

By Senator Joyner

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1 A bill to be entitled
2 An act relating to the Office of Minority Health;
3 creating s. 381.04016, F.S.; providing legislative
4 intent; providing the duties of the Office of Minority
5 Health; requiring the Office of Minority Health to
6 submit an annual report to the Governor and
7 Legislature; requiring consideration of minority
8 health issues in state policy and planning; requiring
9 the Department of Health, the Agency for Health Care
10 Administration, the Department of Elderly Affairs, the
11 Department of Corrections, and the Department of
12 Juvenile Justice to take minority health issues into
13 consideration in their annual planning; requiring that
14 boards or advisory boards of the Department of Health,
15 the Agency for Health Care Administration, or the
16 Department of Elderly Affairs seek equal
17 representation of certain members; providing for
18 responsibility and coordination with the Executive
19 Office of the Governor and other state agencies;
20 providing an effective date.

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22 Be It Enacted by the Legislature of the State of Florida:

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24 Section 1. Section 381.04016, Florida Statutes, is created
25 to read:

26 381.04016 Minority health strategy; legislative intent;
27 duties of Office of Minority Health; other state agency duties.-

28 (1) LEGISLATIVE INTENT.—The Legislature recognizes that
29 despite state investments in health care, racial and ethnic

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30 populations in this state continue to have significantly poorer
31 health outcomes when compared to non-Hispanic whites. The
32 Legislature further finds that the health care needs of
33 minorities are diverse and that delivery of services, research,
34 and public policy must take into account the distinct
35 characteristics of minority health issues. Priority shall be
36 given to improving the overall health status of minority men,
37 women, and children through research and education specific to
38 minority health issues. The Legislature recognizes the
39 importance of understanding why there is a large disparity
40 between minority groups and non-Hispanic whites with regard to
41 awareness, diagnosis, and treatment of certain diseases, and of
42 finding answers to this disparity through biomedical research.
43 Such research has important implications for all minority
44 individuals in terms of clinical practice and disease
45 manifestation and prevention. The Legislature recognizes that as
46 the state's population ages and life expectancy for minority
47 individuals continues to rise, it is of the utmost importance
48 for the Legislature to encourage strategies designed to reduce
49 health disparities, including, but not limited to, addressing
50 the array of health and social issues, ensuring comprehensive
51 elimination of health disparities, and promoting health equity
52 to ensure access to affordable and adequate health care that
53 meets specific health needs with regard to race and ethnicity.
54 The Legislature further finds and declares that the culturally
55 sensitive design and delivery of health care services and
56 medical education of all health care practitioners shall be
57 based on the principle that health care needs are diverse and
58 cultural competency training and medical education are essential

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59 for effectively treating members of minority populations.

60 (2) DUTIES.—The Office of Minority Health in the Department
61 of Health shall:

62 (a) Ensure that the state's policies and programs are
63 responsive to minority differences and health needs across the
64 life span.

65 (b) Administer the distribution of and provide oversight of
66 contract management for all funds that are designated for
67 reducing racial and ethnic health disparities and promoting
68 optimal health in minority populations.

69 (c) Organize an interagency Committee for Minority Health
70 for the purpose of setting priorities for minority health and
71 integrating minority health programs within current operating
72 and service delivery structures. This committee shall be
73 comprised of the heads or directors of state agencies that
74 administer programs affecting minority health, including, but
75 not limited to, the Department of Health, the Agency for Health
76 Care Administration, the Department of Education, the Department
77 of Elderly Affairs, the Department of Corrections, the Office of
78 Insurance Regulation within the Department of Financial
79 Services, and the Department of Juvenile Justice.

80 (d) Assess the health status of minorities in the state
81 through the collection and review of health data and trends.

82 (e) Review and provide recommendations on the state's
83 insurance code as it relates to minority health issues.

84 (f) Work with medical school curriculum committees to
85 develop course requirements on minority health and to promote
86 clinical practice guidelines that are specific to minority
87 issues and cultural competency.

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88 (g) Organize statewide activities during Minority Health
89 Month.

90 (h) Promote research, treatment, and collaboration on
91 minority health issues at universities and medical centers in
92 the state.

93 (i) Promote employer incentives for prevention and wellness
94 programs that emphasize minority health.

95 (j) Serve as the primary state resource for the
96 coordination of minority health information.

97 (k) Develop a statewide minority health plan that promotes
98 collaborative approaches to meeting the health needs of minority
99 populations. The plan shall:

100 1. Identify activities designed to reduce the number of
101 premature deaths in minority populations and identify
102 appropriate resources to implement those activities, including:
103 a. Providing specific strategies for reducing the mortality
104 rate of minority individuals.

105 b. Listing conditions that may cause or contribute to
106 disease in minority populations and the best methods by which to
107 identify, control, and prevent these conditions from developing.

108 c. Identifying the best methods for ensuring an increase in
109 the percentage of minority individuals in the state who receive
110 screening and diagnostic testing.

111 2. Provide recommendations for the development of practice
112 guidelines for addressing disease in minority populations.

113 3. Provide recommendations for reducing health disparities
114 and promoting optimal health among all racial and ethnic groups.

115 4. Coordinate with existing program plans that address
116 minority health issues.

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117 (l) Promote clinical practice guidelines specific to
118 minority individuals.

119 (m) Serve as the state's liaison with other states and
120 federal agencies and programs to develop best practices in
121 minority health.

122 (n) Develop a statewide, web-based clearinghouse on
123 minority health issues and resources.

124 (o) Promote public awareness campaigns and education on the
125 health needs of minority individuals.

126 (p) By January 15 of each year, provide to the Governor,
127 the President of the Senate, and the Speaker of the House of
128 Representatives a report containing policy recommendations for
129 implementing the provisions of this section.

130 (3) DUTIES OF OTHER STATE AGENCIES.—

131 (a) The Department of Health, the Agency for Health Care
132 Administration, the Department of Elderly Affairs, the
133 Department of Corrections, and the Department of Juvenile
134 Justice shall take minority health issues into consideration in
135 their annual planning.

136 (b) When assessing research and demonstration proposals for
137 which state funding is being sought, the Department of Health,
138 the Agency for Health Care Administration, and the Department of
139 Elderly Affairs shall consider health issues concerning minority
140 populations and dissimilar outcomes.

141 (c) Boards or advisory bodies that fall under the purview
142 of the Department of Health, the Agency for Health Care
143 Administration, or the Department of Elderly Affairs shall seek
144 equal representation of minority women and men and include
145 members who are knowledgeable and sensitive to minority

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146 diversity issues.

147 (4) RESPONSIBILITY AND COORDINATION.—The Office of Minority
148 Health and the Department of Health shall direct and carry out
149 the provisions of this section and may work with the Executive
150 Office of the Governor and other state agencies to carry out
151 their duties and responsibilities under this section.

152 Section 2. This act shall take effect July 1, 2012.