

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 effective date.

25  
26           WHEREAS, the death rate for cancer among African  
27   American men is approximately 50 percent higher than for white  
28   men, and

29           WHEREAS, African Americans are nearly twice as likely  
30   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

14           WHEREAS, African Americans are 77 percent more likely,  
15 and Hispanics are 26 percent more likely, than non-Hispanic  
16 whites to suffer from obesity, and

17           WHEREAS, Native American youth are 34 percent more  
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  
22 physically inactive, and

23           WHEREAS, African Americans are nearly fourteen times as  
24 likely to die of AIDS as whites, and

25           WHEREAS, African Americans ages 35 and older are 7 to  
26 15 percent more likely to develop glaucoma compared to all  
27 other population groups, and 50 percent of Asians over the age  
28 of 50 have glaucoma, and

29           WHEREAS, immunization against vaccine-preventable  
30 diseases saves millions of dollars in health care costs and  
31 reduces the number of absences from school and work, thereby

1 creating environments in which children and adults can  
2 succeed, and

3 WHEREAS, to promote good health practices, a community  
4 must develop systems that support healthy behaviors and  
5 address the real causes of death and illness, and

6 WHEREAS, health promotion and disease prevention are  
7 less costly than treatment of disease, and

8 WHEREAS, the Legislature supports the principle of the  
9 Front Porch Florida initiative and finds that residents can  
10 work with government to identify resources both inside and  
11 outside the community, and create neighborhood networks  
12 empowered to address racial and ethnic disparities in health  
13 specific to their communities, and

14 WHEREAS, the Legislature intends to close the health  
15 status gap between racial and ethnic populations by making  
16 available grants to fund local projects addressing the real  
17 causes of death and illness, increasing public awareness of  
18 the impact of unhealthy lifestyles, increasing community-based  
19 health promotion activities, and increasing community-based  
20 disease prevention activities, NOW, THEREFORE,

21  
22 Be It Enacted by the Legislature of the State of Florida:

23  
24 Section 1. Section 381.7351, Florida Statutes, is  
25 created to read:

26 381.7351 Short title.--Sections 381.7351-381.7356 may  
27 be cited as the "Reducing Racial and Ethnic Health  
28 Disparities: Closing the Gap Act."

29 Section 2. Section 381.7352, Florida Statutes, is  
30 created to read:

31 381.7352 Legislative findings and intent.--

1           (1) The Legislature finds that despite state  
 2 investments in health care programs, certain racial and ethnic  
 3 populations in Florida continue to have significantly poorer  
 4 health outcomes when compared to non-Hispanic whites. The  
 5 Legislature finds that local solutions to health care problems  
 6 can have a dramatic and positive effect on the health status  
 7 of these populations. Local governments and communities are  
 8 best equipped to identify the health education, health  
 9 promotion, and disease prevention needs of the racial and  
 10 ethnic populations in their communities, mobilize the  
 11 community to address health outcome disparities, enlist and  
 12 organize local public and private resources, and faith based  
 13 organizations to address these disparities, and evaluate the  
 14 effectiveness of interventions.

15           (2) It is therefore the intent of the Legislature to  
 16 provide funds within Florida counties and Front Porch Florida  
 17 Communities, in the form of Reducing Racial and Ethnic Health  
 18 Disparities: Closing the Gap grants, to stimulate the  
 19 development of community-based and neighborhood-based projects  
 20 which will improve the health outcomes of racial and ethnic  
 21 populations. Further, it is the intent of the Legislature  
 22 that these programs foster the development of coordinated,  
 23 collaborative, and broad-based participation by public and  
 24 private entities, and faith based organizations. Finally, it  
 25 is the intent of the Legislature that the grant program  
 26 function as a partnership between state and local governments,  
 27 faith based organizations, and private-sector health care  
 28 providers, including managed care, voluntary health care  
 29 resources, social service providers, and nontraditional  
 30 partners.

