. w/maximum travel	$19,090	$15,757
1 (1/2) Standard professional w/limited travel	6,867	5,195
1 (1/2) Standard support staff	3,993	2,598
Other general office expenses	4,296	4,296
Staff development	5,000	5,000
Council travel	2,400	2,400
Honorarium individual applications @ $500 each	75,000	75,000
Honorarium team applications @ $2,100 each	52,500	52,500
Honorarium interim/annual progress reports	9,600	9,600
Technical services contract	420.000	370,000
Operating Capital Outlay		
Computers	2,100	- 0 –
Total Estimated Expenditures	$741,997	$687,720

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None

2. Expenditures:

None

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

By referring to research facilities as those that are "in this state," non-state universities, not-for-profit entities, researchers, biotechnology and pharmaceutical companies and others will benefit from this bill

by receiving grants from which they may develop patented or licensed intellectual property. Further, new research talent and national grant-producing researchers should be attracted to cancer research facilities in this state.

D. FISCAL COMMENTS:

The bill discontinues the automatic distribution of alcoholic beverage tax collections from the State Treasury for the James and Esther King Biomedical Research Program and the Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute, and provides instead for an annual appropriation by the Legislature. The bill also discontinues the annual distributions of alcoholic tax collections for the Florida State University School of Chiropractic Medicine.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

The bill does not require counties or municipalities to spend funds or take action requiring the expenditure of funds. This bill does not reduce the percentage of state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenue.

2. Other:

This bill has no impact on the trust fund restrictions under the requirements of Article III, Subsection 19(f) of the Florida Constitution.

B. RULE-MAKING AUTHORITY:

No additional rule-making is required for the Department of Health to implement the provisions of this bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On March 17, 2006, the Health Care Appropriations Committee adopted a strike-all amendment that made the following changes:

- Added the Bankhead-Coley Cancer Research Program to the purposes of the Biomedical Research Trust Fund.
- Changed the number of appointments to the Biomedical Research Advisory Council by the President of the Senate and the Speaker of the House of Representatives from one to two.
- Added the awarding of grants by the Biomedical Research Advisory Council for cancer research for the purposes of Bankhead-Coley Cancer Research Program.
- Reduced the membership of the advisory council to the CURED from 18 to 16 members.
- Added a competitive, peer-reviewed grant application process to the Bankhead-Coley Cancer Research Program.
- Provided $250,000 for CURED operating costs out of the $6 million appropriation for Biomedical Research Trust Fund, and up to 10 percent of the $9 million appropriation for administrative expenses for the Bankhead-Coley Cancer Research Program.

On March 28, 2006, the Health and Families Council adopted four amendments conforming the House Bill to the Senate Bill as follows:

- Corrected two statutory references.

- Removed potential reference to a public records exemption (addressed in separate bill)
- Specified use of funds appropriated for Alzheimer's research and related projects.

The analysis is written to reflect the bill as amended.

CHAMBER ACTION

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1 The Health & Families Council recommends the following:
2
3 **Council/Committee Substitute**
4 Remove the entire bill and insert:
5 A bill to be entitled
6 An act relating to biomedical research; providing
7 legislative intent; amending s. 20.435, F.S.; authorizing
8 the use of funds in the Biomedical Research Trust Fund for
9 the purposes of the William G. "Bill" Bankhead, Jr., and
10 David Coley Cancer Research Program; amending s. 215.5602,
11 F.S.; revising the membership and the method for
12 appointing members to the Biomedical Research Advisory
13 Council; requiring the council to award grants for cancer
14 research through the William G. "Bill" Bankhead, Jr., and
15 David Coley Cancer Research Program; authorizing the
16 Legislature to annually appropriate funds to the James and
17 Esther King Biomedical Research Program; providing for
18 transition to new appointments; amending s. 381.855, F.S.;
19 revising the membership of the advisory council for the
20 Florida Center for Universal Research to Eradicate
21 Disease; providing for terms of office and the filling of
22 vacancies; providing for officers, meetings, and
23 procedures; authorizing the Legislature to annually

24 appropriate funds to the Florida Center for Universal
25 Research to Eradicate Disease; providing for transition to
26 new appointments; amending s. 381.921, F.S.; revising a
27 goal of the Florida Cancer Council; creating s. 381.922,
28 F.S.; establishing the William G. "Bill" Bankhead, Jr.,
29 and David Coley Cancer Research Program within the
30 Department of Health; providing the purpose of the
31 program; requiring the program to provide grants for
32 cancer research; providing procedures for awarding cancer
33 research grants; providing for peer-review panels;
34 providing requirements with respect to ethical conduct and
35 conflicts of interest; providing for public records and
36 meetings; requiring an annual report; amending s. 561.121,
37 F.S.; redistributing certain funds collected from taxes on
38 alcoholic beverages; amending s. 1004.445, F.S.; revising
39 the method of appointing and filling vacancies on the
40 board of directors of the Johnnie B. Byrd, Sr.,
41 Alzheimer's Center and Research Institute; requiring
42 certain information in the annual report; requiring an
43 annual operating budget; providing procedures for awarding
44 of Alzheimer's disease research grants; providing for peer
45 review panels; providing requirements with respect to
46 ethical conduct and conflicts of interest; providing for
47 public records and meetings; authorizing the Legislature
48 to annually appropriate funds to the Johnnie B. Byrd, Sr.,
49 Alzheimer's Center and Research Institute; providing for
50 transition to new appointments; providing appropriations;
51 providing effective dates.

52
53 Be It Enacted by the Legislature of the State of Florida:
54
55 Section 1. It is the intent of the Legislature to provide
56 funding to support grants for biomedical research in this state
57 with the anticipation that sustained funding for biomedical
58 research over a period of years will lead to an alleviation of
59 human suffering from diseases such as cancer and Alzheimer's
60 disease. It is the intent of the Legislature to dramatically
61 reduce this state's inordinately high cancer burden, reducing
62 both cancer incidence and mortality, while advancing scientific
63 endeavors in this state, making this state a world-class leader
64 in cancer research and treatment. Further, it is the intent of
65 the Legislature to address the debilitating and deadly effects
66 of Alzheimer's disease by supporting research in Alzheimer's
67 disease statewide through the awarding of research grants on a
68 competitive basis. Additionally, it is the intent of the
69 Legislature to stimulate dramatic economic development,
70 particularly in the biotechnology industry, through investment
71 in this state's biomedical research.
72 Section 2. Paragraph (h) of subsection (1) of section
73 20.435, Florida Statutes, is amended to read:
74 20.435 Department of Health; trust funds.--
75 (1) The following trust funds are hereby created, to be
76 administered by the Department of Health:
77 (h) Biomedical Research Trust Fund.
78 1. Funds to be credited to the trust fund shall consist of
79 funds deposited pursuant to ss. ~~s.~~ 215.5601 and 381.922. Funds

80 shall be used for the purposes of the William G. "Bill"
81 Bankhead, Jr., and David Coley Cancer Research Program and the
82 James and Esther King Biomedical Research Program as specified
83 in ss. 215.5602 and 288.955. The trust fund is exempt from the
84 service charges imposed by s. 215.20.
85 2. Notwithstanding the provisions of s. 216.301 and
86 pursuant to s. 216.351, any balance in the trust fund at the end
87 of any fiscal year shall remain in the trust fund at the end of
88 the year and shall be available for carrying out the purposes of
89 the trust fund. The department may invest these funds
90 independently through the Chief Financial Officer or may
91 negotiate a trust agreement with the State Board of
92 Administration for the investment management of any balance in
93 the trust fund.
94 3. Notwithstanding s. 216.301 and pursuant to s. 216.351,
95 any balance of any appropriation from the Biomedical Research
96 Trust Fund which is not disbursed but which is obligated
97 pursuant to contract or committed to be expended may be
98 certified by the Governor for up to 3 years following the
99 effective date of the original appropriation.
100 4. The trust fund shall, unless terminated sooner, be
101 terminated on July 1, 2008.
102 Section 3. Subsection (3) of section 215.5602, Florida
103 Statutes, is amended, and subsections (11) and (12) are added to
104 that section, to read:
105 215.5602 James and Esther King Biomedical Research
106 Program.--

107 (3) There is created within the Department of Health the
108 Biomedical Research Advisory Council.
109 (a) The council shall consist of eleven ~~nine~~ members,
110 including: the chief executive officer of the Florida Division
111 of the American Cancer Society, or a designee; the chief
112 executive officer of the Florida/Puerto Rico Affiliate of the
113 American Heart Association, or a designee; and the chief
114 executive officer of the American Lung Association of Florida,
115 or a designee. The ~~Governor shall appoint the~~ remaining eight
116 ~~six~~ members of the council shall be appointed~~,~~ as follows:
117 1. The Governor shall appoint four members, two members
118 with expertise in the field of biomedical research, one member
119 from a research university in the state, and one member
120 representing the general population of the state.
121 2. The President of the Senate shall appoint two members,
122 one member with expertise in the field of behavioral or social
123 research and one representative from a cancer program approved
124 by the American College of Surgeons.
125 3. The Speaker of the House of Representatives shall
126 appoint two members, one member from a professional medical
127 organization and one representative from a cancer program
128 approved by the American College of Surgeons.
129 ~~4. One member from a research university in the state.~~
130 ~~5. One member representing the general population of the~~
131 ~~state.~~
132
133 In making these ~~his or her~~ appointments, the Governor, the
134 President of the Senate, and the Speaker of the House of

135 Representatives shall select primarily, but not exclusively,
136 Floridians with biomedical and lay expertise in the general
137 areas of cancer, cardiovascular disease, stroke, and pulmonary
138 disease. The ~~Governor's~~ appointments shall be for a 3-year term
139 and shall reflect the diversity of the state's population. An
140 appointed ~~A council~~ member ~~appointed by the Governor~~ may not
141 serve more than two consecutive terms.
142 (b) The council shall adopt internal organizational
143 procedures as necessary for its efficient organization.
144 (c) The department shall provide such staff, information,
145 and other assistance as is reasonably necessary to assist the
146 council in carrying out its responsibilities.
147 (d) Members of the council shall serve without
148 compensation, but may receive reimbursement as provided in s.
149 112.061 for travel and other necessary expenses incurred in the
150 performance of their official duties.
151 (11) The council shall award grants for cancer research
152 through the William G. "Bill" Bankhead, Jr., and David Coley
153 Cancer Research Program created in s. 381.922.
154 (12) The Legislature may annually appropriate funds to the
155 James and Esther King Biomedical Research Program for the
156 purposes of this section.
157 Section 4. All appointments to the Biomedical Research
158 Advisory Council for the James and Esther King Biomedical
159 Research Program which were not made in accordance with s.
160 215.5602, Florida Statutes, as amended by this act, shall expire
161 June 30, 2006, but such appointees may continue to serve until

162 their successors are appointed. This section shall take effect
163 upon this act becoming a law.
164 Section 5. Subsection (5) of section 381.855, Florida
165 Statutes, is amended, and subsections (6), (7), and (8) are
166 added to that section, to read:
167 381.855 Florida Center for Universal Research to Eradicate
168 Disease.--
169 (5) There is established within the center an advisory
170 council that shall meet at least annually.
171 (a) The council shall consist of one representative from a
172 Florida not-for-profit institution engaged in basic and clinical
173 biomedical research and education which receives more than $10
174 million in annual grant funding from the National Institutes of
175 Health, to be appointed by the Secretary of Health from a
176 different institution each term, and ~~the members of the board of~~
177 ~~directors of the Florida Research Consortium and at least~~ one
178 representative from and appointed by each of the following
179 entities:
180 ~~1. The Emerging Technology Commission.~~
181 1.~~2.~~ Enterprise Florida, Inc.
182 2.~~3.~~ BioFlorida.
183 3.~~4.~~ The Biomedical Research Advisory Council.
184 4.~~5.~~ The Florida Medical Foundation.
185 5.~~6.~~ Pharmaceutical Research and Manufacturers of America.
186 ~~7. The Florida Tri-Agency Coalition on Smoking OR Health.~~
187 6.~~8.~~ The Florida Cancer Council.
188 7.~~9.~~ The American Cancer Society, Florida Division, Inc.
189 8.~~10.~~ The American Heart Association.

