

HOUSE OF REPRESENTATIVES STAFF ANALYSIS

BILL #: CS/HB 1389 Cardiovascular Disease
SPONSOR(S): Health & Family Services Policy Council, Homan and others
TIED BILLS: **IDEN./SIM. BILLS:** SB 1872

	REFERENCE	ACTION	ANALYST	STAFF DIRECTOR
1)	Health Care Services Policy Committee	6 Y, 0 N	Schoolfield	Schoolfield
2)	Health & Family Services Policy Council	24 Y, 0 N, As CS	Lowell	Gormley
3)	Human Services Appropriations Committee			
4)	Full Appropriations Council on General Government & Health Care			
5)				

SUMMARY ANALYSIS

This bill creates in an unspecified section of statute the Florida Council on Cardiovascular Disease and Stroke. The Council is to consist of 13 members, who are appointed by the Governor and confirmed by the Senate.

The bill charges the council to develop a plan to reduce the morbidity, mortality, and economic burden of cardiovascular disease (CVD) and stroke in the state. The council is directed to perform a number of activities relating to prevention of CVD including:

- Conducting health education, public awareness, and community outreach.
- Promoting health education and public awareness provided by private or public organizations.
- Coordinating with other entities concerned with similar conditions; and identify, recognize, and promote effective programs.
- Identifying for specific groups the benefits of treatment and improving access to treatment of the disease.
- Providing guidance regarding the roles and responsibilities of certain groups including government agencies.
- Assisting communities, the Department of Education and local schools to develop prevention programs.
- Establishing forums and other public education initiatives.
- Evaluating and enhancing the programs developed as a result of the bill.

The council must develop a database of recommendations for care and treatment of patients with CVD or stroke and make this information available to the public. The council is also charged to collect data and information related to CVD and to maintain this database.

The council must provide written recommendations to the Department of Health, Governor, Speaker of the House of Representatives, and President of the Senate by January 15, 2010.

The bill has an estimated fiscal impact of \$161,526 in FY 2009-2010.

The bill is effective July 1, 2009.

HOUSE PRINCIPLES

Members are encouraged to evaluate proposed legislation in light of the following guiding principles of the House of Representatives

- Balance the state budget.
- Create a legal and regulatory environment that fosters economic growth and job creation.
- Lower the tax burden on families and businesses.
- Reverse or restrain the growth of government.
- Promote public safety.
- Promote educational accountability, excellence, and choice.
- Foster respect for the family and for innocent human life.
- Protect Florida's natural beauty.

FULL ANALYSIS

I. SUBSTANTIVE ANALYSIS

A. EFFECT OF PROPOSED CHANGES:

Background

Cardiovascular Disease

Cardiovascular disease (CVD) is an abnormal function of the heart or blood vessels. It can cause an increase in risk for heart attack, heart failure, sudden death, stroke and cardiac rhythm problems, thus resulting in decreased quality of life and decreased life expectancy. The causes of cardiovascular disease range from structural defects, to infection, inflammation, environment and genetics. In order to help prevent cardiovascular disease one must adopt a healthy lifestyle and avoid smoking, fattening foods and stress.

CVD risk factors that can be prevented or treated include: high blood pressure, high cholesterol, excess weight, physical inactivity, smoking, diabetes, excessive alcohol consumption, illegal drug use and stress. Unpreventable risks include: previous heart attack, family member with heart disease, increasing age, gender and race.¹

The American Heart Association estimates that in year 2006, 80,000,000 people in the United States have one or more forms of cardiovascular disease including high blood pressure, coronary heart disease, stroke and heart failure. Cardiovascular diseases claimed 864,480 lives in 2005 which is 35.3 percent or 1 of every 2.8 deaths. By comparison cancer claimed 559,312 lives; and HIV (AIDS) 12,543 lives. Nearly 151,000 Americans killed by CVD in 2005 were under age 65.

Progress is being made in reducing death from CVD. From 1995 to 2005, death rates around the nation from CVD declined 26.4 percent. In the same 10-year period the actual number of deaths declined 9.6 percent.²

In Florida, every year, more than 50,000 people die of heart disease and stroke. Every year, more than 400,000 hospitalizations are due to cardiovascular diseases. Costs for cardiovascular disease in 2008 are estimated at \$10 billion, including health care expenditures and lost productivity from death and disability.³

¹ Cardiovascular Disease Foundation, see <http://www.cvdf.org/> (last visited March 29, 2009).

² American Heart Association, see <http://www.americanheart.org/presenter.jhtml?identifier=4478> (last visited March 29, 2009).

³ Florida Charts.com Report. Susan Allen, DOH, email 3-20-09.

