HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: PCS for HB 425 Posttraumatic Stress Disorder Benefits and Peer Support Programs
SPONSOR(S): Insurance & Banking Subcommittee
TIED BILLS: **IDEN./SIM. BILLS:**

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR or BUDGET/POLICY CHIEF
Orig. Comm.: Insurance & Banking Subcommittee		Herendeen	Luczynski

SUMMARY ANALYSIS

Workers' compensation benefits for a nervous or mental injury are typically allowed only if an employee suffers a physical injury that triggers a mental injury. However, the Legislature created special rules for certain first responders in 2018, making Posttraumatic Stress Disorder (PTSD) a compensable occupational disease for firefighters, paramedics, emergency medical technicians, and law enforcement officers who suffer from PTSD after experiencing certain types of qualifying events, even though they were not physically injured.

This bill extends workers' compensation benefits for PTSD to full- and part-time correctional officers, full- and part-time correctional probation officers, part-time law enforcement officers, and auxiliary law enforcement officers. The bill defines the qualifying events that would make such employees eligible for medical benefits and compensation for lost wages even if the employee did not suffer a physical injury.

Additionally, the bill recognizes the unique demands of persons who work in corrections, emergency rescue, and law enforcement by increasing training requirements related to mental health awareness, prevention, and mitigation. Employers of firefighters, paramedics, emergency medical technicians, law enforcement officers, correctional officers, and correctional probation officers would be required to provide at least one hour of training annually. Training must include, but is not limited to, peer support programs, training provided by a licensed mental health practitioner, and suicide prevention.

To support the required training, confidentiality provisions for peer support programs are extended to correctional and correctional probation officers. Such provisions already apply to firefighters, paramedics, emergency medical technicians, law enforcement officers, and 911 public safety telecommunicators.

To help ensure claims are legitimate, the employing agency must document an employees' personal involvement in a qualifying event before awarding medical benefits or compensation for lost wages.

Provisions related to notice of injury and notice of claim are adjusted. Currently, notice of a PTSD-related injury is due to the employer within 90 days of a qualifying event or the manifestation of the disorder, whichever is later. If the compensability of an injury is disputed, a claim must be filed within 52 weeks of the qualifying event. The bill makes the notice of injury due within 90 days of a qualifying event or diagnosis of the disorder, whichever is later. Similarly, the bill extends the claim filing deadline to within 52 weeks of the qualifying event or diagnosis of the disorder, whichever is later. This allows claims more than one year after a qualifying event.

The bill has an indeterminate, likely significant, negative fiscal impact on state and local governments.

The bill provides an effective date of July 1, 2022.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Current Situation

Florida Workers' Compensation System

Workers' compensation is a no-fault system that provides medical benefits and compensation for lost wages when an employee is injured or killed in the course of employment. Employers must secure coverage, and may do so by purchasing insurance from an authorized carrier, qualifying as a self-insurer, or purchasing coverage from the Florida Workers' Compensation Joint Underwriting Association, which is the state-sponsored insurer of last resort. In return for providing compensation, the employer is relieved of liability for workplace injuries, and may only be sued for intentional acts that result in injury or death.[1]

In addition to on-the-job injuries, employers may be required to pay compensation or furnish benefits if an occupational disease caused death or disablement, is due to the nature of the employee's occupation, and the employee contracted the disease during the course of his or her employment.[2] In general, occupational diseases are compensable if:

- A condition peculiar to the occupation causes the disease;
- The employee contracts the disease on the job;
- The job presents a particular hazard of the disease;
- The incidence of the disease is substantially higher in the occupation than in the public;
- The nature of the employment was a major contributing cause of the disease; and
- Epidemiological studies show that exposure to the specific substance involved, at the levels to which the employee was exposed, may cause the precise disease sustained by the employee.[3]

Benefits for Temporary and Permanent Disability

The insurance carrier or self-insured employer must provide medical and indemnity benefits for any employee who suffers an injury "arising out of and in the course of employment."[4]

Medical Benefits

To be compensable, a work-related accident must be the major contributing cause of any resulting injury or illness, meaning that the cause must be more than 50 percent responsible for the injury as compared to all other causes combined, as demonstrated by medical evidence only.[5]

