By the Committee on Health Care Licensing & Regulation and Representatives Ritter and Goodlette $\,$

1	A bill to be entitled
2	An act relating to governmental reorganization;
3	amending s. 20.42, F.S.; reassigning the Agency
4	for Health Care Administration to the
5	Department of Health Care; requiring the
6	Executive Director of Health Care
7	Administration to be confirmed by the Senate;
8	making changes in the organizational structure
9	of the agency; amending s. 20.43, F.S.;
10	redesignating the Department of Health as the
11	Department of Health Care; repealing
12	authorization for the Department of Health to
13	contract with the Agency for Health Care
14	Administration for certain services;
15	transferring to the Department of Health Care
16	the powers, duties, functions, and assets that
17	relate to the consumer complaint services,
18	investigations, and prosecutorial services that
19	are performed by the Agency for Health Care
20	Administration under contract with the
21	Department of Health; providing for the
22	appointment of and duties for an Organizational
23	Efficiency Advisory Committee; providing for a
24	reviser's bill; providing for the validity of
25	pending judicial and administrative
26	proceedings; providing an effective date.
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28	Be It Enacted by the Legislature of the State of Florida:
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30	Section 1. Section 20.42, Florida Statutes, 1998
31	Supplement, is amended to read:

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20.42 Agency for Health Care Administration. -- There is created the Agency for Health Care Administration within the Department of Health Care Business and Professional Regulation. The agency shall be a separate budget entity, and the executive director of the agency shall be the agency head for all purposes. The agency shall not be subject to control, supervision, or direction by the Department of Health Care Business and Professional Regulation in any manner, including, but not limited to, personnel, purchasing, transactions involving real or personal property, and budgetary matters.

- (1) EXECUTIVE DIRECTOR OF HEALTH CARE ADMINISTRATION. -- The head of the agency is the Executive Director of Health Care Administration, who shall be appointed by the Governor, subject to confirmation by the Senate. The executive director shall serve at the pleasure of and report to the Governor. The requirement for Senate confirmation applies to any person appointed on or after October 1, 1999.
- (2) ORGANIZATION OF THE AGENCY. -- The agency shall be organized as follows:
- (a) The Division of Managed Care and Health Quality Assurance, which shall be responsible for health facility licensure and inspection, managed competition, managed care, and the certificate-of-need program.
- (b) The Division of Health Policy and Cost Control, which shall be responsible for health policy, the State Center for Health Statistics, the development of The Florida Health Plan, certificate of need, state and local health planning under s. 408.033, and research and analysis.
- (b)(c) The Division of Medicaid, which State Health Purchasing shall be responsible for the Medicaid program. The 31 division shall also administer the Florida Kidcare program

contracts with the Florida Health Access Corporation program and the Florida Health Care Purchasing Cooperative and the contract with the Florida Healthy Kids Corporation.

- (c)(d) The Division of Administration and Information

 Administrative Services, which shall be responsible for

 finance and accounting revenue management, budget, personnel,

 and general services, management information services, and the

 State Center for Health Statistics.
- (3) DEPUTY DIRECTOR FOR MANAGED CARE AND HEALTH QUALITY ASSURANCE.—The director shall appoint a Deputy Director for Managed Care and Health Quality Assurance who shall serve at the pleasure of, and be directly responsible to, the executive director. The Deputy Director for Managed Care and Health Quality Assurance shall be responsible for the Division of Managed Care and Health Quality Assurance.
- (4) DEPUTY DIRECTOR FOR HEALTH POLICY AND COST

 CONTROL.--The director shall appoint a Deputy Director for

 Health Policy and Cost Control who shall serve at the pleasure
 of, and be directly responsible to, the director. The Deputy

 Director for Health Policy and Cost Control shall be
 responsible for the Division of Health Policy and Cost
 Control.
- (4)(5) DEPUTY DIRECTOR FOR MEDICAID STATE HEALTH

