

The Florida Senate
PROFESSIONAL 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 Policy Committee

BILL: SB 2892

INTRODUCER: Senator Dawson

SUBJECT: Health Care /Minority Physician Networks

DATE: March 24, 2007

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Garner	Wilson	HP	Favorable
2.			HA	
3.				
4.				
5.				
6.				

I. Summary:

The bill requires the Agency for Health Care Administration to provide for the development and expansion of minority physician networks statewide by July 1, 2007.

The bill also requires the Department of Health to work with and promote the establishment of public and private partnerships with charitable organizations, hospitals, provider service networks, Medicaid health maintenance organizations, and minority physician networks to increase the proportion of health care professionals from minority backgrounds, as part of the Florida Healthy People 2010 program.

This bill amends ss. 381.736 and 409.912, F.S.

II. Present Situation:

The Florida Medicaid Program

Florida's Medicaid Program is jointly funded by the federal, state, and county governments to provide medical care to eligible individuals. Florida implemented its Medicaid program on January 1, 1970, to provide medical services to indigent people. The Agency for Health Care Administration (AHCA or agency) is the single state agency responsible for the Florida Medicaid Program. The statutory provisions for the Medicaid program appear in ss. 409.901 through 409.9205, F.S.

Some Medicaid services are mandatory services that must be covered by any state participating in the Medicaid program pursuant to federal law.¹ Other services are optional. A state may choose to include optional services in its state Medicaid plan, but if included, such services must be offered to all individuals statewide who meet Medicaid eligibility criteria as though they are mandatory benefits.² Payments for services to individuals in the optional categories are subject to the availability of monies and any limitations established by the General Appropriations Act or chapter 216, F.S.

For FY 2006-07, the Florida Medicaid program is estimated to cover 2.1 million people³ at a cost of \$14.6 billion.⁴

Medicaid and the Minority Physician Network

Florida law requires the AHCA to contract with established minority physician networks that provide services to historically underserved minority patients. The networks must provide cost-effective Medicaid services, comply with the requirements to be a MediPass provider, and provide their primary care physicians with access to data and other management tools necessary to assist them in ensuring the appropriate use of services, including inpatient hospital services and pharmaceuticals. The agency is also required to provide for the development and expansion of minority physician networks in each service area to provide services to Medicaid recipients who are eligible to participate under federal law and rules.

In May 2001, the AHCA was authorized by the General Appropriations Act to establish pilot projects for improving the quality of care and the cost effectiveness of the MediPass program; and in particular, the agency was authorized to contract with physician-owned and operated organizations with experience managing care for Medicaid and Medicare programs, utilizing at least one predominantly minority, physician network.

Three entities applied to operate under the pilot program and two minority physician networks were eventually awarded contracts: Florida Netpass and PhyTrust (now known as Access Health Solutions). These two minority networks of primary care physicians began operating in South Florida, Medicaid Areas 10 and 11, in 2001. In 2003, the networks expanded to the Tampa and St. Petersburg areas covering Medicaid Areas 5 and 6 under a two-year contract with the AHCA.

As of March 2007, there are three Medicaid minority physician networks providing services in 26 counties with an enrollment of 138,568 Medicaid beneficiaries.

The Florida Healthy People 2010 Program

The Florida Healthy People 2010 Program is administered by the Florida Department of Health (DOH). Section 381.736, F.S., requires the DOH, in collaboration with the AHCA and the minority physician networks, to examine efforts to improve minority health outcomes as the main focus of this program. The Office of Minority Health serves as the focal point within the

¹ These mandatory services are codified in s. 409.905, F.S.

² Optional services covered under the Florida Medicaid program are found in s. 409.906, F.S.

³ <http://edr.state.fl.us/conferences/medicaid/medcases.pdf> (last visited on March 22, 2007)

⁴ <http://edr.state.fl.us/conferences/medicaid/medhistory.pdf> (last visited on March 22, 2007)

DOH for coordination, information exchange, coalition and partnership building, and related efforts to address the health needs of racial and ethnic minorities.

Under the project, the DOH works with and promotes the establishment of public and private partnerships with charitable organizations, hospitals, and minority physician networks to increase the proportion of healthcare professionals from minority backgrounds. A wide variety of activities are conducted through the program which is centered on increasing the proportion of minorities in healthcare professions. These activities include:⁵

- *Addressing Missing Persons: Minorities in Health Professions.* As part of this activity, an intergenerational forum was conducted for high school students currently enrolled in health occupation courses to foster leadership skills, establish educational equity, and build independence and high self-esteem. In addition, the forum educated and advocated for the students' rights to make good decisions about their health, as well as the minority communities' ability to address health and wellness issues.
- *The MPN Summer Internship.* This activity fills a critical need by offering hands-on learning to talented college students seeking a career in the medical field. In addition, a new summer mentor program was developed and implemented in 2006 to educate and train medical students currently enrolled in Meharry Medical College. The program brings experienced minority physicians together with students to help them in their transition period, emphasizing the importance of remaining in the healthcare pipeline and the commitment to practicing in underserved communities.
- *The Florida Epidemic Intelligence Service (EIS) Program.* The program was created by Emergency Order #01-300 and Governor Jeb Bush signed it on October 11, 2001, as part of the state's response to terrorism. This program offers a two-year, post-graduate, applied epidemiology training for health professionals under the direction of the Bureau of Epidemiology. The bureau recruits and trains epidemiologists to assist county health departments in identifying and resolving disease outbreaks, and in becoming leaders in the public health field. The long-term goal of this program is to increase the capacity of the Department of Health to respond to new challenges in disease control and prevention.
- *The Public Health Rotation (Public Health Practice I).* This program is an integral and essential part of the curriculum of the Florida Agricultural and Mechanical University's (FAMU) Master's of Public Health Program and helps prepare and orient the student for a professional career in public health. The primary purpose of the rotation is to orient the student to public health practice.

III. Effect of Proposed Changes:

Section 1. Amends s. 409.912, F.S., to require the AHCA to provide for the development and expansion of minority physician networks statewide by July 1, 2007.

⁵ http://www.doh.state.fl.us/equopp/CTG/Final_Report_Healthy_People_2010_Dec_2005.pdf (last visited on March 24, 2007)

Section 2. Amends s. 381.736, F.S., to require the DOH to work with and promote the establishment of public and private partnerships with charitable organizations, hospitals, provider service networks, Medicaid health maintenance organizations, and minority physician networks to increase the proportion of health care professionals from minority backgrounds, as part of the Florida Healthy People 2010 program

Section 3. Provides that the bill takes effect upon becoming a law.

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 Article VII, Section 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 Article I, Section 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 Article 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:

The agency will require additional resources to develop and expand minority physician networks in all service areas of the state by July 1, 2007, as required in this bill. An open application process for new minority physician contracts is needed and technical assistance and monitoring of the expansions would be necessary. Therefore, the agency will require additional staff, equipment and travel funds to carry out these functions. The additional staff will be one Medical/Health Care Program Analyst at pay grade 24. Specific functions for this position will be contract procurement, contract management, technical assistance, monitoring site visits, and reporting. Total expenses for fiscal year 2007-08 are \$79,930 and for fiscal year 2008-09 are \$75,530 which includes salary, equipment, and travel.

The DOH may require additional resources to implement the provisions of subsection (4) of s. 381.736, F.S. The bill requires the DOH to partner with more managed care entities in the effort to increase the proportion of health care professionals from minority backgrounds. Therefore, the department may require additional staff, equipment and travel funds to carry out these functions of an indeterminate amount.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

This Senate Professional Staff Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.

VIII. Summary of Amendments:

None.

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