

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: HB 211
SPONSOR(S): Troutman
TIED BILLS:

Area Health Education Center Network

IDEN./SIM. BILLS: SB 374

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

SUMMARY ANALYSIS

House Bill 211 amends section 381.0402, F.S., and revises the Department of Health’s duties regarding Area Health Education Center (AHEC) networks in Florida. The bill specifies that the department maintain AHEC networks focused increasing training opportunities, increasing access to primary care services, providing health workforce recruitment, enhancing health care quality and addressing public health issues in medically underserved areas.

The bill amends section 381.0405, F.S., to reflect current practices and removes obsolete language regarding grant programs no longer in existence.

The bill amends section 381.0409, F.S., and establishes requirements for the AHEC network relating to students in the health care professions and health care providers serving medically underserved populations.

The bill provides an effective date of July 1, 2006.

There is no fiscal impact with this bill.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. HOUSE PRINCIPLES ANALYSIS:

Promote personal responsibility – The bill provides an opportunity for health professionals to train in medically underserved areas, thereby increasing access to primary care services and enhancing the quality of health care. As a result, individuals and families should have greater incentive to use health care services.

B. EFFECT OF PROPOSED CHANGES:

The bill revises the Department of Health's duties relating to the Area Health Education Centers (AHEC) in Florida to reflect current practices. The bill clarifies existing law regarding the multidisciplinary approach that AHEC networks use to recruit and retain health profession students to improve health care services to medically underserved persons. New language is created in s. 381.0402, F.S., to provide that AHEC programs work to strengthen the health care safety net by enhancing services and that AHECs provide library and other informational services.

Background

Area Health Education Centers link the resources of university health science centers with local planning, educational and clinical resources. An AHEC network of health-related institutions provides multidisciplinary educational services to students, faculty and local practitioners, ultimately improving health care delivery in medically underserved areas.

The AHEC program is a long-term initiative, requiring major changes in the traditional method of training medical and other health profession students and in the relationship between university health science centers and community health service delivery systems. The Basic AHEC Program was initiated in 1972 and the Model State Supported AHEC Program was initiated in 1992.

The Florida AHEC Network is an extensive, statewide system for health professional education and support founded on 10 regional AHECs. Each AHEC is supported by an AHEC Program at one of the state's five medical schools. The organization of the network allows the AHECs to draw on the resources of the academic health centers to address local health care issues. The Florida AHEC Network has addressed the primary health care needs of Florida's underserved populations by:

- Extending academic health resources;
- Providing information and support to community health care providers;
- Emphasizing the primary care needs of medically underserved populations;
- Encouraging health profession education programs to enhance their curricula with community-based clinical experiences, interdisciplinary training, distance education and other programs vital to students' learning; and
- Influencing the future health professional workforce by development programs to general interest in health careers among minority and disadvantaged youth.

Under section 381.0402, F.S., the Department of Health, in cooperation with the state-approved medical schools in Florida must organize an AHEC network based on earlier medically indigent demonstration projects and must evaluate the impact of each network on improving access to services by persons who are medically underserved. The network must be a catalyst for the primary care training of health professionals through increased opportunities to train in medically underserved areas.

An AHEC network must:

- Be coordinated and under contract with a state-approved medical school, which is responsible for clinical training and supervision;
- Divide the state into service areas with each medical school coordinating recruitment, training and retention of medical students within an assigned area;
- Use a multidisciplinary approach with medical supervision;
- Use community resources, such as county health departments, federally funded primary care centers, or other primary health care providers, as community-based sites to train medical students, interns and residents;
- Assist providers in medically underserved areas and other safety net providers to remain current in their fields through a variety of community resource initiatives;
- Strengthen the state's health care safety net by enhancing services and increasing access to care in medically underserved areas; and
- Provide other services, such as library and information resources, continuing professional education, technical assistance, and other support services, for providers who serve in medically underserved areas.

The Department of Health must establish criteria and procedures for quality assurance, performance evaluations, periodic audits, and other network safeguards. The department must make every effort to assure that participating medical schools do not discriminate among enrollees with respect to age, race, sex, or health status. Participating medical schools may target high-risk medically needy population groups.

C. SECTION DIRECTORY:

Section 1. Amends s. 381.0402, F.S., to clarify the Department of Health's responsibilities regarding the development and approval of Area Health Education Center (AHEC) networks.

Section 2. Amends s. 381.0405, F.S., regarding the Office of Rural Health grant process.

Section 3. Creates s. 381.0409, F.S., and provides new language regarding coordination with federal health professional recruitment and placement programs.

Section 4. Provides an effective date of July 1, 2006.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues: None

2. Expenditures: None

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues: None

2. Expenditures: None

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None

D. FISCAL COMMENTS:

None

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

None applicable because this bill does not: require counties or municipalities to spend funds or to take actions requiring the expenditure of funds; reduce the authority that cities or counties have to raise revenues in the aggregate; or reduce the percentage of a state tax shared with cities or counties.

2. Other: None

B. RULE-MAKING AUTHORITY:

The Department of Health has sufficient rulemaking authority to implement the provisions of this bill.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None

IV. AMENDMENTS/COMMITTEE SUBSTITUTE & COMBINED BILL CHANGES