## Florida House of Representatives - 2000 By Representative Bradley

1	A bill to be entitled
2	An act relating to improving racial and ethnic
3	health outcomes; creating s. 381.7351, F.S.;
4	creating the "Reducing Racial and Ethnic Health
5	Disparities: Closing the Gap Act"; creating s.
6	381.7352, F.S.; providing legislative findings
7	and intent; creating s. 381.7353, F.S.;
8	providing for the creation of the Reducing
9	Racial and Ethnic Health Disparities: Closing
10	the Gap grant program, to be administered by
11	the Department of Health; providing department
12	duties and responsibilities; authorizing
13	appointment of an advisory committee; creating
14	s. 381.7354, F.S.; providing eligibility for
15	grant awards; creating s. 381.7355, F.S.;
16	providing project requirements, an application
17	process, and review criteria; creating s.
18	381.7356, F.S.; providing for Closing the Gap
19	grant awards; providing for local matching
20	funds; providing factors for determination of
21	the amount of grant awards; providing for award
22	of grants to begin by a specified date, subject
23	to specific appropriation; providing for annual
24	renewal of grants; providing an appropriation;
25	providing an effective date.
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27	WHEREAS, the death rate for cancer among African
28	American men is approximately 50 percent higher than for white
29	men, and
30	WHEREAS, African Americans are nearly twice as likely
31	to die of stroke as whites, and
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1 WHEREAS, African American women are 50 percent more 2 likely, and Hispanic women are 30 percent more likely, than 3 non-Hispanic white women to be diagnosed with late-stage 4 breast cancer, and 5 WHEREAS, the death rate for coronary heart disease is 6 6 percent higher for African Americans than for whites, and 7 WHEREAS, during the first year of life, the rate of 8 death for African American babies is twice that of white 9 babies, and African Americans are twice as likely as whites to 10 have low birthweight babies, and 11 WHEREAS, African Americans are twice as likely to have 12 diabetes as whites, and Hispanic whites are 25 percent more 13 likely than non-Hispanic whites to have diabetes, and WHEREAS, African Americans are 77 percent more likely, 14 and Hispanics are 26 percent more likely, than non-Hispanic 15 16 whites to suffer from obesity, and WHEREAS, Native American youth are 34 percent more 17 18 likely to be current smokers than non-Hispanic white youth, 19 and 20 WHEREAS, African American and Hispanic adults are 60 21 percent more likely than non-Hispanic white adults to be physically inactive, and 22 23 WHEREAS, African Americans are nearly six times as likely to die of AIDS as whites, and 24 25 WHEREAS, immunization against vaccine-preventable 26 diseases saves millions of dollars in health care costs and 27 reduces the number of absences from school and work, thereby 28 creating environments in which children and adults can 29 succeed, and 30 31

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CODING: Words stricken are deletions; words underlined are additions.

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1 WHEREAS, to promote good health practices, a community 2 must develop systems that support healthy behaviors and 3 address the real causes of death and illness, and 4 WHEREAS, health promotion and disease prevention are 5 less costly than treatment of disease, and WHEREAS, the Legislature supports the principle of the 6 7 Front Porch Florida initiative and finds that residents can 8 work with government to identify resources both inside and 9 outside the community, and create neighborhood networks empowered to address racial and ethnic disparities in health 10 11 specific to their communities, and 12 WHEREAS, the Legislature intends to close the health 13 status gap between racial and ethnic populations by making 14 available grants to fund local projects addressing the real causes of death and illness, increasing public awareness of 15 16 the impact of unhealthy lifestyles, increasing community-based health promotion activities, and increasing community-based 17 disease prevention activities, NOW, THEREFORE, 18 19 20 Be It Enacted by the Legislature of the State of Florida: 21 22 Section 1. Section 381.7351, Florida Statutes, is created to read: 23 24 381.7351 Short title.--Sections 381.7351-381.7356 may be cited as the "Reducing Racial and Ethnic Health 25 26 Disparities: Closing the Gap Act." 27 Section 2. Section 381.7352, Florida Statutes, is 28 created to read: 29 381.7352 Legislative findings and intent.--30 The Legislature finds that despite state (1)investments in health care programs, certain racial and ethnic 31 3

