

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 905 Arthritis Prevention and Education
SPONSOR(S): Gannon and others
TIED BILLS: **IDEN./SIM. BILLS:** SB 1450

| REFERENCE | ACTION | ANALYST | STAFF DIRECTOR |
|-----------------------------------------|--------|--------------|----------------|
| 1) Health Care General Committee | | Schiefelbein | Brown-Barrios |
| 2) Health Care Appropriations Committee | | | |
| 3) Health & Families Council | | | |
| 4) _____ | | | |
| 5) _____ | | | |

SUMMARY ANALYSIS

This bill creates the "Arthritis Prevention and Education Act" within the Department of Health and directs the department to establish an arthritis prevention and education program. The requirements of the program include, to the extent that funds are available, a needs assessment, creation of an advisory panel and implementation of a variety of public awareness activities. The bill also provides authority for the Secretary of the Department of Health to accept funding for the purposes of implementing the program.

This bill provides an effective date upon becoming law.

There is a fiscal impact associated with this proposal.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Limited Government: Creates a new program within the Department of Health.

Empower Families/Promote Personal Responsibility: Provides families with current information regarding arthritis prevention and education to encourage personal disease awareness and management.

B. EFFECT OF PROPOSED CHANGES:

This bill creates the "Arthritis Prevention and Education Act" within the Department of Health and directs the department to establish an arthritis prevention and education program. The requirements of the program include, to the extent that funds are available, to conduct a needs assessment, create an advisory panel on arthritis, and provide public awareness regarding arthritis.

The department would be required to identify additional data related to arthritis which is not currently being collected. In addition to managing the Florida Arthritis Partnership, the department would be required to manage the new advisory panel created within this bill. The department would also be required to provide public awareness regarding the causes of arthritis, risk factors, prevention and early detection, pain minimalization and diagnosing and treatment options of this condition.

Background

The Department of Health currently maintains the Arthritis Prevention and Education Program within the Bureau of Chronic Disease Prevention. The program was established in March 1998 and is funded through a cooperative agreement with the Centers for Disease Control and Prevention (CDC). Florida was one of eight states to receive funding in 1999 from the CDC to focus efforts on reducing the burden of arthritis and other rheumatic conditions. Data collection began in 2000 through the Behavioral Risk Factor Surveillance System, which is a state-based survey system of non-institutionalized population aged 18 years and older. The data collected from this survey for 2001 were analyzed and presented in the referenced report. In addition, data from public use hospital discharge data base from the Agency for Health Care Administration were analyzed.¹

The Arthritis Prevention and Education Program provides staff to an advisory coalition to guide, review and provide direction for the state in all activities related to reduce the burden of arthritis, define and monitor the prevalence and impact of the arthritis using the Behavioral Risk Factor Surveillance System (BRFSS), develop and update a state plan for arthritis and implement strategies from the State Arthritis Plan. The program works in conjunction with the Arthritis Foundation, Florida Chapter regarding overall strategic planning to develop a statewide action plan that includes population based strategies, health system approaches and increases awareness and addresses resources, services and support for people living with arthritis. The program provides limited funding to county health departments and other organizations to implement evidence-based arthritis interventions. The program maintains a web-page with current information on program activities and available materials. The program currently has access to a health communications campaign developed by CDC regarding annual public awareness outreach efforts.

The Department of Health and the Arthritis Foundation have formed the Florida Arthritis Partnership (FLAP) whose mission is to encourage and promote state-wide awareness of arthritis. FLAP has recently developed a statewide arthritis strategic plan for 2001-2004 along with an annual action plan.

¹ Fisher LE. The State of Arthritics in Florida, 2002, Tallahassee, Florida: Florida Department of Health, 2002

Arthritis in the United States and Florida

According to the Department of Health, Arthritis Prevention and Education Program, Arthritis is the number one cause of disability in America and limits daily activities for approximately 7 million people. Arthritis refers to more than 100 different diseases that affect areas around joints, but can also affect other parts of the body. Early diagnosis and disease management is reported to improve quality of life and decreased limitations of mobility.

According to the *State of Arthritis in Florida Report*, the prevalence of self-reported physician-diagnosed arthritis in Florida is estimated to be 25.5 percent and the prevalence of chronic joint symptoms, with a physician diagnosis of arthritis, is estimated to be 8.3 percent for a total prevalence of 33.8 percent among adults. The report also notes that although arthritis/chronic joint symptoms affect people across the age span, prevalence is highest among those aged 65 years and older, among whom 57.4 percent have arthritis/chronic joint symptoms. This compares to a prevalence of 17.6 percent among 18-44 year olds. Overall, 12.2 percent of those with arthritis/chronic joint symptoms under the age of 65 years report being unable to work compared with 1.8 percent of those without arthritic/chronic joint symptoms.

C. SECTION DIRECTORY:

Section 1. Creates s.385.210, F.S., establishing the “Arthritis Prevention and Education Act,” creating the arthritis prevention and education program, an advisory panel on arthritis, a public awareness initiative and establishing a mechanism to provide funding for the program.

Section 2. Provides an effective date of upon becoming law.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None

2. Expenditures: According to the Department of Health the fiscal impact of the bill is as follows:

| Estimated Expenditures | 1 Year | 2 nd Year (annual/recurring) |
|-----------------------------------------------------------------------------------------------------------|--------------------|-----------------------------------------|
| Salaries Other Personal Services Expense Needs Assessment | \$ 150,000 | --- |
| Travel and Meeting Expenses for Advisory Committee (20 individuals @ \$500 each x 2 times per year) | 20,000 | \$ 20,000 |
| Public Awareness Campaign: | | |
| - Radio – airtime and production | \$1,580,000 | \$1,580,000 |
| - Billboards | 500,000 | 500,000 |
| - Outdoor storefront placards | 450,000 | 450,000 |
| - Market Testing | 50,000 | 50,000 |
| Total Estimated Expenditures | \$2,750,000 | \$2,600,000 |

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None

2. Expenditures:

None

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None

FISCAL COMMENTS:

None

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

None

2. Other:

B. RULE-MAKING AUTHORITY:

None

C. DRAFTING ISSUES OR OTHER COMMENTS:

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES