# SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

		F	Prepared By: E	ducation Committe	ee	
BILL:	SB 374					
INTRODUCER:	Senator Peaden					
SUBJECT:	Area Health Education Center Network					
DATE:	February 28	8, 2006	REVISED:			
ANALYST		STAFF DIRECTOR		REFERENCE		ACTION
Munroe		Wilson		HE	Favorable	
. Harkey		Matthews		ED	Favorable	
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#### I. Summary:

The bill revises the Department of Health's (DOH) duties relating to the Area Health Education Center (AHEC) network in Florida. The bill specifies that the AHEC network include the AHECs at the medical schools in the state (Florida State University, Nova Southeastern University, the University of Florida, the University of Miami, and the University of South Florida). The department must maintain an AHEC network focused on improving access to health services by persons who are medically underserved.

The Department of Health must contract with the medical schools at these universities to assist in funding the AHEC network, which links the education of medical students, interns, and residents with the provision of primary care services to medically underserved populations.

The bill establishes requirements for the AHEC network relating to students in the health care professions and health care providers serving medically underserved populations. The bill requires DOH to make every effort to assure that the network, rather than the participating medical schools, does not discriminate among enrollees with respect to age, race, sex, or health status.

The bill revises the duties of the Office of Rural Health within DOH. The bill deletes references to specific federal grant programs that no longer exist.

This bill amends sections 381.0402 and 381.0405, Florida Statutes. The bill creates s. 381.0409, Florida Statutes.

#### II. Present Situation:

The Area Health Education Centers link the resources of university health science centers with local planning, educational, and clinical resources. Through a network of health-related institutions, an AHEC provides multidisciplinary educational services to students, faculty, and local practitioners, ultimately improving health care delivery in medically underserved areas.<sup>1</sup> Area Health Education Centers train health care providers in sites and programs that are responsive to state and local needs. Health care enhancement and recruitment programs for K-12 students are emphasized.<sup>2</sup>

The AHEC program is a long-term initiative, requiring major changes both in the traditional method of training medical and other health professions 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 1993. The AHEC program is part of a series of health professions programs that are authorized under Title VII of the Public Health Service Act<sup>3</sup>. Title VII of the Public Health Service Act supports the training and education of health care providers through loans, loan guarantees, and scholarships to students, and grants and contracts to academic institutions and non-profit organizations. The Health Professions Education Partnerships Act of 1998 reauthorized the AHEC Program for five years.<sup>4</sup> Although Congress has not reauthorized Title VII of the Public Health Service Act since 2003, Congress has continued to annually fund the AHEC program.

The Florida AHEC Network is an extensive, statewide system for health professional education and support founded upon 10 regional AHECs. The organization of the network allows the AHECs to draw upon the resources of the academic health centers to address local health care issues.

According to the 2005 Florida AHEC Network annual report, the network received \$13,721,385 in 2005 in General Revenue, tobacco settlement funds and funds to implement health literacy, obesity, and tobacco control projects. The Florida AHEC Network addresses the primary health care needs of Florida's underserved populations by:

- Extending academic resources and health professions education to medically underserved communities;
- Coordinating community-based clinical rotations and serving as a point of contact for academic health centers within the communities where students train;
- Offering programs and activities designed to influence the future health professional workforce by stimulating and promoting youth interest in health careers;
- Providing information and support to community health professionals to reduce isolation of providers in medically deprived areas, improving access and use of educational and informational resources, and enhancing the quality of care;

<sup>&</sup>lt;sup>1</sup>U.S. Department of Health and Human Services. Health Resources and Services Administration. <u>http://bhpr.hrsa.gov/ahec/</u> <sup>2</sup> *Ibid.* 

<sup>&</sup>lt;sup>3</sup> Codified at 42 U.S.C. s. 292 *et seq*.

<sup>&</sup>lt;sup>4</sup> See Public Law 105-392.

- Engaging in special projects to reduce health disparities and improve access to quality health care, such as statewide programs to train community health workers to reach medically underserved populations, working with communities to address the issue of tobacco use, and developing programs targeting health literacy and cultural sensitivity; and
- Conducting a variety of activities to evaluate the impact of its programs and administering the extensive network of affiliation agreements with academic and community partners necessary to accomplish its work.

