

**The Florida Senate**  
**BILL ANALYSIS AND FISCAL IMPACT STATEMENT**

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

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Prepared By: The Professional Staff of the Budget Committee

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BILL: SB 1958 (SPB 7062)

INTRODUCER: Budget Committee

SUBJECT: Correctional Medical Authority

DATE: February 10, 2012      REVISED: \_\_\_\_\_

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Sneed	Rhodes	BC	<b>SPB 7062 Favorable</b>
2.	_____	_____	_____	_____
3.	_____	_____	_____	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

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**I. Summary:**

This bill conforms Florida Statutes to the Senate proposed Fiscal Year 2012-13 General Appropriations Act.

The bill substantially amends s. 945.602(1), Florida Statutes, by reassigning, for administrative purposes, the State of Florida Correctional Medical Authority (CMA) from the Department of Health to the Executive Office of the Governor. All powers, duties, functions, and administrative rules transfer from the Department of Health to the Executive Office of the Governor.

**II. Present Situation:**

The Correctional Medical Authority (CMA) was created in 1986.<sup>1</sup> The CMA is housed within the Department of Health (DOH) for administrative purposes, but is not subject to the control or supervision of DOH or the Department of Corrections.<sup>2</sup>

The governing board of the authority is composed of nine persons appointed by the Governor subject to confirmation by the Senate. Members of the CMA are not compensated for performance of their duties but they are paid expenses incurred while engaged in the performance of such duties pursuant to s. 112.061, F.S.<sup>3</sup>

According to section 945.603, F.S.:

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<sup>1</sup> Ch. 86-183, Laws of Florida.

<sup>2</sup> s. 945.602, Florida Statutes.

<sup>3</sup> *Id.*

The purpose of the authority is to assist in the delivery of health care services for inmates in the Department of Corrections by advising the Secretary of Corrections on the professional conduct of primary, convalescent, dental, and mental health care and the management of costs consistent with quality care, by advising the Governor and the Legislature on the status of the Department of Corrections' health care delivery system, and by assuring that adequate standards of physical and mental health care for inmates are maintained at all Department of Corrections' institutions.

Pursuant to this section, the CMA is authorized to:

- (1) Review and advise the Secretary of Corrections on cost containment measures the Department of Corrections could implement.
- (2) Review and make recommendations regarding health care for the delivery of health care services including, but not limited to, acute hospital-based services and facilities, primary and tertiary care services, ancillary and clinical services, dental services, mental health services, intake and screening services, medical transportation services, and the use of nurse practitioner and physician assistant personnel to act as physician extenders as these relate to inmates in the Department of Corrections.
- (3) Develop and recommend to the Governor and the Legislature an annual budget for all or part of the operation of the State of Florida prison health care system.
- (4) Review and advise the Secretary of Corrections on contracts between the Department of Corrections and third parties for quality management programs.
- (5) Review and advise the Secretary of Corrections on minimum standards needed to ensure that an adequate physical and mental health care delivery system is maintained by the Department of Corrections.
- (6) Review and advise the Secretary of Corrections on the sufficiency, adequacy, and effectiveness of the Department of Corrections' Office of Health Services' quality management program.
- (7) Review and advise the Secretary of Corrections on the projected medical needs of the inmate population and the types of programs and resources required to meet such needs.
- (8) Review and advise the Secretary of Corrections on the adequacy of pre-service, in-service, and continuing medical education programs for all health care personnel and, if necessary, recommend changes to such programs within the Department of Corrections.
- (9) Identify and recommend to the Secretary of Corrections the professional incentives required to attract and retain qualified professional health care staff within the prison health care system.

- (10) Coordinate the development of prospective payment arrangements as described in s. 408.50, F.S., when appropriate for the acquisition of inmate health care services.
- (11) Review the Department of Corrections' health services plan and advise the Secretary of Corrections on its implementation.
- (12) Sue and be sued in its own name and plead and be impleaded.
- (13) Make and execute agreements of lease, contracts, deeds, mortgages, notes, and other instruments necessary or convenient in the exercise of its powers and functions under this act.
- (14) Employ or contract with health care providers, medical personnel, management consultants, consulting engineers, architects, surveyors, attorneys, accountants, financial experts, and such other employees, entities, or agents as may be necessary in its judgment to carry out the mandates of the Correctional Medical Authority and fix their compensation.
- (15) Recommend to the Legislature such performance and financial audits of the Office of Health Services in the Department of Corrections as the authority considers advisable.

Section 945.6031, F.S., requires the CMA to submit reports to the Governor and Legislature on the status of DOC's health care delivery system.<sup>4</sup> This section also requires CMA to conduct surveys of the physical and mental health care system at each correctional institution and report the survey findings for each institution to the Secretary of Corrections. A process by which DOC must respond to such surveys is set forth in this section.

Sections 945.6035 and 945.6036, F.S., set forth a process to resolve any disputes which arise between the authority and the department regarding the physical and mental health care of inmates.

### III. Effect of Proposed Changes:

**Section 1** amends s. 945.602, F.S., by assigning the CMA to the Executive Office of the Governor instead of the Department of Health. The CMA will continue to function as an independent entity and as such, will not be subject to control, supervision, or direction by EOG. Additionally, the CMA governing board is required to contract with EOG. Any member of the governing board may continue to serve his term even if the term has expired until a successor is appointed.

**Section 2** transfers all of the CMA's powers, duties, functions, records, offices, personnel, associated administrative support positions, property, pending issues, existing contracts, administrative authority, and administrative rules from the Department of Health to EOG.

**Section 3** provides an effective date of July 1, 2012.

### IV. Constitutional Issues:

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<sup>4</sup> <http://www.doh.state.fl.us/cma/reports/index.html>

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

**IV. Fiscal Impact Statement:**

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

Funding for the Correctional Medical Authority will cost approximately \$664,003 which includes 6.0 FTE. The Senate proposed Fiscal Year 2012-13 General Appropriations Act authorizes 6.0 FTE and appropriations totaling \$580,578 from the General Revenue Fund to cover a partial year’s operating costs (9 months) for the CMA. Additional appropriations of recurring general revenue totaling \$83,425 will be required in Fiscal Year 2013-14 to fully cover annual operating costs for the authority (*see below*).

	Year 1 <u>(9 months)</u>	Year 2 <u>(3 months)</u>
6.0 FTE		
Salaries/Benefits	\$315,391	\$105,097
Lump Sum -EOG	<u>265,287</u>	<u>(21,672)</u>
Total Costs	<u>\$580,578</u>	<u>\$ 83,425</u>

**V. Technical Deficiencies:**

None.

**VI. Related Issues:**

None.

**VII. Additional Information:**

- A. **Committee Substitute – Statement of Substantial Changes:**  
(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

- B. **Amendments:**

None.

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This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

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