

Amendment No.

CHAMBER ACTION

Senate

House

.

1 Representative Zapata offered the following:

2
3 **Amendment to Senate Amendment (780200) (with title**
4 **amendment)**

5 Remove lines 495-1551 and insert:

6 ~~fiscal years only, the department shall award a contract or~~
7 ~~grant in the amount of \$10 million to the AHEC network for the~~
8 ~~purpose of developing the components described in paragraph~~
9 ~~(3) (i). The AHEC network may apply for a competitive contract or~~
10 ~~grant after the 2008-2009 fiscal year.~~

11 (a) In order to ensure that all proposals for funding are
12 appropriate and are evaluated fairly on the basis of merit, the
13 State Surgeon General, in consultation with the council, shall
14 appoint a ~~peer~~ review panel of independent, qualified experts in
15 the field of tobacco control to review the content of each
16 proposal and establish its priority score. The priority scores
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17 shall be forwarded to the council and must be considered in
18 determining which proposals will be recommended for funding.

19 (b) The council and the ~~peer~~ review panel shall establish
20 and follow rigorous guidelines for ethical conduct and adhere to
21 a strict policy with regard to conflicts of interest. Council
22 members are subject to the applicable provisions of chapter 112.

23 ~~A member of the council or panel may not participate in any~~
24 ~~discussion or decision with respect to a research proposal by~~
25 ~~any firm, entity, or agency with which the member is associated~~
26 ~~as a member of the governing body or as an employee or with~~
27 ~~which the member has entered into a contractual arrangement.~~
28 ~~Meetings of the council and the peer review panels are subject~~
29 ~~to chapter 119, s. 286.011, and s. 24, Art. I of the State~~
30 ~~Constitution.~~

31 (c) In each contract or grant agreement, the department
32 shall limit the use of food and promotional items to no more
33 than 2.5 percent of the total amount of the contract or grant
34 and limit overhead or indirect costs to no more than 7.5 percent
35 of the total amount of the contract or grant. The department, in
36 consultation with the Department of Financial Services, shall
37 publish guidelines for appropriate food and promotional items.

38 (d) In each advertising contract, the department shall
39 limit the total of production fees, buyer commissions, and
40 related costs to no more than 10 percent of the total contract
41 amount.

42 (e) Notwithstanding the competitive process for contracts
43 prescribed in this subsection, each county health department is
44 eligible for core funding, on a per capita basis, to implement
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45 tobacco education and use prevention activities within that
46 county.

47 (7) ANNUAL REPORT REQUIRED.--By February 28 ~~January 31~~ of
48 each year, the department shall provide to the Governor, the
49 President of the Senate, and the Speaker of the House of
50 Representatives a report that evaluates the program's
51 effectiveness in reducing and preventing tobacco use and that
52 recommends improvements to enhance the program's effectiveness.
53 The report must contain, at a minimum, an annual survey of youth
54 attitudes and behavior toward tobacco, as well as a description
55 of the progress in reducing the prevalence of tobacco use among
56 youth, adults, and pregnant women; reducing per capita tobacco
57 consumption; and reducing exposure to environmental tobacco
58 smoke.

59 (8) LIMITATION ON ADMINISTRATIVE EXPENSES.--From the total
60 funds appropriated for the Comprehensive Statewide Tobacco
61 Education and Use Prevention Program in the General
62 Appropriations Act, an amount of up to 5 percent may be used by
63 the department for administrative expenses.

64 ~~(9) RULEMAKING AUTHORIZED.--By January 1, 2008, the~~
65 ~~department shall adopt rules pursuant to ss. 120.536(1) and~~
66 ~~120.54 to administer this section.~~

67 Section 8. Section 381.91, Florida Statutes, is
68 transferred and renumbered as section 385.2024, Florida
69 Statutes, to read:

70 385.2024 ~~381.91~~ Jessie Trice Cancer Prevention Program.--

71 (1) It is the intent of the Legislature to:

72 (a) Reduce the rates of illness and death from lung cancer

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73 and other cancers and improve the quality of life among low-
74 income African-American and Hispanic populations through
75 increased access to early, effective screening and diagnosis,
76 education, and treatment programs.

77 (b) Create a community faith-based disease-prevention
78 program in conjunction with the Health Choice Network and other
79 community health centers to build upon the natural referral and
80 education networks in place within minority communities and to
81 increase access to health service delivery in Florida.

82 (c) Establish a funding source to build upon local private
83 participation to sustain the operation of the program.

84 (2) (a) There is created the Jessie Trice Cancer Prevention
85 Program, to be located, for administrative purposes, within the
86 Department of Health, and operated from the community health
87 centers within the Health Choice Network in Florida.

88 (b) Funding may be provided to develop contracts with
89 community health centers and local community faith-based
90 education programs to provide cancer screening, diagnosis,
91 education, and treatment services to low-income populations
92 throughout the state.

93 Section 9. Section 381.911, Florida Statutes, is
94 transferred, renumbered as section 385.2023, Florida Statutes,
95 and amended to read:

96 385.2023 ~~381.911~~ Prostate Cancer Awareness Program.--

97 (1) To the extent that funds are specifically made
98 available for this purpose, the Prostate Cancer Awareness
99 Program is established within the Department of Health. The
100 purpose of this program is to implement the recommendations of
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101 January 2000 of the Florida Prostate Cancer Task Force to
102 provide for statewide outreach and health education activities
103 to ensure that men are aware of and appropriately seek medical
104 counseling for prostate cancer as an early-detection health care
105 measure.

106 (2) For purposes of implementing the program, the
107 Department of Health and the Florida Public Health Foundation,
108 Inc., may:

109 (a) Conduct activities directly or enter into a contract
110 with a qualified nonprofit community education entity.

111 (b) Seek any available gifts, grants, or funds from the
112 state, the Federal Government, philanthropic foundations, and
113 industry or business groups.

114 (3) A prostate cancer advisory committee is created to
115 advise and assist the Department of Health and the Florida
116 Public Health Foundation, Inc., in implementing the program.

117 (a) The State Surgeon General shall appoint the advisory
118 committee members, who shall consist of:

119 1. Three persons from prostate cancer survivor groups or
120 cancer-related advocacy groups.

121 2. Three persons who are scientists or clinicians from
122 public or nonpublic universities or research organizations.

123 3. Three persons who are engaged in the practice of a
124 cancer-related medical specialty from health organizations
125 committed to cancer research and control.

