

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

Prepared By: The Professional Staff of the Appropriations Subcommittee on Health and Human Services

BILL: SB 1436

INTRODUCER: Senator Gibson

SUBJECT: Closing the Gap Grant Proposals

DATE: April 3, 2019 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Lloyd	Brown	HP	Favorable
2.	Gerbrandt	Kidd	AHS	Pre-meeting
3.			AP	

I. Summary:

SB 1436 adds a priority focus area eligible for funding under the “Closing the Gap” grant program to include Alzheimer’s Disease and dementia. The “Closing the Gap” program provides grants for activities designed to reduce racial and ethnic disparities. The bill also removes the requirement that up to 20 percent of any grants awarded under the program be set-aside for projects related to Front Porch Florida Communities.

The bill has no fiscal impact on state government.

The effective date of the bill is July 1, 2019.

II. Present Situation:

The Closing the Gap Program

In 2000, the Florida Legislature created the Reducing the Racial and Ethnic Health Disparities: “Closing the Gap” (CTG) grant program.¹ The program is administered through the Department of Health’s (DOH) Office of Minority Health and Health Equity. The purposes of the grant program is to improve health outcomes of racial and ethnic populations and promote disease prevention activities in the following priority areas:

- Maternal and infant mortality;
- Cancer;
- HIV/AIDS;
- Cardiovascular disease;
- Diabetes;

¹ Chapter 2000-256, ss. 31-32, Laws of Fla. (2000).

- Adult and child immunization;
- Oral health care;
- Sickle cell disease; and,
- Lupus.²

Closing the gap grants are intended to stimulate the development of community and neighborhood-based projects that impact health outcomes of racial and ethnic populations and stimulate partnerships between state and local governments, faith-based organizations, private sector organizations, and other non-traditional partners.³ Priority is given to grant proposals that:

- Represent areas with the greatest documented ethnic and racial health status disparities;
- Exceeded the statutory local match requirement;⁴
- Demonstrate broad-based local community support from entities representing racial and ethnic populations;
- Demonstrate high levels of participation by the health care community in clinical preventive services and health promotion activities;
- Have been submitted by counties with high levels of residents living in poverty and with poor health status indicators;
- Demonstrate a coordinated community approach to addressing racial and ethnic health disparities within existing publicly financed health care programs;
- Incorporate intervention mechanisms that have a high probability of improving the targeted populations health status;
- Demonstrate a commitment to quality management in all aspects of project administration and implementation; and
- Incorporate policy approaches that will lead to long-term sustainability and improvement.⁵

Grant Proposals

Grant proposals are awarded for one year through a proposal process and may be renewed annually subject to the availability of funds and the grantee's achievement of quality standards, objectives, and outcomes. Grants can be awarded to a county or a group of adjoining counties if those counties submit a multi-county application.⁶ Grant funds may not be used to provide medical or clinical services.⁷

The DOH released the *Request for Applications* with an application deadline date of February 16, 2018, for grants beginning July 1, 2018 and ending June 30, 2019.⁸ The next funding cycle will be in 2021-2022.⁹ The maximum award per applicant was \$200,000 and the grant

² Chapter 2018-157, Laws of Fla. Lupus was added to the list of priority areas during the 2018 Regular Legislative Session.

³ Section 381.7352, F.S.

⁴ See s. 381.7356, F.S.

⁵ Section 381.7355(3), F.S.

⁶ Section 381.7356, F.S.

⁷ *Infra* note 15 at page 13.

⁸ Florida Department of Health, Office of Minority Health and Health Equity, *Reducing Racial and Ethnic Health Disparities Closing the Gap Grant Program (CTG) Request for Applications, RFA # 17-007, FY 2018-2019*, <http://www.floridahealth.gov/programs-and-services/minority-health/closing-the-gap.html>, (last visited March 28, 2019).

⁹ *Id.*

application stated that approximately \$3 million dollars would be available, subject to an appropriation.¹⁰

Matching Funds for Grants

Closing the Gap grants require the grantee to provide \$1 in local matching funds for every \$3 in state grant funds being requested. Counties that meet certain population demographics may provide the matching funds through in-kind contributions. The amount of a grant award is based on the county’s or the neighborhood’s population demographics.¹¹ Table 1 below illustrates how populations may meet the match requirement through different combinations of cash and in-kind contributions.