Employees are entitled to receive all medically necessary remedial treatment, care, and attendance, including medications, medical supplies, durable medical equipment, and prostheses, for as long as the nature of the injury and process of recovery requires.[6]

Indemnity Benefits

[1] Ss. 440.015, 440.09, 440.10, 440.38, and 627.313, F.S.
[2] Ss. 440.09, and 440.151, F.S.
[3] S. 440.151(2), F.S.
[4] S. 440.185, F.S.
[5] S. 440.09(1), F.S.
[6] S. 440.13(2)(a), F.S.

Payments for lost wages, known as indemnity benefits, may be required if an injured employee is unable to work, as determined by an authorized doctor, for more than seven calendar days. Indemnity benefits fall into four categories:

- Temporary Total Disability – When an authorized doctor declares an injured employee to be temporarily but totally disabled, the employee is eligible for up to 260 weeks (five years) of disability benefits.[7] Temporary total disability benefits end when the employee returns to work or the employee reaches maximum medical improvement and the employer/insurance carrier has paid five years of benefits.[8]
- Temporary Partial Disability – When an authorized doctor determines that an injured employee may work, with restrictions, the employee receives 80 percent of the difference between his or her earnings prior to injury and post injury. Payments may be required for up to 260 weeks.[9]
- Permanent Impairment – When an authorized doctor determines that the injured employee has reached maximum medical improvement but remains unable to perform certain work activities, the doctor assigns an impairment rating that represents a percentage of disability to the body as a whole; a monetary benefit is calculated based on the percent of impairment.[10]
- Permanent Total Disability – When an authorized doctor determines that the injured employee is unable to work in any job for any employer, the employer/insurance carrier must pay total disability benefits until the injured employee reaches age 75.[11]

Injured workers are typically paid two thirds of their average weekly salary, typically beginning on the eighth day after the employee loses time from work.[12]

The minimum payment is $20 per week and the maximum payment is 100 percent of the statewide average weekly wage, which is based on the average weekly wage paid by employers' subject to the Florida Reemployment Assistance Program Law as reported to the Department of Economic Opportunity.[13] Payments to injured workers who earn more than the statewide average weekly wage are capped at the statewide average weekly wage that was in effect on the date of injury.[14]

General Rules of Compensability for Mental or Nervous Injuries

Mental or Nervous injuries may be compensable, but only if the injury is accompanied by a physical injury that requires medical treatment. Thus, if a workplace accident causes both a physical injury and a related mental or nervous injury, both may be compensable so long as the physical injury that requires medical treatment is the major contributing cause (at least 50 percent responsible) of the mental or nervous injury. A mental or nervous injury caused by "stress, fright, or excitement" is not compensable.[15]

As discussed above, an employee who is temporarily disabled by a workplace injury is eligible for up to 260 weeks of disability benefits, which typically results in payment of about two-thirds of the employee's regular wages, beginning on the eighth day after the employee loses time from work.[16] However, temporary disability benefits caused by a mental or nervous injury are limited to six months after a claimant reaches maximum medical improvement for the physical injury that triggered the mental or nervous injury.[17]

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[7] S. 440.15(2)(a), F.S., limits disability benefits to 104 weeks (two years), but the Florida Supreme Court held that this limit was unconstitutional and directed that a prior limit of 260 weeks (five years) be reinstated. *See Westphal v. City of St. Petersburg*, 194 So. 3d 311 (Fla. 2016).
[8] S. 440.15(1), F.S.
[9] S 440.15(4), F.S.
[10] S 440.15(3), F.S.
[11] S. 440.15(1)(b), F.S.
[12] S. 440.14(1), F.S.
[13] S. 440.12(2), F.S.
[14] *Id*.
[15] S. 440.093, F.S.
[16] S. 440.15(2)(a), F.S. limits disability benefits to 104 weeks, but the Florida Supreme Court held that this limit was unconstitutional and directed that a prior limit of 260 weeks be reinstated. *See Westphal v. City of St. Petersburg*, 194 So. 3d 311 (Fla. 2016).
[17] S. 440.093(3), F.S.