126 (b) Members shall serve without compensation but are
127 entitled to reimbursement, pursuant to s. 112.061, for per diem
128 and travel expenses incurred in the performance of their

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official duties.

(4) The program shall coordinate its efforts with those of the Florida Public Health Foundation, Inc.

Section 10. Section 381.912, Florida Statutes, is repealed.

Section 11. Section 381.92, Florida Statutes, is transferred and renumbered as section 385.2025, Florida Statutes, to read:

385.2025 ~~381.92~~ Florida Cancer Council.--

(1) Effective July 1, 2004, the Florida Cancer Council within the Department of Health is established for the purpose of making the state a center of excellence for cancer research.

(2) (a) The council shall be representative of the state's cancer centers, hospitals, and patient groups and shall be organized and shall operate in accordance with this act.

(b) The Florida Cancer Council may create not-for-profit corporate subsidiaries to fulfill its mission. The council and its subsidiaries are authorized to receive, hold, invest, and administer property and any moneys acquired from private, local, state, and federal sources, as well as technical and professional income generated or derived from the mission-related activities of the council.

(c) The members of the council shall consist of:

1. The chair of the Florida Dialogue on Cancer, who shall serve as the chair of the council;

2. The State Surgeon General or his or her designee;

3. The chief executive officer of the H. Lee Moffitt Cancer Center or his or her designee;

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157 4. The director of the University of Florida Shands Cancer
158 Center or his or her designee;

159 5. The chief executive officer of the University of Miami
160 Sylvester Comprehensive Cancer Center or his or her designee;

161 6. The chief executive officer of the Mayo Clinic,
162 Jacksonville, or his or her designee;

163 7. The chief executive officer of the American Cancer
164 Society, Florida Division, Inc., or his or her designee;

165 8. The president of the American Cancer Society, Florida
166 Division, Inc., Board of Directors or his or her designee;

167 9. The president of the Florida Society of Clinical
168 Oncology or his or her designee;

169 10. The president of the American College of Surgeons,
170 Florida Chapter, or his or her designee;

171 11. The chief executive officer of Enterprise Florida,
172 Inc., or his or her designee;

173 12. Five representatives from cancer programs approved by
174 the American College of Surgeons. Three shall be appointed by
175 the Governor, one shall be appointed by the Speaker of the House
176 of Representatives, and one shall be appointed by the President
177 of the Senate;

178 13. One member of the House of Representatives, to be
179 appointed by the Speaker of the House of Representatives; and

180 14. One member of the Senate, to be appointed by the
181 President of the Senate.

182 (d) Appointments made by the Speaker of the House of
183 Representatives and the President of the Senate pursuant to
184 paragraph (c) shall be for 2-year terms, concurrent with the
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185 bienniums in which they serve as presiding officers.

186 (e) Appointments made by the Governor pursuant to
187 paragraph (c) shall be for 2-year terms, although the Governor
188 may reappoint members.

189 (f) Members of the council or any subsidiaries shall serve
190 without compensation, and each organization represented on the
191 council shall cover the expenses of its representatives.

192 (3) The council shall issue an annual report to the Center
193 for Universal Research to Eradicate Disease, the Governor, the
194 Speaker of the House of Representatives, and the President of
195 the Senate by December 15 of each year, with policy and funding
196 recommendations regarding cancer research capacity in Florida
197 and related issues.

198 Section 12. Section 381.921, Florida Statutes, is
199 transferred and renumbered as section 385.20251, Florida
200 Statutes, to read:

201 385.20251 ~~381.921~~ Florida Cancer Council mission and
202 duties.--The council, which shall work in concert with the
203 Florida Center for Universal Research to Eradicate Disease to
204 ensure that the goals of the center are advanced, shall endeavor
205 to dramatically improve cancer research and treatment in this
206 state through:

207 (1) Efforts to significantly expand cancer research
208 capacity in the state by:

209 (a) Identifying ways to attract new research talent and
210 attendant national grant-producing researchers to cancer
211 research facilities in this state;

212 (b) Implementing a peer-reviewed, competitive process to
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213 identify and fund the best proposals to expand cancer research
214 institutes in this state;

215 (c) Funding through available resources for those
216 proposals that demonstrate the greatest opportunity to attract
217 federal research grants and private financial support;

218 (d) Encouraging the employment of bioinformatics in order
219 to create a cancer informatics infrastructure that enhances
220 information and resource exchange and integration through
221 researchers working in diverse disciplines, to facilitate the
222 full spectrum of cancer investigations;

223 (e) Facilitating the technical coordination, business
224 development, and support of intellectual property as it relates
225 to the advancement of cancer research; and

226 (f) Aiding in other multidisciplinary research-support
227 activities as they inure to the advancement of cancer research.

228 (2) Efforts to improve both research and treatment through
229 greater participation in clinical trials networks by:

230 (a) Identifying ways to increase adult enrollment in
231 cancer clinical trials;

232 (b) Supporting public and private professional education
233 programs designed to increase the awareness and knowledge about
234 cancer clinical trials;

235 (c) Providing tools to cancer patients and community-based
236 oncologists to aid in the identification of cancer clinical
237 trials available in the state; and

238 (d) Creating opportunities for the state's academic cancer
239 centers to collaborate with community-based oncologists in
240 cancer clinical trials networks.

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241 (3) Efforts to reduce the impact of cancer on disparate
242 groups by:

243 (a) Identifying those cancers that disproportionately
244 impact certain demographic groups; and

245 (b) Building collaborations designed to reduce health
246 disparities as they relate to cancer.

247 Section 13. Paragraph (a) of subsection (2) and subsection
248 (5) of section 381.922, Florida Statutes, as amended by section
249 2 of chapter 2009-5, Law of Florida, is amended to read:

250 381.922 William G. "Bill" Bankhead, Jr., and David Coley
251 Cancer Research Program.--

252 (2) The program shall provide grants for cancer research
253 to further the search for cures for cancer.

254 (a) Emphasis shall be given to the goals enumerated in s.
255 385.20251 ~~s. 381.921~~, as those goals support the advancement of
256 such cures.

257 (5) For the 2008-2009 fiscal year and each fiscal year
258 thereafter, the sum of \$6.75 million is appropriated annually
259 from recurring funds in the General Revenue Fund to the
260 Biomedical Research Trust Fund within the Department of Health
261 for purposes of the William G. "Bill" Bankhead, Jr., and David
262 Coley Cancer Research Program and shall be distributed pursuant
263 to this section to provide grants to researchers seeking cures
264 for cancer, with emphasis given to the goals enumerated in s.
265 385.20251 ~~s. 381.921~~. From the total funds appropriated, an
266 amount of up to 10 percent may be used for administrative
267 expenses.