Table 1. Closing the Gap Matching Funds Contribution Combinations¹²	
Grantee Type	Matching Funds Requirements
County Populations greater than 50,000	One dollar for every \$3 grant payment 50 percent must be in cash 50 percent may be in-kind
County Population of 50,000 or less	Local matching may be provided entirely through in-kind contributions
Grantee is a Front Porch Community ¹³	No match requirement

On June 1, 2018, the DOH awarded grants under the Request for Applications process to the following vendors:

Vendors Awards Closing the Gap Contracts (2018-2019)			
BayCare Health System	Center for Change	Metropolitan Charities	Suwannee River AHEC
Big Bend Cares	Foundation for Sickle Cell Disease Research	Miami-Dade AHEC	Dept of Health – Duval County
Big Bend Rural Health	Gadsden County Healthy Start	Mother Care Network	Dept of Health – Franklin and Gulf
Brain Expansions	Healthy Mothers Healthy Babies	Prideline Youth Services	Dept of Health – Hardee County
Broward Urban League	Hebni Nutrition Consultants	Reclaiming the Land	Dept of Health – Seminole County
Caridad Center	Latino Salud	Sickle Cell Disease Foundation	Dept of Health – Highland County

Social Determinants of Health

Healthy People 2020 is an initiative of the United States Department of Health and Human Services that provides 10-year national objectives for improving the health of Americans. Its vision is a society in which all people live long, healthy lives.¹⁴ One of the missions of *Healthy People 2020* is increase public awareness of determinants of health, disease, and disability and

¹⁰ *Id.*

¹¹ Section 381.7356, F.S.

¹² *Id.*

¹³ See *Infra* note 31.

¹⁴ United States Department of Health and Human Services, *Healthy People 2020 – Framework*, <https://www.healthypeople.gov/sites/default/files/HP2020Framework.pdf>, (last visited March 28, 2019).

the opportunities for progress. The project seeks to achieve health equity, eliminate disparities, and improve the health of all groups while also attaining high-quality, longer lives, free of preventable disease, disability, injury, and premature death.¹⁵ In Florida, the ethnic and racial disparity in some health categories is significant, as shown in Table 2 below.

Indicator (per 100,000, unless noted)	White	Black	Hispanic	Non-Hispanic
Fetal Deaths ¹⁷ (per 1,000 deliveries)	5.2	10.4	5.5	7.2
Infant Deaths ¹⁸ (per 1,000 births)	4.4	11.3	5.1	6.4
Maternal Deaths ¹⁹	13.3	24.9	10.5	19.3
Diabetes death rate	18.3	35.7	19.8	20.0
HIV Virus Disease	1.6	10.1	30.1	3.7
Coronary Heart Disease death rate	146.2	100	125.4	153.1
Stroke death rate	37.2	53.9	37.9	37.0
Alzheimer’s	21.7	15.2	25.9	20.2

A statistical brief from the DOH in 2017 noted that the gap between the black mortality rate and the white mortality rate has decreased over time. In 1995, the age-adjusted mortality rate per 100,000 population was 1,224.9 for Black race and 811.6 for White race, and in 2015, these rates had come down to 851.9 for Black race and 735.0 for White race.²⁰

Dementia

Dementia is not a specific disease but is a catch-all term that is used to describe a group of symptoms associated with a decline in memory or other cognitive abilities that reduce a person’s ability to perform everyday activities.²¹ Symptoms of dementia vary greatly, but at least two of these core mental functions must be significantly impaired for symptoms to be attributed to dementia:

- Memory;
- Communication and language;
- Ability to focus and pay attention;
- Reasoning and judgment; and

¹⁵ *Id.*

¹⁶ Florida Department of Health, FLHealthCHARTS.com, *Resident Age Adjusted Death Rate (AADR) per 100,000 Population by Year by 50 Leading Rankable Causes of Death by Ethnicity* (chart generated on March 20, 2019).

¹⁷ Florida Department of Health, *Supra* note 21, *Fetal Death Ratio per 100,000 Births per year* (chart generated on March 20, 2019).

¹⁸ Florida Department of Health, *Supra* note 21, *Infant Death Ratio per 100,000 Births per year* (chart generated on March 20, 2019).

¹⁹ Florida Department of Health, *Supra* note 21, *Maternal Death Rate per 100,000 Births per year* (chart generated on March 20, 2019).

²⁰ Florida Department of Health, FLHealthCHARTS.com Statistical Brief, *Gap Between Black and White Death Rate Narrows*, <http://www.flhealthcharts.com/Charts/documents/StatisticalBriefs/GapNarrows.pdf>, (last visited March 28, 2019).

²¹ Alzheimer’s Association, *What is Dementia*, <https://www.alz.org/alzheimers-dementia/what-is-dementia> (last visited March 28, 2019).

- Visual perception.²²

Alzheimer's disease also accounts for 60 to 80 percent of all dementia cases.²³

Alzheimer's Disease

Alzheimer's disease is the most common cause of dementia. The disease likely develops from many factors such as genetics, lifestyle, and the environment, with age being the greatest known risk factor. Most individuals who develop the disease will do so after the age of 65.²⁴ The disease is a progressive disorder that causes brain cells to degenerate and die.²⁵

Individuals with Alzheimer's may show symptoms such as:

- Repeating statements and questions numerous times over;
- Forgetting conversations, appointments, or events and not remembering them later;
- Misplacing possessions routinely, often putting them in illogical places;
- Getting lost in familiar places;
- Forgetting the names of family members; and
- Having trouble finding the right words to identify objects, express thoughts, or take part in conversations.²⁶

Individuals may also have changes in behavior due to changes in their brains and they may experience depression, apathy, and social withdrawal along with mood swings and delusions.²⁷

III. Effect of Proposed Changes:

The bill amends s. 381.7355, F.S., to expand the priority areas eligible for a Closing the Gap grant award to include Alzheimer's disease and dementia.

The bill eliminates the requirement that up to 20 percent of any grants awarded under the program be set-aside for projects related to Front Porch Florida Communities.²⁸

The effective date of the bill is July 1, 2019.

²² *Id.*

²³ *Id.*

²⁴ Alzheimer's Association, *Causes and Risk Factors*, <https://www.alz.org/alzheimers-dementia/what-is-alzheimers/causes-and-risk-factors> (last visited March 28, 2019).

²⁵ Mayo Clinic, *Alzheimer's Disease*, <https://www.mayoclinic.org/diseases-conditions/alzheimers-disease/symptoms-causes/syc-20350447> (last visited March 28, 2019).

²⁶ *Id.*

²⁷ *Id.*

²⁸ The Front Porch Florida Initiative began during Governor Jeb Bush's administration and was dedicated to revitalization efforts in some of the state's most distressed communities through the award of competitive grants to fund projects proposed by the community. Front Porch funding was used for economic development, beautification, revitalization, technical assistance, community training, and youth development. The initiative began in 1999 and received its last appropriation in the 2007 General Appropriations Act for the 2007-2008 fiscal year. During that span, the Legislature appropriated over \$28 million in funding. *See*: Florida Senate Committee on Community Affairs, *Department Of Community Affairs - Review Of The Front Porch Florida Initiative*, Interim Project 2008-110 (October 2007) available at http://archive.flsenate.gov/data/Publications/2008/Senate/reports/interim_reports/pdf/2008-110ca.pdf (last visited March 28, 2019)

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

D. State Tax or Fee Increases:

None.

E. Other Constitutional Issues:

None.

V. Fiscal Impact Statement:

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

Public and private community groups, foundations, and community partnerships that advocate for issues relating to reducing disparities in the prevalence of Alzheimer's disease and dementia among racial and ethnic populations will have a new potential opportunity to compete for grants

C. Government Sector Impact:

The annual appropriation of state funds to the Closing the Gap program is subject to an annual appropriation. Funding for the program is not mandated in SB 1436. The addition of a new priority does not impact the overall cost of the program.

County health departments and other local government entities will also have an opportunity to compete for funds under the program. During this current fiscal year, several local government entities received Closing the Gap grants.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following sections of the Florida Statutes: 381.7354 and 381.7355.

IX. Additional Information:

A. Committee Substitute – Statement of Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.

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