populations in Florida continue to have significantly poorer 1 2 health outcomes when compared to non-Hispanic whites. The Legislature finds that local solutions to health care problems 3 can have a dramatic and positive effect on the health status 4 5 of these populations. Local governments and communities are 6 best equipped to identify the health education, health 7 promotion, and disease prevention needs of the racial and 8 ethnic populations in their communities, mobilize the 9 community to address health outcome disparities, enlist and organize local public and private resources to address these 10 11 disparities, and evaluate the effectiveness of interventions. 12 (2) It is therefore the intent of the Legislature to 13 provide funds within Florida counties and neighborhoods, in 14 the form of Reducing Racial and Ethnic Health Disparities: Closing the Gap grants, to stimulate the development of 15 16 community-based and neighborhood-based projects which will improve the health outcomes of racial and ethnic populations. 17 Further, it is the intent of the Legislature that these 18 programs foster the development of coordinated, collaborative, 19 20 and broad-based participation by public and private entities. Finally, it is the intent of the Legislature that the grant 21 22 program function as a partnership between state and local governments and private-sector health care providers, 23 including managed care, voluntary health care resources, 24 social service providers, and nontraditional partners. 25 26 Section 3. Section 381.7353, Florida Statutes, is 27 created to read: 28 381.7353 Reducing Racial and Ethnic Health 29 Disparities: Closing the Gap grant program; administration; department duties. --30 31

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1	(1) The Reducing Racial and Ethnic Health Disparities:
2	Closing the Gap grant program shall be administered by the
3	Department of Health.
4	(2) The department shall:
5	(a) Publicize the availability of funds and establish
6	an application process for submitting a grant proposal.
7	(b) Provide technical assistance and training,
8	including a statewide meeting promoting best practice
9	programs, as requested, to grant recipients.
10	(c) Develop uniform data reporting requirements for
11	the purpose of evaluating the performance of the grant
12	recipients and demonstrating improved health outcomes.
13	(d) Develop a monitoring process to evaluate progress
14	toward meeting grant objectives.
15	(e) Coordinate with existing community-based programs,
16	such as chronic disease community intervention programs,
17	cancer prevention and control programs, diabetes control
18	programs, the Healthy Start program, the Florida KidCare
19	Program, the HIV/AIDS program, immunization programs, and
20	other related programs at the state and local levels, to avoid
21	duplication of effort and promote consistency.
22	(3) Pursuant to s. 20.43(6), the secretary may appoint
23	an ad hoc advisory committee to: examine areas where public
24	awareness, public education, research, and coordination
25	regarding racial and ethnic health outcome disparities are
26	lacking; consider access and transportation issues which
27	contribute to health status disparities; and make
28	recommendations for closing gaps in health outcomes and
29	increasing the public's awareness and understanding of health
30	disparities that exist between racial and ethnic populations.
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Section 4. Section 381.7354, Florida Statutes, is created to read: 381.7354 Eligibility.--(1) Any person, entity, or organization within a single county may apply for a Closing the Gap grant and shall serve as the lead agency to administer and coordinate project activities within that county and develop community partnerships necessary to implement the grant. (2) Persons, entities, or organizations within adjoining counties with populations of less than 100,000, based on the annual estimates produced by the Population Program of the University of Florida Bureau of Economic and Business Research, may jointly submit a multicounty Closing the Gap grant proposal. However, the proposal must clearly identify a single lead agency with respect to program accountability and administration. (3) In addition to the grants awarded under subsections (1) and (2), up to 20 percent of the funding for the Reducing Racial and Ethnic Health Disparities: Closing the Gap grant program shall be dedicated to projects that address improving racial and ethnic health status within a specific neighborhood. Specific priority shall be given to communities or neighborhoods that have been designated as Front Porch Florida Communities. (4) Nothing in ss. 381.7351-381.7356 shall prevent a person, entity, or organization within a county or group of

27 <u>counties from separately contracting for the provision of</u>

28 racial and ethnic health promotion, health awareness, and

29 disease prevention services.

30 Section 5. Section 381.7355, Florida Statutes, is 31 created to read:

1 381.7355 Project requirements; review criteria.--2 (1) Closing the Gap grant proposals shall be submitted 3 to the Department of Health for review. 4 (2) A proposal must include each of the following 5 elements: 6 (a) The purpose and objectives of the proposal, 7 including identification of the particular racial or ethnic 8 disparity the project will address. The proposal must address 9 one or more of the following priority areas: 10 1. Decreasing racial and ethnic disparities in 11 maternal and infant mortality rates. 12 2. Decreasing racial and ethnic disparities in 13 morbidity and mortality rates relating to cancer. 14 3. Decreasing racial and ethnic disparities in morbidity and mortality rates relating to HIV/AIDS. 15 16 4. Decreasing racial and ethnic disparities in 17 morbidity and mortality rates relating to cardiovascular 18 disease. 19 5. Decreasing racial and ethnic disparities in 20 morbidity and mortality rates relating to diabetes. 6. Increasing adult and child immunization rates in 21 22 certain racial and ethnic populations. 23 (b) Identification and relevance of the target 24 population. 25 (c) Methods for obtaining baseline health status data 26 and assessment of community health needs. 27 (d) Mechanisms for mobilizing community resources and 28 gaining local commitment. 29 (e) Development and implementation of health promotion and disease prevention interventions. 30 31