190 9.~~11.~~ The American Lung Association of Florida.
191 10.~~12.~~ The American Diabetes Association, South Coastal
192 Region.
193 11.~~13.~~ The Alzheimer's Association.
194 12.~~14.~~ The Epilepsy Foundation.
195 13.~~15.~~ The National Parkinson Foundation.
196 14.~~16.~~ The Florida Public Health Foundation, Inc.
197 15.~~17.~~ The Florida Research Consortium ~~Scripps Florida or~~
198 ~~the entity formed in this state by The Scripps Research~~
199 ~~Institute~~.
200 (b) Members of the council shall serve without
201 compensation, and each organization represented shall cover all
202 expenses of its representative.
203 (6) Members shall be appointed to 4-year terms of office.
204 The members of the advisory council shall annually elect a chair
205 from among the members of the advisory council. Any vacancy on
206 the advisory council shall be filled in the same manner as the
207 original appointment.
208 (7) The advisory council shall meet at least annually, but
209 may meet as often as it deems necessary to carry out its duties
210 and responsibilities. The advisory council may take official
211 action by a majority vote of the members present at any meeting
212 at which a quorum is present.
213 (8) The Legislature may annually appropriate funds to the
214 Florida Center for Universal Research to Eradicate Disease for
215 operating costs.
216 Section 6. All appointments to the advisory council for
217 the Florida Center for Universal Research to Eradicate Disease

218 which were not made in accordance with s. 381.855, Florida
219 Statutes, as amended by this act, shall expire June 30, 2006,
220 but such appointees may continue to serve until their successors
221 are appointed. This section shall take effect upon this act
222 becoming a law.
223 Section 7. Subsection (1) of section 381.921, Florida
224 Statutes, is amended to read:
225 381.921 Florida Cancer Council mission and duties.--The
226 council, which shall work in concert with the Florida Center for
227 Universal Research to Eradicate Disease to ensure that the goals
228 of the center are advanced, shall endeavor to dramatically
229 improve cancer research and treatment in this state through:
230 (1) Efforts to significantly expand cancer research
231 capacity in the state by:
232 (a) Identifying ways to attract new research talent and
233 attendant national grant-producing researchers to ~~Florida-based~~
234 cancer research facilities in this state;
235 (b) Implementing a peer-reviewed, competitive process to
236 identify and fund the best proposals to expand cancer research
237 institutes in this state;
238 (c) Funding through available resources for those
239 proposals that demonstrate the greatest opportunity to attract
240 federal research grants and private financial support;
241 (d) Encouraging the employment of bioinformatics in order
242 to create a cancer informatics infrastructure that enhances
243 information and resource exchange and integration through
244 researchers working in diverse disciplines, to facilitate the
245 full spectrum of cancer investigations;

246 (e) Facilitating the technical coordination, business
247 development, and support of intellectual property as it relates
248 to the advancement of cancer research; and
249 (f) Aiding in other multidisciplinary research-support
250 activities as they inure to the advancement of cancer research.
251 Section 8. Section 381.922, Florida Statutes, is created
252 to read:
253 381.922 William G. "Bill" Bankhead, Jr., and David Coley
254 Cancer Research Program.--
255 (1) The William G. "Bill" Bankhead, Jr., and David Coley
256 Cancer Research Program, which may be otherwise cited as the
257 "Bankhead-Coley Program," is created within the Department of
258 Health. The purpose of the program shall be to advance progress
259 towards cures for cancer through grants awarded through a peer-
260 reviewed, competitive process.
261 (2) The program shall provide grants for cancer research
262 to further the search for cures for cancer.
263 (a) Emphasis shall be given to the goals enumerated in s.
264 381.921, as those goals support the advancement of such cures.
265 (b) Preference may be given to grant proposals that foster
266 collaborations among institutions, researchers, and community
267 practitioners, as such proposals support the advancement of
268 cures through basic or applied research, including clinical
269 trials involving cancer patients and related networks.
270 (3)(a) Applications for funding for cancer research may be
271 submitted by any university or established research institute in
272 the state. All qualified investigators in the state, regardless
273 of institutional affiliation, shall have equal access and

274 opportunity to compete for the research funding. Collaborative
275 proposals, including those that advance the program's goals
276 enumerated in subsection (2), may be given preference. Grants
277 shall be awarded by the Secretary of Health, after consultation
278 with the Biomedical Research Advisory Council, on the basis of
279 scientific merit, as determined by an open, competitive peer-
280 review process that ensures objectivity, consistency, and high
281 quality. The following types of applications shall be considered
282 for funding:
283 1. Investigator-initiated research grants.
284 2. Institutional research grants.
285 3. Collaborative research grants, including those that
286 advance the finding of cures through basic or applied research.
287 (b) In order to ensure that all proposals for research
288 funding are appropriate and are evaluated fairly on the basis of
289 scientific merit, the Secretary of Health, in consultation with
290 the council, shall appoint a peer-review panel of independent,
291 scientifically qualified individuals to review the scientific
292 content of each proposal and establish its priority score. The
293 priority scores shall be forwarded to the council and must be
294 considered in determining which proposals shall be recommended
295 for funding.
296 (c) The council and the peer-review panel shall establish
297 and follow rigorous guidelines for ethical conduct and adhere to
298 a strict policy with regard to conflicts of interest. A member
299 of the council or panel may not participate in any discussion or
300 decision with respect to a research proposal by any firm,
301 entity, or agency with which the member is associated as a

302 member of the governing body or as an employee or with which the
303 member has entered into a contractual arrangement. Meetings of
304 the council and the peer-review panels are subject to chapter
305 119, s. 286.011, and s. 24, Art. I of the State Constitution.
306 (4) By December 15 of each year, the Department of Health
307 shall submit to the Governor, the President of the Senate, and
308 the Speaker of the House of Representatives a report indicating
309 progress towards the program's mission and making
310 recommendations that further its purpose.
311 Section 9. Subsection (1) of section 561.121, Florida
312 Statutes, is amended to read:
313 561.121 Deposit of revenue.--
314 (1) All state funds collected pursuant to ss. 563.05,
315 564.06, and 565.12 shall be paid into the State Treasury and
316 disbursed in the following manner:
317 (a)~~1.~~ Two percent of monthly collections of the excise
318 taxes on alcoholic beverages established in ss. 563.05, 564.06,
319 and 565.12 shall be deposited into the Alcoholic Beverage and
320 Tobacco Trust Fund to meet the division's appropriation for the
321 state fiscal year.
322 ~~2. Beginning July 1, 2004, there is annually distributed~~
323 ~~$15 million to the Grants and Donations Trust Fund within the~~
324 ~~Department of Elderly Affairs, and these funds are annually~~
325 ~~appropriated to support a contract with the Johnnie B. Byrd,~~
326 ~~Sr., Alzheimer's Center and Research Institute at the University~~
327 ~~of South Florida for the purposes of conducting research,~~
328 ~~developing and operating integrated data projects, and providing~~

329 ~~assistance to memory disorder clinics as established in s.~~
330 ~~430.502.~~
331 ~~3. Beginning July 1, 2004, there is annually distributed~~
332 ~~$6 million to the Biomedical Research Trust Fund within the~~
333 ~~Department of Health, and these funds are annually appropriated~~
334 ~~to the James and Esther King Biomedical Research Program. From~~
335 ~~these funds, up to $250,000 shall be available annually for the~~
336 ~~operating costs of the Florida Center for Universal Research to~~
337 ~~Eradicate Disease.~~
338 ~~4. Beginning July 1, 2004, there is annually distributed~~
339 ~~$9 million to be paid by warrant drawn by the Chief Financial~~
340 ~~Officer upon the State Treasury to Florida State University for~~
341 ~~the School of Chiropractic Medicine. Notwithstanding the~~
342 ~~provisions of chapter 216, until the School of Chiropractic~~
343 ~~Medicine is completely staffed and fully operational, these~~
344 ~~funds may be used for any purpose by the university.~~
345 (b) The remainder of the funds collected pursuant to ss.
346 563.05, 564.06, and 565.12 ~~collection~~ shall be credited to the
347 General Revenue Fund.
348 Section 10. Subsections (2) and (6) of section 1004.445,
349 Florida Statutes, are amended, present subsections (8), (9), and
350 (10) are renumbered as subsections (9), (10), and (11),
351 respectively, and new subsections (8) and (12) are added to that
352 section, to read:
353 1004.445 Johnnie B. Byrd, Sr., Alzheimer's Center and
354 Research Institute.--
355 (2)(a) The State Board of Education shall enter into an
356 agreement for the utilization of the facilities on the campus of

357 the University of South Florida to be known as the Johnnie B.
358 Byrd, Sr., Alzheimer's Center and Research Institute, including
359 all furnishings, equipment, and other chattels used in the
360 operation of those facilities, with a Florida not-for-profit
361 corporation organized solely for the purpose of governing and
362 operating the Johnnie B. Byrd, Sr., Alzheimer's Center and
363 Research Institute. This not-for-profit corporation, acting as
364 an instrumentality of the state, shall govern and operate the
365 Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute
366 in accordance with the terms of the agreement between the State
367 Board of Education and the not-for-profit corporation. The not-
368 for-profit corporation may, with the prior approval of the State
369 Board of Education, create either for-profit or not-for-profit
370 corporate subsidiaries, or both, to fulfill its mission. The
371 not-for-profit corporation and its subsidiaries are authorized
372 to receive, hold, invest, and administer property and any moneys
373 acquired from private, local, state, and federal sources, as
374 well as technical and professional income generated or derived
375 from practice activities of the institute, for the benefit of
376 the institute and the fulfillment of its mission.
377 (b) ~~1.~~ The affairs of the not-for-profit corporation shall
378 be managed by a board of directors who shall serve without
379 compensation. The board of directors shall consist of the
380 President of the University of South Florida and the chair of
381 the State Board of Education, or their designees, <u>five</u> ~~5~~
382 representatives of the state universities, and <u>nine</u> ~~no fewer~~
383 ~~than 9 nor more than 14~~ representatives of the public who are
384 neither medical doctors nor state employees. Each director who

385 is a representative of a state university or of the public shall
386 be appointed to serve a term of 3 years. The chair of the board
387 of directors shall be selected by a majority vote of the
388 directors. Each director shall have only one vote.
389 ~~2. The initial board of directors shall consist of the~~
390 ~~President of the University of South Florida and the chair of~~
391 ~~the State Board of Education, or their designees; the~~ Of the
392 five university representatives, ~~of whom~~ one shall be appointed
393 by the Governor, two by the President of the Senate, and two by
394 the Speaker of the House of Representatives; and of the nine
395 public representatives, ~~of whom~~ three shall be appointed by the
396 Governor, three by the President of the Senate, and three by the
397 Speaker of the House of Representatives. ~~Upon the expiration of~~
398 ~~the terms of the initial appointed directors, all directors~~
399 ~~subject to 3-year terms of office under this paragraph shall be~~
400 ~~appointed by a majority vote of the directors and the board may~~
401 ~~be expanded to include additional public representative~~
402 ~~directors up to the maximum number allowed.~~ Any vacancy in
403 office shall be filled in the same manner as the original
404 appointment ~~for the remainder of the term by majority vote of~~
405 ~~the directors~~. Any director may be reappointed.
406 (6) The institute shall be administered by a chief
407 executive officer, who shall be appointed by and serve at the
408 pleasure of the board of directors of the not-for-profit
409 corporation, and who shall exercise the following powers and
410 duties, subject to the approval of the board of directors:
411 (a) The chief executive officer shall establish programs
412 that fulfill the mission of the institute in research,

413 education, treatment, prevention, and early detection of
414 Alzheimer's disease; however, the chief executive officer may
415 not establish academic programs for which academic credit is
416 awarded and which culminate in the conferring of a degree,
417 without prior approval of the State Board of Education.
418 (b) The chief executive officer shall have control over
419 the budget and the moneys appropriated or donated to the
420 institute from private, local, state, and federal sources, as
421 well as technical and professional income generated or derived
422 from practice activities of the institute. However, professional
423 income generated by university faculty from practice activities
424 at the institute shall be shared between the institute and the
425 university as determined by the chief executive officer and the
426 appropriate university dean or vice president.
427 (c) The chief executive officer shall appoint
428 representatives of the institute to carry out the research,
429 patient care, and educational activities of the institute and
430 establish the compensation, benefits, and terms of service of
431 such representatives. Representatives of the institute shall be
432 eligible to hold concurrent appointments at affiliated academic
433 institutions. University faculty shall be eligible to hold
434 concurrent appointments at the institute.
435 (d) The chief executive officer shall have control over
436 the use and assignment of space and equipment within the
437 facilities.
438 (e) The chief executive officer shall have the power to
439 create the administrative structure necessary to carry out the
440 mission of the institute.

441 (f) The chief executive officer shall have a reporting
442 relationship to the Commissioner of Education.
443 (g) The chief executive officer shall provide a copy of
444 the institute's annual report to the Governor and Cabinet, the
445 President of the Senate, the Speaker of the House of
446 Representatives, and the chair of the State Board of Education.
447 The annual report shall describe the expenditure of all funds
448 and shall provide information regarding research that has been
449 conducted or funded by the center, as well as the expected and
450 actual results of such research.
451 (h) By August 1 of each year, the chief executive officer
452 shall develop and submit to the Governor and Cabinet, the
453 President of the Senate, the Speaker of the House of
454 Representatives, and the chair of the State Board of Education
455 an annual operating budget detailing the planned use of state,
456 federal, and private funds for the fiscal year.
457 (8)(a) Applications for Alzheimer's disease research
458 funding may be submitted from any university or established
459 research institute in the state. All qualified investigators in
460 the state, regardless of institutional affiliation, shall have
461 equal access and opportunity to compete for the research
462 funding. Grants shall be awarded by the board of directors of
463 the not-for-profit corporation on the basis of scientific merit,
464 as determined by an open, competitive peer review process that
465 ensures objectivity, consistency, and high quality. The
466 following types of applications shall be considered for funding:
467 1. Investigator-initiated research grants.
468 2. Institutional research grants.

469 (b) To ensure that all proposals for research funding are
470 appropriate and are evaluated fairly on the basis of scientific
471 merit, the board of directors of the not-for-profit corporation,
472 in consultation with the council of scientific advisors, shall
473 appoint a peer review panel of independent, scientifically
474 qualified individuals to review the scientific content of each
475 proposal and establish its scientific priority score. The
476 priority scores shall be forwarded to the council and must be
477 considered in determining which proposals shall be recommended
478 for funding.
479 (c) The council of scientific advisors and the peer review
480 panel shall establish and follow rigorous guidelines for ethical
481 conduct and adhere to a strict policy with regard to conflict of
482 interest. All employees, members of the board of directors, and
483 affiliates of the not-for-profit corporation shall follow the
484 same rigorous guidelines for ethical conduct and shall adhere to
485 the same strict policy with regard to conflict of interest. A
486 member of the council or panel may not participate in any
487 discussion or decision with respect to a research proposal by
488 any firm, entity, or agency with which the member is associated
489 as a member of the governing body or as an employee or with
490 which the member has entered into a contractual arrangement.
491 Meetings of the council and the peer review panels are subject
492 to chapter 119, s. 286.011, and s. 24, Art. I of the State
493 Constitution.
494 (12) The Legislature may annually appropriate funds to the
495 Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute

496 at the University of South Florida for the purposes of this
497 section.
498 Section 11. All appointments to the board of directors of
499 the not-for-profit corporation for the Johnnie B. Byrd, Sr.,
500 Alzheimer's Center and Research Institute that were not made in
501 accordance with s. 1004.445, Florida Statutes, as amended by
502 this act, shall expire June 30, 2006, but such appointees may
503 continue to serve until their successors are appointed. This
504 section shall take effect upon this act becoming a law.
505 Section 12. (1) The sum of $6 million is appropriated
506 from the General Revenue Fund to the Biomedical Research Trust
507 Fund in the Department of Health for fiscal year 2006-2007 for
508 purposes of the James and Esther King Biomedical Research
509 Program pursuant to s. 215.5602, Florida Statutes. From these
510 funds up to $250,000 shall be available for the operating costs
511 of the Florida Center for Universal Research to Eradicate
512 Disease.
513 (2) The sum of $9 million is appropriated from the General
514 Revenue Fund to the Biomedical Research Trust Fund within the
515 Department of Health for purposes of the William G. "Bill"
516 Bankhead, Jr., and David Coley Cancer Research Program for the
517 2006-2007 fiscal year, and shall be distributed pursuant to s.
518 381.922, Florida Statutes, to provide grants to researchers
519 seeking cures for cancer, with emphasis given to the goals
520 enumerated in s. 381.921, Florida Statutes. From the total funds
521 appropriated, an amount of up to 10 percent may be used for
522 administrative expenses.