 PURCHASING.--The executive director shall appoint a Deputy

 Director for Medicaid State Health Purchasing who shall serve at the pleasure of, and be directly responsible to, the executive director. The Deputy Director for Medicaid State Health Purchasing shall be responsible for the Division of Medicaid State Health Purchasing.
- (5)(6) DEPUTY DIRECTOR FOR ADMINISTRATION AND INFORMATION OF ADMINISTRATIVE SERVICES.--The executive

director shall appoint a Deputy Director <u>for Administration</u>
and <u>Information of Administrative</u> Services who shall serve at
the pleasure of, and be directly responsible to, the <u>executive</u>
director. The Deputy Director <u>for Administration and</u>
<u>Information Services</u> shall be responsible for the Division of
Administration and Information Administrative Services.

Section 2. Section 20.43, Florida Statutes, 1998 Supplement, is amended to read:

- 20.43 Department of Health <u>Care</u>.--There is created a Department of Health Care.
- (1) The purpose of the Department of Health <u>Care</u> is to promote and protect the health of all residents and visitors in the state through organized state and community efforts, including cooperative agreements with counties. The department shall:
- (a) Prevent, to the fullest extent possible, the occurrence and progression of communicable and noncommunicable diseases and disabilities.
- (b) Maintain a constant surveillance of disease occurrence and accumulate health statistics necessary to establish disease trends and to design health programs.
- (c) Conduct special studies of the causes of diseases and formulate preventive strategies.
- (d) Promote the maintenance and improvement of the environment as it affects public health.
- (e) Promote the maintenance and improvement of health in the residents of the state.
- (f) Provide leadership, in cooperation with the public and private sectors, in establishing statewide and community public health delivery systems.

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- (g) Provide health care and early intervention services to infants, toddlers, children, adolescents, and high-risk perinatal patients who are at risk for disabling conditions or have chronic illnesses.
- (h) Provide services to abused and neglected children through child protection teams and sexual abuse treatment programs.
- (i) Develop working associations with all agencies and organizations involved and interested in health and health care delivery.
- (j) Analyze trends in the evolution of health systems, and identify and promote the use of innovative, cost-effective health delivery systems.
- (k) Serve as the statewide repository of all aggregate data accumulated by state agencies related to health care; analyze that data and issue periodic reports and policy statements, as appropriate; require that all aggregated data be kept in a manner that promotes easy utilization by the public, state agencies, and all other interested parties; provide technical assistance as required; and work cooperatively with the state's higher education programs to promote further study and analysis of health care systems and health care outcomes.
- (1) Biennially publish, and annually update, a state health plan that assesses current health programs, systems, and costs; makes projections of future problems and opportunities; and recommends changes needed in the health care system to improve the public health.
- (m) Regulate health practitioners, to the extent authorized by the Legislature, as necessary for the 31 preservation of the health, safety, and welfare of the public.

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- (2) The head of the Department of Health <u>Care</u> is the Secretary of Health <u>Care</u> and State Health Officer. The secretary must be a physician licensed under chapter 458 or chapter 459 who has advanced training or extensive experience in public health administration. The secretary is appointed by the Governor, subject to confirmation by the Senate. The secretary serves at the pleasure of the Governor.
- (3) The following divisions of the Department of Health <u>Care</u> are established, and each division is under the <u>direct supervision of a division director appointed by the secretary:</u>
 - (a) Division of Administration.
 - (b) Division of Environmental Health.
 - (c) Division of Disease Control.
 - (d) Division of Family Health Services.
 - (e) Division of Children's Medical Services.
- (f) Division of Local Health Planning, Education, and Workforce Development.
- (g) Division of Medical Quality Assurance, which is responsible for the following boards and professions established within the division:
 - 1. Nursing assistants, as provided under s. 400.211.
- 23 2. Health care services pools, as provided under s. 402.48.
- 25 3. The Board of Acupuncture, created under chapter 26 457.
 - 4. The Board of Medicine, created under chapter 458.
 - 5. The Board of Osteopathic Medicine, created under chapter 459.
- 30 6. The Board of Chiropractic Medicine, created under 31 chapter 460.