268 Section 14. Section 381.93, Florida Statutes, is
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269 transferred and renumbered as section 385.2021, Florida
270 Statutes, to read:

271 385.2021 ~~381.93~~ Breast and cervical cancer early detection
272 program.--This section may be cited as the "Mary Brogan Breast
273 and Cervical Cancer Early Detection Program Act."

274 (1) It is the intent of the Legislature to reduce the
275 rates of death due to breast and cervical cancer through early
276 diagnosis and increased access to early screening, diagnosis,
277 and treatment programs.

278 (2) The Department of Health, using available federal
279 funds and state funds appropriated for that purpose, is
280 authorized to establish the Mary Brogan Breast and Cervical
281 Cancer Screening and Early Detection Program to provide
282 screening, diagnosis, evaluation, treatment, case management,
283 and followup and referral to the Agency for Health Care
284 Administration for coverage of treatment services.

285 (3) The Mary Brogan Breast and Cervical Cancer Early
286 Detection Program shall be funded through grants for such
287 screening and early detection purposes from the federal Centers
288 for Disease Control and Prevention under Title XV of the Public
289 Health Service Act, 42 U.S.C. ss. 300k et seq.

290 (4) The department shall limit enrollment in the program
291 to persons with incomes up to and including 200 percent of the
292 federal poverty level. The department shall establish an
293 eligibility process that includes an income-verification process
294 to ensure that persons served under the program meet income
295 guidelines.

296 (5) The department may provide other breast and cervical
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297 cancer screening and diagnostic services; however, such services
298 shall be funded separately through other sources than this act.

299 Section 15. Section 381.931, Florida Statutes, is
300 transferred and renumbered as section 385.20211, Florida
301 Statutes, to read:

302 385.20211 ~~381.931~~ Annual report on Medicaid
303 expenditures.--The Department of Health and the Agency for
304 Health Care Administration shall monitor the total Medicaid
305 expenditures for services made under this act. If Medicaid
306 expenditures are projected to exceed the amount appropriated by
307 the Legislature, the Department of Health shall limit the number
308 of screenings to ensure Medicaid expenditures do not exceed the
309 amount appropriated. The Department of Health, in cooperation
310 with the Agency for Health Care Administration, shall prepare an
311 annual report that must include the number of women screened;
312 the percentage of positive and negative outcomes; the number of
313 referrals to Medicaid and other providers for treatment
314 services; the estimated number of women who are not screened or
315 not served by Medicaid due to funding limitations, if any; the
316 cost of Medicaid treatment services; and the estimated cost of
317 treatment services for women who were not screened or referred
318 for treatment due to funding limitations. The report shall be
319 submitted to the President of the Senate, the Speaker of the
320 House of Representatives, and the Executive Office of the
321 Governor by March 1 of each year.

322 Section 16. Chapter 385, Florida Statutes, entitled
323 "Chronic Diseases," is renamed the "Healthy and Fit Florida
324 Act."

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325 Section 17. Section 385.101, Florida Statutes, is amended
326 to read:

327 385.101 Short title.--This chapter Sections 385.101-
328 ~~385.103~~ may be cited as the "Healthy and Fit Florida Chronic
329 ~~Diseases~~ Act."

330 Section 18. Section 385.102, Florida Statutes, is amended
331 to read:

332 385.102 Legislative intent.--It is the finding of the
333 Legislature that:

334 (1) Chronic diseases continue to be the leading cause of
335 death and disability in this state and the country exist in high
336 proportions among the people of this state. These Chronic
337 diseases include, but are not limited to, arthritis,
338 cardiovascular disease heart disease, hypertension, diabetes,
339 renal disease, cancer, and chronic obstructive lung disease,
340 including chronic obstructive pulmonary disease. These diseases
341 are often have the same preventable risk factors interrelated,
342 and they directly and indirectly account for a high rate of
343 death, disability, and underlying costs to the state's health
344 care system illness.

345 (2) Chronic diseases have a significant impact on quality
346 of life, not only for the individuals who experience their
347 painful symptoms and resulting disabilities, but also for family
348 members and caregivers.

349 (3) Racial and ethnic minorities and other underserved
350 populations are disproportionately affected by chronic diseases.

351 (4) There are enormous medical costs and lost wages
352 associated with chronic diseases and their complications.

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353 (5)-(2) Advances in medical knowledge and technology assist
354 have assisted in the prevention, detection, and management of
355 chronic diseases. Comprehensive approaches that stress the
356 stresssing application of current medical treatment, continuing
357 research, professional training, and patient education, and
358 community-level policy and environmental changes should be
359 implemented encouraged.

360 (6)-(3) A comprehensive program dealing with the early
361 detection and prevention of chronic diseases is required to make
362 knowledge and therapy available to all people of this state. The
363 mobilization of scientific, medical, and educational resources,
364 along with the implementation of community-based policy under
365 one comprehensive chronic disease law, act will facilitate the
366 prevention, early intervention, and management treatment of
367 chronic these diseases and their symptoms. This integration of
368 resources and policy will and result in a decline in death and
369 disability illness among the people of this state.

370 (7) Chronic diseases account for 70 percent of all deaths
371 in the United States. The following chronic diseases are the
372 leading causes of death and disability:

373 (a) Heart disease and stroke, which have remained the
374 first and third leading causes of death for both men and women
375 in the United States for over seven decades and account for
376 approximately one-third of total deaths each year in this state.

377 (b) Cancer, which is the second leading cause of death and
378 is responsible for one in four deaths in this state.

379 (c) Lung disease, which is the third leading cause of
380 death and accounts for one in every six deaths in this state.

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381 (d) Diabetes, which is the sixth leading cause of death in
382 this state.

383 (e) Arthritis, which is the leading cause of disability in
384 the United States, limiting daily activities for more than 19
385 million citizens. In this state, arthritis limits daily
386 activities for an estimated 1.3 million people.

387 (8) The department shall establish, promote, and maintain
388 state-level and local-level programs for chronic disease
389 prevention and health promotion to the extent that funds are
390 specifically made available for this purpose.

391 Section 19. Section 385.1021, Florida Statutes, is created
392 to read:

393 385.1021 Definitions.--As used in this chapter, the term:

394 (1) "CDC" means the United States Centers for Disease
395 Control and Prevention.

396 (2) "Chronic disease" means an illness that is prolonged,
397 does not resolve spontaneously, and is rarely cured completely.