Stroke

A stroke or "brain attack" occurs when a blood clot blocks an artery (a blood vessel that carries blood from the heart to the body) or a blood vessel (a tube through which the blood moves through the body) breaks, interrupting blood flow to an area of the brain. When either of these things happen, brain cells begin to die and brain damage occurs. When brain cells die during a stroke, abilities controlled by that area of the brain are lost. These abilities include speech, movement and memory. How a stroke patient is affected depends on where the stroke occurs in the brain and how much the brain is damaged.⁴ The American Heart Association estimates that around the nation 6,500,000 people had strokes in 2006. In Florida, 8,715 people died as a result of a stroke in 2007.

Medical stroke risk factors include a previous stroke, previous episode of transient ischemic attack (TIA) or mini stroke, high cholesterol, high blood pressure, heart disease, atrial fibrillation and carotid artery disease. Lifestyle stroke risk factors include smoking, being overweight and drinking too much alcohol.⁵

Effect of Proposed Changes

The bill creates the Florida Council on Cardiovascular Disease and Stroke. The council consists of 13 members appointed by the Governor and confirmed by the Senate, with the chair appointed by the Governor. The membership consists of four physicians to represent specializations in cardiology, neurology to treat stroke, primary care and emergency medicine, a nurse with a cardiovascular disease specialty, a dietician, a pharmacist, two people with training and experience in public health, two consumers with special consideration to participants in the American Heart Association or American Stroke Association, and two providers of care for persons with CVD. The bill directs the Governor to attempt to appoint female members and members of minority groups to the council. The members shall be appointed to staggered 4-year terms and meet quarterly or at the call of the chairperson.

The Department of Health is required to provide staff and administrative support for the council.

The bill charges the council to develop a plan to reduce the morbidity, mortality, and economic burden of CVD and stroke in the state. The council is directed to perform a number of activities relating to prevention of CVD including:

- Conducting health education, public awareness, and community outreach.
- Promoting health education and public awareness provided by private or public organizations.
- Coordinating with other entities concerned with similar conditions and identifying, recognizing, and promoting effective programs.
- Identifying for specific groups the benefits of treatment and improving access to treatment of the disease.
- Providing guidance regarding the roles and responsibilities of certain groups including government agencies.
- Assisting communities, the Department of Education and local schools to develop prevention programs.
- Establishing forums and other public education initiatives.
- Evaluating and enhancing the programs developed as a result of the bill.

The council must provide written recommendations to the Department of Health, Governor, Speaker of the House of Representatives, and President of the Senate by January 15, 2010. Beginning January 2011 and thereafter reports are required to be submitted on the activities of the council including accountability for funds received and disbursed. The council is not authorized in the bill or current statute to receive or disburse funds. It is unclear what funds would be received or disbursed other than

⁴ National Stroke Association, see <http://www.stroke.org/site/PageServer?pagename=STROKE> (last visited March 29, 2009).

⁵ National Stroke Association, Stroke Facts, see http://www.stroke.org/site/DocServer/STROKE_101_Fact_Sheet.pdf?docID=4541 (last visited March 29, 2009).

those provided by the Department of Health. The Department of Health must provide administrative support including travel cost for council members.

The council must develop a database of recommendations for care and treatments of patients with CVD or stroke and make this information available to the public. The council is also charged to collect data and information related to CVD and to maintain this database. The information must include at a minimum, behavioral risk factors, morbidity and mortality rates, and community indicators relevant to cardiovascular disease and stroke.

B. SECTION DIRECTORY:

Section 1 Creates an unspecified section of law relating to the Florida Council on Cardiovascular Disease and Stroke.

Section 2 Provides an effective date of July 1, 2009.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None

2. Expenditures:

Yes, in FY 2009-2010, \$161,526 and annualized cost of \$171,254 ongoing.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None

2. Expenditures:

None

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None

D. FISCAL COMMENTS:

The Department of Health estimates a first year cost of \$161,526 to provide administrative support and staffing for the council. The estimated cost for year one is as follows:

1. Salaries	\$42,419
2. Contractual Services (evaluation and database)	\$90,000
3. Expenses (travel, meetings, etc)	\$27,706
4. Operating Capital Outlay	\$ 1,000
5. HR Fee	\$ 401
Total	\$161,526

III. COMMENTS

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not appear to require counties or municipalities to take an action requiring the expenditure of funds, reduce the authority that counties or municipalities have to raise revenue in the aggregate, nor reduce the percentage of state tax shared with counties or municipalities

2. Other:

None

B. RULE-MAKING AUTHORITY:

None

C. DRAFTING ISSUES OR OTHER COMMENTS:

Line 156: It is recommended that the words "by or" be deleted on line 156 to clarify that the annual report will include funds received or disbursed for the council (by the Department of Health).

IV. AMENDMENTS/COUNCIL OR COMMITTEE SUBSTITUTE CHANGES

On April 1, 2009, the Health and Family Services Policy Council adopted two amendments with the following provisions:

- Add a 13th member to the Council on Cardiovascular Disease and Stroke.
- Require one of the council members to be a licensed physician whose area of specialization is emergency medicine and who serves as an Emergency Services Medical Director.

The bill was reported favorably as a Council Substitute. This analysis reflects the Council Substitute.