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- 7. The Board of Podiatric Medicine, created under chapter 461.
 - 8. Naturopathy, as provided under chapter 462.
 - 9. The Board of Optometry, created under chapter 463.
 - 10. The Board of Nursing, created under chapter 464.
 - 11. The Board of Pharmacy, created under chapter 465.
 - 12. The Board of Dentistry, created under chapter 466.
 - 13. Midwifery, as provided under chapter 467.
- 14. The Board of Speech-Language Pathology and Audiology, created under part I of chapter 468.
- 15. The Board of Nursing Home Administrators, created under part II of chapter 468.
- 16. The Board of Occupational Therapy, created under part III of chapter 468.
- 17. Respiratory therapy, as provided under part V of chapter 468.
- 18. Dietetics and nutrition practice, as provided under part X of chapter 468.
- 19. Athletic trainers, as provided under part XIII of chapter 468.
- 20. The Board of Orthotists and Prosthetists, created under part XIV of chapter 468.
 - 21. Electrolysis, as provided under chapter 478.
- 22. The Board of Massage Therapy, created under chapter 480.
- 23. The Board of Clinical Laboratory Personnel, created under part III of chapter 483.
- 24. Medical physicists, as provided under part IV of chapter 483.
- 30 25. The Board of Opticianry, created under part I of 31 chapter 484.

- 1 26. The Board of Hearing Aid Specialists, created 2 under part II of chapter 484.
 - 27. The Board of Physical Therapy Practice, created under chapter 486.
 - 28. The Board of Psychology, created under chapter 490.
 - 29. School psychologists, as provided under chapter 490.
 - 30. The Board of Clinical Social Work, Marriage and Family Therapy, and Mental Health Counseling, created under chapter 491.

The department may contract with the Agency for Health Care

Administration who shall provide consumer complaint,

investigative, and prosecutorial services required by the

Division of Medical Quality Assurance, councils, or boards, as

appropriate.

(4)(a) The members of each board within the department shall be appointed by the Governor, subject to confirmation by the Senate. Consumer members on the board shall be appointed pursuant to paragraph (b). Members shall be appointed for 4-year terms, and such terms shall expire on October 31. However, a term of less than 4 years may be used to ensure that:

- 1. No more than two members' terms expire during the same calendar year for boards consisting of seven or eight members.
- 2. No more than 3 members' terms expire during the same calendar year for boards consisting of 9 to 12 members.

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No more than 5 members' terms expire during the same calendar year for boards consisting of 13 or more members.

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A member whose term has expired shall continue to serve on the board until such time as a replacement is appointed. A vacancy on the board shall be filled for the unexpired portion of the term in the same manner as the original appointment. No member may serve for more than the remaining portion of a previous member's unexpired term, plus two consecutive 4-year terms of the member's own appointment thereafter.

- (b) Each board with five or more members shall have at least two consumer members who are not, and have never been, members or practitioners of the profession regulated by such board or of any closely related profession. Each board with fewer than five members shall have at least one consumer member who is not, and has never been, a member or practitioner of the profession regulated by such board or of any closely related profession.
- (c) Notwithstanding any other provision of law, the department is authorized to establish uniform application forms and certificates of licensure for use by the boards within the department. Nothing in this paragraph authorizes the department to vary any substantive requirements, duties, or eligibilities for licensure or certification as provided by law.
- The department shall plan and administer its public health programs through its county health departments and may, for administrative purposes and efficient service delivery, establish up to 15 service areas to carry out such 31 duties as may be prescribed by the secretary. The boundaries

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of the service areas shall be the same as, or combinations of, the districts of the health and human services boards established in s. 20.19 and, to the extent practicable, shall take into consideration the boundaries of the jobs and education regional boards.

