

By Senator Peaden

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1                                   A bill to be entitled  
2           An act relating to cardiovascular disease; creating  
3           the Florida Council on Cardiovascular Disease and  
4           Stroke; providing definitions; providing for the  
5           appointment of members; providing terms of membership;  
6           providing requirements for voting and a quorum;  
7           providing for quarterly meetings; requiring the  
8           Department of Health to provide administrative  
9           support; providing for reimbursement of per diem and  
10          travel expenses; providing powers and duties of the  
11          council; requiring the council to submit written  
12          recommendations to the department, the Governor, and  
13          the Legislature by a specified date; requiring the  
14          council to report on its activities and accounting of  
15          funds to the Governor and the Legislature; requiring  
16          the council to review available clinical resources and  
17          develop a database of recommendations for care and  
18          treatment of patients having cardiovascular disease or  
19          patients at the risk of or who have suffered from a  
20          stroke; requiring the council to make this database  
21          available to the public; requiring the council to  
22          collect and analyze information related to  
23          cardiovascular disease and stroke from different  
24          agencies and organizations and create and maintain a  
25          database of the information; providing requirements  
26          for the database; authorizing the council to use  
27          information from other sources; providing an effective  
28          date.  
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30 Be It Enacted by the Legislature of the State of Florida:

31  
32 Section 1. Florida Council on Cardiovascular Disease and  
33 Stroke.-

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

35 (a) "Cardiovascular disease" means the group of diseases  
36 that involve the heart and blood vessels and that are the result  
37 of complex interactions between multiple inherited traits and  
38 environmental factors.

39 (b) "Council" means the Florida Council on Cardiovascular  
40 Disease and Stroke.

41 (c) "Managed care entity" means a health maintenance  
42 organization or a prepaid health clinic certified under chapter  
43 641, a prepaid health plan authorized under s. 409.912, Florida  
44 Statutes, or an exclusive provider organization certified under  
45 s. 627.6472, Florida Statutes.

46 (2) APPOINTMENT OF COUNCIL; TERMS OF MEMBERS.-

47 (a) The Florida Council on Cardiovascular Disease and  
48 Stroke is composed of 12 members, including a chairperson, who  
49 shall be appointed by the Governor and who are subject to  
50 confirmation by the Senate, as follows:

51 1. A licensed physician whose area of specialization is  
52 cardiology;

53 2. A licensed physician whose area of specialization is  
54 neurology to treat stroke;

55 3. A licensed physician who is employed in a primary care  
56 setting;

57 4. A registered nurse whose area of specialization is  
58 quality improvement practices for cardiovascular disease and

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59 stroke;

60 5. A registered and licensed dietitian;

61 6. A pharmacist who is licensed in this state;

62 7. Two persons who have experience and training in public  
63 health policy, research, or practice;

64 8. Two consumer members, with special consideration given  
65 to persons who are active participants in the Florida affiliates  
66 of the American Heart Association or American Stroke Association  
67 and who work in a managed care entity or in a hospital or  
68 rehabilitation setting; and

69 9. Two members of the public who provide care for persons  
70 who have cardiovascular disease or are at risk of a stroke or  
71 who have suffered from cardiovascular disease or stroke.

72 (b) In appointing members under paragraph (a), the Governor  
73 shall attempt to appoint female members and members of different  
74 minority groups, including African Americans, Hispanic  
75 Americans, Native Americans, and Asian Americans. The Governor  
76 shall fill any vacancies for the remainder of the unexpired term  
77 in the same manner as the original appointment.

78 (c) Members of the council shall be appointed to staggered  
79 4-year terms, with the terms of three or four of the members  
80 expiring February 1 of each odd-numbered year.

81 (d) A majority of the members of the council constitutes a  
82 quorum, and an affirmative vote of a majority of the members is  
83 necessary to take action.

84 (e) The council shall meet quarterly or at the call of the  
85 chairperson.

86 (f) The Department of Health shall provide staff and  
87 administrative support for the council.

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88       (g) Members of the council shall serve without  
89 compensation, but are entitled to reimbursement for travel and  
90 per diem expenses incurred in the performance of their duties in  
91 accordance with s. 112.061, Florida Statutes.

