

By the Committee on Health, Aging, and Long-Term Care; and  
Senators Miller and Lawson

317-1295-04

1                                   A bill to be entitled  
2           An act relating to minority health care;  
3           creating s. 381.736, F.S.; providing for the  
4           Department of Health to develop a Florida  
5           Healthy People 2010 Program; providing program  
6           goals and guidelines; requiring a report to the  
7           Legislature; amending s. 409.901, F.S.;  
8           defining the term "minority physician network";  
9           amending s. 409.912, F.S.; requiring the Agency  
10          for Health Care Administration to provide a  
11          Medicaid minority physician network; providing  
12          guidelines for the operation of the network;  
13          providing an effective date.

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15 Be It Enacted by the Legislature of the State of Florida:

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17           Section 1. Section 381.736, Florida Statutes, is  
18 created to read:

19           381.736 Florida Healthy People 2010 Program.--

20           (1) The Department of Health shall develop and  
21 implement, using existing resources, the Florida Healthy  
22 People 2010 Program, based upon the federal Healthy People  
23 2010 Program, designed to improve the health of all Americans  
24 by advancing the following goals:

25           (a) Increase the quality and years of healthy life;  
26 and

27           (b) Eliminate health disparities among different  
28 segments of the population.

29           (2) The department shall report to the Legislature by  
30 December 31 of each year regarding progress in meeting the  
31 program's goals and shall report on the status of disparities

1 in health among minorities and nonminorities, using health  
2 indicators that are consistent with those identified by the  
3 federal Healthy People 2010 Program.

4 (3) To reduce negative health consequences that result  
5 from ignoring racial and ethnic cultures, the department shall  
6 work with minority physician networks to develop programs to  
7 educate health care professionals about the importance of  
8 culture in health status. These programs shall include, but  
9 need not be limited to:

10 (a) The education of health care providers about the  
11 prevalence of specific health conditions among certain  
12 minority groups;

13 (b) The training of clinicians to be sensitive to  
14 cultural diversity among patients and to recognize that  
15 inherent biases can lead to disparate treatments;

16 (c) The creation of initiatives that educate  
17 private-sector health care and managed care organizations  
18 about the importance of cross-cultural training of health care  
19 professionals and the effect of such training on the  
20 professional-patient relationship; and

21 (d) The fostering of increased use of interpreter  
22 services in health care settings.

23 (4) The department shall work with the establishment  
24 of public and private partnerships with charitable  
25 organizations, hospitals, and minority physician networks to  
26 increase the proportion of health care professionals from  
27 minority backgrounds.

28 (5) The department shall work with and promote  
29 research on methods by which to reduce disparities in health  
30 care at colleges and universities that have historically large  
31 minority enrollments, including centers of excellence in this

1 state identified by the National Center on Minority Health and  
2 Health Disparities, by working with the colleges,  
3 universities, and community representatives to encourage local  
4 minority students to pursue professions in health care.

5 Section 2. Subsection (23) is added to section  
6 409.901, Florida Statutes, to read:

7 409.901 Definitions; ss. 409.901-409.920.--As used in  
8 ss. 409.901-409.920, except as otherwise specifically  
9 provided, the term:

10 (23) For the purposes of this section, the term  
11 "minority physician network" means a network of primary care  
12 physicians that is predominantly minority-owned, as defined in  
13 s. 288.703, which has a collaborative partnership with a  
14 public college or university and a tax-exempt charitable  
15 corporation.

16 Section 3. Subsection (45) is added to section  
17 409.912, Florida Statutes, to read:

18 409.912 Cost-effective purchasing of health care.--The  
19 agency shall purchase goods and services for Medicaid  
20 recipients in the most cost-effective manner consistent with  
21 the delivery of quality medical care. The agency shall  
22 maximize the use of prepaid per capita and prepaid aggregate  
23 fixed-sum basis services when appropriate and other  
24 alternative service delivery and reimbursement methodologies,  
25 including competitive bidding pursuant to s. 287.057, designed  
26 to facilitate the cost-effective purchase of a case-managed  
27 continuum of care. The agency shall also require providers to  
28 minimize the exposure of recipients to the need for acute  
29 inpatient, custodial, and other institutional care and the  
30 inappropriate or unnecessary use of high-cost services. The  
31 agency may establish prior authorization requirements for

1 certain populations of Medicaid beneficiaries, certain drug  
2 classes, or particular drugs to prevent fraud, abuse, overuse,  
3 and possible dangerous drug interactions. The Pharmaceutical  
4 and Therapeutics Committee shall make recommendations to the  
5 agency on drugs for which prior authorization is required. The  
6 agency shall inform the Pharmaceutical and Therapeutics  
7 Committee of its decisions regarding drugs subject to prior  
8 authorization.

9 (45) The agency shall contract with an established  
10 minority physician network that provides services to  
11 historically underserved minority patients. The network must  
12 provide cost-effective Medicaid services, comply with the  
13 requirements to be a MediPass provider, and provide its  
14 primary care physicians with access to data and other  
15 management tools necessary to assist them in ensuring the  
16 appropriate use of services, including inpatient hospital  
17 services and pharmaceuticals.

18 (a) The agency shall provide for the development and  
19 expansion of minority physician networks in each service area  
20 to provide services to Medicaid recipients who are eligible to  
21 participate under federal law and rules.

22 (b) The agency shall reimburse the minority physician  
23 network as a fee-for-service provider for Medicaid services  
24 and shall also pay a case-management fee for primary care. Any  
25 savings shall be divided, with one half going to the minority  
26 physician network and one half going to the agency.

27 (c) Medicaid recipients who are enrolled in MediPass  
28 shall be assigned to a minority physician network pursuant to  
29 the assignment ratios provided in s. 409.9122.

30 Section 4. This act shall take effect July 1, 2004.  
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1                   STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN  
2                   COMMITTEE SUBSTITUTE FOR  
3                   Senate Bill 1178

4 The committee substitute makes the following changes to SB  
5 1178:

6 Requires DOH to work with, rather than provide support to,  
7 minority physician networks to: develop programs to educate  
8 health care professionals about the importance of culture in  
9 health status; establish public and private partnerships with  
10 charitable organizations, hospitals, and minority physician  
11 networks to increase the proportion of health care  
12 professionals from minority backgrounds; and promote research  
13 on methods by which to reduce disparities in health care at  
14 colleges and universities that have historically large  
15 minority enrollments, including centers of excellence in the  
16 state identified by the National Center on Minority Health and  
17 Health Disparities, by working with colleges, universities,  
18 and community representatives to encourage minority college  
19 students to pursue professions in health care.

20 Provides that the definition of minority physician applies  
21 only to that section of the bill.

22 Any savings to the MediPass program under the minority  
23 physician network pilot project shall be split equally between  
24 AHCA and the minority physician network.  
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