398 (3) "Department" means the Department of Health.

399 (4) "Environmental changes" means changes to the economic,
400 social, or physical natural or built environments which
401 encourage or enable behaviors.

402 (5) "Policy change" means altering an informal or formal
403 agreement between public or private sectors which sets forth
404 values, behaviors, or resource allocation in order to improve
405 health.

406 (6) "Primary prevention" means an intervention that is
407 directed toward healthy populations and focuses on avoiding
408 disease before it occurs.

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409 (7) "Risk factor" means a characteristic or condition
410 identified during the course of an epidemiological study of a
411 disease that appears to be statistically associated with a high
412 incidence of that disease.

413 (8) "Secondary prevention" means an intervention that is
414 designed to promote the early detection and management of
415 diseases and reduce the risks experienced by at-risk
416 populations.

417 (9) "System changes" means altering standard activities,
418 protocols, policies, processes, and structures carried out in
419 population-based settings, such as schools, worksites, health
420 care facilities, faith-based organizations, and the overall
421 community, which promote and support new behaviors.

422 (10) "Tertiary prevention" means an intervention that is
423 directed at rehabilitating and minimizing the effects of disease
424 in a chronically ill population.

425 (11) "Tobacco" means, without limitation, tobacco itself
426 and tobacco products that include tobacco and are intended or
427 expected for human use or consumption, including, but not
428 limited to, cigarettes, cigars, pipe tobacco, and smokeless
429 tobacco.

430 (12) "Wellness program" means a structured program that is
431 designed or approved by the department to offer intervention
432 activities on or off the worksite which help state employees
433 change certain behaviors or adopt healthy lifestyles.

434 (13) "Youth" means children and young adults, up through
435 24 years of age, inclusive.

436 Section 20. Section 385.1022, Florida Statutes, is created
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437 to read:

438 385.1022 Chronic disease prevention program.--The
439 department shall support public health programs to reduce the
440 incidence of mortality and morbidity from diseases for which
441 risk factors can be identified. Such risk factors include, but
442 are not limited to, being overweight or obese, physical
443 inactivity, poor nutrition and diet, tobacco use, sun exposure,
444 and other practices that are detrimental to health. The programs
445 shall educate and screen the general public as well as groups at
446 particularly high risk of chronic diseases.

447 Section 21. Section 385.1023, Florida Statutes, is created
448 to read:

449 385.1023 State-level prevention programs for chronic
450 disease.--

451 (1) The department shall create state-level programs that
452 address the leading, preventable chronic disease risk factors of
453 poor nutrition and obesity, tobacco use, sun exposure, and
454 physical inactivity in order to decrease the incidence of
455 arthritis, cancer, diabetes, heart disease, lung disease,
456 stroke, and other chronic diseases.

457 (2) State-level programs shall address, but need not be
458 limited to, the following activities:

459 (a) Monitoring specific causal and behavioral risk factors
460 that affect the health of residents in the state.

461 (b) Analyzing data regarding chronic disease mortality and
462 morbidity to track changes over time.

463 (c) Promoting public awareness and increasing knowledge
464 concerning the causes of chronic diseases, the importance of

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465 early detection, diagnosis, and appropriate evidence-based
466 prevention, management, and treatment strategies.

467 (d) Disseminating educational materials and information
468 concerning evidence-based results, available services, and
469 pertinent new research findings and prevention strategies to
470 patients, health insurers, health professionals, and the public.

471 (e) Using education and training resources and services
472 developed by organizations having appropriate expertise and
473 knowledge of chronic diseases for technical assistance.

474 (f) Evaluating the quality and accessibility of existing
475 community-based services for chronic disease.

476 (g) Increasing awareness among state and local officials
477 involved in health and human services, health professionals and
478 providers, and policymakers about evidence-based chronic-disease
479 prevention, tobacco cessation, and treatment strategies and
480 their benefits for people who have chronic diseases.

481 (h) Developing a partnership with state and local
482 governments, voluntary health organizations, hospitals, health
483 insurers, universities, medical centers, employer groups,
484 private companies, and health care providers to address the
485 burden of chronic disease in this state.

486 (i) Implementing and coordinating state-level policies in
487 order to reduce the burden of chronic disease.

488 (j) Providing lasting improvements in the delivery of
489 health care for individuals who have chronic disease and their
490 families, thus improving their quality of life while also
491 containing health care costs.

492 Section 22. Section 385.103, Florida Statutes, is amended
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to read:

385.103 Community-level ~~Community intervention~~ programs
for chronic disease prevention and health promotion.--

(1) DEFINITIONS.--As used in this section, the term:

(a) "Chronic disease prevention and health promotion
~~control~~ program" means a program that may include, but is not
limited to, including a combination of the following elements:

1. Staff who are sufficiently trained and skilled in
public health, community health, or school health education to
facilitate the operation of the program ~~Health screening;~~

2. Community input into the planning, implementation, and
evaluation processes ~~Risk factor detection;~~

3. Use of public health data to make decisions and to
develop and prioritize community-based interventions focusing on
chronic diseases and their risk factors; ~~Appropriate~~
~~intervention to enable and encourage changes in behaviors that~~
~~create health risks; and~~

4. Adherence to a population-based approach by using a
socioecological model that addresses the influence on individual
behavior, interpersonal behavior, organizational behavior, the
community, and public policy; ~~Counseling in nutrition, physical~~
~~activity, the effects of tobacco use, hypertension, blood~~
~~pressure control, and diabetes control and the provision of~~
~~other clinical prevention services.~~

5. Focus on at least the common preventable risk factors
for chronic disease, such as physical inactivity, obesity, poor
nutrition, and tobacco use;

6. Focus on developing and implementing interventions and

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521 activities through communities, schools, worksites, faith-based
522 organizations, and health-care settings;

523 7. Use of evidence-based interventions as well as best and
524 promising practices to guide specific activities and effect
525 change, which may include guidelines developed by organizations,
526 volunteer scientists, and health care professionals who write
527 published medical, scientific statements on various chronic
528 disease topics. The statements shall be supported by scientific
529 studies published in recognized journals that have a rigorous
530 review and approval process. Scientific statements generally
531 include a review of data available on a specific subject and an
532 evaluation of its relationship to overall chronic disease
533 science;

534 8. Use of policy, system, and environmental changes that
535 support healthy behaviors so as to affect large segments of the
536 population and encourage healthy choices;

537 9. Development of extensive and comprehensive evaluation
538 that is linked to program planning at the state level and the
539 community level in order to determine the program's
540 effectiveness or necessary program modifications; and

541 10. Reduction of duplication of efforts through
542 coordination among appropriate entities for the efficient use of
543 resources.