Special Rules for First Responders

The 2007 Law

The Legislature recognized the unique occupational hazards associated with the work of first responders in 2007, by providing additional coverage for employment-related accidents and injuries of both paid and volunteer firefighters, emergency medical technicians and paramedics, and law enforcement officers.[18] The law relaxed certain standards to make it easier for first responders to obtain workers' compensation benefits.

For mental and nervous injuries, lawmakers:

- Authorized medical benefits for first responders who did not suffer a physical injury but demonstrate, by clear and convincing evidence, that a mental or nervous injury arose out of employment;
- Authorized indemnity benefits (lost wages) for first responders who demonstrate that a mental or nervous injury arose out of a physical injury suffered during the course of employment; and
- Exempted first responders from limits that typically apply to temporary disability benefits for mental and nervous injuries. For employees who are not first responders, benefits for mental or nervous injuries: 1) may last no longer than six months from the date of the maximum medical improvement from the physical injury,[19] and 2) may not exceed the 1 percent limit on permanent psychiatric impairment benefits.[20]

For occupational diseases, lawmakers:

- Reduced the evidentiary burden for claims of occupational disease due to exposure to a specific toxic substance, requiring proof of causation by a preponderance of the evidence, rather than the clear and convincing evidentiary standard typically applied to such claims; and
- Eliminated the requirement that a first responder's claim of occupational disease be supported by epidemiological studies showing that exposure to the specific substance involved, at the levels to which the employee was exposed, may cause the precise disease sustained by the employee.

Additionally, lawmakers:

- Created a presumption that any adverse reaction to a smallpox vaccination administered to a first responder is a compensable accident; and
- Required that permanent total supplemental benefits received by a first responder whose employer does not participate in the Social Security program shall not terminate when the first responder reaches age 62.

2018 Amendments

In 2018, the Legislature authorized medical benefits and compensation for lost wages for first responders who are diagnosed with PTSD (as described by the Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition, published by the American Psychiatric Association).[21]

[18] Chapter 2007-87, Laws of Florida, created s. 112.1815, F.S.
[19] S. 440.093, F.S.
[20] S. 440.14(3), F.S.
[21] Chapter 2018-124, Laws of Florida, amended s. 112.1815, F.S.

As a result, a first responder who experiences one of the following qualifying events need not suffer a physical injury to qualify for medical benefits and be compensated for lost wages:

- Seeing a deceased minor;
- Witnessing the death of a minor;
- Witnessing an injury to a minor who subsequently dies before or upon arrival at a hospital emergency department;
- Participating in the treatment of an injured minor who dies before or on arrival at a hospital emergency department;
- Transporting an injured minor who dies before or on arrival at a hospital emergency department;
- Seeing a decedent whose death was due to grievous bodily harm of a nature that shocks the conscience;
- Witnessing a death (including suicide) that involved grievous bodily harm of a nature that shocks the conscience;
- Witnessing a homicide, whether criminal or excusable, including murder, mass killing, manslaughter, self-defense, misadventure, and negligence;
- Witnessing an injury (including an attempted suicide) to a person who dies before or upon arrival at a hospital emergency department if the person was injured by grievous bodily harm of a nature that shocks the conscience;
- Participating in the treatment of an injury (including attempted suicide) to a person who dies before or upon arrival at a hospital emergency department if the person was injured by grievous bodily harm of a nature that shocks the conscience; or
- Transporting a person who was injured (including by attempted suicide) who dies before or upon arrival at a hospital emergency department if the person was injured by grievous bodily harm of a nature that shocks the conscience.