92       (3) POWERS AND DUTIES OF THE COUNCIL.-

93       (a) The council shall develop an effective and resource-  
94 efficient plan to reduce the morbidity, mortality, and economic  
95 burden of cardiovascular disease and stroke in this state. The  
96 council shall:

97           1. Conduct health education, public awareness, and  
98 community outreach activities that relate to primary and  
99 secondary prevention of cardiovascular disease and stroke;

100           2. Promote, enhance, and coordinate health education,  
101 public awareness, and community outreach activities that relate  
102 to primary and secondary prevention of cardiovascular disease  
103 and stroke and that are provided by private and other public  
104 organizations;

105           3. Coordinate activities with other entities that are  
106 concerned with medical conditions that are similar to  
107 cardiovascular disease and stroke or that have similar risk  
108 factors;

109           4. Identify for health care providers, employers, schools,  
110 community health centers, and other groups the benefits of  
111 encouraging treatment and primary and secondary prevention,  
112 promote public awareness of cardiovascular disease and stroke,  
113 and recognize innovative and effective programs that achieve the  
114 objectives of improved treatment, prevention, and public  
115 awareness;

116           5. Provide guidance regarding the roles and

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117 responsibilities of government agencies, health care providers,  
118 employers, third-party payers, patients, and families of  
119 patients in the treatment, primary and secondary prevention, and  
120 public awareness of cardiovascular disease and stroke;

121 6. Improve access to treatment for and primary and  
122 secondary prevention of cardiovascular disease and stroke  
123 through public awareness programs, including access for  
124 uninsured individuals and individuals living in rural or  
125 underserved areas;

126 7. Assist communities in developing comprehensive local  
127 programs for the prevention of cardiovascular disease and  
128 stroke;

129 8. Assist the Department of Education and local school  
130 districts in promoting a public school curriculum that includes  
131 physical, nutritional, and health education relating to the  
132 prevention of cardiovascular disease and stroke;

133 9. Establish appropriate forums, programs, or initiatives  
134 that are designed to educate the public regarding the effect of  
135 heart disease and stroke on women's health, with an emphasis on  
136 preventive health and healthy lifestyles;

137 10. Evaluate and enhance the implementation and  
138 effectiveness of the program developed under this section; and

139 11. Advise the Legislature on legislation that is needed to  
140 develop further and maintain a statewide system of quality  
141 education services for all persons who have cardiovascular  
142 disease or who have suffered from or are at risk for stroke. The  
143 council may develop and submit legislation to the Legislature or  
144 comment on pending legislation that affects persons who have  
145 cardiovascular disease or who have suffered from or are at risk

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146 for stroke.

147 (b) By January 15, 2010, the council shall make written  
148 recommendations for performing its duties under this section to  
149 the Department of Health, the Governor, the President of the  
150 Senate, and the Speaker of the House of Representatives.

151 (c) By January 15, 2011, and each January 15 thereafter,  
152 the council shall report to the Governor, the President of the  
153 Senate, and the Speaker of the House of Representatives on the  
154 activities of the council, accounting for all funds received and  
155 disbursed by or for the council during the preceding fiscal  
156 year.

157 (4) DATABASE OF CLINICAL RESOURCES.—The council shall  
158 review available clinical resources and shall develop a database  
159 of recommendations for appropriate care and treatment of  
160 patients who have cardiovascular disease or patients who have  
161 suffered from or are at risk for stroke. The council shall make  
162 the database accessible to the public.

163 (5) CARDIOVASCULAR DISEASE AND STROKE DATABASE.—

164 (a) The council shall collect and analyze information  
165 related to cardiovascular disease and stroke at the state level  
166 and regional level and, to the extent feasible, at the local  
167 level. The council shall obtain the information from federal and  
168 state agencies and from private and public organizations. The  
169 council shall maintain a database of this information. The  
170 database shall include, but need not be limited to:

171 1. Information related to behavioral risk factors  
172 identified for cardiovascular disease and stroke;

173 2. Morbidity and mortality rates for cardiovascular disease  
174 and stroke; and

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175       3. Community indicators relevant to cardiovascular disease  
176 and stroke.

177       (b) In compiling the database, the council may use  
178 information available from other sources, such as the Behavioral  
179 Risk Factor Surveillance System established by the Centers for  
180 Disease Control and Prevention, reports of data from hospital  
181 discharges, and information included in death certificates.

182       Section 2. This act shall take effect July 1, 2009.