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1           (3) A faith-based organization receiving funding  
2 under the Reducing Racial and Ethnic Health Disparities:  
3 Closing the Gap Act must be a nonprofit organization holding a  
4 current exemption from federal taxation under s. 501(c)(3) of  
5 the Internal Revenue Code. Funding under this section shall  
6 not be used for religious or sectarian purposes.

7           Section 3. Section 381.7353, Florida Statutes, is  
8 created to read:

9           381.7353 Reducing Racial and Ethnic Health  
10 Disparities: Closing the Gap grant program; administration;  
11 department duties.--

12           (1) The Reducing Racial and Ethnic Health Disparities:  
13 Closing the Gap grant program shall be administered by the  
14 Department of Health.

15           (2) The department shall:

16           (a) Publicize the availability of funds and establish  
17 an application process for submitting a grant proposal.

18           (b) Provide technical assistance and training,  
19 including a statewide meeting promoting best practice  
20 programs, as requested, to grant recipients.

21           (c) Develop uniform data reporting requirements for  
22 the purpose of evaluating the performance of the grant  
23 recipients and demonstrating improved health outcomes.

24           (d) Develop a monitoring process to evaluate progress  
25 toward meeting grant objectives.

26           (e) Coordinate with existing community-based programs,  
27 such as chronic disease community intervention programs,  
28 cancer prevention and control programs, diabetes control  
29 programs, the Healthy Start program, the Florida KidCare  
30 Program, the HIV/AIDS program, immunization programs, and

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1 other related programs at the state and local levels, to avoid  
2 duplication of effort and promote consistency.

3 (3) Pursuant to s. 20.43(6), the secretary may appoint  
4 an ad hoc advisory committee to: examine areas where public  
5 awareness, public education, research, and coordination  
6 regarding racial and ethnic health outcome disparities are  
7 lacking; consider access and transportation issues which  
8 contribute to health status disparities; and make  
9 recommendations for closing gaps in health outcomes and  
10 increasing the public's awareness and understanding of health  
11 disparities that exist between racial and ethnic populations.

12 Section 4. Section 381.7354, Florida Statutes, is  
13 created to read:

14 381.7354 Eligibility.--

15 (1) Any person, entity, or organization within a  
16 county may apply for a Closing the Gap grant and may serve as  
17 the lead agency to administer and coordinate project  
18 activities within the county and develop community  
19 partnerships necessary to implement the grant.

20 (2) Persons, entities, or organizations within  
21 adjoining counties with populations of less than 100,000,  
22 based on the annual estimates produced by the Population  
23 Program of the University of Florida Bureau of Economic and  
24 Business Research, may jointly submit a multicounty Closing  
25 the Gap grant proposal. However, the proposal must clearly  
26 identify a single lead agency with respect to program  
27 accountability and administration.

28 (3) In addition to the grants awarded under  
29 subsections (1) and (2), up to 20 percent of the funding for  
30 the Reducing Racial and Ethnic Health Disparities: Closing the  
31 Gap grant program shall be dedicated to projects that address

1 improving racial and ethnic health status within specific  
2 Front Porch Florida Communities, as designated pursuant to s.  
3 14.2015(9)(b).

4 (4) Nothing in ss. 381.7351-381.7356 shall prevent a  
5 person, entity, or organization within a county or group of  
6 counties from separately contracting for the provision of  
7 racial and ethnic health promotion, health awareness, and  
8 disease prevention services.

9 Section 5. Section 381.7355, Florida Statutes, is  
10 created to read:

11 381.7355 Project requirements; review criteria.--

12 (1) Closing the Gap grant proposals shall be submitted  
13 to the Department of Health for review.

14 (2) A proposal must include each of the following  
15 elements:

16 (a) The purpose and objectives of the proposal,  
17 including identification of the particular racial or ethnic  
18 disparity the project will address. The proposal must address  
19 one or more of the following priority areas:

20 1. Decreasing racial and ethnic disparities in  
21 maternal and infant mortality rates.

22 2. Decreasing racial and ethnic disparities in  
23 morbidity and mortality rates relating to cancer.

