

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 monitor and report on  
5           Florida's status regarding the Healthy People  
6           2010 goals and objectives currently tracked by  
7           the department; requiring an annual report to  
8           the Legislature; requiring the department to  
9           work with various groups to educate health care  
10          professionals on racial and ethnic issues in  
11          health, to recruit and train health care  
12          professionals from minority backgrounds, and to  
13          promote certain research; amending s. 409.901,  
14          F.S.; defining the term "minority physician  
15          network"; amending s. 409.912, F.S.; requiring  
16          the Agency for Health Care Administration to  
17          contract for a Medicaid minority physician  
18          network; providing guidelines for the operation  
19          of the network; defining the term  
20          "cost-effective"; requiring the agency to  
21          conduct actuarially sound audits; providing an  
22          effective date.

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

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26           Section 1. Section 381.736, Florida Statutes, is  
27 created to read:

28           381.736 Florida Healthy People 2010 Program.--  
29           (1) The Department of Health shall, using existing  
30 resources, monitor and report Florida's status on the Healthy  
31 People 2010 goals and objectives currently tracked and

1 available to the department. The federal Healthy People 2010  
2 goals and objectives are designed to measure and help to  
3 improve the health of all Americans by advancing the following  
4 goals:

5 (a) Increase the quality and years of healthy life.

6 (b) Eliminate health disparities among different  
7 segments of the population.

8 (2) The department shall report to the Legislature by  
9 December 31 of each year on the status of disparities in  
10 health among minorities and nonminorities, using health  
11 indicators currently available that are consistent with those  
12 identified by the federal Healthy People 2010 goals and  
13 objectives.

14 (3) To reduce negative health consequences that result  
15 from ignoring racial and ethnic cultures, the department shall  
16 work with minority physician networks to develop programs to  
17 educate health care professionals about the importance of  
18 culture in health status. These programs shall include, but  
19 need not be limited to:

20 (a) The education of health care providers about the  
21 prevalence of specific health conditions among certain  
22 minority groups.

23 (b) The training of clinicians to be sensitive to  
24 cultural diversity among patients and to recognize that  
25 inherent biases can lead to disparate treatments.

26 (c) The creation of initiatives that educate  
27 private-sector health care and managed care organizations  
28 about the importance of cross-cultural training of health care  
29 professionals and the effect of such training on the  
30 professional-patient relationship.

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1           (d) The fostering of increased use of interpreter  
2 services in health care settings.

3           (4) The department shall work with and promote the  
4 establishment of public and private partnerships with  
5 charitable organizations, hospitals, and minority physician  
6 networks to increase the proportion of health care  
7 professionals from minority backgrounds.

8           (5) The department shall promote research on methods  
9 by which to reduce disparities in health care at colleges and  
10 universities that have historically large minority  
11 enrollments, including centers of excellence in this state  
12 identified by the National Center on Minority Health and  
13 Health Disparities, by working with those colleges and  
14 universities and with community representatives to encourage  
15 local minority students to pursue professions in health care.

16           Section 2. Subsections (23), (24), (25), and (26) of  
17 section 409.901, Florida Statutes, are renumbered as  
18 subsections (24), (25), (26), and (27), respectively, and a  
19 new subsection (23) is added to that section, to read:

20           409.901 Definitions; ss. 409.901-409.920.--As used in  
21 ss. 409.901-409.920, except as otherwise specifically  
22 provided, the term:

23           (23) "Minority physician network" means a network of  
24 primary care physicians with experience managing Medicaid or  
25 Medicare recipients that is predominantly owned by minorities  
26 as defined in s. 288.703, which may have a collaborative  
27 partnership with a public college or university and a  
28 tax-exempt charitable corporation.

29           Section 3. Subsection (45) is added to section  
30 409.912, Florida Statutes, to read:

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1           409.912 Cost-effective purchasing of health care.--The  
2 agency shall purchase goods and services for Medicaid  
3 recipients in the most cost-effective manner consistent with  
4 the delivery of quality medical care. The agency shall  
5 maximize the use of prepaid per capita and prepaid aggregate  
6 fixed-sum basis services when appropriate and other  
7 alternative service delivery and reimbursement methodologies,  
8 including competitive bidding pursuant to s. 287.057, designed  
9 to facilitate the cost-effective purchase of a case-managed  
10 continuum of care. The agency shall also require providers to  
11 minimize the exposure of recipients to the need for acute  
12 inpatient, custodial, and other institutional care and the  
13 inappropriate or unnecessary use of high-cost services. The  
14 agency may establish prior authorization requirements for  
15 certain populations of Medicaid beneficiaries, certain drug  
16 classes, or particular drugs to prevent fraud, abuse, overuse,  
17 and possible dangerous drug interactions. The Pharmaceutical  
18 and Therapeutics Committee shall make recommendations to the  
19 agency on drugs for which prior authorization is required. The  
20 agency shall inform the Pharmaceutical and Therapeutics  
21 Committee of its decisions regarding drugs subject to prior  
22 authorization.

23           (45) The agency shall contract with an established  
24 minority physician network that provides services to  
25 historically underserved minority patients. The network must  
26 provide cost-effective Medicaid services, comply with the  
27 requirements to be a MediPass provider, and provide its  
28 primary care physicians with access to data and other  
29 management tools necessary to assist them in ensuring the  
30 appropriate use of services, including inpatient hospital  
31 services and pharmaceuticals.

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

5       (b) The agency shall reimburse the minority physician  
6 network as a fee-for-service provider, including the case  
7 management fee for primary care, or as a capitated rate  
8 provider for Medicaid services. Any savings shall be shared  
9 with the minority physician network pursuant to the contract.

10       (c) For purposes of this subsection, the term  
11 "cost-effective" means that a network's per-member, per-month  
12 costs to the state, including, but not limited to,  
13 fee-for-service costs, administrative costs, and  
14 case-management fees, must be no greater than the state's  
15 costs associated with contracts for Medicaid services  
16 established under subsection (3), which shall be actuarially  
17 adjusted for case mix, model, and service area. The agency  
18 shall conduct actuarially sound audits adjusted for case mix  
19 and model in order to ensure such cost-effectiveness and shall  
20 publish the audit results on its Internet website and submit  
21 the audit results annually to the Governor, the President of  
22 the Senate, and the Speaker of the House of Representatives no  
23 later than December 31. Contracts established pursuant to this  
24 subsection which are not cost-effective may not be renewed.

25       (d) The agency may apply for any federal waivers  
26 needed to implement this paragraph.

27       Section 4. This act shall take effect July 1, 2004.

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