

## HOUSE OF REPRESENTATIVES STAFF ANALYSIS

**BILL #:** HB 1073      Reproductive Health Services  
**SPONSOR(S):** Roberson and others  
**TIED BILLS:**      **IDEN./SIM. BILLS:** SB 2458

REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1) <u>Health Care General Committee</u>		Halperin	Brown-Barrios
2) <u>PreK-12 Committee</u>			
3) <u>Health Care Appropriations Committee</u>			
4) <u>Education Appropriations Committee</u>			
5) <u>Health &amp; Families Council</u>			

## SUMMARY ANALYSIS

HB 1073 requires health information on family planning methods, referrals, and basic reproductive health services to be available on the Department of Health (DOH) website. This is intended to increase public access to family planning services, including early cancer screenings, contraception, and annual exams.

The bill requires all school districts to develop a plan to provide comprehensive and medically accurate family life and human sexuality education in schools. The bill intends for the curriculum to respect community values and encourage family communication; provide education that is medically accurate and age appropriate; and promote responsible behavior, including, but not limited to, the promotion of abstinence.

The bill requires that health care providers offer rape victims information on pregnancy prevention prophylaxis, and to provide such prophylaxis if requested and deemed medically appropriate.

If enacted, the bill takes effect on the date it becomes law.

## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. HOUSE PRINCIPLES ANALYSIS:

**Promote Personal Responsibility** – The bill requires school districts to emphasize individual responsibility within a comprehensive family life and human sexuality education curriculum.

**Empower Families** – The bill increases the amount and accessibility of information to Floridians on family planning and reproductive health services.

**Provide Limited Government** -- The bill creates additional requirements and regulations for schools and government agencies.

#### B. EFFECT OF PROPOSED CHANGES:

##### *Family Planning information provided by the Department of Health website*

HB 1073 requires health information on family planning methods, referrals to community resources to assist women and families in preventing unintended pregnancies, and basic reproductive health services to be available on the Department of Health (DOH) website. This is intended to increase public access to family planning services, including early cancer screenings, contraception, and annual exams. To accommodate the requirements of the bill, the department would increase the scope and accessibility of its current family planning website. The department would add information to the website or arrange current information in a way that consumers can access it more readily.

##### *Require school districts to develop curriculum for family life and human sexuality education*

The bill requires all school districts to develop a plan to provide comprehensive and medically accurate family life and human sexuality education in schools no later than the 2008-2009 school year. The bill stipulates that K-12 curriculum include:

- Respecting community values and encouraging family communication;
- Developing skills in communication, decision-making, and conflict resolution;
- Developing healthy relationships;
- Providing human development and sexuality education that is medically accurate and age appropriate;
- Promoting responsible behavior, including, but not limited to, the promotion of abstinence;
- Addressing the medically accurate use of contraception; and
- Promoting individual responsibility.

The bill gives individuals the opportunity to hold districts accountable for these provisions by establishing a process for reporting suspected incidents of noncompliance with teaching as prescribed by this section. The process includes reporting to the Auditor General, with findings forwarded to the Attorney General. If it is found that the district is not in compliance and does not satisfy the requirements, they shall be considered to have not met the objectives of the school improvement plan.

##### *Access to Emergency Contraception for sexual assault patients*

The bill requires health care providers and health care facilities<sup>1</sup> to offer information to rape victims on pregnancy prevention prophylaxis, and provide such prophylaxis if requested and deemed medically appropriate. Treatment provided to a rape survivor shall:

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<sup>1</sup> Health care practitioners are defined as those as licensed under Chapters 458, 459, or 464, F.S.; and health care facilities are defined as those licensed under Chapter 395, F.S.

- Provide each rape survivor with medically and factually accurate and clear information about pregnancy prevention prophylaxis, including its indications and contraindications and risks associated with its use
- Inform each rape survivor of the survivor's medical option to receive pregnancy prevention prophylaxis; and
- Immediately prescribe or provide contraception to the rape survivor, if it is requested and if it is considered by the practitioner to be medically appropriate.

If enacted, the bill takes effect on the date it becomes law.