544 (b) "~~Community~~ Health education program" means a program
545 that follows ~~involving~~ the planned and coordinated use of ~~the~~
546 educational standards and teaching methods ~~resources available~~
547 ~~in a community~~ in an effort to provide:

548 1. Appropriate medical, research-based interventions to

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549 enable and encourage changes in behaviors which reduce or
550 eliminate health risks;

551 2. Counseling in nutrition, weight management, physical
552 inactivity, and tobacco-use prevention and cessation strategies;
553 hypertension, blood pressure, high cholesterol, and diabetes
554 control; and other clinical prevention services;

555 3.1. Motivation and assistance to individuals or groups in
556 adopting and maintaining ~~Motivate and assist citizens to adopt~~
557 ~~and maintain~~ healthful practices and lifestyles; and

558 4.2. Make available Learning opportunities that which will
559 increase the ability of people to make informed decisions
560 affecting their personal, family, and community well-being and
561 that which are designed to facilitate voluntary adoption of
562 behavior that which will improve or maintain health.

563 ~~3. Reduce, through coordination among appropriate~~
564 ~~agencies, duplication of health education efforts; and~~

565 ~~4. Facilitate collaboration among appropriate agencies for~~
566 ~~efficient use of scarce resources.~~

567 (c) "Community intervention program" means a program
568 combining the required elements of a chronic disease prevention
569 and health promotion control program and the principles of a
570 ~~community~~ health education program that addresses system,
571 policy, and environmental changes that ensure that communities
572 provide support for healthy lifestyles ~~into a unified program~~
573 ~~over which a single administrative entity has authority and~~
574 ~~responsibility.~~

575 ~~(d) "Department" means the Department of Health.~~

576 ~~(e) "Risk factor" means a factor identified during the~~

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577 ~~course of an epidemiological study of a disease, which factor~~
578 ~~appears to be statistically associated with a high incidence of~~
579 ~~that disease.~~

580 (2) OPERATION OF COMMUNITY-LEVEL COMMUNITY INTERVENTION
581 PROGRAMS FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION.--

582 (a) The department shall develop and implement a
583 comprehensive, community-based program for chronic disease
584 prevention and health promotion. The program shall be designed
585 to reduce major behavioral risk factors that are associated with
586 chronic diseases by enhancing the knowledge, skills, motivation,
587 and opportunities for individuals, organizations, health care
588 providers, small businesses, health insurers, and communities to
589 develop and maintain healthy lifestyles. The department shall
590 assist the county health departments in developing and operating
591 community intervention programs throughout the state. At a
592 minimum, the community intervention programs shall address one
593 to three of the following chronic diseases: cancer, diabetes,
594 heart disease, stroke, hypertension, renal disease, and chronic
595 obstructive lung disease.

596 (b) The program shall include:

- 597 1. Countywide assessments of specific, causal, and
598 behavioral risk factors that affect the health of residents;
599 2. The development of community-based programs for chronic
600 disease prevention and health promotion which incorporate health
601 promotion and preventive care practices that are supported in
602 scientific and medical literature;
603 3. The development and implementation of statewide age-
604 specific, disease-specific, and community-specific health

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605 promotion and preventive care strategies using primary,
606 secondary, and tertiary prevention interventions;

607 4. The promotion of community, research-based health-
608 promotion model programs that meet specific criteria, address
609 major risk factors, and motivate individuals to permanently
610 adopt healthy behaviors and increase social and personal
611 responsibilities;

612 5. The development of policies that encourage the use of
613 alternative community delivery sites for health promotion,
614 disease prevention, and preventive care programs and promote the
615 use of neighborhood delivery sites that are close to work, home,
616 and school; and

617 6. An emphasis on the importance of healthy and physically
618 active lifestyles to build self-esteem and reduce morbidity and
619 mortality associated with chronic disease and being overweight
620 or obese. Existing community resources, when available, shall be
621 used to support the programs. The department shall seek funding
622 for the programs from federal and state financial assistance
623 programs which presently exist or which may be hereafter
624 created. Additional services, as appropriate, may be
625 incorporated into a program to the extent that resources are
626 available. The department may accept gifts and grants in order
627 to carry out a program.

628 ~~(c) Volunteers shall be used to the maximum extent~~
629 ~~possible in carrying out the programs. The department shall~~
630 ~~contract for the necessary insurance coverage to protect~~
631 ~~volunteers from personal liability while acting within the scope~~
632 ~~of their volunteer assignments under a program.~~

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633 ~~(d) The department may contract for the provision of all~~
634 ~~or any portion of the services required by a program, and shall~~
635 ~~so contract whenever the services so provided are more cost-~~
636 ~~efficient than those provided by the department.~~

637 ~~(e) If the department determines that it is necessary for~~
638 ~~clients to help pay for services provided by a program, the~~
639 ~~department may require clients to make contribution therefor in~~
640 ~~either money or personal services. The amount of money or value~~
641 ~~of the personal services shall be fixed according to a fee~~
642 ~~schedule established by the department or by the entity~~
643 ~~developing the program. In establishing the fee schedule, the~~
644 ~~department or the entity developing the program shall take into~~
645 ~~account the expenses and resources of a client and his or her~~
646 ~~overall ability to pay for the services.~~

647 Section 23. Section 385.105, Florida Statutes, is created
648 to read:

649 385.105 Physical activity, obesity prevention, nutrition,
650 other health-promotion services, and wellness programs.--

651 (1) PHYSICAL ACTIVITY--.

652 (a) The department shall develop programs for people at
653 every stage of their lives to increase physical fitness and
654 promote behavior changes.

655 (b) The department shall work with school health advisory
656 or wellness committees in each school district as established in
657 s. 381.0056.

658 (c) The department shall develop public and private
659 partnerships that allow the public to easily access recreational
660 facilities and public land areas that are suitable for physical

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661 activity.

662 (d) The department shall work in collaboration with the
663 Executive Office of the Governor and Volunteer Florida, Inc., to
664 promote school initiatives, such as the Governor's Fitness
665 Challenge.

666 (e) The department shall collaborate with the Department
667 of Education in recognizing nationally accepted best practices
668 for improving physical education in schools.