Under s. 381.0402, F.S., DOH, 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 for training in medically underserved areas. The Department of Health must contract to assist in funding an AHEC network, which links the education of medical students, interns, and residents with the provision of primary care services to low-income persons.

The AHEC network must:

- Be coordinated with and under contract with the state-approved medical schools, which must be responsible for the clinical training and supervision.
- Divide the state into service areas with each medical school coordinating the recruiting, training, and retention of medical students within its assigned area.
- Use a multidisciplinary approach with appropriate medical supervision.
- Use current community resources, such as county health departments, federally funded primary care centers, or other primary health care providers, as community-based sites for training medical students, interns, and residents.

The Department of Health must establish criteria and procedures for quality assurance, performance evaluations, periodic audits, and other appropriate safeguards for the network. 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.

Section 381.0405, F.S., provides responsibilities for the Office of Rural Health within DOH. The office must assume responsibility for state coordination of various rural health care programs. The office coordinates with other state and local agencies, provides technical assistance to rural health care providers, collects and disseminates information regarding rural health, acquires grant funds for rural health providers, and works to improve access to emergency care in rural areas.

In cooperation with the federal government, DOH currently performs various activities related to the healthcare workforce without specific statutory recognition. Such activities include: the designation of health professional shortage areas and medically underserved areas; recommending waivers of home residency requirements for foreign physicians with J-1 visas through the U.S. Department of State; attesting to "service in the public interest" for foreign

physicians seeking national interest waivers; and providing placement assistance for health practitioners who are members of the National Health Service Corps.

### III. Effect of Proposed Changes:

The bill updates the statutes governing the Area Health Education Centers program and the Office of Rural Health to reflect current practices and to provide statutory authority for healthcare workforce programs the department now administers with the federal government. The bill amends s. 381.0402, F.S., to revise DOH's duties relating to the AHEC network in Florida. The bill specifies that the AHEC network includes the AHECs at the medical schools in the state (Florida State University, Nova Southeastern University, the University of Florida, the University of Miami, and the University of South Florida). The department must maintain and evaluate, rather than organize, an AHEC network focused on improving access to health services by persons who are medically underserved. The network must serve as a catalyst for the primary care training of health professionals by increasing opportunities for training in medically underserved areas, increasing access to primary care services, providing health workforce recruitment, enhancing the quality of health care, and addressing current and emerging public health issues.

The Department of Health must contract with the medical schools to assist in funding the AHEC network, which links the provision of primary care services to medically underserved populations with the education of medical students, interns, and residents. The requirements for the AHEC network to be coordinated with and under contract with the state-approved medical schools is deleted.

The bill requires the AHEC network to:

- Facilitate the recruitment, training, and retention of students in the health care professions within each AHEC service area.
- Use community resources as sites for training students in the health care professions.
- Use a multidisciplinary approach with appropriate supervision.

The AHEC network must also:

- Assist providers in medically underserved areas and other safety net providers in remaining current in their fields through a variety of community resource initiatives;
- Strengthen the health care safety net in Florida 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 make every effort to assure that the network, rather than participating medical schools, does not discriminate among enrollees with respect to age, race, sex, or health status.

The bill amends s. 381.0405, F.S., to revise the duties of the Office of Rural Health within DOH. The bill deletes references to specific federal grant programs, which no longer exist: the Rural Hospital Transition Grant Program and the Essential Access Community Hospital Program.

The bill creates s. 381.0409, F.S., to specify that the department will coordinate with the federal government to designate health professional shortage areas and medically underserved areas, recommend foreign physicians for visa waivers, document health care professionals working in the public interest, and to place professionals using the federally funded recruitment incentive programs.

The bill will take effect July 1, 2006.

### IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

### V. Economic Impact and Fiscal Note:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

None.

#### VI. Technical Deficiencies:

None.

## VII. Related Issues:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

# VIII. Summary of Amendments:

None.

This Senate staff analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.