Diagnosis of Posttraumatic Stress Disorder

According to the American Psychiatric Association, PTSD is a psychiatric disorder that may occur in people who have experienced or witnessed a traumatic event, such as a natural disaster, serious accident, terrorist act, war, or rape; or people who have been threatened with death, sexual violence, or serious injury.[22] Exposure to an upsetting traumatic event may be indirect rather than first hand. PTSD can occur if a person learns of the violent death of a close family member or friend, or is repeatedly exposed to the horrible details of trauma.[23]

Symptoms of PTSD may begin shortly after the traumatic event, or may not appear until years after the event. For a person to be diagnosed with PTSD, symptoms must last for more than one month and must cause significant distress or interfere with the individual's daily functioning.[24]

Symptoms may include flashbacks, nightmares and severe anxiety, as well as uncontrollable thoughts about the event. This can lead to avoidance of any stimuli that recalls the traumatic events, negative thoughts about oneself or the world, and changes in emotional reactions to events, like being easily startled or having trouble sleeping or concentrating.[25]

Rates of PTSD are higher among veterans, police officers, firefighters, and emergency medical personnel.[26]

Notice Requirements

[22] American Psychiatric Association, *What is Posttraumatic Stress Disorder*, https://www.psychiatry.org/patients-families/ptsd/what-is-ptsd (last visited Jan. 24, 2022).
[23] *Id*.
[24] *Id*.
[25] Mayo Clinic, *Post-traumatic stress disorder (PTSD)*, https://www.mayoclinic.org/diseases-conditions/post-traumatic-stress-disorder/symptoms-causeds/syc-20355967 (last visited Jan. 24, 2022).
[26] *Id*.

A first responder who suffers from PTSD must notify his or her employer within 90 days of a qualifying event identified in the law, or the manifestation of the disorder, whichever is later.[27]

If the compensability of an injury is disputed, the first responder must file a petition for workers' compensation benefits within 52 weeks of a qualifying event.[28]

A first responder who develops symptoms of PTSD after the one-year deadline for filing a claim has elapsed has no cause of action.[29]

Training Requirements

The 2018 amendments directed state and local government employers to provide educational training related to mental health awareness, prevention, mitigation, and treatment to both paid and volunteer first responders. The DWC published a website with training materials that employing agencies may use to satisfy the training requirement.[30]

Rulemaking

In Rule 69L-3.009, F.A.C., the DWC specified the types of injuries that qualify as grievous bodily harm of a nature that shocks the conscience. According to the rule, these are:

- Decapitation (full or partial),
- Degloving,
- Enucleation,
- Evisceration,
- Exposure of one or more of the following internal organs:
  - Brain,
  - Heart,
  - Intestines,
  - Kidneys,
  - Liver, or
  - Lungs
- Impalement,
- Severance (full or partial), and
- Third degree burn on 9 percent or more of the body.

Fiscal Impact of the 2018 Amendments

Since the 2018 amendments, there have been 84 workers' compensation claims involving PTSD by first responders, and 50 of those claims were brought by first responders who did not suffer any physical injury. Those 50 PTSD claims have incurred an average cost of $42,326 per claim in just three years, for a total of approximately $2.1 million.[31]

Available Resources

[27] Ss. 112.1815(5)(d), and 440.151(6), F.S.
[28] *Id*. The one-year timeframe to file a petition for benefits under S. 112.1815, F.S., is shorter than the two-year limitation period of s. 440.19, F.S., which applies to workplace injuries. S. 440.19, F.S., states: "Except to the extent provided elsewhere in this section, all employee petitions for benefits under this chapter shall be barred unless the employee, or the employee's estate if the employee is deceased, has advised the employer of the injury or death pursuant to s. 440.185(1) and the petition is filed within 2 years after the date on which the employee knew or should have known that the injury or death arose out of work performed in the course and scope of employment."
[29] *Palm Beach County Fire Rescue v. Wilkes*, 309 So. 3d 687 (Fla. 1st DCA, 2020).
[30] Florida Department of Financial Services, Division of Workers' Compensation, *Educational Training Materials/PTSD*, https://www.myfloridacfo.com/division/wc/Employer/PTSD/default.htm (last visited Jan. 24, 2022).
[31] Department of Financial Services, Agency Analysis of 2022 House Bill 425, at 2 (Jan. 21, 2022).

Peer Support

In 2020, the Legislature recognized the need for mental health counseling for first responders by adopting confidentiality provisions intended to encourage peer support programs for paid and volunteer law enforcement officers, firefighters, emergency medical technicians, paramedics and 911 public safety telecommunicators.[32]

In a peer support program, a person who has recovered from a mental health problem helps a peer establish or maintain his or her recovery.[33] In Florida, the peer must receive training to provide peer support, and be designated by the employing agency, and may not be a health care practitioner.[34] Peer support is focused on prevention. A peer supporter reaches out to a colleague in a time of personal or professional crisis. The peer supporter may serve as a mentor, an active listener, or help the first responder find professional counseling.[35]

Communications between the peers are privileged and confidential unless the first responder: agrees in writing that private information may be revealed; the peer and the first responder are adverse parties in civil or criminal litigation; or the peer has reason to fear for the safety of the first responder, another person, or society.[36]

First Responders Suicide Deterrence Task Force

In 2020, the Legislature created the First Responders Suicide Deterrence Task Force within the Statewide Office of Suicide Prevention, which is housed in the Department of Children and Families and coordinates education and training curricula on suicide prevention efforts for veterans and service members.[37]

The first report of the task force, published July 1, 2021, provides an outline of resources available to the members of the law enforcement and emergency rescue communities. The report also provides the findings of two studies conducted in fall 2020.

The Department of Children and Families and the Division of Emergency Management surveyed 2,300 first responders working in Florida and found:

- Nearly half of the respondents (49.8 percent) rated work-related stress as manageable;
- The other half (50.2 percent) reported their stress level as acute, episodic, or chronic.[38]

The Department of Law Enforcement and the Florida Firefighters Safety and Health Collaborative surveyed 189 agencies (107 law enforcement and 82 emergency rescue/firefighter) and found:

- 94 percent have Employee Assistance Programs;
- 71 percent provide chaplains for personal counseling and spiritual support;
- 70 percent provide mental health training;
- 67 percent use Critical Incident Stress Management teams after major incidents, to provide counseling and assess employee needs;
- 54 percent have peer support teams;
- 32 percent use mental health assessments to determine an employee's fitness for duty;

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[32] S. 111.09, F.S.
[33] Substance Abuse and Mental Health Services Administration, *What Are Peer Recovery Support Services?* (2009), https://store.samhsa.gov/sites/default/files/d7/priv/sma09-4454.pdf (last visited Jan. 24, 2022).
[34] S. 111.09(1)(b), F.S.
[35] First Responder Suicide Deterrence Task Force, *2021 Annual Report*, July 1, 2021, at 5, https://www.myflfamilies.com/service-programs/samh/publications/docs/First%20Responder%20Task%20Force%202021%20Report%20-%20Final%20-%208-4-21.pdf (last visited Jan. 24, 2022).
[36] S. 111.09(2), F.S.
[37] S. 14.2019, F.S.
[38] First Responder Suicide Deterrence Task Force, *2021 Annual Report, supra* note 35 at 4.

- 29 percent offer stress management wellness visits;
- 25 percent offer family educational programs;
- 24 percent use Clinical Response Teams whose members have been trained to assess and educate employees who experience crisis symptoms that may put them at risk for mental health issues; and
- 19 percent have on-site mental health clinicians.[39]

Effect of the Bill

The bill makes the following state and local government employees eligible for workers' compensation benefits for PTSD, even if they do not suffer a physical injury:

- Part-time law enforcement officers and auxiliary law enforcement officers may be eligible for medical benefits and compensation for lost time if they are diagnosed with PTSD after experiencing one of 11 qualifying events outlined in existing law (detailed above);
- Correctional officers may be eligible for medical benefits and compensation for lost time if they are diagnosed with PTSD after experiencing one of eight qualifying events outlined in the bill; which are:
  - Being seriously injured by an inmate in a manner that shocks the conscience;
  - Being taken hostage by an inmate or trapped in a life-threatening situation as a result of an inmate's act.
  - Directly witnessing an injury, including an attempted suicide, to a person who subsequently dies before or upon arrival at a hospital emergency department if the person was injured by grievous bodily harm of a nature that shocks the conscience.
  - Participating in the physical treatment of an injury, including an attempted suicide, to a person who subsequently dies before or upon arrival at a hospital emergency department if the person was injured by grievous bodily harm of a nature that shocks the conscience.
  - Manually transporting a person who was injured, including by suicide attempt, and who subsequently dies before or upon arrival at a hospital emergency department if the person was injured by grievous bodily harm of a nature that shocks the conscience.
  - Directly witnessing a death, including a death by suicide, that involved grievous bodily harm of a nature that shocks the conscience.
  - Directly witnessing a homicide regardless of whether the homicide was criminal or excusable, including murder, mass killing, manslaughter, self-defense, misadventure, and negligence.
  - Seeing for oneself a decedent whose death involved grievous bodily harm of a nature that shocks the conscience.
- Correctional probation officers may be eligible for medical benefits and compensation for lost time if they are diagnosed with PTSD after experiencing one of eight qualifying events outlined in the bill, which are:
  - Being seriously injured by a probationer in a manner that shocks the conscience.
  - Being taken hostage by a probationer or trapped in a life-threatening situation due to the actions of a probationer.
  - Receiving a credible threat of great bodily harm or death to himself or herself, or to a loved one, that is made by a probationer who has the means to carry out the threat or by a person who is acting on behalf of a probationer and has the means to carry out the threat.
  - Making a life-threatening mistake or not preventing a life-threatening situation that leads to the death or serious bodily injury of a probationer, bystander, correctional probation officer, or law enforcement officer.
  - Directly witnessing an injury or death, including injury or death due to suicide, of a probationer who suffered grievous bodily harm of a nature that shocks the conscience.
  - Participating in the physical treatment of a probationer's injury, including an injury due to attempted suicide, if the probationer dies before or upon arrival at a hospital emergency department and the probationer was injured by grievous bodily harm of a nature that shocks the conscience.
  - Manually transporting a probationer who was injured, including an injury due to attempted suicide, if the probationer dies before or upon arrival at a hospital emergency department and the probationer was injured by grievous bodily harm of a nature that shocks the conscience.

[39] *Id*. at 17.

- Directly witnessing a homicide committed by or against a probationer, regardless of whether the homicide was criminal or excusable, including murder, mass killing, manslaughter, self-defense, misadventure, and negligence.

Existing law makes about 140,000 first responders eligible for workers' compensation benefits for PTSD; this includes 48,474 law enforcement officers,[40] 19,000 firefighters,[41] 40,385 emergency medical technicians,[42] and 34,893 paramedics.[43]

The bill extends PTSD benefits to about 18,500 correctional and correctional probation officers,[44] and 238 part-time and auxiliary law enforcement officers.[45]

The bill also creates a new requirement for the employing agency, to help ensure that claims are legitimate, by requiring the employer to document that the employee was personally involved in a qualifying event before the employee can be deemed eligible for workers' compensation benefits.

The bill amends notice requirements for PTSD claims brought by employees working as firefighters, paramedics, emergency medical technicians, law enforcement officers, correctional officers, or correctional probation officers as follows:

- Notice of Injury: Currently, a first responder who suffers from PTSD must file a notice of injury with his or her employer within 90 days of a qualifying event identified in the law, or the manifestation of the disorder, whichever is later. The bill requires notification within 90 days of a qualifying event identified in the law, or diagnosis of the disorder, whichever is later.
- Notice of Claim: Currently, If the compensability of an injury is disputed, the first responder must file a petition for workers' compensation benefits within 52 weeks after the qualifying event. The bill requires notification within 52 weeks of a qualifying event or diagnosis of PTSD, whichever is later.

Making a claim due within one year of diagnosis allows claims more than one year after a qualifying event, because symptoms of PTSD may begin shortly after a traumatic event, or may not appear until years after the event.

The bill places an emphasis on the need to mitigate traumatic stress by increasing training requirements for firefighters, paramedics, emergency medical technicians, law enforcement officers, and correctional officers, correctional probation officers. The law currently requires training to mitigate traumatic stress, but does not require any specific amount or type of training. The bill requires at least one hour of training, either in person or by electronic means, each year. The required training must include, but is not limited to, peer support programs, mental health awareness training provided by a licensed mental health practitioner who specializes in PTSD, and suicide prevention programs.