669 (2) OBESITY PREVENTION.--The department shall promote
670 healthy lifestyles to reduce the prevalence of excess weight
671 gain and being overweight or obese through programs that are
672 directed towards all residents of this state by:

673 (a) Using all appropriate media to promote maximum public
674 awareness of the latest research on healthy lifestyles and
675 chronic diseases and disseminating relevant information through
676 a statewide clearinghouse relating to wellness, physical
677 activity, and nutrition and the effect of these factors on
678 chronic diseases and disabling conditions.

679 (b) Providing technical assistance, training, and
680 resources on healthy lifestyles and chronic diseases to the
681 public, health care providers, school districts, and other
682 persons or entities, including faith-based organizations that
683 request such assistance to promote physical activity, nutrition,
684 and healthy lifestyle programs.

685 (c) Developing, implementing, and using all available
686 research methods to collect data, including, but not limited to,
687 population-specific data, and tracking the incidence and effects
688 of weight gain, obesity, and related chronic diseases. The

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689 department shall include an evaluation and data-collection
690 component in all programs as appropriate. All research conducted
691 under this paragraph is subject to review and approval as
692 required by the department's institutional review board under s.
693 381.86.

694 (d) Entering into partnerships with the Department of
695 Education, local communities, school districts, and other
696 entities to encourage schools in this state to promote
697 activities during and after school to help students meet a
698 minimum goal of 30 minutes of physical activity or physical
699 fitness per day.

700 (e) Entering into partnerships with the Department of
701 Education, school districts, and the Florida Sports Foundation
702 to develop a programs recognizing the schools at which students
703 demonstrate excellent physical fitness or fitness improvement.

704 (f) Collaborating with other state agencies to develop
705 policies and strategies for preventing and treating obesity,
706 which shall be incorporated into programs administered by each
707 agency and shall include promoting healthy lifestyles of
708 employees of each agency.

709 (g) Advising, in accordance with s. 456.081, health care
710 practitioners about the morbidity, mortality, and costs
711 associated with being overweight or obese, informing such
712 practitioners of promising clinical practices for preventing and
713 treating obesity, and encouraging practitioners to counsel their
714 patients regarding the adoption of healthy lifestyles.

715 (h) Maximizing all local, state, and federal funding
716 sources, including grants, public-private partnerships, and
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717 other mechanisms to strengthen the department's programs
718 promoting physical activity and nutrition.

719 (3) NUTRITION.--The department shall promote optimal
720 nutritional status in all stages of people's lives by developing
721 strategies to:

722 (a) Promote and maintain optimal nutritional status in the
723 population through activities, including, but not limited to:

724 1. Nutrition screening and assessment and nutrition
725 counseling, including nutrition therapy, followup, case
726 management, and referrals for persons who have medical
727 conditions or nutrition-risk factors and who are provided health
728 services through public health programs or through referrals
729 from private health care providers or facilities;

730 2. Nutrition education to assist residents of the state in
731 achieving optimal health and preventing chronic disease; and

732 3. Consultative nutrition services to group facilities
733 which promote the provision of safe and nutritionally adequate
734 diets.

735 (b) Monitor and conduct surveillance of the nutritional
736 status of this state's population.

737 (c) Conduct or support research or evaluations related to
738 public health nutrition. All research conducted under this
739 paragraph is subject to review and approval as required by the
740 department's institutional review board under s. 381.86.

741 (d) Establish policies and standards for public health
742 nutrition practices.

743 (e) Promote interagency cooperation, professional
744 education, and consultation.

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745 (f) Provide technical assistance and advise state
746 agencies, private institutions, and local organizations
747 regarding public health nutrition standards.

748 (g) Work with the Department of Agriculture and Consumer
749 Services, the Department of Education, and the Department of
750 Management Services to further the use of fresh produce from
751 this state in schools and encourage the development of community
752 gardens. Nutritional services shall be available to eligible
753 persons in accordance with eligibility criteria adopted by the
754 department. The department shall provide by rule requirements
755 for the service fees, when applicable, which may not exceed the
756 department's actual costs.

757
758 The department may adopt rules to administer this subsection.

759 (4) OTHER HEALTH-PROMOTION SERVICES.--

760 (a) The department shall promote personal responsibility
761 by encouraging residents of this state to be informed, follow
762 health recommendations, seek medical consultations and health
763 assessments, take healthy precautions, and comply with medical
764 guidelines, including those that lead to earlier detection of
765 chronic diseases in order to prevent chronic diseases or slow
766 the progression of established chronic diseases.

767 (b) The department shall promote regular health visits
768 during a person's lifetime, including annual physical
769 examinations that include measuring body mass index and vital
770 signs, blood work, immunizations, screenings, and dental
771 examinations in order to reduce the financial, social, and
772 personal burden of chronic disease.

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773 (5) WELLNESS PROGRAMS.--

774 (a) Each state agency may conduct employee wellness
775 programs in buildings and lands owned or leased by the state.
776 The department shall serve as a model to develop and implement
777 employee wellness programs that may include physical fitness,
778 healthy nutrition, self-management of disease, education, and
779 behavioral change. The department shall assist other state
780 agencies to develop and implement employee wellness programs.
781 These programs shall use existing resources, facilities, and
782 programs or resources procured through grant funding and
783 donations that are obtained in accordance with state ethics and
784 procurement policies, and shall provide equal access to any such
785 programs, resources, and facilities to all state employees.

786 (b) The department shall coordinate its efforts with the
787 Department of Management Services and other state agencies.

788 (c) Each agency may establish an employee wellness work
789 group to design the program. The department shall be available
790 to provide policy guidance and assist in identifying effective
791 wellness program strategies.

792 (d) The department shall provide by rule requirements for
793 nominal participation fees, when applicable, which may not
794 exceed the department's actual costs; collaborations with
795 businesses; and the procurement of equipment and incentives.

796 Section 24. Section 385.202, Florida Statutes, is amended
797 to read:

798 385.202 Statewide cancer registry.--

799 (1) Each facility, laboratory, or practitioner licensed
800 under chapter 395, chapter 458, chapter 459, chapter 464,
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801 chapter 483, and each freestanding radiation therapy center as
802 defined in s. 408.07, shall report to the department ~~of Health~~
803 ~~such~~ information, specified by the department, by rule. The
804 department may adopt rules regarding reporting requirements for
805 the cancer registry, which shall include the data required, the
806 timeframe for reporting, and those professionals who are
807 responsible for ensuring compliance with reporting requirements,
808 ~~which indicates diagnosis, stage of disease, medical history,~~
809 ~~laboratory data, tissue diagnosis, and radiation, surgical, or~~
810 ~~other methods of diagnosis or treatment for each cancer~~
811 ~~diagnosed or treated by the facility or center. Failure to~~
812 ~~comply with this requirement may be cause for registration or~~
813 ~~licensure suspension or revocation.~~

814 (2) The department shall establish, or cause to have
815 established, by contract with a recognized medical organization
816 in this state and its affiliated institutions, a statewide
817 cancer registry program to ensure that cancer reports required
818 under this section shall be maintained and available for use in
819 the course of public health surveillance and any study for the
820 purpose of reducing morbidity or mortality; and no liability of
821 any kind or character for damages or other relief shall arise or
822 be enforced against any facility or practitioner ~~hospital~~ by
823 reason of having provided such information or material to the
824 department.