24 3. Decreasing racial and ethnic disparities in  
25 morbidity and mortality rates relating to HIV/AIDS.

26 4. Decreasing racial and ethnic disparities in  
27 morbidity and mortality rates relating to cardiovascular  
28 disease.

29 5. Decreasing racial and ethnic disparities in  
30 morbidity and mortality rates relating to diabetes.

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1           6. Increasing adult and child immunization rates in  
2 certain racial and ethnic populations.

3           (b) Identification and relevance of the target  
4 population.

5           (c) Methods for obtaining baseline health status data  
6 and assessment of community health needs.

7           (d) Mechanisms for mobilizing community resources and  
8 gaining local commitment.

9           (e) Development and implementation of health promotion  
10 and disease prevention interventions.

11           (f) Mechanisms and strategies for evaluating the  
12 project's objectives, procedures, and outcomes.

13           (g) A proposed work plan, including a timeline for  
14 implementing the project.

15           (h) Likelihood that project activities will occur and  
16 continue in the absence of funding.

17           (3) Priority shall be given to proposals that:

18           (a) Represent areas with the greatest documented  
19 racial and ethnic health status disparities.

20           (b) Exceed the minimum local contribution requirements  
21 specified in s. 381.7356.

22           (c) Demonstrate broad-based local support and  
23 commitment from entities representing racial and ethnic  
24 populations, including non-Hispanic whites. Indicators of  
25 support and commitment may include agreements to participate  
26 in the program, letters of endorsement, letters of commitment,  
27 interagency agreements, or other forms of support.

28           (d) Demonstrate a high degree of participation by the  
29 health care community in clinical preventive service  
30 activities and community-based health promotion and disease  
31 prevention interventions.



1           (e) Have been submitted from counties with a high  
2 proportion of residents living in poverty and with poor health  
3 status indicators.

4           (f) Demonstrate a coordinated community approach to  
5 addressing racial and ethnic health issues within existing  
6 publicly financed health care programs.

7           (g) Incorporate intervention mechanisms which have a  
8 high probability of improving the targeted population's health  
9 status.

10           (h) Demonstrate a commitment to quality management in  
11 all aspects of project administration and implementation.

12           Section 6. Section 381.7356, Florida Statutes, is  
13 created to read:

14           381.7356 Local matching funds; grant awards.--

15           (1) One or more Closing the Gap grants may be awarded  
16 in a county, or in a group of adjoining counties from which a  
17 multicounty application is submitted. Front Porch Florida  
18 Communities grants may also be awarded in a county or group of  
19 adjoining counties that is also receiving a grant award.

20           (2) Closing the Gap grants shall be awarded on a  
21 matching basis. One dollar in local matching funds must be  
22 provided for each \$3 grant payment made by the state, except  
23 that:

24           (a) In counties with populations greater than 50,000,  
25 up to 50 percent of the local match may be in-kind in the form  
26 of free services or human resources. Fifty percent of the  
27 local match must be in the form of cash.

28           (b) In counties with populations of 50,000 or less,  
29 the required local matching funds may be provided entirely  
30 through in-kind contributions.

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1           (c) Grant awards to Front Porch Florida Communities  
2 shall not be required to have a matching requirement.

3           (3) The amount of the grant award shall be based on  
4 the county or neighborhood's population, or on the combined  
5 population in a group of adjoining counties from which a  
6 multicounty application is submitted, and on other factors, as  
7 determined by the department.

8           (4) Dissemination of grant awards shall begin no later  
9 than January 1, 2001.

10           (5) A Closing the Gap grant shall be funded for 1 year  
11 and may be renewed annually upon application to and approval  
12 by the department, subject to the achievement of quality  
13 standards, objectives, and outcomes and to the availability of  
14 funds.

15           (6) Implementation of the Reducing Racial and Ethnic  
16 Health Disparities: Closing the Gap grant program shall be  
17 subject to a specific appropriation provided in the General  
18 Appropriations Act.

19           Section 7. This act shall take effect upon becoming a  
20 law.