523 (3) The sum of $15 million is appropriated from the
524 General Revenue Fund to the Grants and Donations Trust Fund
525 within the Department of Elderly Affairs for the Johnnie B.
526 Byrd, Sr., Alzheimer's Center and Research Institute at the
527 University of South Florida for fiscal year 2006-2007 for the
528 purposes of conducting research, developing and operating
529 integrated data projects, and providing assistance to memory
530 disorder clinics as provided under s. 430.502, Florida Statutes.
531 These funds may not be used for any other purpose. Not less than
532 80 percent of these funds shall be distributed by the center as
533 institutional research grants or investigator-initiated research
534 grants.
535 Section 13. Except as otherwise expressly provided in this
536 act and except for this section, which shall take effect upon
537 this act becoming a law, this act shall take effect July 1,
538 2006.

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1337 CS Driver Licenses
SPONSOR(S): Ambler & others
TIED BILLS: **IDEN./SIM. BILLS:** SB 2672

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) Transportation Committee	15 Y, 0 N, w/CS	Thompson	Miller
2) Health Care General Committee		Brown-Barrios	Brown-Barrios
3) Transportation & Economic Development Appropriations Committee			
4) State Infrastructure Council			
5)			

SUMMARY ANALYSIS

Currently, the Department of Highway Safety & Motor Vehicles (DHSMV) mails renewal notices that direct eligible licensees to appear at a driver license office for in-person renewal or to transmit the completed renewal notice and the fees to the DHSMV by mail, electronically, or telephonically within the 30 days preceding the licensee's birthday for a license extension. DHSMV may issue 6-year license extensions by mail, electronic, or telephonic means without vision examinations for drivers who have no convictions or suspensions and who are not over 79 years of age. Licensed drivers are eligible for two consecutive license extensions without a required vision examination. Those individuals who are over 79 years of age are required to undergo a mandatory vision test and provide proof of meeting the statutory vision standards to be eligible to renew their driving privilege. The fees for license renewals are the same for all applicants, regardless of the validity period of the license.

HB 1337 w/CS requires all applicants, regardless of age, to submit to a vision test when applying for the renewal of a driver's license, either in person or through the submission of a report by an authorized and appropriate medical professional. The bill allows for the results of a vision exam that was done up to 12 months before the renewal application, to be submitted. The bill includes ophthalmologists in the list of medical professionals authorized to submit these reports. The bill provides that a driver's license expires on a licensee's 80th birthday and provides for a 4-year license renewal period (with examination) for persons over 80 years of age. Each renewal after a person's 80th birthday requires passing an eye and hearing examination. Also, the bill provides that renewal fees would be waived for drivers with a license that was held for less than 4 years prior to their 80th birthday.

The bill's mandatory vision tests and revisions to the duration of renewal licenses issued to people 80 years of age and older would have a significant workload impact on DHSMV. The bill will require funding for additional FTEs, facilities, equipment and programming and may have a significant negative fiscal impact for the first year and on a recurring basis. See the Fiscal Comments section of this analysis for more details.

The bill would take effect July 1, 2006.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Provide Limited Government—HB 1337 w/CS requires vision exams for all driver license renewals and shortens the time between renewals for drivers over the age of eighty.

B. EFFECT OF PROPOSED CHANGES:

Present Situation

Driver's License Examination Requirements
The Department is currently required by s. 322.18, F.S to examine every first time applicant, regardless of age, prior to the issuance of an original Florida driver license. The examination includes a test of eyesight and hearing, ability to read and understand highway signs, knowledge of traffic laws, and a demonstration of motor vehicle operation skills. However, a new Florida resident with a valid out-of-state license may reciprocate his or her license and only be required to pass the eye exam.

Once a license is issued, the DHSMV continuously monitors driver performance through reexaminations of drivers appearing to be incompetent. On written notice of at least 5 days, the DHSMV, having good cause, may require a licensed driver to submit to an examination or reexamination[1]. "Good cause" includes, but is not limited to, the recommendation from a court, a law enforcement agency, or a physician.

A licensee may also be subject to reexamination by the DHSMV upon renewal. The examination consists of tests of the licensee's eyesight and hearing and his or her ability to read and understand highway signs and pavement markings.

Driver's License Issuance Periods
Pursuant to, s. 322.18, F.S., an initial driver license issuance is generally valid for 6 years, concurrent with the applicant's birthday. If an applicant establishes his or her identity for a driver's license using either an employment authorization card or a proof of nonimmigrant classification (both are issued by the United States Department of Homeland Security), then the driver's license expires 2 years after the date of issuance or upon the expiration date cited on the Department of Homeland Security documents, whichever date first occurs. In addition, commercial driver's licenses with hazardous-materials endorsements are only valid for 4 years.

A renewal driver's license is valid for 4 years. However, if the applicant's driving record includes no convictions for the preceding 3 years, or no revocations, disqualifications, or suspensions over the preceding 7 years, the renewal driver's license is valid for 6 years.

Currently, the DHSMV may issue 4-year and 6-year license extensions by mail, electronic, or telephonic means without a vision examination for drivers who are not over 79 years of age, unless renewal applicants are directed by the DHSMV to appear for an in-person examination. Licensed drivers are eligible for two consecutive license extensions without a required examination by the DHSMV. Therefore, the maximum time from the original driver license issuance to the end of the second license renewal could be a maximum of 18 years (6-year original license and 2 mail-in or electronic renewal periods of 6 years each equaling 18 years.)

However, a licensee who is otherwise eligible for a renewal license and who is over 79 years of age must:

[1] Section 322.221, F.S.

- Submit to and pass a vision test administered at any driver's license office; or
- If applying for an extension by mail, submit to a vision test administered by a licensed physician or optometrist.

The physician or optometrist must send the results of the test to the DHSMV on the proper department form signed by the physician or optometrist, or may do so by electronic means. The renewal applicant must meet vision standards equivalent to DHSMV's vision test. Also, a licensee who is over 79 years of age may not submit an application for extension by electronic or telephonic means, unless a physician or optometrist has already electronically submitted the results of a vision test to DHSMV.

Driver's License Fees
The fee for an original operator's (class D) driver's license is $20 and the fee for renewal or extension is $15. Driver license fees are set out in s. 322.21, F.S. The renewal fee is applicable for both a 4 and 6-year license. Driver license fees are deposited into the General Revenue Fund.

Effect of Proposed Changes

Driver's License Examination Requirements
HB 1337 w/CS amends s. 322.18, F.S., to require all individuals to submit to a vision test when applying for the renewal of their driver's license, either in person or through the submission of a report by an authorized and appropriate medical professional. The bill specifically includes ophthalmologists in the list of appropriate medical professionals authorized to submit these reports. The vision test must be performed no more than twelve months prior to the application for renewal.

Driver's License Issuance Periods
The bill revises s. 322.18, F.S., to provide that a driver's license expires on a licensee's 80th birthday and provides for a 4-year license renewal period for persons over 80 years of age. Each renewal after a person's 80th birthday requires passing an eye and hearing examination.

Driver's License Fees
This bill amends s. 322.18, F.S., to waive the license renewal fees for drivers who have a license that was held for less than 4 years prior to their 80th birthday.

According to DHSMV, approximately 2 million license renewals are issued annually through its field offices and headquarters' central issuance processing system. The vast majority of these would be subject to the mandatory vision-testing requirement of the bill. Because of the bill's vision test requirements, the percentage of individuals using either electronic or telephonic means to renew would likely decrease as individuals may be more likely to renew at a field issuance office where vision tests are free of charge as opposed to visiting a licensed medical professional. This would result in a corresponding increase in the number of individuals who will go to a field issuance office to renew their driver's license. The bill's revisions to the duration of renewal licenses issued to people over 80 years old could also have a significant workload impact on DHSMV.

Additional examiners and office manager positions would be required to process the increased number of individuals expected to renew in a field issuance office rather than utilizing a convenience method, as well as processing the additional renewal activity for those drivers aged 80 and older. For information on the fiscal impacts of the bill, see the Fiscal Comments section of this analysis.

Older Drivers and Health Status
In the United States, 7,544 people age 65 and older died in motor vehicle crashes during 2001. During 2002, an estimated 193,068 adults age 65 and older suffered nonfatal injuries as occupants in motor vehicle crashes. Compared to an overall fatality rate of 2.0 per 1,000 crashes, persons ages 65–74

have a fatality rate of 3.2. For those ages 75-84, the rate is 5.3, and for those ages 85 and above it increases to 8.6.[2]

Risk Factors

There are several risk factors that can contribute to motor vehicle-related injury.[3] Age-related declines in health may affect some older drivers' ability. Health factors in older drivers that may contribute to motor vehicle-related injury include:

- Physical, sensory, and cognitive changes occur during the normative aging process, affecting the performance of everyday tasks, including driving.
- Chronic medical conditions.
- Use of multiple medications that can adversely affect driving abilities.
- Cataracts, the leading cause of vision impairments in older adults, glaucoma, macular degeneration, and decreased visual acuity.

Psychosocial Impact

Driving an automobile is associated with autonomy and, therefore, driving cessation or driving reduction can lead to a loss of independence and depression. Where few alternatives exist to personal vehicles, the loss of a driver's license can affect one's quality of life and decreased access to medical and community services.

Recognition of declining ability

When older drivers recognize diminished capacities, many adjust their driving behaviors and some cease driving altogether.[4] Those who recognize diminished capacities frequently reduce their risk by reducing their exposure, limiting themselves to driving conditions in which they feel most confident.

- Make fewer trips and travel fewer miles.
- Tend to avoid rush hour.
- Tend to avoid inclement weather.
- Tend to avoid driving after dark.
- Are less likely to drink and drive.
- Wear safety belts more often than do any other age groups except infants and preschool children.

C. SECTION DIRECTORY:

Section 1. Amends s. 322.18, F.S., to limit the duration of driver's licenses issued to not exceed an applicant's 80th birthday; to provide that the license of any person expires at midnight on the licensee's 80th birthday; to provide that a driver's license that expires may renew up to 12 months before the applicant's 80th birthday if the applicant passes an eye and hearing examination; to eliminate the age requirement for vision tests; to require a vision test for all license renewals; to add ophthalmologists to the list of people who may submit vision test results and to waive the license renewal fee for certain drivers.

Section 2. Provides an effective date of July 1, 2006.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

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[2] National Cooperative Highway Research Program 2006 . Available online at http://safety.transportation.org/htmlguides/old_drvr/types_of_probs.htm

[3] Relationship of Health Status, Functional Status, and Psychosocial Status to Driving Among Elderly with Disabilities William C. Mann, et al, Physical & Occupational Therapy in Geriatrics, 23(2/3), 1-2. Available online at http://driving.phhp.ufl.edu/publications/Relationship%20of%20Health%20Status.pdf

[4] CDC's Unintentional Injury Activities Report – 2004 National Center for Injury Prevention and Control. Available online at http://www.cdc.gov/ncipc/pub-res/unintentional_activity/2004/DUIP_Activity_Rpt2004.pdf

1. Revenues:

   See FISCAL COMMENTS section, below.

2. Expenditures:

   See FISCAL COMMENTS section, below.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

   None.

2. Expenditures:

   None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

To the extent that the bill requires all applicants, regardless of age, to submit to a vision test when applying for the renewal of a driver's license, adds ophthalmologists to the list of appropriate medical professionals authorized to submit reports for these tests, and provides for a shorter license renewal period for persons over 80 years of age, some individuals may visit ophthalmologists or other licensed physicians for these mandatory vision tests.

D. FISCAL COMMENTS:

According to the DHSMV, requiring all applicants regardless of age to submit to a vision test when applying for the renewal of a driver's license in person or through the submission of a report by an authorized and appropriate medical professional will have a significant fiscal impact. The bill will also require funding additional positions, facilities and equipment for the first year and on a recurring basis.

The bill may also require contracted programming modifications to the Driver License Information System. DHSMV is preparing a fiscal impact estimate for HB 1337 w/CS, but the estimate was not complete as of the date of this analysis.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

   Not applicable because this bill does not appear to: require cities or counties to spend funds or take actions requiring the expenditure of funds; reduce the authority that cities or counties have to raise revenues in the aggregate; or reduce the percentage of a state tax shared with cities or counties.

2. Other:

   None.

B. RULE-MAKING AUTHORITY:

No exercise of rulemaking authority is required to implement the provisions of this bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

On **March 28, 2006** the Transportation Committee adopted a strike-all amendment to HB 1337. The amendment provided the following changes:

- Eliminated the age-based schedule for licensees,
- Provided that a driver's license expires on a licensee's 80th birthday,
- Provided for a 4-year license renewal period (with examination) for persons over 80 years of age,
- Waived renewal fees for drivers that have a license that was held for less than 4 years prior to their 80th birthday, and
- Allowed the results of a vision exam that was done up to 12 months before the renewal application to be submitted.

The committee then voted 15-0 to report the bill favorably with committee substitute.

