

CHAMBER ACTION

1 The Committee on Health Care recommends the following:

2
3 **Committee Substitute**

4 Remove the entire bill and insert:

5 A bill to be entitled

6 An act relating to minority health care; creating s.
7 381.736, F.S.; providing for the Department of Health to
8 monitor and report on Florida's status regarding the
9 Healthy People 2010 goals and objectives currently tracked
10 by the department; requiring an annual report to the
11 Legislature; requiring the department to work with various
12 groups to educate health care professionals on racial and
13 ethnic issues in health and to recruit and train health
14 care professionals from minority backgrounds; providing
15 educational program guidelines; amending s. 409.901, F.S.;
16 defining the term "minority physician network"; amending s.
17 409.912, F.S.; requiring the Agency for Health Care
18 Administration to contract for a Medicaid minority
19 physician network; providing guidelines for the operation
20 of the network; providing an effective date.

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

24 Section 1. Section 381.736, Florida Statutes, is created
25 to read:

26 381.736 Florida Healthy People 2010 objectives.--

27 (1) The Department of Health shall, using existing
28 resources, monitor and report Florida's status on the Healthy
29 People 2010 goals and objectives currently tracked and available
30 to the department. The federal Healthy People 2010 goals and
31 objectives are designed to measure and help to improve the
32 health of all Americans by advancing the following goals:

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

34 (b) Eliminate health disparities among different segments
35 of the population.

36 (2) The department shall report to the Legislature by
37 December 31 of each year on the status of disparities in health
38 among minorities and nonminorities, using health indicators
39 currently available that are consistent with those identified by
40 the federal Healthy People 2010 goals and objectives.

41 (3) To reduce negative health consequences that result
42 from ignoring racial and ethnic cultures, the department shall
43 work with minority physician networks to develop programs to
44 educate health care professionals about the importance of
45 culture in health status. These programs shall include, but need
46 not be limited to:

47 (a) The education of health care providers about the
48 prevalence of specific health conditions among certain minority
49 groups.

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

53 (c) The creation of initiatives that educate private-
 54 sector health care and managed care organizations about the
 55 importance of cross-cultural training of health care
 56 professionals and the effect of such training on the
 57 professional-patient relationship.

58 (d) The fostering of increased use of interpreter services
 59 in health care settings.

60 (4) The department shall work with and promote the
 61 establishment of public and private partnerships with charitable
 62 organizations, hospitals, and minority physician networks to
 63 increase the proportion of health care professionals from
 64 minority backgrounds.

65 (5) The department shall promote research on methods by
 66 which to reduce disparities in health care at colleges and
 67 universities that have historically large minority enrollments,
 68 including centers of excellence in this state identified by the
 69 National Center on Minority Health and Health Disparities, by
 70 working with those colleges and universities and with community
 71 representatives to encourage local minority students to pursue
 72 professions in health care.

73 Section 2. Subsections (23), (24), (25), and (26) of
 74 section 409.901, Florida Statutes, are renumbered as subsections
 75 (24), (25), (26), and (27), respectively, and a new subsection
 76 (23) is added to said section, to read:

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77 409.901 Definitions; ss. 409.901-409.920.--As used in ss.
78 409.901-409.920, except as otherwise specifically provided, the
79 term:

80 (23) "Minority physician network" means a network of
81 primary care physicians that is predominantly minority owned, as
82 defined in s. 288.703, which may have a collaborative
83 partnership with a public college or university and a tax-exempt
84 charitable corporation.

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

87 409.912 Cost-effective purchasing of health care.--The
88 agency shall purchase goods and services for Medicaid recipients
89 in the most cost-effective manner consistent with the delivery
90 of quality medical care. The agency shall maximize the use of
91 prepaid per capita and prepaid aggregate fixed-sum basis
92 services when appropriate and other alternative service delivery
93 and reimbursement methodologies, including competitive bidding
94 pursuant to s. 287.057, designed to facilitate the cost-
95 effective purchase of a case-managed continuum of care. The
96 agency shall also require providers to minimize the exposure of
97 recipients to the need for acute inpatient, custodial, and other
98 institutional care and the inappropriate or unnecessary use of
99 high-cost services. The agency may establish prior authorization
100 requirements for certain populations of Medicaid beneficiaries,
101 certain drug classes, or particular drugs to prevent fraud,
102 abuse, overuse, and possible dangerous drug interactions. The
103 Pharmaceutical and Therapeutics Committee shall make
104 recommendations to the agency on drugs for which prior

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105 authorization is required. The agency shall inform the
106 Pharmaceutical and Therapeutics Committee of its decisions
107 regarding drugs subject to prior authorization.

108 (45) The agency shall contract with an established
109 minority physician network that provides services to
110 historically underserved minority patients. The network must
111 provide cost-effective Medicaid services, comply with the
112 requirements to be a MediPass provider, and provide its primary
113 care physicians with access to data and other management tools
114 necessary to assist them in ensuring the appropriate use of
115 services, including inpatient hospital services and
116 pharmaceuticals.

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

121 (b) The agency shall reimburse the minority physician
122 network as a fee-for-service provider or capitated rate provider
123 for Medicaid services and shall also pay a case-management fee
124 for primary care. Any savings shall be divided, with one-half
125 going to the minority physician network and one-half going to
126 the agency.

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

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