## BACKGROUND

### *Family Planning Resources*

A 2001 review conducted by the Florida State University Center for Prevention and Early Intervention Policy, in conjunction with the Department of Health (DOH) Family Planning Program, assessed the number of women in Florida in need of family planning services. Data from each county health department determined that the Statewide Family Planning Program and other providers are serving only 26 percent of women in need of family planning services.<sup>2</sup> According to other estimates by the Guttmacher Institute, approximately 1,726,160 women in Florida are in need of contraceptive services and supplies. Of these, 886,250 women need publicly supported contraceptive services because they have incomes below 250% of the federal poverty level or are sexually active teenagers. Florida has 311 publicly funded family planning clinics that serve approximately 30 percent of all women in need of publicly supported contraceptive services and 32% of teenagers in need.<sup>3</sup>

### *Teen Pregnancy*

Florida currently is number six in the country for the number of teen pregnancies, with approximately 50,000 occurring each year, of which approximately 52 percent result in live births and 34 percent result in abortions. Florida's teenage pregnancy rate declined by 2 percent between 1992 and 2000. For Florida teens, AIDS and AIDS-related illnesses are the ninth leading cause of death.<sup>4</sup> Florida also ranks third in the country in 2004 for the number of residents living with HIV/AIDS.<sup>5</sup>

### *Family Planning resources on the Department of Health website*

Florida law currently requires DOH to provide family planning and maternal health information, assistance, and services to citizens of childbearing age. The department currently addresses the prevention of unwanted pregnancies through shared efforts between the department's family planning, comprehensive school health, and abstinence education programs. Family planning consists of an array of services such as preconception risk assessment, contraception, screening for sexually transmitted diseases, and pregnancy testing. The abstinence program is run through in-school programs, out-of-school programs, and public and private projects throughout the state.<sup>6</sup> The goal of the program is to reduce unplanned pregnancies and promote positive pregnancy outcomes. The program is intended to improve maternal and infant health, reduce the incidence of abortion, and lower rates of sexually transmitted diseases, including HIV.

The department currently has a Family Planning website with information on contraceptive methods and referrals to community providers. In addition to including the information required by statute, the website also lists a comprehensive package of services that the department provides, FDA approved methods of contraceptives, and county health department family planning clinics.

<sup>2</sup> The Florida State University Institute of Science and Public Affairs, Center for Prevention and Early Intervention Policy, letter to Dr. Jean Malecki, Director, Palm Beach County Health Department. July 16, 2001.

<sup>3</sup> Guttmacher Institute, [http://www.guttmacher.org/pubs/state\\_data/states/florida.html](http://www.guttmacher.org/pubs/state_data/states/florida.html).

<sup>4</sup> Communication with Stephanie Grutman, Executive Director for the Florida Association of Planned Parenthood Alliances, Inc. March 28, 2006.

<sup>5</sup> Kaiser Family Health Foundation <http://www.statehealthfacts.org/cgi-bin/healthfacts.cgi?action=compare&category=HIV%2fAIDS&subcategory=Persons+Living+with+AIDS&topic=Persons+Living+with+AIDS+All+Ages>

<sup>6</sup> Information provided by the Department of Health bill analysis on HB 1073; March 28, 2006.

### *Education curriculum*

Current law includes topic areas to be addressed in family life and human sexuality education curriculum, but does not prescribe specific information and skills. These are currently local decisions that school districts make. Section 1003.41, F.S., states that in order for high school students to graduate, they must receive one-half credit in “life management skills” in either ninth or tenth grade. The course is required to include instruction in the prevention of HIV/AIDS and sexually transmitted diseases (STDs), the benefits of sexual abstinence, and the consequences of teen pregnancy. School boards may decide to permit additional content regarding HIV/AIDS including information about how to control the spread of the disease.

Section 1003.41, F.S., provides that all instruction and course material must:

- Teach abstinence from sexual activity outside marriage as the expected standard for all school-age students while teaching the benefits of monogamous heterosexual marriage;
- Emphasize that abstinence from sexual activity is a way to avoid out-of-wedlock pregnancy, sexually transmitted diseases, including acquired immune deficiency syndrome, and other associated health problems;
- Teach that each student has the power to control personal behavior and encourage students to base actions on reasoning, self-esteem, and respect for others; and
- Provide instruction and material that is appropriate for the grade and age of the student.

### *Rape and sexual assault in Florida*

Florida statistics on sexual violence are gathered by the Florida Department of Law Enforcement. In 2003, there were 12,756 reported sexual offenses in Florida, of which 6,724 were forcible rapes, 401 attempted rapes, and 1,596 forcible sodomies. The FBI estimates that only 37 percent of rapes are reported, and the Bureau of Justice estimates that only 30.7 percent of rapes are reported. It is estimated that approximately 11.1 percent, or 1 in 9 adult women in Florida have been victims of one or more forcible rapes in their lifetime. This prevalence is somewhat lower than the national estimate of approximately 13.4 percent.<sup>7</sup> Approximately 1 percent to 5 percent of these assaults resulted in pregnancy.<sup>8</sup>

According to DOH, most county health departments currently refer rape victims to a rape crisis center or an emergency room to perform a forensics exam. Rape Crisis centers provide information and referral, crisis intervention, advocacy and support, therapy, and medical intervention. County health departments may be utilized to provide information to rape victims regarding pregnancy prevention and prophylaxis options.