825 (3) The department may adopt rules regarding the
826 establishment and operation of a statewide cancer registry
827 program.

828 (4) ~~(3)~~ The department or a contractual designee operating
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829 the statewide cancer registry program required by this section
830 shall use or publish said material only for the purpose of
831 public health surveillance and advancing medical research or
832 medical education in the interest of reducing morbidity or
833 mortality, except that a summary of such studies may be released
834 for general publication. Information which discloses or could
835 lead to the disclosure of the identity of any person whose
836 condition or treatment has been reported and studied shall be
837 confidential and exempt from the provisions of s. 119.07(1),
838 except that:

839 (a) Release may be made with the written consent of all
840 persons to whom the information applies;

841 (b) The department or a contractual designee may contact
842 individuals for the purpose of epidemiologic investigation and
843 monitoring, provided information that is confidential under this
844 section is not further disclosed; or

845 (c) The department may exchange personal data with any
846 other governmental agency or a contractual designee for the
847 purpose of public health surveillance and medical or scientific
848 research, if provided such governmental agency or contractual
849 designee does shall not further disclose information that is
850 confidential under this section.

851 ~~(5)-(4)~~ Funds appropriated for this section shall be used
852 for establishing, administering, compiling, processing, and
853 providing biometric and statistical analyses to the reporting
854 facilities and practitioners. Funds may also be used to ensure
855 the quality and accuracy of the information reported and to
856 provide management information to the reporting facilities and
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857 practitioners.

858 (6)(5) The department may adopt rules regarding the
859 classifications of, by rule, classify facilities that are
860 responsible for making reports to the cancer registry, the
861 content and frequency of the reports, and the penalty for
862 failure to comply with these requirements for purposes of
863 reports made to the cancer registry and specify the content and
864 frequency of the reports. In classifying facilities, the
865 department shall exempt certain facilities from reporting cancer
866 information that was previously reported to the department or
867 retrieved from existing state reports made to the department or
868 the Agency for Health Care Administration. The provisions of
869 This section does shall not apply to any facility whose primary
870 function is to provide psychiatric care to its patients.

871 (7) Notwithstanding subsection (1), each facility and
872 practitioner that reports cancer cases to the department shall
873 make their records available for onsite review by the department
874 or its authorized representative.

875 Section 25. Subsection (3) of section 385.203, Florida
876 Statutes, is amended to read:

877 385.203 Diabetes Advisory Council; creation; function;
878 membership.--

879 (3) The council shall be composed of 26 ~~25~~ citizens of the
880 state who have knowledge of, or work in, the area of diabetes
881 mellitus as follows:

882 (a) Five interested citizens, three of whom are affected
883 by diabetes.

884 (b) Twenty-one ~~Twenty~~ members, who must include one
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885 representative from each of the following areas: nursing with
886 diabetes-educator certification; dietary with diabetes educator
887 certification; podiatry; ophthalmology or optometry; psychology;
888 pharmacy; adult endocrinology; pediatric endocrinology; the
889 American Diabetes Association (ADA); the Juvenile Diabetes
890 Foundation (JDF); the Florida Academy of Family Physicians; a
891 community health center; a county health department; an American
892 Diabetes Association recognized community education program;
893 each medical school in the state; an osteopathic medical school;
894 the insurance industry; a Children's Medical Services diabetes
895 regional program; and an employer.

896 (c) One or more representatives from the Department of
897 Health, who shall serve on the council as ex officio members.

898 Section 26. Section 385.206, Florida Statutes, is amended
899 to read:

900 385.206 Pediatric Hematology-Oncology ~~care~~ Center
901 Program.--

902 (1) DEFINITIONS.--As used in this section, the term:

903 (a) "Department" means the Department of Health.

904 (b) "Hematology" means the study, diagnosis, and treatment
905 of blood and blood-forming tissues.

906 (c) "Oncology" means the study, diagnosis, and treatment
907 of malignant neoplasms or cancer.

908 (d) "Hemophilia" or "other hemostatic disorder" means a
909 bleeding disorder resulting from a genetic abnormality of
910 mechanisms related to the control of bleeding.

911 (e) "Sickle-cell anemia or other hemoglobinopathy" means
912 an hereditary, chronic disease caused by an abnormal type of
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913 hemoglobin.

914 (f) "Patient" means a person under the age of 21 who is in
915 need of hematologic-oncologic services and who is enrolled in
916 the Children's Medical Services Network ~~declared medically and~~
917 ~~financially eligible by the department; or a person who received~~
918 ~~such services prior to age 21 and who requires long term~~
919 ~~monitoring and evaluation to ascertain the sequelae and the~~
920 ~~effectiveness of treatment.~~

921 (g) "Center" means a facility designated by the department
922 as having a program specifically designed to provide a full
923 range of medical and specialty services to patients with
924 hematologic and oncologic disorders.

925 (2) PEDIATRIC HEMATOLOGY-ONCOLOGY CARE CENTER PROGRAM;
926 AUTHORITY.--The department may designate ~~is authorized to make~~
927 ~~grants and reimbursements to designated centers and provide~~
928 funding to establish and maintain programs for the care of
929 patients with hematologic and oncologic disorders. Program
930 administration costs shall be paid by the department from funds
931 appropriated for this purpose.

932 (3) GRANT FUNDING CONTRACTS ~~GRANT AGREEMENTS;~~
933 CONDITIONS.--

934 (a) Funding provided ~~A grant made~~ under this section shall
935 be pursuant to a contract ~~contractual agreement~~ made between a
936 center and the department. Each contract ~~agreement~~ shall provide
937 that patients will receive services ~~specified types of treatment~~
938 ~~and care~~ from the center without additional charge to the
939 patients or their parents or guardians. ~~Grants shall be~~
940 ~~disbursed in accordance with conditions set forth in the~~

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941 ~~disbursement guidelines.~~

942 ~~(4) GRANT DISBURSEMENTS AND SPECIAL DISBURSEMENTS FOR~~
943 ~~LOCAL PROGRAMS.--~~

944 ~~(b)(a) Funding may be provided Grant disbursements may be~~
945 ~~made to centers that which meet the following criteria:~~

946 1. The personnel shall include at least one board-
947 certified pediatric hematologist-oncologist, at least one board-
948 certified pediatric surgeon, at least one board-certified
949 radiotherapist, and at least one board-certified pathologist.

950 2. ~~As approved by the department,~~ The center shall
951 actively participate in a national children's cancer study
952 group, maintain a pediatric tumor registry, have a
953 multidisciplinary pediatric tumor board, and meet other
954 guidelines for development, including, but not limited to,
955 guidelines from such organizations as the American Academy of
956 Pediatrics and the American Pediatric Surgical Association.

957 ~~(b) Programs shall also be established to provide care to~~
958 ~~hematology-oncology patients within each district of the~~
959 ~~department. The guidelines for local programs shall be~~
960 ~~formulated by the department. Special disbursements may be made~~
961 ~~by the program office to centers for educational programs~~
962 ~~designed for the districts of the department. These programs may~~
963 ~~include teaching total supportive care of the dying patient and~~
964 ~~his or her family, home therapy to hemophiliacs and patients~~
965 ~~with other hemostatic disorders, and screening and counseling~~
966 ~~for patients with sickle-cell anemia or other~~
967 ~~hemoglobinopathies.~~

968 ~~(4)(5) PROGRAM AND PEER REVIEW.--~~The department shall

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969 evaluate ~~at least annually during the grant period~~ the services
970 rendered by the centers ~~and the districts of the department~~.
971 Data from the centers and other sources relating to pediatric
972 cancer shall be reviewed annually by the Florida Association of
973 Pediatric Tumor Programs, Inc.; and a written report with
974 recommendations shall be made to the department. This database
975 will be available to the department for program planning and
976 quality assurance initiatives ~~formulation of its annual program~~
977 ~~and financial evaluation report~~. A portion of the funds
978 appropriated for this section may be used to provide statewide
979 consultation, supervision, and evaluation of the programs of the
980 centers, as well as central program office support personnel.

981 Section 27. Paragraph (g) of subsection (2) and subsection
982 (7) of section 385.207, Florida Statutes, are amended to read:

983 385.207 Care and assistance of persons with epilepsy;
984 establishment of programs in epilepsy control.--

985 (2) The Department of Health shall:

986 (g) Continue current programs and develop cooperative
987 programs and services designed to enhance the vocational
988 rehabilitation of epilepsy clients, including the current jobs
989 programs. The department shall, as part of its contract with a
990 provider of epilepsy services, collect information regarding the
991 number of clients served, the outcomes reached, the expenses
992 incurred, and the fees collected by such providers for the
993 provision of services ~~keep~~ and make this information available
994 to the Governor and the Legislature upon request ~~information~~
995 ~~regarding the number of clients served, the outcome reached, and~~
996 ~~the expense incurred by such programs and services.~~

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997 ~~(7) The department shall limit total administrative~~
998 ~~expenditures from the Epilepsy Services Trust Fund to 5 percent~~
999 ~~of annual receipts.~~

1000 Section 28. Paragraphs (b), (d), and (g) of subsection (2)
1001 and paragraph (b) of subsection (5) of section 385.210, Florida
1002 Statutes, are amended to read:

1003 385.210 Arthritis prevention and education.--

1004 (2) LEGISLATIVE FINDINGS.--The Legislature finds the
1005 following:

1006 (b) Arthritis is the leading cause of disability in the
1007 United States, limiting daily activities for more than 19 7
1008 million citizens.

1009 (d) There are enormous economic and social costs
1010 associated with treating arthritis and its complications; the
1011 economic costs are estimated at over \$128 billion (2003) ~~\$116~~
1012 ~~billion (1997)~~ annually in the United States.

1013 (g) The National Arthritis Foundation, the CDC ~~Centers for~~
1014 ~~Disease Control and Prevention~~, and the Association of State and
1015 Territorial Health Officials have led the development of a
1016 public health strategy, the National Arthritis Action Plan, to
1017 respond to this challenge.

1018 (5) FUNDING.--

1019 (b) The State Surgeon General may ~~shall~~ seek any federal
1020 waiver or waivers that may be necessary to maximize funds from
1021 the Federal Government to implement this program.

1022 Section 29. Section 385.301, Florida Statutes, is created
1023 to read:

1024 385.301 Rulemaking authority.--The department may adopt

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1025 rules pursuant to chapter 120 to administer this chapter.

1026 Section 30. Paragraph (1) of subsection (4) of section
1027 400.9905, Florida Statutes, is amended to read:

1028 400.9905 Definitions.--

1029 (4) "Clinic" means an entity at which health care services
1030 are provided to individuals and which tenders charges for
1031 reimbursement for such services, including a mobile clinic and a
1032 portable equipment provider. For purposes of this part, the term
1033 does not include and the licensure requirements of this part do
1034 not apply to:

1035 (1) Orthotic, ~~or~~ prosthetic, pediatric cardiological, or
1036 perinatalogical clinical facilities that are a publicly traded
1037 corporation or that are wholly owned, directly or indirectly, by
1038 a publicly traded corporation. As used in this paragraph, a
1039 publicly traded corporation is a corporation that issues
1040 securities traded on an exchange registered with the United
1041 States Securities and Exchange Commission as a national
1042 securities exchange.

1043 Section 31. Subsection (9) of section 409.904, Florida
1044 Statutes, is amended to read:

1045 409.904 Optional payments for eligible persons.--The
1046 agency may make payments for medical assistance and related
1047 services on behalf of the following persons who are determined
1048 to be eligible subject to the income, assets, and categorical
1049 eligibility tests set forth in federal and state law. Payment on
1050 behalf of these Medicaid eligible persons is subject to the
1051 availability of moneys and any limitations established by the
1052 General Appropriations Act or chapter 216.

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1053 (9) Eligible women with incomes at or below 200 percent of
1054 the federal poverty level and under age 65, for cancer treatment
1055 pursuant to the federal Breast and Cervical Cancer Prevention
1056 and Treatment Act of 2000, screened through the Mary Brogan
1057 Breast and Cervical Cancer Early Detection Program established
1058 under s. 385.2021 ~~s. 381.93~~.

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T I T L E A M E N D M E N T

Remove lines 2078-2083