CHAMBER ACTION

1 The Transportation Committee recommends the following:
2
3 **Council/Committee Substitute**
4 Remove the entire bill and insert:
5 A bill to be entitled
6 An act relating to driver licenses; amending s. 322.18,
7 F.S.; limiting the duration of licenses issued to certain
8 applicants; providing expiration, examination, and renewal
9 requirements for driver's licenses issued to persons over
10 a specified age; providing renewal fee waivers for certain
11 licenses; eliminating an age requirement relating to
12 vision tests; requiring a vision test for all renewals of
13 a license; providing for submission of test results by a
14 physician, ophthalmologist, or optometrist; requiring such
15 submission prior to a licensee using certain renewal
16 procedures; providing an effective date.
17
18 Be It Enacted by the Legislature of the State of Florida:
19
20 Section 1. Paragraphs (a) and (b) of subsection (2) and
21 paragraphs (a) and (b) of subsection (5) of section 322.18,
22 Florida Statutes, are amended, and paragraph (f) is added to
23 subsection (2) of that section, to read:

24 322.18 Original applications, licenses, and renewals;
25 expiration of licenses; delinquent licenses.--
26 (2) Each applicant who is entitled to the issuance of a
27 driver's license, as provided in this section, shall be issued a
28 driver's license, as follows:
29 (a) An applicant applying for an original issuance shall
30 be issued a driver's license which expires at midnight on the
31 licensee's birthday which next occurs on or after the sixth
32 anniversary of the date of issue. <u>However, a driver's license</u>
33 <u>may not be issued for a period that exceeds an applicant's 80th</u>
34 <u>birthday, except as provided in paragraph (f).</u>
35 (b) An applicant applying for a renewal issuance or
36 renewal extension shall be issued a driver's license or renewal
37 extension sticker which expires at midnight on the licensee's
38 birthday which next occurs 4 years after the month of expiration
39 of the license being renewed, except that a driver whose driving
40 record reflects no convictions for the preceding 3 years shall
41 be issued a driver's license or renewal extension sticker which
42 expires at midnight on the licensee's birthday which next occurs
43 6 years after the month of expiration of the license being
44 renewed. <u>However, a driver's license may not be issued for a</u>
45 <u>period that exceeds an applicant's 80th birthday, except as</u>
46 <u>provided in paragraph (f).</u>
47 <u>(f) Notwithstanding any other provision of this chapter,</u>
48 <u>the driver's license of any person expires at midnight on the</u>
49 <u>licensee's 80th birthday. A license issued to a person after</u>
50 <u>that person's 80th birthday shall expire at midnight on the</u>
51 <u>licensee's birthday that next occurs 4 years after the month of</u>

52 expiration of the license being renewed. A driver's license that
53 expires pursuant to this paragraph may be renewed up to 12
54 months before the 80th birthday if the applicant applying for
55 renewal passes an eye and hearing examination as provided in s.
56 322.121. Renewal fees for all driver's licenses that expire
57 pursuant to this paragraph are waived if the applicant has a
58 valid driver's license held for fewer than 4 years.
59 (5) All renewal driver's licenses may be issued after the
60 applicant licensee has been determined to be eligible by the
61 department.
62 (a) A licensee who is otherwise eligible for renewal ~~and~~
63 ~~who is over 79 years of age~~:
64 1. Must submit to and pass a vision test administered at
65 any driver's license office; or
66 2. Must, if the licensee applies for an extension by mail
67 as provided in subsection (8), ~~must~~ submit to a vision test
68 administered by a physician or ophthalmologist licensed under
69 chapter 458 or chapter 459, or an optometrist licensed under
70 chapter 463, no more than 12 months prior to the date of the
71 application for extension, must send the results of that test to
72 the department on a form obtained from the department and signed
73 by such health care practitioner, and must meet vision standards
74 that are equivalent to the standards for passing the
75 departmental vision test. The physician, ophthalmologist, or
76 optometrist may submit the results of a vision test by a
77 department-approved electronic means.
78 (b) A licensee ~~who is over 79 years of age~~ may not submit
79 an application for extension under subsection (8) by electronic

80 or telephonic means, unless the results of a vision test have
81 been electronically submitted in advance by the physician,
82 ophthalmologist, or optometrist.
83 Section 2. This act shall take effect July 1, 2006.

HB 1561

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 1561 Expert Witnesses
SPONSOR(S): Brummer and others
TIED BILLS: **IDEN./SIM. BILLS:** SB 2686

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) Health Care General Committee		Brown-Barrios	Brown-Barrios
2) Health & Families Council			
3)			
4)			
5)			

SUMMARY ANALYSIS

Currently, expert witnesses are not required to hold a Florida license or hold any Board issued certificate in order to testify in medical negligence (medical malpractice) litigation.

The bill requires an expert witness who provides testimony concerning the prevailing professional standard of care in any action for damages involving a claim of negligence against a Florida-licensed medical (allopathic) physician or osteopathic physician to be:

- A Florida-licensed medical physician or osteopathic physician or
- If licensed in another state or Canada, to hold an expert witness certificate.

The bill requires the Board of Medicine or the Board of Osteopathic Medicine to issue an expert witness certificate to any physician who:

1. is licensed to practice allopathic or osteopathic medicine in any other state or in Canada,
2. whose license is currently active and valid,
3. who completes a registration form prescribed by the board,
4. pays the application fee, and
5. has not had a previous expert witness certificate revoked by the Board of Medicine or the Board of Osteopathic Medicine.

The expert witness certificate is valid for two years. The bill authorizes the Board of Medicine and the Board of Osteopathic Medicine to adopt rules.

The bill limits a physician possessing an expert witness certificate to use the certificate solely to give a verified written medical expert opinion and to provide expert testimony concerning the prevailing professional standard of care in connection with any medical malpractice litigation pending in this state against a physician licensed in Florida.

The bill makes the act of providing misleading, deceptive, or fraudulent expert witness testimony related to the practice of medicine by a medical physician or osteopathic physician grounds for denial of a license or disciplinary action.

The bill has an estimated fiscal impact of $377,541 in FY 06/07 and $404,875 in FY 07/08.

If enacted, the bill takes effect July 1, 2006.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Provide Limited Government: The bill creates additional statutory requirements and regulations for government agencies and the public.

B. EFFECT OF PROPOSED CHANGES:

Primary effects of the bill include:

- Creation of an expert witness certificate good for two years for a medical physician or osteopathic physician licensed in another state or Canada that entitles the holder to provide verified written medical expert opinion and to provide expert testimony in medical malpractice cases.
- Limiting the admission of verified written medical expert opinion and expert testimony involving a claim of negligence against a Florida medical or osteopathic physician to physicians licensed by this state or physicians possessing an expert witness certificate.
- Granting authority to the Board of Medicine or the Board of Osteopathic Medicine to issue and revoke an expert witness certificate.
- Granting authority to the Board of Medicine or the Board of Osteopathic Medicine to deny a license or discipline a medical physician or osteopathic physician for providing misleading, deceptive, or fraudulent witness testimony related to the practice of medicine.

BACKGROUND

Medical Expert
"A Medical expert" is defined as:

> [A] person duly and regularly engaged in the practice of his or her profession who holds a health care professional degree from a university or college and who meets the requirements of an expert witness as set forth in s. 766.102.[1]

Expert Witness Requirements in a medical negligence proceeding
Florida law provides that in a medical negligence or medical malpractice[2] proceeding a person may not give expert testimony against or on behalf of the defendant concerning the prevailing professional standard of care unless that person is a licensed health care provider and meets certain requirements and conditions of health care providers for the purpose of testifying in court. There are no requirements in current law that an expert witness must have a Florida license.[3]

If the health care provider against whom or on whose behalf the testimony is offered is a specialist [4]
The expert witness must:

1. Specialize in the same specialty as the health care provider against whom or on whose behalf the testimony is offered; or specialize in a similar specialty that includes the evaluation,

[1] s. 766.202(6),F.S.
[2] s. 766.202(7),F.S.
[3] s. 766.102, F.S.
[4] s. 766.102(5)(a), F.S.

diagnosis, or treatment of the medical condition that is the subject of the claim and have prior experience treating similar patients; and

2. Have devoted professional time during the 3 years immediately preceding the date of the occurrence that is the basis for the action to:

a. The active clinical practice of, or consulting with respect to, the same or similar specialty that includes the evaluation, diagnosis, or treatment of the medical condition that is the subject of the claim and have prior experience treating similar patients;

b. Instruction of students in an accredited health professional school or accredited residency or clinical research program in the same or similar specialty; or

c. A clinical research program that is affiliated with an accredited health professional school or accredited residency or clinical research program in the same or similar specialty.

If the health care provider against whom or on whose behalf the testimony is offered is a general practitioner.[5]

The expert witness must have devoted professional time during the 5 years immediately preceding the date of the occurrence that is the basis for the action to:

1. The active clinical practice or consultation as a general practitioner;
2. The instruction of students in an accredited health professional school or accredited residency program in the general practice of medicine; or
3. A clinical research program that is affiliated with an accredited medical school or teaching hospital and that is in the general practice of medicine.

If the health care provider against whom or on whose behalf the testimony is offered is a health care provider other than a specialist or a general practitioner.[6]

The expert witness must have devoted professional time during the 3 years immediately preceding the date of the occurrence that is the basis for the action to:

1. The active clinical practice of, or consulting with respect to, the same or similar health profession as the health care provider against whom or on whose behalf the testimony is offered;
2. The instruction of students in an accredited health professional school or accredited residency program in the same or similar health profession in which the health care provider against whom or on whose behalf the testimony is offered; or
3. A clinical research program that is affiliated with an accredited medical school or teaching hospital and that is in the same or similar health profession as the health care provider against whom or on whose behalf the testimony is offered.

Other requirements and conditions for providing expert testimony.

A physician licensed under chapter 458, F.S., or chapter 459, F.S., who qualifies as an expert witness and who, by reason of active clinical practice or instruction of students, has knowledge of the applicable standard of care for nurses, nurse practitioners, certified registered nurse anesthetists, certified registered nurse midwives, physician assistants, or other medical support staff may give expert testimony in a medical negligence action with respect to the standard of care of medical support staff.[7]

In a medical negligence action against a hospital, a health care facility, or medical facility, a person may give expert testimony on the appropriate standard of care as to administrative and other nonclinical issues if the person has substantial knowledge, by virtue of his or her training and experience, concerning the standard of care among hospitals, health care facilities, or medical facilities of the same type as the hospital, health care facility, or medical facility whose acts or omissions are the subject of the testimony and which are located in the same or similar communities at the time of the alleged act giving rise to the cause of action.[8]

---

[5] s. 766.102(5)(b), F.S.
[6] s. 766.102(5)(c), F.S.
[7] s. 766.102(6), F.S.
[8] s. 766.102(7), F.S.

If a health care provider is providing evaluation, treatment, or diagnosis for a condition that is not within his or her specialty, a specialist trained in the evaluation, treatment, or diagnosis for that condition is considered a similar health care provider.[9]

In any action for damages involving a claim of negligence against a physician licensed under chapter 458, F.S., osteopathic physician licensed under chapter 459, F.S., podiatric physician licensed under chapter 461, F.S., or chiropractic physician licensed under chapter 460, F.S., providing emergency medical services in a hospital emergency department, the court must admit expert medical testimony only from physicians, osteopathic physicians, podiatric physicians, and chiropractic physicians who have had substantial professional experience within the preceding 5 years while assigned to provide emergency medical services in a hospital emergency department.[10]

Power of the trial court

The requirements and conditions delineated in law regarding who may provide testimony as an expert witness in a medical negligence proceeding does not limit the power of the trial court to disqualify or qualify an expert witness on other grounds.[11] In addition, in the Florida Evidence Code it is the court that determines preliminary questions concerning the qualification of a person to be a witness, the existence of a privilege, or the admissibility of evidence.[12]

The framework for expert testimony in Florida courts

Florida allows that if scientific, technical, or other specialized knowledge will assist the trier of fact in understanding the evidence or in determining a fact in issue, a witness qualified as an expert by knowledge, skill, experience, training, or education may testify about it in the form of an opinion; however, the opinion is admissible only if it can be applied to the evidence at trial.[13]

In *Frye v. United States* [14] the court laid the framework for how courts would treat expert opinion testimony based on novel scientific procedures. *Frye* became the federal standard for judges to apply in evaluating scientific evidence. In *Frye*, a defendant in a murder trial attempted to show his innocence by using a lie detector test that measured systolic blood pressure. The court excluded the evidence, reasoning that the lie detector test was unreliable because the scientific principle upon which it was based was not "sufficiently established to have gained general acceptance in the particular field in which it belongs." The implication is that one "expert" scientist testifying to the accuracy of the lie detector would not be enough and that a large community of scientists must accept the test in order for the judge to allow the jury to hear the evidence.

In Florida, the *Frye* general standard was adopted in the context of a lie detector test in a 1952 case.[15] Since then, all novel scientific evidence in Florida has been held up to the *Frye* standard. In 1995, the Florida Supreme Court, in *Ramirez v. State*, held that Florida will continue to use the *Frye* standard.[16] Consistent with s. 90.702, F.S., and the Florida Supreme Court's decision in *Ramirez*, the admission of expert opinion testimony concerning scientific principles is governed by the following four-step process:

> First, the trial judge must determine whether such expert testimony will assist the jury in understanding the evidence or in determining a fact at issue.
>
> Second, the trial judge must decide whether the expert's testimony is based on a scientific principle or discovery that is "sufficiently established to have gained general acceptance in the particular field in which it belongs". (*Frye* standard)

---

[9] s. 766.102(8), F.S.
[10] s. 766.102(9)(a), F.S.
[11] s. 766.102(12), F.S.
[12] s. 90.105(1), F.S.
[13] s. 90.702, F.S.
[14] Frye v. United States, 293 F. 1013 (D.C. Cir. 1923)
[15] Kaminski v. State, 63 So. 2d 339 (Fla. 1952)
[16] Ramirez v. State, 651 So. 2d 1164, 1167 (Fla. 1995)

Third, the trial judge must determine whether a particular witness is qualified as an expert to present opinion testimony on the subject at issue.

Fourth, the trial judge may then allow the expert to render an opinion on the subject of his or her expertise, and then it is up to the jury to determine the credibility of the expert's opinion, which it may either accept or reject.

These four steps are the basic framework that applies to Florida's statutory and case law.

The Practice of Medicine
Chapter 458, F.S., governs the practice of medicine (allopathic) in Florida. The chapter defines the "practice of medicine" to mean the diagnosis, treatment, operation, or prescription for any human disease, pain, injury, deformity, or other physical or mental condition.[17] The Board of Medicine is authorized to adopt rules to implement provisions of the medical practice act and discipline medical physicians.[18]

The Practice of Osteopathic Medicine
Chapter 459, F.S., also known as the osteopathic medicine practice act, governs the practice of osteopathic medicine. The chapter defines the "practice of osteopathic medicine" to mean the diagnosis, treatment, operation, or prescription for any human disease, pain, injury, deformity, or other physical or mental condition, which practice is based in part upon educational standards and requirements which emphasize the importance of the musculoskeletal structure and manipulative therapy in the maintenance and restoration of health.[19] The Board of Osteopathic Medicine has the authority to adopt rules to implement provisions of the osteopathic medicine practice act, and discipline osteopathic physicians.[20]

C. SECTION DIRECTORY:

Section 1. Creates s. 458.3175, F.S., relating to expert witness certificate.