- (6) The secretary and division directors are authorized to appoint ad hoc advisory committees as necessary. The issue or problem that the ad hoc committee shall address, and the timeframe within which the committee is to complete its work, shall be specified at the time the committee is appointed. Ad hoc advisory committees shall include representatives of groups or entities affected by the issue or problem that the committee is asked to examine. Members of ad hoc advisory committees shall receive no compensation, but may, within existing departmental resources, receive reimbursement for travel expenses as provided in s. 112.061.
- (7) To protect and improve the public health, the department may use state or federal funds to:
- (a) Provide incentives, including food coupons or payment for travel expenses, for encouraging disease prevention and patient compliance with medical treatment, such as tuberculosis therapy.
- (b) Plan and conduct health education campaigns for the purpose of protecting or improving public health. The department may purchase promotional items and advertising, such as space on billboards or in publications or radio or television time, for health information and promotional messages that recognize that the following behaviors, among others, are detrimental to public health: unprotected sexual intercourse, other than with one's spouse; cigarette smoking; 31 alcohol consumption or other substance abuse during pregnancy;

alcohol abuse or other substance abuse; lack of exercise and poor diet and nutrition habits; and failure to recognize and address a genetic tendency to suffer from sickle-cell anemia, diabetes, high blood pressure, cardiovascular disease, or cancer. For purposes of activities under this paragraph, the department of Health may establish requirements for local matching funds or in-kind contributions to create and distribute advertisements, in either print or electronic format, which are concerned with each of the targeted behaviors, establish an independent evaluation and feedback system for the public health communication campaign, and monitor and evaluate the efforts to determine which of the techniques and methodologies are most effective.

(c) Plan and conduct promotional campaigns to recruit health professionals to be employed by the department or to recruit participants in departmental programs for health practitioners, such as scholarship, loan repayment, or volunteer programs. To this effect the department may purchase promotional items and advertising.

Section 3. (1) Effective July 1, 1999, all powers, duties, functions, records, personnel, property, and unexpended balances of appropriations, allocations, and other funds of the Agency for Health Care Administration which relate to consumer complaint services, investigations, and prosecutorial services and which are currently provided by the Agency for Health Care Administration under a contract with the Department of Health are transferred by a type two transfer, as defined in s. 20.06(2), Florida Statutes, to the Department of Health Care. Any rules adopted by or for the Agency for Health Care Administration for the purpose of administering or operating such programs are included in this

transfer and shall remain in effect until specifically changed 1 2 in the manner provided by law. (2)(a) All records, personnel, and funds of the 3 4 consumer complaint and investigative services units are 5 transferred and assigned to the Division of Medical Quality 6 Assurance of the Department of Health Care. 7 (b) All records, personnel, and funds of the 8 prosecutorial unit are transferred and assigned to the Office 9 of the General Counsel of the Department of Health Care. 10 Section 4. The Secretary of Health Care and the 11 Executive Director of Health Care Administration shall each 12 appoint four staff members to an Organizational Efficiency 13 Advisory Committee. Appointments must be made no later than 14 August 1, 1999. The Secretary of Health Care shall designate a member of the committee to serve as committee chair. The 15 committee shall be assigned, for administrative purposes only, 16 to the Department of Health Care. The committee shall review 17 current activities and make recommendations regarding 18 19 consolidation of potentially duplicative functions, 20 particularly those relating to administrative services, legal services, information and management information systems, and 21 data and planning services, and any needed modifications in 22 organizational structure. The committee shall report its 23 24 findings, including recommendations for changes in state 25 policy, rules, and statutes that will improve the 26 administrative efficiency of the Department of Health Care and 27 the Agency for Health Care Administration, to the Secretary of 28 Health Care, the Executive Director of Health Care 29 Administration, the Governor, the President of the Senate, and the Speaker of the House of Representatives by January 15, 30 2000.

Section 5. The Division of Statutory Revision of the Office of Legislative Services is requested to prepare a reviser's bill for introduction at a subsequent session of the Legislature to change the term "Department of Health" to "Department of Health Care" in the Florida Statutes and to make such further changes as are necessary to conform the Florida Statutes to the organizational changes effected by this act. Section 6. This act does not affect the validity of any judicial or administrative proceeding pending as of the effective date of this act, and any entity to which are transferred the powers, duties, and functions of any agency relating to the pending proceedings shall be substituted as a party in interest. Section 7. This act shall take effect July 1, 1999.