Following is a summary of the priority issues impacting BioFlorida. This update accompanies the detailed BioFlorida legislative tracking report that includes over 100 bills impacting the life sciences industry.

Legislators began filing their priority bills in late summer, and the deadline for filing member bills was the first day of the legislative session, January 9, 2018. The following summarizes the priority issues impacting BioFlorida to date. Throughout the next 60 days we will continue to keep you updated on these important issues.

**Policy Issues**

**Biomedical Research**
BioFlorida supports the state’s investment in biomedical research that can lead to breakthrough treatments and expand the industry and Florida’s economy. In the fall, the agencies submitted their legislative budget recommendations and in November, Governor Scott recommended the same level of funding as last year for these priorities. This week, subcommittees rolled out initial budget presentations and there is level funding of biomedical research. This is merely a starting point, both the House and Senate must pass a budget out of their respective chambers then they will move to conference to create one state budget.

**Patient Access**
There are several bills BioFlorida is monitoring that address patient access issues, BioFlorida is monitoring these bills as potential vehicles for price transparency language. **HB 313** by Rep. Michael Grant (R-Port Charlotte) offers incentives for physicians to provide free care to low-income individuals. The bill waives the renewal fees of physicians who provide at least 160 hours of pro bono medical services to certain populations within the biennial licensure renewal period. Demonstration of 120 hours gains an exemption from the 40 hours of continuing medical education required for license renewal. The bill also authorizes both the Board of Medicine and the Board of Osteopathic Medicine to issue a limited number of restricted licenses to physicians not licensed in Florida who contract to practice for 36 months solely in the employ of the state, a federally funded community health center, a migrant health center, a free clinic, or a health provider in a health professional shortage area or medically underserved area. The bill also creates a registration process for retired physicians to provide volunteer health care services if the physician held an active licensed status to practice and maintained such license in good standing in this state or in another jurisdiction of the U. S. or Canada for at least 20 years under certain conditions. Having passed out of all of its committees, the House bill has been scheduled for consideration by the full House on January 31st. No Senate companion measure has been filed.

Institute for Commercialization of Public Research
BioFlorida supports the FICPR which funds start-ups and helps investors and entrepreneurs identify new investment opportunities based on technologies developed. This year, there are two proposals to move the FICPR further in a direction of privatization, and thereby eliminating the recurring necessity for public funding. Both SB 1314 and HB 1181 have been referred to committees but not yet heard.

Link to SB 1314: https://www.flсенate.gov/Session/Bill/2018/01314
Link to HB 1181: https://www.flсенate.gov/Session/Bill/2018/01181

Opioid Prescribing
SB 8 by Senator Lizbeth Benacquisto (R-Fort Myers) and HB 21 by Rep. Jim Boyd (R-Bradenton) are aimed at reducing opioid deaths and addiction in Florida. The legislation restricts Schedule II controlled opioids to a 3-day supply but would allow physicians to prescribe up to a 7-day supply in certain situations. Under the legislation, health care practitioners would also be required to consult the Prescription Drug Monitoring Program (PDMP) before writing prescriptions for controlled substances. Under current law, doctors can access the database but are not required to use it. Lastly, the bills require physicians to complete a board-approved 2-hour mandatory education course on prescribing controlled substances as part of biennial renewal of their licenses. On January 22nd, HB 21 is passed the House Appropriations Committee by a vote of 19 to 0. The House bill has one final hearing remaining in the Health and Human Services Committee. On January 24th, the Senate bill passed the Appropriations Committee by a vote of 19 to 0 and is now in its final committee stop, the Rules Committee. The Senate bill also contains language that restricts Medicaid managed care plans and health insurers from requiring prior authorization or step therapy or imposing any other conditions as a prerequisite to receiving medication assisted treatment (MAT) services.

Link to SB 8: http://www.flсенate.gov/Session/Bill/2018/8

Telehealth
The amended version of SB 280 by Senator Aaron Bean (R-Fernandina Beach) establishes practice standards for telehealth health care services, addresses the prescribing of controlled substances and ordering of medical marijuana through telehealth, and prescribes recordkeeping and patient consent. Telehealth is the delivery of health care services using telecommunication technologies, which allows licensed practitioners in one location to diagnose and treat patients at a different location. The Senate version is slated to be heard in the Health Policy Committee on January 30th. The companion measure, HB 793 by Rep. Ralph Massullo (R-Lecanto), has not been heard by committees.

Link to SB 280: http://www.flсенate.gov/Session/Bill/2018/280
Link to HB 793: http://www.flсенate.gov/Session/Bill/2018/793
Tax Incentives
Single-subject tax relief concepts have been considered in both chambers, but it is too early for definitive decisions about tax package totals or components. While the appropriations process began this week with both chambers rolling out subcommittee budget recommendations, the total allocation for the tax package has yet to be released. On the House side, Ways and Means Chair Paul Renner (R—Palm Coast) and his committee heard a workshop on eleven tax bills, including HB 939 which would further lower the business rent tax to 5%, (last year’s tax package reduced it from 6 percent to 5.8 percent). These bills are likely concepts to be included in the larger tax relief package; however, the Chair did not tip his hand as to what components will eventually be in the tax proposal. Similarly, the Senate Finance and Tax Subcommittee has not yet made decisions on components. Additionally, the research and development tax credit has not been evaluated by either chamber. We anticipate that given this year’s budget forecast, a slight decrease in the business rent tax is possible but it will be a very lean tax relief package.

This week, the subcommittee chairs published their draft budgets and this will begin the chambers’ independent budget crafting. These budgets must be heard through the respective full Appropriations Committees and then be passed off the floor. All of the current budget drafts are starting points and will continue to change at each level of review. We will continue to keep BioFlorida members updated on the priorities as the budget process moves forward.

Fail First
SB 98 by Senator Greg Stuebe (R-Sarasota) and HB 199 by Rep. Shawn Harrison (R-Tampa) require a health insurer to make current prior authorization requirements, restrictions, and forms accessible. The legislation specifies the requirements for a health insurer that implements a new prior authorization requirement or that amends an existing requirement or restriction and requires a plan to publish on the plan’s website and provide to an insured a written procedure for requesting a protocol exception. The bills also provide timeframes for when an insurance company must deny or authorize the prior authorization request and define an “urgent care situation” to clarify that, not just a treating physician, but a PA or ARNP, could also determine whether a health situation is urgent. HB 199 was amended to only prohibit step therapy protocols that have been completed previously. On January 24th, SB 98 was heard on the Senate floor with a vote of final passage of the measure likely next week. The Senate agreed to an amendment sponsored by Senator Gary Farmer (D-Fort Lauderdale) that would require insurers to grant exceptions to any “step therapy” requirements if the medical treatment being recommended is an opioid and the request for an exception is for a non-opioid prescription drug or for treatment with a likelihood of similar or better results. The House companion bill has two committee hearings remaining.

Link to HB 199: http://www.flsenate.gov/Session/Bill/2018/199

In addition to these issues and budget items, BioFlorida is monitoring approximately 100 pieces of legislation on behalf of its members. More information will be forthcoming on budget-related
issues as the budgeting process begins in the few weeks. The 2018BioFlorida Government Affairs Priorities can be found here, and a complete legislative tracking list is attached.

If there is anyone who is interested in joining the BioFlorida Government Relations Committee please email admin@bioflorida.com. The Government Relations Committee helps address the legislative priorities and goals of BioFlorida and also formulates advocacy positions in support or opposition of proposed legislation.

*Don’t forget to mark your calendar for these upcoming Government Affairs meetings!*

*All calls will use: 641-715-3580 access code 617-363*

- **February 23 (Friday) 2pm EST—Mid-Session Update Call**
- **March 12 (Monday) 2pm EST—Legislative Wrap Up Call**
- **July 9 (Monday) 2pm EST—Federal Update**
- **October 14-16, 2018 BioFlorida Annual Conference, The Westin Fort Lauderdale**

We hope this brief legislative update is helpful. If you have any questions about specific bills or the budget process, please email Alli Liby-Schoonover at Allison.LibySchoonover@metzlaw.com.