Section 2. Creates paragraph (oo) of subsection (1) of s.458.331, F.S., relating to grounds for disciplinary action.

Section 3. Creates s. 459.0066, F.S., relating to expert witness certificate.

Section 4. Creates paragraph (qq) of subsection (1) of s. 459.015, F.S., relating to grounds for disciplinary action.

Section 5. Creates subsection (12) and renumbers existing subsection (12) of s.766.102, F.S., relating to medical negligence; standards of recovery; expert witness.

Section 6. Provides an effective date of July 1, 2006.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

The Department of Health should generate revenue as a result of the application fee required to secure an expert witness certificate.

---

[17] s 458.305(3), F.S.,
[18] ss. 458.309, and 458.331, F.S .
[19] s. 459.003, F.S.,
[20] ss. 459.005, and 459.015, F.S.

2. Expenditures: According to DOH the cost associated with this bill is as follows:

Estimated Expenditures	FY 2006/2007	FY 2007/2008 (Annualized/Recurr.)
Salaries		
1 Research Specialist (RS) II, PG 17 (BOM) (not lapsed)	$38,550	$38,550
2 RS II, PG 17 (BMS)	$57,825	$77,100
1 Information Specialist (IS) II, PG 20 (CSU)	$33,851	$45,135
2 RS I, PG 15, (BMS)	$52,758	$70,344
1 IS II, PG 20 (ISU)	$33,851	$45,135
1 Admin Asst, PG 15 (BMS)	$26,379	$35,172
Other Personal Services		
Expert Witness fees to review disciplinary cases	$20,000	$20,000
Expense		
Non-recurring expense package	$25,088	
Recurring expense package with limited travel for one RS II	$10,390	$10,390
Recurring expense package with maximum travel for two IS II	$31,514	$31,514
Recurring expense package with no travel for two RS II	$12,806	$12,806
Recurring expense	$15,585	$15,585
Operating Capital Outlay		
OCO package for new FTEs	$15,800	
Human Resource Services		
For new FTEs	$3,144	$3,144
Total Estimated Expenditures	$377,541	$404,875

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

   None

2. Expenditures:

   None

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

An expert witness who resides in a state other than Florida or in Canada would need to secure a certificate to provide expert testimony in Florida and would incur an application fee for the certificate of no greater than $50.

D. FISCAL COMMENTS:

According to DOH, because the bill creates two new regulatory programs (one in the Board of Medicine and one in the Board of Osteopathic Medicine), it necessitates additional staff to administer. DOH computed salaries at 10% above the minimum for the pay grade plus 28% for benefits and all positions were lapsed at 25% except for the Board of Medicine position.

- Two positions are needed for the Compliance Monitoring Unit in the Bureau of Management Services to handle the expected multiple requests for certification and public documents and the increased monitoring of new disciplinary actions.
- Two positions are needed in the Central Records Unit in the Bureau of Management Services due to the expected increase in the clerk's filing of documents, reporting to the Federation of State Medical Boards, public records requests (general public and state), certification of disciplinary files and orders, and certification of licensure orders and appeals processed.
- One position is required for the Federal Health Care Integrity Protection Data Bank (HIPDB) unit to handle increased federally mandated reporting of board actions.
- One position is required for the Investigative Services Unit to absorb the anticipated investigative workload.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not require counties or municipalities to spend funds or to take any action requiring the expenditure of funds. This bill does not reduce the percentage of a state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenue.

2. Other:

The bill provides authority to the Board of Medicine or the Board of Osteopathic Medicine to revoke an expert witness certificate issued by the respective boards (line 26 & 70). However, there is no provision or guidance regarding what would constitute grounds for revocation and other procedures related to this including appeals. The bill allows each board to adopt rules to implement the new requirements related to the expert witness certificate.

In contrast, the bill makes the act of providing misleading, deceptive, or fraudulent witness testimony related to the practice of medicine by a medical physician or osteopathic physician licensed in Florida grounds for denial of a license or disciplinary action. Since, by definition, the expert witness certificate is granted only to physicians not licensed in Florida, it is unclear how the current statutory framework in chapters 456, 458 and 459, F.S., relating to disciplinary action would apply, if at all.

The lack of legislative direction to the Board of Medicine or the Board of Osteopathic Medicine on revoking an expert witness certificate could be construed as "unlawful " delegation of Legislative power to the Executive. The separation-of-powers doctrine prevents the Legislature from delegating its constitutional duties making an agency the lawgiver rather than the administrator of the law. The Legislature must promulgate standards sufficient to guide administrative agencies in the performance of their duties.[21]

Amendments have been drafted to address this issue.

B. RULE-MAKING AUTHORITY:

The bill provides authority to the Florida Board of Medicine and the Board of Osteopathic Medicine to adopt rules to implement expert witness certificate requirements.

[21] See Board of Architecture v. Wasserman, 377 So.2d 653 (Fla. 1979) and Askew v. Cross Key Waterways, 372 So.2d 913 (Fla. 1978),

C. DRAFTING ISSUES OR OTHER COMMENTS:

According to DOH, the effective date of the bill, July 1, 2006, does not provide adequate time for the boards to promulgate rules, develop forms and hire staff to administer the expert witness certificate programs.

Technical drafting error on line 80. The line should read "osteopathic medicine as defined in s. 459.003(3)."

Amendments have been drafted to address these issues.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES

1 A bill to be entitled
2 An act relating to expert witnesses; creating ss. 458.3175
3 and 459.0066, F.S.; requiring the Board of Medicine and
4 the Board of Osteopathic Medicine, respectively, to issue
5 expert witness certificates to certain licensed physicians
6 under certain circumstances; providing requirements for
7 certification; providing a limitation; requiring the
8 boards to implement rules and set fees; amending ss.
9 458.331 and 459.015, F.S.; providing that certain
10 fraudulent, deceptive, or misleading expert witness
11 testimony is grounds for disciplinary action; providing
12 penalties; amending s. 766.102, F.S.; providing that
13 certain medical expert testimony is not admissible unless
14 the expert witness meets certain requirements; providing
15 an effective date.
16
17 Be It Enacted by the Legislature of the State of Florida:
18
19 Section 1. Section 458.3175, Florida Statutes, is created
20 to read:
21 458.3175 Expert witness certificate.--
22 (1) Any physician who is licensed to practice allopathic
23 medicine in any other state or in Canada, whose license is
24 currently active and valid, who completes a registration form
25 prescribed by the board, who pays the application fee, and who
26 has not had a previous expert witness certificate revoked by the
27 board shall be issued a certificate to provide expert testimony.

28 (2) A physician possessing an expert witness certificate
29 may use the certificate solely to give a verified written medical
30 expert opinion as provided in s. 766.203 and to provide expert
31 testimony concerning the prevailing professional standard of care
32 in connection with any medical negligence litigation pending in
33 this state against a physician licensed under this chapter or
34 chapter 459. The possession of an expert witness certificate
35 alone does not entitle the physician to engage in the practice of
36 medicine as defined in s. 458.305(3).
37 (3) Every application for an expert witness certificate
38 shall be approved or denied within 5 business days after receipt
39 of a completed application. Any application for a certificate
40 that is not approved or denied within the required time period is
41 considered approved. Any applicant for an expert witness
42 certificate seeking to claim certification by default shall
43 notify the board, in writing, of the intent to rely on the
44 default certification provision of this subsection.
45 (4) All licensure fees other than the initial application
46 fee, including neurological injury compensation assessments,
47 shall be waived for those persons obtaining an expert witness
48 certificate but not otherwise allowed to practice medicine in
49 this state.
50 (5) The board shall adopt rules to implement this section,
51 including rules setting the amount of the expert witness
52 certificate application fee. The application fee for the expert
53 witness certificate may not exceed $50. An expert witness
54 certificate shall expire 2 years after the date of issuance.

55 Section 2. Paragraph (oo) is added to subsection (1) of
56 section 458.331, Florida Statutes, to read:
57 458.331 Grounds for disciplinary action; action by the
58 board and department.--
59 (1) The following acts constitute grounds for denial of a
60 license or disciplinary action, as specified in s. 456.072(2):
61 (oo) Providing misleading, deceptive, or fraudulent expert
62 witness testimony related to the practice of medicine.
63 Section 3. Section 459.0066, Florida Statutes, is created
64 to read:
65 459.0066 Expert witness certificate.--
66 (1) Any physician who is licensed to practice osteopathic
67 medicine in any other state or in Canada, whose license is
68 currently active and valid, who completes a registration form
69 prescribed by the board, who pays the application fee, and who
70 has not had a previous expert witness certificate revoked by the
71 board shall be issued a certificate to provide expert testimony.
72 (2) A physician possessing an expert witness certificate
73 may use the certificate solely to give a verified written medical
74 expert opinion as provided in s. 766.203 and to provide expert
75 testimony concerning the prevailing professional standard of care
76 in connection with any medical negligence litigation pending in
77 this state against a physician licensed under this chapter or
78 chapter 458. The possession of an expert witness certificate
79 alone does not entitle the physician to engage in the practice of
80 medicine as defined in s. 458.305(3).
81 (3) Every application for an expert witness certificate
82 shall be approved or denied within 5 business days after receipt

83 of a completed application. Any application for a certificate
84 that is not approved or denied within the required time period is
85 considered approved. Any applicant for an expert witness
86 certificate seeking to claim certification by default shall
87 notify the board, in writing, of the intent to rely on the
88 default certification provision of this subsection.
89 (4) All licensure fees other than the initial application
90 fee, including neurological injury compensation assessments,
91 shall be waived for those persons obtaining an expert witness
92 certificate but not otherwise allowed to practice medicine in
93 this state.
94 (5) The board shall adopt rules to implement this section,
95 including rules setting the amount of the expert witness
96 certificate application fee. The application fee for the expert
97 witness certificate may not exceed $50. An expert witness
98 certificate shall expire 2 years after the date of issuance.
99 Section 4. Paragraph (qq) is added to subsection (1) of
100 section 459.015, Florida Statutes, to read:
101 459.015 Grounds for disciplinary action; action by the
102 board and department.--
103 (1) The following acts constitute grounds for denial of a
104 license or disciplinary action, as specified in s. 456.072(2):
105 (qq) Providing misleading, deceptive, or fraudulent expert
106 witness testimony related to the practice of medicine.
107 Section 5. Subsection (12) of section 766.102, Florida
108 Statutes, is renumbered as subsection (13), and a new subsection
109 (12) is added to that section to read:

110 766.102 Medical negligence; standards of recovery; expert
111 witness.--
112 (12) If the party against whom or on whose behalf the
113 expert testimony concerning the prevailing professional standard
114 of care is offered is a physician licensed under chapter 458 or
115 chapter 459, the expert witness must be licensed in this state
116 under chapter 458 or chapter 459 or possess an expert witness
117 certificate as provided in s. 458.3175 or s. 459.0066. Expert
118 testimony is not admissible unless the expert providing such
119 testimony is licensed by this state or possesses an expert
120 witness certificate.
121 Section 6. This act shall take effect July 1, 2006.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 01 (for drafter's use only)

Bill No. **HB 1561**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	____	

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1 Council/Committee hearing bill: Health Care General Committee
2 Representative(s) Harrell offered the following:
3
4 **Amendment**
5 On line(s) 27 after the period insert:
6 For the purpose of this section, an expert witness certificate
7 shall be considered a license as defined in s. 456.001(5) and
8 treated as a license in any applicable disciplinary action
9 pursuant to this chapter.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 02 (for drafter's use only)

Bill No. **HB 1561**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	____	

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1 Council/Committee hearing bill: Health Care General Committee
2 Representative(s) Harrell offered the following:
3
4 **Amendment**
5 On line(s) 71 after the period insert:
6 For the purpose of this section, an expert witness certificate
7 shall be considered a license as defined in s. 456.001(5) and
8 treated as a license in any applicable disciplinary action
9 pursuant to this chapter.

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 03 (for drafter's use only)

Bill No. **HB 1561**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	_____	

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1 Council/Committee hearing bill: Health Care General Committee

2 Representative(s) Harrell offered the following:

3

4 **Amendment**

5 On line(s) 121 remove "July" and insert: October

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 04 (for drafter's use only)

Bill No. **HB 1561**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	_____	

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1 Council/Committee hearing bill: Health Care General Committee
2 Representative(s) Harrell offered the following:
3
4 **Amendment**
5 Remove line(s) 80 and insert:
6 osteopathic medicine as defined in s. 459.003(3).

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 05 (for drafter's use only)

Bill No. **HB 1561**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	____	

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1 Council/Committee hearing bill: Health Care General Committee

2 Representative(s) Hays offered the following:

3

4 **Amendment**

5 On line(s) 38 and 82 remove "5" and insert: 60

04/03/2006 5:19 p.m.

h1561-HCG-0605cr

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 06 (for drafter's use only)

Bill No. **HB 1561**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	____	

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1 Council/Committee hearing bill: Health Care General Committee

2 Representative(s) Hays offered the following:

3

4 **Amendment**

5 On line(s) 53 and 97 remove "$50" and insert: $500

04/03/2006 5:22 p.m.

h1561-HCG-0606cr

HOUSE AMENDMENT FOR COUNCIL/COMMITTEE PURPOSES

Amendment No. 07 (for drafter's use only)

Bill No. **HB 1561**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	_____	

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1 Council/Committee hearing bill: Health Care General Committee
2 Representative(s) Hays offered the following:
3
4 **Amendment**
5 Between line(s) 54 and 55 insert:
6 (6) The Board of Medicine shall require an applicant to
7 list all malpractice cases in the last five years when the
8 applicant was used as an expert witness. Before the issuance of
9 the expert witness certificate, the Board shall investigate all
10 previous malpractice cases to determine if misleading or
11 fraudulent testimony was offered by the applicant.

Health Care General Committee

Tuesday, April 4, 2006
10:15 AM – 11:00 AM
306 HOB

COMMITTEE MEETING PACKET

Revised

ADDENDUM "A" (04/03/2006; 9:00 PM)

Allan G. Bense
Speaker

Gayle B. Harrell
Chair

Bill No. **HB 1027 CS**

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	_____	

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1 Council/Committee hearing bill: Health Care General
2 Representative(s) Hasner offered the following:
3
4 **Amendment (with title amendment)**
5 Remove everything after the enacting clause and insert:
6 Section 1. It is the intent of the Legislature to provide
7 funding to support grants for biomedical research in this state
8 with the anticipation that sustained funding for biomedical
9 research over a period of years will lead to an alleviation of
10 human suffering from diseases such as cancer and Alzheimer's
11 disease. It is the intent of the Legislature to dramatically
12 reduce this state's inordinately high cancer burden, reducing
13 both cancer incidence and mortality, while advancing scientific
14 endeavors in this state, making this state a world-class leader
15 in cancer research and treatment. Further, it is the intent of
16 the Legislature to address the debilitating and deadly effects
17 of Alzheimer's disease by supporting research in Alzheimer's
18 disease statewide through the awarding of research grants on a
19 competitive basis. Additionally, it is the intent of the
20 Legislature to stimulate dramatic economic development,
21 particularly in the biotechnology industry, through investment
22 in this state's biomedical research.

23 Section 2. Paragraph (h) of subsection (1) of section
24 20.435, Florida Statutes, is amended to read:
25 20.435 Department of Health; trust funds.--
26 (1) The following trust funds are hereby created, to be
27 administered by the Department of Health:
28 (h) Biomedical Research Trust Fund.
29 1. Funds to be credited to the trust fund shall consist of
30 funds deposited pursuant to ss. ~~s.~~ 215.5601 and 381.922. Funds
31 shall be used for the purposes of the William G. "Bill"
32 Bankhead, Jr., and David Coley Cancer Research Program and the
33 James and Esther King Biomedical Research Program as specified
34 in ss. 215.5602 and 288.955. The trust fund is exempt from the
35 service charges imposed by s. 215.20.
36 2. Notwithstanding the provisions of s. 216.301 and
37 pursuant to s. 216.351, any balance in the trust fund at the end
38 of any fiscal year shall remain in the trust fund at the end of
39 the year and shall be available for carrying out the purposes of
40 the trust fund. The department may invest these funds
41 independently through the Chief Financial Officer or may
42 negotiate a trust agreement with the State Board of
43 Administration for the investment management of any balance in
44 the trust fund.
45 3. Notwithstanding s. 216.301 and pursuant to s. 216.351,
46 any balance of any appropriation from the Biomedical Research
47 Trust Fund which is not disbursed but which is obligated
48 pursuant to contract or committed to be expended may be
49 certified by the Governor for up to 3 years following the
50 effective date of the original appropriation.
51 4. The trust fund shall, unless terminated sooner, be
52 terminated on July 1, 2008.

53 Section 3. Subsection (3) of section 215.5602, Florida
54 Statutes, is amended, and subsections (11) and (12) are added to
55 that section, to read:
56 215.5602 James and Esther King Biomedical Research
57 Program.--
58 (3) There is created within the Department of Health the
59 Biomedical Research Advisory Council.
60 (a) The council shall consist of 11 ~~nine~~ members,
61 including: the chief executive officer of the Florida Division
62 of the American Cancer Society, or a designee; the chief
63 executive officer of the Florida/Puerto Rico Affiliate of the
64 American Heart Association, or a designee; and the chief
65 executive officer of the American Lung Association of Florida,
66 or a designee. The ~~Governor shall appoint the~~ remaining eight
67 ~~six~~ members of the council shall be appointed~~,~~ as follows:
68 1. The Governor shall appoint four members, two members
69 with expertise in the field of biomedical research, one member
70 from a research university in the state, and one member
71 representing the general population of the state.
72 2. The President of the Senate shall appoint two members,
73 one member with expertise in the field of behavioral or social
74 research and one representative from a cancer program approved
75 by the American College of Surgeons.
76 3. The Speaker of the House of Representatives shall
77 appoint two members, one member from a professional medical
78 organization and one representative from a cancer program
79 approved by the American College of Surgeons.
80 ~~4. One member from a research university in the state.~~
81 ~~5. One member representing the general population of the~~
82 ~~state.~~
83

84 In making these ~~his or her~~ appointments, the Governor, the
85 President of the Senate, and the Speaker of the House of
86 Representatives shall select primarily, but not exclusively,
87 Floridians with biomedical and lay expertise in the general
88 areas of cancer, cardiovascular disease, stroke, and pulmonary
89 disease. The ~~Governor's~~ appointments shall be for a 3-year term
90 and shall reflect the diversity of the state's population. An
91 appointed ~~A council~~ member ~~appointed by the Governor~~ may not
92 serve more than two consecutive terms.
93 (b) The council shall adopt internal organizational
94 procedures as necessary for its efficient organization.
95 (c) The department shall provide such staff, information,
96 and other assistance as is reasonably necessary to assist the
97 council in carrying out its responsibilities.
98 (d) Members of the council shall serve without
99 compensation, but may receive reimbursement as provided in s.
100 112.061 for travel and other necessary expenses incurred in the
101 performance of their official duties.
102 (11) The council shall award grants for cancer research
103 through the William G. "Bill" Bankhead, Jr., and David Coley
104 Cancer Research Program created in s. 381.922.
105 (12) This section expires January 1, 2011. The Legislature
106 shall review the performance, the outcomes, and the financial
107 management of the James and Esther King Biomedical Research
108 Program during the 2010 Regular Session of the Legislature and
109 shall determine the most appropriate funding source and means of
110 funding the program, based on its review.
111 Section 4. All appointments to the Biomedical Research
112 Advisory Council for the James and Esther King Biomedical
113 Research Program which were not made in accordance with s.
114 215.5602, Florida Statutes, as amended by this act, shall expire

115 June 30, 2006, but such appointees may continue to serve until
116 their successors are appointed. This section shall take effect
117 upon this act becoming a law.
118 Section 5. Subsection (5) of section 381.855, Florida
119 Statutes, is amended, and subsections (6) and (7) are added to
120 that section, to read:
121 381.855 Florida Center for Universal Research to Eradicate
122 Disease.--
123 (5) There is established within the center an advisory
124 council that shall meet at least annually.
125 (a) The council shall consist of one representative from a
126 Florida not-for-profit institution engaged in basic and clinical
127 biomedical research and education which receives more than $10
128 million in annual grant funding from the National Institutes of
129 Health, to be appointed by the Secretary of Health from a
130 different institution each term, and ~~the members of the board of~~
131 ~~directors of the Florida Research Consortium and at least~~ one
132 representative from and appointed by each of the following
133 entities:
134 ~~1. The Emerging Technology Commission.~~
135 1.~~2.~~ Enterprise Florida, Inc.
136 2.~~3.~~ BioFlorida.
137 3.~~4.~~ The Biomedical Research Advisory Council.
138 4.~~5.~~ The Florida Medical Foundation.
139 5.~~6.~~ Pharmaceutical Research and Manufacturers of America.
140 ~~7. The Florida Tri-Agency Coalition on Smoking OR Health.~~
141 6.~~8.~~ The Florida Cancer Council.
142 7.~~9.~~ The American Cancer Society, Florida Division, Inc.
143 8.~~10.~~ The American Heart Association.
144 9.~~11.~~ The American Lung Association of Florida.

145 10.~~12.~~ The American Diabetes Association, South Coastal
146 Region.
147 11.~~13.~~ The Alzheimer's Association.
148 12.~~14.~~ The Epilepsy Foundation.
149 13.~~15.~~ The National Parkinson Foundation.
150 14.~~16.~~ The Florida Public Health Foundation, Inc.
151 15.~~17.~~ The Florida Research Consortium ~~Scripps Florida or~~
152 ~~the entity formed in this state by The Scripps Research~~
153 ~~Institute~~.
154 (b) Members of the council shall serve without
155 compensation, and each organization represented shall cover all
156 expenses of its representative.
157 (6) Members shall be appointed to 4-year terms of office.
158 The members of the advisory council shall annually elect a chair
159 from among the members of the advisory council. Any vacancy on
160 the advisory council shall be filled in the same manner as the
161 original appointment.
162 (7) The advisory council shall meet at least annually,
163 but may meet as often as it deems necessary to carry out its
164 duties and responsibilities. The advisory council may take
165 official action by a majority vote of the members present at any
166 meeting at which a quorum is present.
167 Section 6. All appointments to the advisory council for
168 the Florida Center for Universal Research to Eradicate Disease
169 which were not made in accordance with s. 381.855, Florida
170 Statutes, as amended by this act, shall expire June 30, 2006,
171 but such appointees may continue to serve until their successors
172 are appointed. This section shall take effect upon this act
173 becoming a law.
174 Section 7. Subsection (1) of section 381.921, Florida
175 Statutes, is amended to read:

176 381.921 Florida Cancer Council mission and duties.--The
177 council, which shall work in concert with the Florida Center for
178 Universal Research to Eradicate Disease to ensure that the goals
179 of the center are advanced, shall endeavor to dramatically
180 improve cancer research and treatment in this state through:
181 (1) Efforts to significantly expand cancer research
182 capacity in the state by:
183 (a) Identifying ways to attract new research talent and
184 attendant national grant-producing researchers to ~~Florida-based~~
185 cancer research facilities in this state;
186 (b) Implementing a peer-reviewed, competitive process to
187 identify and fund the best proposals to expand cancer research
188 institutes in this state;
189 (c) Funding through available resources for those
190 proposals that demonstrate the greatest opportunity to attract
191 federal research grants and private financial support;
192 (d) Encouraging the employment of bioinformatics in order
193 to create a cancer informatics infrastructure that enhances
194 information and resource exchange and integration through
195 researchers working in diverse disciplines, to facilitate the
196 full spectrum of cancer investigations;
197 (e) Facilitating the technical coordination, business
198 development, and support of intellectual property as it relates
199 to the advancement of cancer research; and
200 (f) Aiding in other multidisciplinary research-support
201 activities as they inure to the advancement of cancer research.
202 Section 8. Section 381.922, Florida Statutes, is created
203 to read:
204 381.922 William G. "Bill" Bankhead, Jr., and David Coley
205 Cancer Research Program.--

206 (1) The William G. "Bill" Bankhead, Jr., and David Coley
207 Cancer Research Program, which may be otherwise cited as the
208 "Bankhead-Coley Program," is created within the Department of
209 Health. The purpose of the program shall be to advance progress
210 towards cures for cancer through grants awarded through a peer-
211 reviewed, competitive process.
212 (2) The program shall provide grants for cancer research
213 to further the search for cures for cancer.
214 (a) Emphasis shall be given to the goals enumerated in s.
215 381.921, as those goals support the advancement of such cures.
216 (b) Preference may be given to grant proposals that foster
217 collaborations among institutions, researchers, and community
218 practitioners, as such proposals support the advancement of
219 cures through basic or applied research, including clinical
220 trials involving cancer patients and related networks.
221 (3)(a) Applications for funding for cancer research may be
222 submitted by any university or established research institute in
223 the state. All qualified investigators in the state, regardless
224 of institutional affiliation, shall have equal access and
225 opportunity to compete for the research funding. Collaborative
226 proposals, including those that advance the program's goals
227 enumerated in subsection (2), may be given preference. Grants
228 shall be awarded by the Secretary of Health, after consultation
229 with the Biomedical Research Advisory Council, on the basis of
230 scientific merit, as determined by an open, competitive peer-
231 review process that ensures objectivity, consistency, and high
232 quality. The following types of applications shall be considered
233 for funding:
234 1. Investigator-initiated research grants.
235 2. Institutional research grants.

236 3. Collaborative research grants, including those that
237 advance the finding of cures through basic or applied research.
238 (b) In order to ensure that all proposals for research
239 funding are appropriate and are evaluated fairly on the basis of
240 scientific merit, the Secretary of Health, in consultation with
241 the council, shall appoint a peer-review panel of independent,
242 scientifically qualified individuals to review the scientific
243 content of each proposal and establish its priority score. The
244 priority scores shall be forwarded to the council and must be
245 considered in determining which proposals shall be recommended
246 for funding.
247 (c) The council and the peer-review panel shall establish
248 and follow rigorous guidelines for ethical conduct and adhere to
249 a strict policy with regard to conflicts of interest. A member
250 of the council or panel may not participate in any discussion or
251 decision with respect to a research proposal by any firm,
252 entity, or agency with which the member is associated as a
253 member of the governing body or as an employee or with which the
254 member has entered into a contractual arrangement. Meetings of
255 the council and the peer-review panels are subject to chapter
256 119, s. 286.011, and s. 24, Art. I of the State Constitution.
257 (4) By December 15 of each year, the Department of Health
258 shall submit to the Governor, the President of the Senate, and
259 the Speaker of the House of Representatives a report indicating
260 progress towards the program's mission and making
261 recommendations that further its purpose.
262 (5) This section expires January 1, 2011. The Legislature
263 shall review the performance, the outcomes, and the financial
264 management of the William G. "Bill" Bankhead, Jr., and David
265 Coley Cancer Research Program during the 2010 Regular Session of
266 the Legislature, and shall determine the most appropriate

267 funding source and means of funding the program, based on its
268 review.
269 Section 9. 381.98 The Florida Public Health Foundation,
270 Inc.; establishment; purpose; mission; duties; board of
271 directors.--
272 (1) The Florida Public Health Foundation, Inc., referred
273 to in this section as "the corporation," is established for the
274 purpose of disseminating breakthrough findings in biomedical
275 research and promoting health awareness in this state, and
276 providing services to the Florida Department of Health.
277 (2) The corporation's mission includes disseminating
278 information about innovative biomedical research and clinical
279 trials in this state as well as making Floridians and their
280 treatment providers aware of specified diseases and conditions
281 and available methods of preventing, diagnosing, treating, and
282 curing those diseases and conditions.
283 (3) The purpose and objective of the corporation shall be
284 to operate exclusively for charitable, scientific, and
285 educational purposes; to protect and improve the health and
286 well-being of Florida's people and environment through
287 partnerships committed to program innovation, education, applied
288 research, and policy development; and to engage in charitable
289 programs dedicated to improving the health of Floridians.
290 (4) The corporation shall be established as a not-for-
291 profit entity qualifying under s. 501(c)(3) of the Internal
292 Revenue Code. The corporation may receive, hold, invest, and
293 administer property and any moneys acquired from private, local,
294 state, and federal sources, as well as technical and
295 professional income generated or derived from the mission-
296 related activities of the corporation. The corporation shall

297 have all of the powers conferred upon corporations organized
298 under chapter 617.
299 (5) The corporation's duties include procuring funds
300 necessary for accomplishing the purpose and mission of the
301 corporation. The corporation shall strive to complement,
302 supplement, and enhance the missions of the various
303 organizations, entities, and departments represented on its
304 board by serving as the lead corporation in the state for
305 promoting public health awareness.
306 (6) The affairs of the corporation shall be managed by an
307 executive director appointed by a board of directors consisting
308 of:
309 (a) The Secretary of Health or his or her designee.
310 (b) A former member of the Senate appointed by the
311 President of the Senate.
312 (c) A former member of the House of Representatives
313 appointed by the Speaker of the House of Representatives.
314 (d) A representative of the American Heart Association.
315 (e) A representative of the American Cancer Society,
316 Florida Division, Inc.
317 (f) A representative of the American Lung Association of
318 Florida.
319 (g) A representative of the American Diabetes Association,
320 South Coastal Region.
321 (h) A representative of the Alzheimer's Association.
322 (i) A representative of the Epilepsy Foundation.
323 (j) A representative of the National Parkinson Foundation.
324 (k) A representative of the March of Dimes, Florida
325 Chapter.
326 (l) A representative of the Arthritis Foundation, Florida
327 Chapter.

328 (m) A representative of the American Liver Foundation.
329 (n) A representative of the Florida Council for Behavioral
330 Healthcare, Inc.
331 (o) A representative of the Florida Alcohol and Drug Abuse
332 Association.
333 (p) A representative of Pharmaceutical Research and
334 Manufacturers of America.
335 (q) A representative of the Florida Public Health
336 Association.
337 (r) A representative of the Florida Association of County
338 Health Officers.
339 (s) A public health academician selected by the State
340 Health Officer.
341 (t) A representative of the Florida Academy of Family
342 Physicians.
343 (u) Three consumers who have demonstrated an interest in
344 protecting the public health appointed by the Florida Public
345 Health Association.
346 (7) Members of the board of directors shall serve for 2-
347 year terms and shall serve without compensation. Each
348 organization represented on the board of directors shall cover
349 the expenses of its representative.
350 (8) The corporation, in consultation with the Department
351 of Health and the Florida Center for Universal Research to
352 Eradicate Disease, shall facilitate communication between
353 biomedical researchers and health care providers each month
354 according to the health awareness schedule established by the
355 Florida Public Health Foundation, Inc., in order to ensure
356 ongoing dialogue between researchers, treatment providers, and
357 the department.

358 (9) The corporation and the Department of Health shall
359 enter into partnerships with providers of continuing education
360 for health care practitioners, including, but not limited to,
361 hospitals and state and local medical organizations, to ensure
362 that practitioners are aware of the most recent and complete
363 diagnostic and treatment tools.
364 (10) The corporation may provide personnel to the
365 Department of Health for purposes of performing duties and
366 responsibilities outlined in private and public grants received
367 by the Department of Health. Such personnel are not state
368 employees and not entitled to retirement credit and other
369 benefits provided to state employees under Chapters 110 and 112,
370 Florida Statutes. Such personnel shall perform services
371 pursuant to an agreement between the corporation and the
372 Department of Health.
373 (11) The corporation may purchase goods, services, and
374 property for use by the Department of Health. Such purchases
375 shall not be subject to the provisions of Chapters 253, 255,
376 287, Florida Statutes, nor to the control an direction of the
377 Departments of Environmental Protection or Management Services.
378 (12) The corporation shall provide an annual report
379 concerning its activities and finances to the Florida Center for
380 Universal Research to Eradicate Disease and shall provide copies
381 of the annual report to the Governor, the President of the
382 Senate, and the Speaker of the House of Representatives.
383 Section 10. Subsection (3) of section 430.41, Florida
384 Statutes, is added to read:
385 430.41 Grants and Donations Trust Fund.--
386 (1) The Grants and Donations Trust Fund is hereby created,
387 to be administered by the Department of Elderly Affairs. Funds
388 to be credited to the trust fund shall include all public and

389 private grants and donations to the department, except for
390 grants provided by the Federal Government and other earnings
391 that are deposited into the Operations and Maintenance Trust
392 Fund of the department. Funds from the Grants and Donations
393 Trust Fund shall be used to fulfill agreements made with
394 grantors and contributors and such other purposes as may be
395 appropriate and shall only be expended pursuant to legislative
396 appropriation or an approved amendment to the department's
397 operating budget pursuant to the provisions of chapter 216.
398 (2) Notwithstanding the provisions of s. 216.301 and
399 pursuant to s. 216.351, any balance in the trust fund at the end
400 of any fiscal year shall remain in the trust fund and shall be
401 available for carrying out the purposes of the trust fund.
402 (3) Notwithstanding s. 216.301 and pursuant to s. 216.351,
403 any balance of any general revenue appropriation to the Grants
404 and Donations Trust Fund which is not disbursed but which is
405 obligated pursuant to contract or committed to be expended may
406 be certified by the Governor for up to 3 years following the
407 effective date of the original appropriation.
408 Section 11. Subsection (1) of section 561.121, Florida
409 Statutes, is amended to read:
410 561.121 Deposit of revenue.--
411 (1) All state funds collected pursuant to ss. 563.05,
412 564.06, and 565.12 shall be paid into the State Treasury and
413 disbursed in the following manner:
414 (a)1. Two percent of monthly collections of the excise
415 taxes on alcoholic beverages established in ss. 563.05, 564.06,
416 and 565.12 shall be deposited into the Alcoholic Beverage and
417 Tobacco Trust Fund to meet the division's appropriation for the
418 state fiscal year.

419 ~~2. Beginning July 1, 2004, there is annually distributed~~
420 ~~$15 million to the Grants and Donations Trust Fund within the~~
421 ~~Department of Elderly Affairs, and these funds are annually~~
422 ~~appropriated to support a contract with the Johnnie B. Byrd,~~
423 ~~Sr., Alzheimer's Center and Research Institute at the University~~
424 ~~of South Florida for the purposes of conducting research,~~
425 ~~developing and operating integrated data projects, and providing~~
426 ~~assistance to memory disorder clinics as established in s.~~
427 ~~430.502.~~
428 ~~3. Beginning July 1, 2004, there is annually distributed~~
429 ~~$6 million to the Biomedical Research Trust Fund within the~~
430 ~~Department of Health, and these funds are annually appropriated~~
431 ~~to the James and Esther King Biomedical Research Program. From~~
432 ~~these funds, up to $250,000 shall be available annually for the~~
433 ~~operating costs of the Florida Center for Universal Research to~~
434 ~~Eradicate Disease.~~
435 4. ~~Beginning July 1, 2004, there is annually distributed~~
436 ~~$9 million to be paid by warrant drawn by the Chief Financial~~
437 ~~Officer upon the State Treasury to Florida State University for~~
438 ~~the School of Chiropractic Medicine. Notwithstanding the~~
439 ~~provisions of chapter 216, until the School of Chiropractic~~
440 ~~Medicine is completely staffed and fully operational, these~~
441 ~~funds may be used for any purpose by the university.~~
442 (b) The remainder of the funds collected pursuant to ss.
443 563.05, 564.06, and 565.12 ~~collection~~ shall be credited to the
444 General Revenue Fund.
445 Section 12. Subsections (2) and (6) of section 1004.445,
446 Florida Statutes, are amended, present subsections (8), (9), and
447 (10) are renumbered as subsections (9), (10), and (11),
448 respectively, and new subsections (8) and (12) are added to that
449 section, to read:

450 1004.445 Johnnie B. Byrd, Sr., Alzheimer's Center and
451 Research Institute.--
452 (2)(a) The State Board of Education shall enter into an
453 agreement for the utilization of the facilities on the campus of
454 the University of South Florida to be known as the Johnnie B.
455 Byrd, Sr., Alzheimer's Center and Research Institute, including
456 all furnishings, equipment, and other chattels used in the
457 operation of those facilities, with a Florida not-for-profit
458 corporation organized solely for the purpose of governing and
459 operating the Johnnie B. Byrd, Sr., Alzheimer's Center and
460 Research Institute. This not-for-profit corporation, acting as
461 an instrumentality of the state, shall govern and operate the
462 Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute
463 in accordance with the terms of the agreement between the State
464 Board of Education and the not-for-profit corporation. The not-
465 for-profit corporation may, with the prior approval of the State
466 Board of Education, create either for-profit or not-for-profit
467 corporate subsidiaries, or both, to fulfill its mission. The
468 not-for-profit corporation and its subsidiaries are authorized
469 to receive, hold, invest, and administer property and any moneys
470 acquired from private, local, state, and federal sources, as
471 well as technical and professional income generated or derived
472 from practice activities of the institute, for the benefit of
473 the institute and the fulfillment of its mission.
474 (b)~~1.~~ The affairs of the not-for-profit corporation shall
475 be managed by a board of directors who shall serve without
476 compensation. The board of directors shall consist of the
477 President of the University of South Florida and the chair of
478 the State Board of Education, or their designees, <u>five</u> ~~5~~
479 representatives of the state universities, and <u>nine</u> ~~no fewer~~
480 ~~than 9 nor more than 14~~ representatives of the public who are

481 neither medical doctors nor state employees. Each director who
482 is a representative of a state university or of the public shall
483 be appointed to serve a term of 3 years. The chair of the board
484 of directors shall be selected by a majority vote of the
485 directors. Each director shall have only one vote.
486 ~~2. The initial board of directors shall consist of the~~
487 ~~President of the University of South Florida and the chair of~~
488 ~~the State Board of Education, or their designees; the~~ Of the
489 five university representatives, ~~of whom~~ one shall be appointed
490 by the Governor, two by the President of the Senate, and two by
491 the Speaker of the House of Representatives; and of the nine
492 public representatives, ~~of whom~~ three shall be appointed by the
493 Governor, three by the President of the Senate, and three by the
494 Speaker of the House of Representatives. ~~Upon the expiration of~~
495 ~~the terms of the initial appointed directors, all directors~~
496 ~~subject to 3-year terms of office under this paragraph shall be~~
497 ~~appointed by a majority vote of the directors and the board may~~
498 ~~be expanded to include additional public representative~~
499 ~~directors up to the maximum number allowed.~~ Any vacancy in
500 office shall be filled in the same manner as the original
501 appointment ~~for the remainder of the term by majority vote of~~
502 ~~the directors~~. Any director may be reappointed.
503 (6) The institute shall be administered by a chief
504 executive officer, who shall be appointed by and serve at the
505 pleasure of the board of directors of the not-for-profit
506 corporation, and who shall exercise the following powers and
507 duties, subject to the approval of the board of directors:
508 (a) The chief executive officer shall establish programs
509 that fulfill the mission of the institute in research,
510 education, treatment, prevention, and early detection of
511 Alzheimer's disease; however, the chief executive officer may

512 not establish academic programs for which academic credit is
513 awarded and which culminate in the conferring of a degree,
514 without prior approval of the State Board of Education.
515 (b) The chief executive officer shall have control over
516 the budget and the moneys appropriated or donated to the
517 institute from private, local, state, and federal sources, as
518 well as technical and professional income generated or derived
519 from practice activities of the institute. However, professional
520 income generated by university faculty from practice activities
521 at the institute shall be shared between the institute and the
522 university as determined by the chief executive officer and the
523 appropriate university dean or vice president.
524 (c) The chief executive officer shall appoint
525 representatives of the institute to carry out the research,
526 patient care, and educational activities of the institute and
527 establish the compensation, benefits, and terms of service of
528 such representatives. Representatives of the institute shall be
529 eligible to hold concurrent appointments at affiliated academic
530 institutions. University faculty shall be eligible to hold
531 concurrent appointments at the institute.
532 (d) The chief executive officer shall have control over
533 the use and assignment of space and equipment within the
534 facilities.
535 (e) The chief executive officer shall have the power to
536 create the administrative structure necessary to carry out the
537 mission of the institute.
538 (f) The chief executive officer shall have a reporting
539 relationship to the Commissioner of Education.
540 (g) The chief executive officer shall provide a copy of
541 the institute's annual report to the Governor and Cabinet, the
542 President of the Senate, the Speaker of the House of

543 Representatives, and the chair of the State Board of Education.
544 The annual report shall describe the expenditure of all funds
545 and shall provide information regarding research that has been
546 conducted or funded by the center, as well as the expected and
547 actual results of such research.
548 (h) By August 1 of each year, the chief executive officer
549 shall develop and submit to the Governor and Cabinet, the
550 President of the Senate, the Speaker of the House of
551 Representatives, and the chair of the State Board of Education
552 an annual operating budget detailing the planned use of state,
553 federal, and private funds for the fiscal year.
554 (8)(a) Applications for Alzheimer's disease research
555 funding may be submitted from any university or established
556 research institute in the state. All qualified investigators in
557 the state, regardless of institutional affiliation, shall have
558 equal access and opportunity to compete for the research
559 funding. Grants shall be awarded by the board of directors of
560 the not-for-profit corporation on the basis of scientific merit,
561 as determined by an open, competitive peer-review process that
562 ensures objectivity, consistency, and high quality. The
563 following types of applications shall be considered for funding:
564 1. Investigator-initiated research grants.
565 2. Institutional research grants.
566 3. Collaborative research grants, including those that
567 advance the finding of cures through basic or applied research.
568 (b) Preference may be given to grant proposals that foster
569 collaboration among institutions, researchers and community
570 practitioners as such proposals support the advancement of cures
571 through basic or applied research, including clinical trials
572 involving Alzheimer's patients and related networks.

573 (c) To ensure that all proposals for research funding are
574 appropriate and are evaluated fairly on the basis of scientific
575 merit, the board of directors of the not-for-profit corporation,
576 in consultation with the council of scientific advisors, shall
577 appoint a peer-review panel of independent, scientifically
578 qualified individuals to review the scientific content of each
579 proposal and establish its scientific priority score. The
580 priority scores shall be forwarded to the council and must be
581 considered in determining which proposals shall be recommended
582 for funding.
583 (c) The council of scientific advisors and the peer-
584 review panel shall establish and follow rigorous guidelines for
585 ethical conduct and adhere to a strict policy with regard to
586 conflict of interest. All employees, members of the board of
587 directors, and affiliates of the not-for-profit corporation
588 shall follow the same rigorous guidelines for ethical conduct
589 and shall adhere to the same strict policy with regard to
590 conflict of interest. A member of the council or panel may not
591 participate in any discussion or decision with respect to a
592 research proposal by any firm, entity, or agency with which the
593 member is associated as a member of the governing body or as an
594 employee or with which the member has entered into a contractual
595 arrangement. Meetings of the council and the peer-review panels
596 are subject to chapter 119, s. 286.011, and s. 24, Art. I of the
597 State Constitution.
598 (12) This section expires January 1, 2011. The
599 Legislature shall review the performance, the outcomes, and the
600 financial management of the Johnnie B. Byrd, Sr., Alzheimer's
601 Center and Research Institute during the 2010 Regular Session of
602 the Legislature, and shall determine the most appropriate

603 funding source and means of funding the center and institute,
604 based on its review.
605 Section 13. All appointments to the board of directors of
606 the not-for-profit corporation for the Johnnie B. Byrd, Sr.,
607 Alzheimer's Center and Research Institute that were not made in
608 accordance with s. 1004.445, Florida Statutes, as amended by
609 this act, shall expire June 30, 2006, but such appointees may
610 continue to serve until their successors are appointed. This
611 section shall take effect upon this act becoming a law.
612 Section 14. (1) The sum of $6 million is appropriated
613 from recurring general revenue funds to the Biomedical Research
614 Trust Fund in the Department of Health for fiscal year 2006-2007
615 for purposes of the James and Esther King Biomedical Research
616 Program pursuant to s. 215.5602, Florida Statutes. From these
617 funds up to $250,000 shall be available for operating costs of
618 the Florida Center for Universal Research to Eradicate Disease.
619 (2)The sum of $9 million is appropriated from recurring
620 general revenue funds to the Biomedical Research Trust Fund
621 within the Department of Health for purposes of the William G.
622 "Bill" Bankhead, Jr., and David Coley Cancer Research Program
623 for the 2006-2007 fiscal year, and shall be distributed pursuant
624 to s. 381.922, Florida Statutes, to provide grants to
625 researchers seeking cures for cancer, with emphasis given to the
626 goals enumerated in s. 381.921, Florida Statutes. From the
627 total funds appropriated, an amount of up to 10 percent may be
628 used for administrative expenses.
629 (3)The sum of $15 million is appropriated from recurring
630 general revenue funds to the Grants and Donations Trust Fund
631 within the Department of Elderly Affairs for the Johnnie B.
632 Byrd, Sr., Alzheimer's Center and Research Institute at the
633 University of South Florida for fiscal year 2006-2007 for the

634 purposes of conducting research, providing grants to
635 researchers, developing and operating integrated data projects,
636 and providing assistance to memory disorder clinics as provided
637 under s. 430.502, Florida Statutes. These funds may not be used
638 for any other purpose. Not less than 80 percent of these funds
639 shall be distributed by the center as institutional research
640 grants, investigator-initiated research grants or providing
641 assistance to statutorily-designated memory disorder clinics.
642 Section 15. Except as otherwise expressly provided in this
643 act and except for this section, which shall take effect upon
644 this act becoming a law, this act shall take effect July 1,
645 2006.
646
647
648 ========== T I T L E A M E N D M E N T ==========
649 Remove the entire title and insert:
650 A bill to be entitled
651 An act relating to biomedical research; providing legislative
652 intent; amending s. 20.435, F.S.; authorizing the use of funds
653 in the Biomedical Research Trust Fund for the purposes of the
654 William G. "Bill" Bankhead, Jr., and David Coley Cancer Research
655 Program; amending s. 215.5602, F.S.; revising the membership and
656 the method for appointing members to the Biomedical Research
657 Advisory Council; requiring the council to award grants for
658 cancer research through the William G. "Bill" Bankhead, Jr., and
659 David Coley Cancer Research Program; providing for the repeal of
660 s. 215.5602, F.S.; requiring the Legislature to review the
661 program prior to the repeal; providing for transition to new
662 appointments; amending s. 381.855, F.S.; revising the membership
663 of the advisory council for the Florida Center for Universal
664 Research to Eradicate Disease; providing for terms of office and

665 the filling of vacancies; providing for officers, meetings, and
666 procedures; providing for transition to new appointments;
667 amending s. 381.921, F.S.; revising a goal of the Florida Cancer
668 Council; creating s. 381.922, F.S.; establishing the William G.
669 "Bill" Bankhead, Jr., and David Coley Cancer Research Program
670 within the Department of Health; providing the purpose of the
671 program; requiring the program to provide grants for cancer
672 research; providing procedures for awarding cancer research
673 grants; providing for peer-review panels; providing requirements
674 with respect to ethical conduct and conflicts of interest;
675 providing for public records and meetings; requiring an annual
676 report; authorizing the Legislature to annually appropriate
677 funds for the William G. "Bill" Bankhead, Jr., and David Coley
678 Cancer Research Program; providing for the repeal of s. 381.922,
679 F.S.; requiring the Legislature to review the program prior to
680 the repeal; amending s. 381.98, F.S., regarding the
681 establishment purpose mission and duties of the Florida Public
682 Health Foundation, Inc.; amending s. 430.41, F.S., creating s
683 420.41(3), F.S.; Grants and Donations Trust Fund; amending s.
684 561.121, F.S.; redistributing certain funds collected from taxes
685 on alcoholic beverages; amending s. 1004.445, F.S.; revising the
686 method of appointing and filling vacancies on the board of
687 directors of the Johnnie B. Byrd, Sr., Alzheimer's Center and
688 Research Institute; requiring certain information in the annual
689 report; requiring an annual operating budget; providing
690 procedures for awarding of Alzheimer's disease research grants;
691 providing for peer-review panels; providing requirements with
692 respect to ethical conduct and conflicts of interest; providing
693 for public records and meetings; providing for the repeal of s.
694 1004.445, F.S.; requiring the Legislature to review the center
695 and institute prior to the repeal; providing for transition to

696 new appointments; providing an appropriation; providing
697 effective dates.

Health Care General Committee

Tuesday, April 4, 2006
10:15 AM – 11:00 AM
306 HOB

COMMITTEE MEETING PACKET

Revised

ADDENDUM "B" (04/04/2006; 8:15 AM)

Allan G. Bense
Speaker

Gayle B. Harrell
Chair

COUNCIL/COMMITTEE ACTION

ADOPTED	__	(Y/N)
ADOPTED AS AMENDED	__	(Y/N)
ADOPTED W/O OBJECTION	__	(Y/N)
FAILED TO ADOPT	__	(Y/N)
WITHDRAWN	__	(Y/N)
OTHER	____	

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1 Council/Committee hearing bill: Health Care General Committee
2 Representative(s) Glorioso offered the following:
3
4 **Amendment (with directory and title amendments)**
5 Remove line(s) 348 - 534 and insert:
6 Section 10. Subsection (2), and subsection (6) of section
7 1004.445, Florida Statutes, are amended, and a new subsection
8 (11) is added to read:
9 1004.445 Johnnie B. Byrd, Sr., Alzheimer's Center and
10 Research Institute.--
11 (2)(a) The State Board of Education shall enter into an
12 agreement for the utilization of the facilities on the campus of
13 the University of South Florida to be known as the Johnnie B.
14 Byrd, Sr., Alzheimer's Center and Research Institute, including
15 all furnishings, equipment, and other chattels used in the
16 operation of those facilities, with a Florida not-for-profit
17 corporation organized solely for the purpose of governing and
18 operating the Johnnie B. Byrd, Sr., Alzheimer's Center and
19 Research Institute. This not-for-profit corporation, acting as
20 an instrumentality of the state, shall govern and operate the
21 Johnnie B. Byrd, Sr., Alzheimer's Center and Research Institute

22 in accordance with the terms of the agreement between the State
23 Board of Education and the not-for-profit corporation. The not-
24 for-profit corporation may, with the prior approval of the State
25 Board of Education, create either for-profit or not-for-profit
26 corporate subsidiaries, or both, to fulfill its mission. The
27 not-for-profit corporation and its subsidiaries are authorized
28 to receive, hold, invest, and administer property and any moneys
29 acquired from private, local, state, and federal sources, as
30 well as technical and professional income generated or derived
31 from practice activities of the institute, for the benefit of
32 the institute and the fulfillment of its mission.
33 (b)1. The affairs of the not-for-profit corporation shall
34 be managed by a board of directors who shall serve without
35 compensation. The board of directors shall consist of the
36 President of the University of South Florida and the chair of
37 the State Board of Education, or their designees, <u>five</u> ~~5~~
38 representatives of the state universities, and no fewer than
39 <u>nine</u> ~~9~~ nor more than 14 representatives of the public who are
40 neither medical doctors nor state employees. Each director who
41 is a representative of a state university or of the public shall
42 be appointed to serve a term of 3 years. The chair of the board
43 of directors shall be selected by a majority vote of the
44 directors. Each director shall have only one vote.
45 2. The initial board of directors shall consist of the
46 President of the University of South Florida and the chair of
47 the State Board of Education, or their designees; the five
48 university representatives, of whom one shall be appointed by
49 the Governor, two by the President of the Senate, and two by the
50 Speaker of the House of Representatives; and <u>of the</u> nine public
51 representatives, ~~of whom~~ three shall be appointed by the

52 Governor, three by the President of the Senate, and three by the
53 Speaker of the House of Representatives. Upon the expiration of
54 the terms of the initial appointed directors, all directors
55 subject to 3-year terms of office under this paragraph shall be
56 appointed by a majority vote of the directors and the board may
57 be expanded to include additional public representative
58 directors up to the maximum number allowed. Any vacancy in
59 office shall be filled for the remainder of the term by majority
60 vote of the directors. Any director may be reappointed.
61 (6) The institute shall be administered by a chief
62 executive officer, who shall be appointed by and serve at the
63 pleasure of the board of directors of the not-for-profit
64 corporation, and who shall exercise the following powers and
65 duties, subject to the approval of the board of directors:
66 (a) The chief executive officer shall establish programs
67 that fulfill the mission of the institute in research,
68 education, treatment, prevention, and early detection of
69 Alzheimer's disease; however, the chief executive officer may
70 not establish academic programs for which academic credit is
71 awarded and which culminate in the conferring of a degree,
72 without prior approval of the State Board of Education.
73 (b) The chief executive officer shall have control over
74 the budget and the moneys appropriated or donated to the
75 institute from private, local, state, and federal sources, as
76 well as technical and professional income generated or derived
77 from practice activities of the institute. However, professional
78 income generated by university faculty from practice activities
79 at the institute shall be shared between the institute and the
80 university as determined by the chief executive officer and the
81 appropriate university dean or vice president.

82 (c) The chief executive officer shall appoint
83 representatives of the institute to carry out the research,
84 patient care, and educational activities of the institute and
85 establish the compensation, benefits, and terms of service of
86 such representatives. Representatives of the institute shall be
87 eligible to hold concurrent appointments at affiliated academic
88 institutions. University faculty shall be eligible to hold
89 concurrent appointments at the institute.
90 (d) The chief executive officer shall have control over
91 the use and assignment of space and equipment within the
92 facilities.
93 (e) The chief executive officer shall have the power to
94 create the administrative structure necessary to carry out the
95 mission of the institute.
96 (f) The chief executive officer shall have a reporting
97 relationship to the Commissioner of Education.
98 (g) The chief executive officer shall provide a copy of
99 the institute's annual report to the Governor and Cabinet, the
100 President of the Senate, the Speaker of the House of
101 Representatives, and the chair of the State Board of Education.
102 The annual report shall describe the expenditure of all
103 appropriated funds and shall provide information regarding
104 research that has been conducted or funded by the center, as
105 well as the expected and actual results of such research.
106 (h) To facilitate Legislative oversight and to establish
107 the highest level of accountability for the investment of public
108 funds dedicated to Alzheimer's disease related research, the
109 Institute shall adopt standards of ethical conduct as recognized
110 in the scientific community, and shall adopt and implement
111 policies, procedures, and accountability standards related to

112 conflict-of-interest, confidentiality and the decision making
113 process for the awarding of research grants. All grants awarded
114 by the institute shall be evaluated by a panel of expert
115 scientific peer reviewers who are not engaged in research in the
116 state of Florida.
117 (11) Beginning in July 1, 2006, continuing through June
118 30, 2009, the Legislature shall annually appropriate funds to
119 the Johnnie B. Byrd, Sr., Alzheimer's Center and Research
120 Institute at the University of South Florida for the purposes of
121 this section and for developing and operating integrated data
122 projects, and providing assistance to the statutorily-designated
123 Memory Disorder Clinics. Beginning July 1, 2009,the Legislature
124 shall review the work of the Institute and may appropriate funds
125 for the purposes provided in this section.
126 Section 11. (1) The sum of $6 million is appropriated
127 from the General Revenue Fund to the Biomedical Research Trust
128 Fund in the Department of Health for fiscal year 2006-2007 for
129 purposes of the James and Esther King Biomedical Research
130 Program pursuant to s. 215.5602, Florida Statutes. From these
131 funds up to $250,000 shall be available for the operating costs
132 of the Florida Center for Universal Research to Eradicate
133 Disease.
134 (2) The sum of $9 million is appropriated from the General
135 Revenue Fund to the Biomedical Research Trust Fund within the
136 Department of Health for purposes of the William G. "Bill"
137 Bankhead, Jr., and David Coley Cancer Research Program for the
138 2006-2007 fiscal year, and shall be distributed pursuant to s.
139 381.922, Florida Statutes, to provide grants to researchers
140 seeking cures for cancer, with emphasis given to the goals
141 enumerated in s. 381.921, Florida Statutes. From the total funds

142 appropriated, an amount of up to 10 percent may be used for
143 administrative expenses.
144 (3) The sum of $15 million is appropriated from the
145 General Revenue Fund to the Grants and Donations Trust Fund
146 within the Department of Elderly Affairs for the Johnnie B.
147 Byrd, Sr., Alzheimer's Center and Research Institute at the
148 University of South Florida for fiscal year 2006-2007 for the
149 purposes provided in s. 1004.445, F.S., and for conducting and
150 supporting research, developing and operating integrated data
151 projects, providing assistance to memory disorder clinics as
152 provided under s. 430.502, Florida Statutes, and for the
153 operation of laboratories. Not less than 80 percent of these
154 funds shall be expended for these purposes.
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