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1 (f) Mechanisms and strategies for evaluating the project's objectives, procedures, and outcomes. 2 (g) A proposed work plan, including a timeline for 3 4 implementing the project. 5 (h) Likelihood that project activities will occur and б continue in the absence of funding. 7 (3) Priority shall be given to proposals that: 8 (a) Represent areas with the greatest documented 9 racial and ethnic health status disparities. 10 (b) Exceed the minimum local contribution requirements 11 specified in s. 381.7356. 12 (c) Demonstrate broad-based local support and 13 commitment from entities representing racial and ethnic 14 populations, including non-Hispanic whites. Indicators of 15 support and commitment may include agreements to participate in the program, letters of endorsement, letters of commitment, 16 interagency agreements, or other forms of support. 17 (d) Demonstrate a high degree of participation by the 18 19 health care community in clinical preventive service 20 activities and community-based health promotion and disease 21 prevention interventions. (e) Have been submitted from counties with a high 22 23 proportion of residents living in poverty and with poor health 24 status indicators. (f) Demonstrate a coordinated community approach to 25 26 addressing racial and ethnic health issues within existing 27 publicly financed health care programs. 28 (g) Incorporate intervention mechanisms which have a 29 high probability of improving the targeted population's health 30 status. 31

(h) Demonstrate a commitment to quality management in 1 2 all aspects of project administration and implementation. 3 Section 6. Section 381.7356, Florida Statutes, is 4 created to read: 5 381.7356 Local matching funds; grant awards.-б (1) Only one Closing the Gap grant shall be awarded in 7 a county, or in a group of adjoining counties from which a 8 multicounty application is submitted. However, neighborhood 9 grants may be awarded in a county or group of adjoining counties that is also receiving a grant award. 10 (2) Closing the Gap grants shall be awarded on a 11 12 matching basis. One dollar in local matching funds must be 13 provided for each \$3 grant payment made by the state, except 14 that: 15 (a) In counties with populations greater than 50,000, up to 50 percent of the local match may be in-kind in the form 16 of free services or human resources. Fifty percent of the 17 local match must be in the form of cash. 18 19 (b) In counties with populations of 50,000 or less, 20 the required local matching funds may be provided entirely through in-kind contributions. 21 22 (c) Grant awards to neighborhoods shall not be 23 required to have a matching requirement. 24 (3) The amount of the grant award shall be based on the county or neighborhood's population, or on the combined 25 26 population in a group of adjoining counties from which a 27 multicounty application is submitted, and on other factors, as 28 determined by the department. 29 (4) Dissemination of grant awards shall begin no later than January 1, 2001. 30 31

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1 (5) A Closing the Gap grant shall be funded for 1 year 2 and may be renewed annually upon application to and approval 3 by the department, subject to the achievement of quality 4 standards, objectives, and outcomes and to the availability of 5 funds. (6) Implementation of the Reducing Racial and Ethnic 6 7 Health Disparities: Closing the Gap grant program shall be 8 subject to a specific appropriation provided in the General 9 Appropriations Act. 10 Section 7. There is appropriated from the General 11 Revenue Fund to the Department of Health the sum of \$10 12 million to be used to establish and implement the Reducing 13 Racial and Ethnic Health Disparities: Closing the Gap grant 14 program, including funding for one full-time-equivalent 15 position. 16 Section 8. This act shall take effect upon becoming a 17 law. 18 19 20 HOUSE SUMMARY Creates the "Reducing Racial and Ethnic Health Disparities: Closing the Gap Act." Provides legislative findings and intent. Creates the Reducing Racial and Ethnic Health Disparities: Closing the Gap grant program, to be administered by the Department of Health. Provides duties and responsibilities of the department. Authorizes appointment of an ad hoc advisory committee by the department secretary. Provides eligibility, requirements, and procedures for award of grants to local individuals, entities, and organizations to address disparities in racial and ethnic health outcomes. Requires local matching funds or in-kind contributions. Provides for dissemination of 1-year grant awards beginning no later than January 1, 2001, subject to specific appropriation. Provides for annual applications for grant renewal. Provides an appropriation. 21 22 23 24 25 26 27 28 29 Provides an appropriation. 30 31

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