

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.)

Prepared By: Health Care Committee

BILL: SB 374

INTRODUCER: Senator Peaden

SUBJECT: Area Health Education Center Network

DATE: January 19, 2006

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Munroe	Wilson	HE	Favorable
2.	_____	_____	ED	_____
3.	_____	_____	HA	_____
4.	_____	_____	_____	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

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 and evaluate, rather than organize, 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 provision of primary care services to medically underserved populations with the education of medical students, interns, and residents. The requirement for the AHEC network to be coordinated with and under contract with the state-approved medical schools is deleted.

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

This bill amends sections 381.0402 and 381.0405, Florida Statutes.

This bill creates s. 381.0409, F.S.

II. Present Situation:

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 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. 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.¹ 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. An AHEC program at one of the state's five medical schools supports each AHEC. The organization of the network allows the AHECs to draw upon 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 professions 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 developing programs to generate interest in health careers among minority and disadvantaged youth.

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

¹ See Public Law 105-392.

provision of primary care services to low-income persons with the education of medical students, interns, and residents.

The AHEC network must:

- Be coordinated with and under contract with the state-approved medical schools, which shall 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.

The Department of Health currently performs various activities in cooperation with the federal government 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 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 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 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 in these universities 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 revises the language relating to duties of and requirements for an AHEC network to conform to other changes in the bill.

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, 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 effective date of the bill is July 1, 2006.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Art. VII, s. 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Art. I, s. 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on the trust fund restrictions under the requirements of Art. III, Subsection 19(f) of the Florida Constitution.

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.

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.
