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2022 Legislature

1  
 2 An act relating to reducing fetal and infant  
 3 mortality; amending s. 381.84, F.S.; revising the  
 4 purpose and requirements for the Comprehensive  
 5 Statewide Tobacco Education and Use Prevention  
 6 Program; revising a provision relating to a certain  
 7 report to conform to changes made by the act; creating  
 8 s. 383.21625, F.S.; providing a definition; requiring  
 9 the Department of Health to contract with local  
 10 healthy start coalitions for the creation of fetal and  
 11 infant mortality review committees in all regions of  
 12 the state; providing requirements for such committees;  
 13 requiring local healthy start coalitions to report the  
 14 findings and recommendations developed by the  
 15 committees to the department annually; requiring the  
 16 department to compile such findings and  
 17 recommendations in a report and submit such report to  
 18 the Governor and Legislature by a specified date and  
 19 annually; authorizing the department to adopt rules;  
 20 amending s. 390.011, F.S.; revising and providing  
 21 definitions; amending s. 390.0111, F.S.; prohibiting a  
 22 physician from performing a termination of pregnancy  
 23 if the physician determines the gestational age of a  
 24 fetus is more than a specified number of weeks;  
 25 providing an exception; amending s. 390.0112, F.S.;

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26 | revising a requirement that the directors of certain  
 27 | medical facilities submit a monthly report to the  
 28 | Agency for Health Care Administration; requiring  
 29 | certain physicians to submit such report to the  
 30 | agency; requiring the report to be submitted  
 31 | electronically on a form adopted by the agency, the  
 32 | Board of Medicine, and the Board of Osteopathic  
 33 | Medicine; requiring the report to include certain  
 34 | additional information; removing obsolete language;  
 35 | creating s. 395.1054, F.S.; requiring that certain  
 36 | hospitals participate in a minimum number of quality  
 37 | improvement initiatives developed in collaboration  
 38 | with the Florida Perinatal Quality Collaborative  
 39 | within the University of South Florida College of  
 40 | Public Health; providing an appropriation; providing  
 41 | an effective date.

42 |  
 43 | Be It Enacted by the Legislature of the State of Florida:

44 |  
 45 | Section 1. Subsections (2), (3), and (7) of section  
 46 | 381.84, Florida Statutes, are amended to read:

47 | 381.84 Comprehensive Statewide Tobacco Education and Use  
 48 | Prevention Program.—

49 | (2) PURPOSE, FINDINGS, AND INTENT.—It is the purpose of  
 50 | this section to implement s. 27, Art. X of the State

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51 Constitution. The Legislature finds that s. 27, Art. X of the  
52 State Constitution requires the funding of a statewide tobacco  
53 education and use prevention program that focuses on tobacco use  
54 by youth. The Legislature further finds that the primary goals  
55 of the program are to reduce the prevalence of tobacco use among  
56 youth, adults, ~~and pregnant women~~, and women who may become  
57 pregnant; reduce per capita tobacco consumption; and reduce  
58 exposure to environmental tobacco smoke. Further, it is the  
59 intent of the Legislature to base increases in funding for  
60 individual components of the program on the results of  
61 assessments and evaluations. Recognizing that some components  
62 will need to grow faster than inflation, it is the intent of the  
63 Legislature to fund portions of the program on a nonrecurring  
64 basis in the early years so that those components that are most  
65 effective can be supported as the program matures.

66 (3) PROGRAM COMPONENTS AND REQUIREMENTS.—The department  
67 shall conduct a comprehensive, statewide tobacco education and  
68 use prevention program consistent with the recommendations for  
69 effective program components contained in the 1999 Best  
70 Practices for Comprehensive Tobacco Control Programs of the CDC,  
71 as amended by the CDC. The program shall include the following  
72 components, each of which shall focus on educating people,  
73 particularly pregnant women, women who may become pregnant, and  
74 youth and their parents, about the health hazards of tobacco and  
75 discouraging the use of tobacco:

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76 (a) Counter-marketing and advertising; Internet resource  
 77 center.—The counter-marketing and advertising campaign shall  
 78 include, at a minimum, Internet, print, radio, and television  
 79 advertising and shall be funded with a minimum of one-third of  
 80 the total annual appropriation required by s. 27, Art. X of the  
 81 State Constitution.

82 1. The campaign shall include an Internet resource center  
 83 for copyrighted materials and information concerning tobacco  
 84 education and use prevention, including cessation. The Internet  
 85 resource center must be accessible to the public, including  
 86 parents, teachers, and students, at each level of public and  
 87 private schools, universities, and colleges in the state and  
 88 shall provide links to other relevant resources. The Internet  
 89 address for the resource center must be incorporated in all  
 90 advertising. The information maintained in the resource center  
 91 shall be used by the other components of the program.

92 2. The campaign shall use innovative communication  
 93 strategies, such as targeting specific audiences who use  
 94 personal communication devices and frequent social networking  
 95 websites.

96 (b) Cessation programs, counseling, and treatment.—This  
 97 program component shall include two subcomponents:

98 1. A statewide toll-free cessation service, which may  
 99 include counseling, referrals to other local resources and  
 100 support services, and treatment to the extent funds are

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101 available for treatment services; and

102       2. A local community-based program to disseminate  
 103 information about tobacco-use cessation, how tobacco-use  
 104 cessation relates to prenatal care and obesity prevention, and  
 105 other chronic tobacco-related diseases.

106       (c) Surveillance and evaluation.—The program shall conduct  
 107 ongoing epidemiological surveillance and shall contract for  
 108 annual independent evaluations of the effectiveness of the  
 109 various components of the program in meeting the goals as set  
 110 forth in subsection (2).

111       (d) Youth school programs.—School and after-school  
 112 programs shall use current evidence-based curricula and programs  
 113 that involve youth to educate youth about the health hazards of  
 114 tobacco, help youth develop skills to refuse tobacco, and  
 115 demonstrate to youth how to stop using tobacco.

116       (e) Community programs and chronic disease prevention.—The  
 117 department shall promote and support local community-based  
 118 partnerships that emphasize programs involving youth, pregnant  
 119 women, and women who may become pregnant, including programs for  
 120 the prevention, detection, and early intervention of tobacco-  
 121 related chronic diseases.

122       (f) Training.—The program shall include the training of  
 123 health care practitioners, tobacco-use cessation counselors, and  
 124 teachers by health professional students and other tobacco-use  
 125 prevention specialists who are trained in preventing tobacco use

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126 and health education. Tobacco-use cessation counselors shall be  
 127 trained by specialists who are certified in tobacco-use  
 128 cessation.

129 (g) Administration and management, statewide programs, and  
 130 county health departments.—The department shall administer the  
 131 program within the expenditure limit established in subsection  
 132 (8). Each county health department is eligible to receive a  
 133 portion of the annual appropriation, on a per capita basis, for  
 134 coordinating tobacco education and use prevention programs  
 135 within that county. Appropriated funds may be used to improve  
 136 the infrastructure of the county health department to implement  
 137 the comprehensive, statewide tobacco education and use  
 138 prevention program. Each county health department shall  
 139 prominently display in all treatment rooms and waiting rooms  
 140 counter-marketing and advertisement materials in the form of  
 141 wall posters, brochures, television advertising if televisions  
 142 are used in the lobby or waiting room, and screensavers and  
 143 Internet advertising if computer kiosks are available for use or  
 144 viewing by people at the county health department.

145 (h) Enforcement and awareness of related laws.—In  
 146 coordination with the Department of Business and Professional  
 147 Regulation, the program shall monitor the enforcement of laws,  
 148 rules, and policies prohibiting the sale or other provision of  
 149 tobacco to minors, as well as the continued enforcement of the  
 150 Clean Indoor Air Act prescribed in chapter 386. The

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151 advertisements produced in accordance with paragraph (a) may  
 152 also include information designed to make the public aware of  
 153 these related laws and rules. The departments may enter into  
 154 interagency agreements to carry out this program component.

155 (i) AHEC tobacco-use cessation initiative.—The AHEC  
 156 network may administer the AHEC tobacco-use cessation initiative  
 157 in each county within the state and perform other activities as  
 158 determined by the department.

159 (7) ANNUAL REPORT REQUIRED.—By January 31 of each year,  
 160 the department shall provide to the Governor, the President of  
 161 the Senate, and the Speaker of the House of Representatives a  
 162 report that evaluates the program's effectiveness in reducing  
 163 and preventing tobacco use and that recommends improvements to  
 164 enhance the program's effectiveness. The report must contain, at  
 165 a minimum, an annual survey of youth attitudes and behavior  
 166 toward tobacco, as well as a description of the progress in  
 167 reducing the prevalence of tobacco use among youth, adults, ~~and~~  
 168 pregnant women, and women who may become pregnant; reducing per  
 169 capita tobacco consumption; and reducing exposure to  
 170 environmental tobacco smoke.

171 Section 2. Section 383.21625, Florida Statutes, is created  
 172 to read:

173 383.21625 Fetal and infant mortality review committees.—

174 (1) As used in this section, the term "department" means  
 175 the Department of Health.

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176       (2) The department shall contract with local healthy start  
 177 coalitions for the creation of fetal and infant mortality review  
 178 committees in all regions of the state to improve fetal and  
 179 infant mortality and morbidity in each region. Each committee  
 180 shall:

181       (a) Review and analyze rates, trends, causes, and other  
 182 data related to fetal and infant mortality and morbidity in a  
 183 geographic area.

184       (b) Develop findings and recommendations for interventions  
 185 and policy changes to reduce fetal and infant mortality and  
 186 morbidity rates.

187       (c) Engage with local communities and stakeholders to  
 188 implement recommended policies and procedures to reduce fetal  
 189 and infant mortality and morbidity.

190       (3) Each local healthy start coalition shall report the  
 191 findings and recommendations developed by each fetal and infant  
 192 mortality review committee to the department annually. Beginning  
 193 October 1, 2023, the department shall compile such findings and  
 194 recommendations in an annual report, which must be submitted to  
 195 the Governor, the President of the Senate, and the Speaker of  
 196 the House of Representatives.

197       (4) The department may adopt rules necessary to implement  
 198 this section.

199       Section 3. Subsections (6) and (7) of section 390.011,  
 200 Florida Statutes, are renumbered as subsections (7) and (8),



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201 respectively, present subsections (8) through (13) are  
 202 renumbered as subsections (10) through (15), respectively,  
 203 present subsection (6) is amended, and new subsections (6) and  
 204 (9) are added to that section, to read:

205 390.011 Definitions.—As used in this chapter, the term:

206 (6) "Fatal fetal abnormality" means a terminal condition  
 207 that, in reasonable medical judgment, regardless of the  
 208 provision of life-saving medical treatment, is incompatible with  
 209 life outside the womb and will result in death upon birth or  
 210 imminently thereafter.

211 (7)-(6) "Gestation" means the development of a human embryo  
 212 or fetus as calculated from the first day of the pregnant  
 213 woman's last menstrual period between fertilization and birth.

214 (9) "Medical abortion" means the administration or use of  
 215 an abortion-inducing drug to induce an abortion.

216 Section 4. Subsection (1) of section 390.0111, Florida  
 217 Statutes, is amended to read:

218 390.0111 Termination of pregnancies.—

219 (1) TERMINATION AFTER GESTATIONAL AGE OF 15 WEEKS ~~IN THIRD~~  
 220 ~~TRIMESTER;~~ WHEN ALLOWED.—A physician may not perform a ~~No~~  
 221 termination of pregnancy if the physician determines the  
 222 gestational age of the fetus is more than 15 weeks ~~shall be~~  
 223 ~~performed on any human being in the third trimester of pregnancy~~  
 224 unless one of the following conditions is met:

225 (a) Two physicians certify in writing that, in reasonable

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226 | medical judgment, the termination of the pregnancy is necessary  
 227 | to save the pregnant woman's life or avert a serious risk of  
 228 | substantial and irreversible physical impairment of a major  
 229 | bodily function of the pregnant woman other than a psychological  
 230 | condition.