Finally, the bill extends confidentiality rules for peer support programs – which currently cover firefighters, paramedics, emergency medical technicians, law enforcement officers and 911 public safety telecommunicators – to include correctional officers and correctional probation officers.

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[40] Florida Department of Law Enforcement, *2020 Criminal Justice Agency Profile Report*, https://www.fdle.state.fl.us/CJSTC/Publications/CJAP/CJAP.aspx (last visited Jan. 24, 2022) (reports 4,352 officers working for state agencies; 22,416 working for sheriff's offices; 1,902 working for schools, universities, and ports; and 19,804 working for municipal police departments).

[41] U.S. Bureau of Labor Statistics, *Occupational Employment and Wages, May 2020*, https://www.bls.gov/oes/current/oes_fl.htm (last visited Jan. 24, 2022).

[42] Department of Health, License Verification, https://mqa-internet.doh.state.fl.us/MQASearchServices/HealthCareProviders (last visited Jan. 24, 2022).

[43] *Id*.

[44] Department of Financial Services, Agency Analysis of 2022 House Bill 425 (Jan. 21, 2022).

[45] *Id*. In a fiscal analysis for a Senate bill that expands workers' compensation benefits for PTSD to correctional officers and correctional probation officers, the Department of Corrections indicates that it provides mental health awareness, prevention, and mitigation programs to inmates, and that it would have to develop new training programs if it were required to provide mental health awareness programs to correctional officers and correctional probation officers. *See* Department of Corrections, Agency Analysis of 2022 Senate Bill 664 (Dec. 2, 2021).

B. SECTION DIRECTORY:

Section 1. Amends s. 112.1815, F.S., Firefighters, paramedics, emergency medical technicians, and law enforcement officers; special provisions for employment-related accidents and injuries.

Section 2. Creates s. 112.18155, F.S., Correctional officers and part-time correctional officers; special provisions for posttraumatic stress disorders.

Section 3. Creates s. 112.18156, F.S., Correctional probation officers and part-time correctional probation officers; special provisions for posttraumatic stress disorders.

Section 4. Creates s. 111.095, F.S., Peer support for correctional officers and correctional probation officers.

Section 5. Amends s. 111.09, F.S., Peer support for first responders.

Section 6. Amends s. 119.071, F.S., General exemptions from inspection or copying of public records.

Section 7. Amends s. 627.659, F.S., Blanket health insurance; eligible groups.

Section 8. Provides a declaration of an important state interest.

Section 9. Provides an effective date of July 1, 2022.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

   None.

2. Expenditures:

   The cost of providing PTSD benefits to correctional officers, correctional probation officers, part-time and auxiliary law enforcement officers who did not suffer a physical injury likely will be significant, as the average cost of providing such benefits to law enforcement officers, firefighters, emergency medical technicians and paramedics covered by the state's Risk Management Trust Fund has been $42,326 per claim. A fiscal impact for this bill has been requested.

   The cost of one hour of annual training is unknown; many state agencies already provide mental health training in some format. The Department of Corrections indicated that it provides mental health training programs to inmates but would need to develop new programs to provide such training to employees.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

   None.

2. Expenditures:

   Municipalities, counties, and special districts likely would be required to pay more workers' compensation claims due to the inclusion of part-time and auxiliary law enforcement officers.

   The cost of providing one hour of annual training is unknown; many local agencies already provide training in some format.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

Physicians who are authorized providers could experience an increase in patients and insurance carriers could experience an increase in claims.

D. FISCAL COMMENTS:

The bill has an indeterminate, likely significant, negative fiscal impact on state and local governments.

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

The county/municipality mandates provision of Art. VII, section 18, of the Florida Constitution may apply because this bill extends workers' compensation benefits for PTSD to part-time and auxiliary law enforcement officers, correctional officers, and correctional probation officers, and also requires mental health awareness training for law enforcement officers, correctional officers, and correctional probation officers; however, an exemption may apply because all similarly situated state and local government employers of the aforementioned first responders are required to provide workers' compensation benefits.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

The bill provides rulemaking authority to the Department of Financial Services, Division of Workers' Compensation.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

IV. AMENDMENTS/COMMITTEE SUBSTITUTE CHANGES