### *Background on Emergency Contraceptives*

Emergency Contraception (EC) provides a method for preventing pregnancy after sexual assault. It can reduce the risk of pregnancy up to 89 percent after unprotected intercourse and can be effective up to 120 hours following intercourse. Currently, Plan-B® is the one designated product approved by the Food and Drug Administration (FDA) specifically for use as an EC. Plan-B® is a high dose oral contraceptive pill that prevents pregnancy. Although EC is often confused with the “abortion pill” (RU-486/Mifepristone), EC does not cause an abortion and has no effect on an existing pregnancy. EC is recommended by the American College of Obstetricians and Gynecologists and the Florida Medical Association to be provided to sexual assault patients. Nationwide, the price of ECs ranges from \$20–\$25.

Currently, most emergency care facilities in Florida do not provide sexual assault victims with EC. Only 35 percent of such facilities provide EC on-site to victims. The majority of facilities, 47 percent, provide

<sup>7</sup> Ruggiero, K.J., & Kilpatrick, D.G. (2003). Rape in Florida: A Report to the State. Charleston, SC: National Violence Against Women Prevention Research Center, Medical University of South Carolina. [http://www.fcasv.org/2005\\_Web/Statistics/OneNineReport.pdf](http://www.fcasv.org/2005_Web/Statistics/OneNineReport.pdf).

<sup>8</sup> Florida Council Against Sexual Violence. March 28, 2006. [www.fcasv.org](http://www.fcasv.org).

EC on an inconsistent basis, where provision depends on an individual physician's discretion, the patient's age or whether the facility happens to have EC in stock. According to the Florida Council Against Sexual Violence, hospitals and rape treatment programs are only reimbursed \$250 per exam by the Attorney General's Victim Compensation program, which does not adequately cover the costs of the exam. If implemented, this bill would speak specifically to the establishment of formal policy on the provision of ECs for sexual assault patients, and would increase the uniformity of EC procedure.

C. SECTION DIRECTORY:

**Section 1.** Identifies the bill as the "Prevention First Act."

**Section 2.** Requires the Department of Health to develop and maintain information and resources on family planning and reproductive health services on the department website.

**Section 3.** Requires all school districts to develop a comprehensive family life and human sexuality education curriculum.

**Section 4.** Requires health care practitioners to provide rape survivors with medically accurate information about pregnancy prevention prophylaxis, and provide such contraception if the rape survivor requests it and the practitioner determines it is medically appropriate.

**Section 5.** Provides an effective date.

## II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

According to analyses by the Department of Education<sup>9</sup>, the bill may incur costs for the Auditor General and Attorney General resulting from complaints against districts for not providing the educational requirements of the bill.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

According to analyses by the Department of Education<sup>10</sup>, there may be a fiscal impact on local governments. The bill requires school districts to develop comprehensive family life and human sexuality education by the 2008-09 school year. Districts would incur costs for research and development as well as for increased instructional requirements for students upon implementation of the requirements of the bill. The curriculum required by the bill would have to be developed for a minimum of four grade groupings, early elementary (K-2), elementary (3-5), middle (6-8), and high school (9-12). Districts would have to purchase or develop curriculum tools and manipulatives, as well as provide training to teachers and administrators.

<sup>9</sup> Department of Health analysis on HB 1073 – Prevention First – March 30, 2006.

<sup>10</sup> Department of Health analysis on HB 1073 – Prevention First – March 30, 2006.

Districts would have the option of purchasing commercially developed curriculums which can be costly. Currently, approximately 600 schools in Florida participate in a web-based educational program - Discovery Health Connection - which provides web-based instruction in 8 different curriculum areas including tobacco, obesity, and aids/sexuality education. The cost for current participants is \$500 per school; however, new schools choosing to participate in order to meet the requirements of the bill would incur an increased cost of \$1,695 per school. The program provides all curriculum tools as well as training for teachers and administrators.

As an alternative to purchasing a curriculum, districts could also establish curriculum by developing teams comprised of experts representative of community interests and knowledgeable in the field of human sexuality. Specific curriculum requirements, per the bill, may limit a school district's ability to address specific community interests and concerns.

**C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:**

This bill requires health care practitioners to provide information on emergency contraceptives and to provide ECs when requested by a rape victim and when medically necessary. This may increase some costs for health care providers.

**D. FISCAL COMMENTS:**

None.

**III. COMMENTS**

**A. CONSTITUTIONAL ISSUES:**

**1. Applicability of Municipality/County Mandates Provision:**

This bill does not require counties or municipalities to spend funds or taken an action requiring the expenditure of funds. This bill does not reduce the percentage of a state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenue.

**2. Other:**

None.

**B. RULE-MAKING AUTHORITY:**

None

**C. DRAFTING ISSUES OR OTHER COMMENTS:**

**IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES**