



2024 Legislative Agenda

The FMA is committed to helping physicians practice medicine by strengthening the physician workforce, increasing reimbursement rates, eliminating practice burdens, and protecting the practice of medicine from unqualified providers. The issues listed below are those that the FMA believes will occupy the majority of our lobbying efforts. However, the Legislative Session is a fluid process and unforeseen events may develop. The FMA consistently communicates with legislative leadership throughout session to ensure that only those bills that positively affect physicians, patients, and the practice of medicine make it across the finish line.

Physician Medicaid to Medicare Rate Increase

In the most significant payment increase for Florida physicians in over a decade, the FMA secured \$76 million during the 2023 Legislative Session to increase reimbursement rates to, at a minimum, the Medicare level for physicians who provide care to Medicaid patients under the age of 21, effective October 1, 2023. In order to continue increasing access to high-quality care, the FMA is working to expand the rate increase to include physicians who render medically necessary services to any Medicaid recipient, regardless of age.

Medical Student Loan Forgiveness – FRAME Program

Due to the overwhelming success of the Florida Reimbursement Assistance for Medical Education (FRAME) Program, the FMA was able to secure and increase the program's recurring funding from \$6 million to \$16 million for Fiscal Years 2022-2023 and 2023-2024. The FRAME Program assists eligible healthcare practitioners, including physicians, with the repayment of medical education loans. Physicians and residents practicing primary care in rural areas are eligible for up to \$20,000 per year in medical education reimbursement. The FMA is once again advocating to increase the program's recurring funding and increase the award amount for physicians. The continuation and increased funding of this program will help alleviate physician shortages in underserved communities, encourage more physicians to practice family and general medicine, and promote team-based medicine in rural communities, which will help safeguard patient safety and quality of care.

Graduate Medical Education – Slots for Doctors Program

During the 2023 Legislative Session, the FMA secured a recurring \$30 million appropriation to create the Slots for Doctors Program. This new graduate medical education program will incentivize the creation of 300 resident positions in specialties with statewide supply-and-demand deficits. The program allocates \$100,000 annually for residency positions in an initial or established accredited residency program. The Slots for Doctors Program is just one of the strategic tools the FMA has employed to increase Florida's physician workforce. Every year, hundreds of Florida medical school graduates must leave the state when matched into out-of-state residency programs. With nearly 60% of residents who complete their residencies in Florida remaining in the state, it is crucial that we continue to create additional residency positions and adequately fund those positions so that the projected physician shortage is averted, and Florida remains a state with available high-quality healthcare. The FMA will work to secure additional funding for the Slots for Doctors Program.

Prior Authorization

The FMA will pursue legislation to simplify, streamline, and expedite prior authorizations. Health plans employ time-consuming prior authorization requirements to control patient access to certain treatments. To reduce the burdensome impact that prior authorization requirements have on patients, physicians, and the healthcare system, the FMA will seek

reforms including but not limited to requiring electronic prior authorization requests, procedural transparency, reducing the medically unnecessary and duplicative information health plans currently require, and implementing time limits for approval or denial.

Tort Reform

Over the last two decades, the FMA has successfully fought for a number of medical liability system reforms, only to see these reforms invalidated by the Supreme Court. The FMA is working with other interested parties to develop a strategy for revisiting these reforms while the environment for doing so is favorable.

Scope-of-Practice Expansion

As always, the FMA will fight attempts to expand scope of practice for non-physicians. This year, the FMA will work to protect patients from unqualified optometrists wanting to perform laser surgery, CRNA independent practice, prescriptive authority for non-medically trained psychologists, deceptive name changes such as physician assistant to “physician associate” and nurse anesthetist to “nurse anesthesiologist,” and any other legislation that would jeopardize patient safety. These dangerous initiatives would serve only to lower the quality of care delivered in Florida.

Access to Cancer Drugs

The FMA supports legislation that would prohibit insurers from requiring patients to meet prior authorization requirements before life-saving drugs could be prescribed for certain cancers and associated conditions. Further, the FMA supports prohibiting insurers from requiring mandatory home infusion of complex medications against the recommendations of the patient’s treating physician. The FMA will also seek legislation to prohibit insurer-mandated “white bagging” and “brown bagging” policies, which compromise patient safety, result in medication and resource waste, and further complicate care coordination. Physicians know what the safest route of administration is for these specialty medications – not health insurers.

Fairness in Dispute Resolution

Under current law, claim disputes between physicians and health plans can be mediated through the state’s third-party

dispute resolution organization. Unfortunately, the law provides these health plans with the ability to “opt out” of mediation, which is taken advantage of when the facts of the claim denial would likely result in a judgment against the plan. By opting out of mediation, health plans are counting on the fact that formal legal challenges will be too burdensome for physicians to pursue – a process that is both costly and time-consuming, detracting from actual patient care. The FMA is advocating for the elimination of this unfair opt-out provision in order to give physicians more power in the dispute resolution process.

Wrongful Death

The FMA opposes legislation that seeks to increase rates for medical malpractice insurance and healthcare costs in general. This legislation, which has been filed unsuccessfully in years past, would permit the recovery of noneconomic damages by adult children for the loss of a parent, and by the parents for the loss of an adult child with no surviving spouse or children, in a medical malpractice wrongful death claim. This type of policy is based on the offensive premise that certain patients would receive a lower standard of care (would be a “free kill”) and that pain and suffering damages would provide accountability. Physicians are already held accountable for their actions by their licensing board, hospitals, employers, and board certification entities. The changes sought by this legislation would do nothing more than drive up Florida’s already high malpractice rate.

Pharmacy Collaborative Practice

Since 2020, pharmacists and physicians have had the ability to enter into collaborative practice agreements to manage certain chronic health conditions as enumerated in statute and rule. Under a collaborative agreement, pharmacists can order and evaluate clinical and laboratory tests and modify or discontinue a patient’s medications. While the Board of Pharmacy has made repeated attempts to expand the list of conditions that may be collaboratively managed to include more complex conditions, such as heart failure and multiple sclerosis, the FMA has successfully blocked these efforts. The FMA will work to roll pharmacists’ scope of practice back to where it belongs – within the practice of pharmacy.