231 |         (b) The physician certifies in writing that, in reasonable  
 232 | medical judgment, there is a medical necessity for legitimate  
 233 | emergency medical procedures for termination of the pregnancy to  
 234 | save the pregnant woman's life or avert a serious risk of  
 235 | imminent substantial and irreversible physical impairment of a  
 236 | major bodily function of the pregnant woman other than a  
 237 | psychological condition, and another physician is not available  
 238 | for consultation.

239 |         (c) The fetus has not achieved viability under s.  
 240 | 390.01112 and two physicians certify in writing that, in  
 241 | reasonable medical judgement, the fetus has a fatal fetal  
 242 | abnormality.

243 |         Section 5. Section 390.0112, Florida Statutes, is amended  
 244 | to read:

245 |         390.0112 Termination of pregnancies; reporting.—

246 |         (1) The director of any medical facility in which  
 247 | abortions are performed, including surgical procedures and  
 248 | medical abortions, including a physician's office, shall submit  
 249 | a report each month to the agency. If the abortion is not  
 250 | performed in a medical facility, the physician performing the

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251 abortion shall submit the monthly report. The report ~~must~~ may be  
 252 submitted electronically on a form adopted by the agency, the  
 253 Board of Medicine, and the Board of Osteopathic Medicine which~~7~~  
 254 ~~may not include personal identifying information~~7 and must  
 255 include:  
 256 (a) ~~Until the agency begins collecting data under~~  
 257 ~~paragraph (e)~~7, The number of abortions performed.  
 258 (b) The reasons such abortions were performed. If a woman  
 259 upon whom an abortion is performed has provided evidence that  
 260 she is a victim of human trafficking pursuant to s.  
 261 390.0111(3)(a)1.b.(IV), such reason must be included in the  
 262 information reported under this section.  
 263 (c) For each abortion, the period of gestation at the time  
 264 the abortion was performed.  
 265 (d) The number of infants born alive or alive immediately  
 266 after an attempted abortion.  
 267 (e) ~~Beginning no later than January 1, 2017,~~ Information  
 268 consistent with the United States Standard Report of Induced  
 269 Termination of Pregnancy adopted by the Centers for Disease  
 270 Control and Prevention.  
 271 (f) The number of medication abortion regimens prescribed  
 272 or dispensed.  
 273 (2) The agency shall keep such reports in a central  
 274 location for the purpose of compiling and analyzing statistical  
 275 data and shall submit data reported pursuant to paragraph (1)(e)

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276 to the Division of Reproductive Health within the Centers for  
 277 Disease Control and Prevention, as requested by the Centers for  
 278 Disease Control and Prevention.

279 ~~(3) If the termination of pregnancy is not performed in a~~  
 280 ~~medical facility, the physician performing the procedure shall~~  
 281 ~~be responsible for reporting such information as required in~~  
 282 ~~subsection (1).~~

283 (3)~~(4)~~ Reports submitted pursuant to this section shall be  
 284 confidential and exempt from the provisions of s. 119.07(1) and  
 285 shall not be revealed except upon the order of a court of  
 286 competent jurisdiction in a civil or criminal proceeding.

287 (4)~~(5)~~ Any person required under this section to file a  
 288 report or keep any records who willfully fails to file such  
 289 report or keep such records may be subject to a \$200 fine for  
 290 each violation. The agency shall be required to impose such  
 291 fines when reports or records required under this section have  
 292 not been timely received. For purposes of this section, timely  
 293 received is defined as 30 days following the preceding month.

294 Section 6. Section 395.1054, Florida Statutes, is created  
 295 to read:

296 395.1054 Birthing quality improvement initiatives.—A  
 297 hospital that provides birthing services shall at all times  
 298 participate in at least two quality improvement initiatives  
 299 developed in collaboration with the Florida Perinatal Quality  
 300 Collaborative within the University of South Florida College of

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301 Public Health.

302       Section 7. For the 2022-2023 fiscal year, the sum of  
 303 \$1,602,000 in recurring funds from the General Revenue Fund is  
 304 appropriated to the Department of Health for the purpose of  
 305 establishing fetal and infant mortality review committees under  
 306 s. 383.21625, Florida Statutes.

307       Section 8. This act shall take effect July 1, 2022.