

HOUSE OF REPRESENTATIVES STAFF FINAL BILL ANALYSIS

BILL #: CS/HB 183 Office of Minority Health and Health Equity
SPONSOR(S): Professions & Public Health Subcommittee, Brown and others
TIED BILLS: **IDEN./SIM. BILLS:** CS/SB 404

FINAL HOUSE FLOOR ACTION: 117 Y's 0 N's **GOVERNOR'S ACTION:** Approved

SUMMARY ANALYSIS

CS/HB 183 passed the House on April 23, 2021, and subsequently passed the Senate on April 26, 2021.

In Florida, minority populations experience higher rates of illness and death from health conditions such as heart disease, stroke, specific cancers, diabetes, HIV/AIDS, mental health, asthma, and obesity. The Office of Minority Health and Health Equity (Office), housed within the Department of Health (DOH), is responsible for helping to improve health and healthcare outcomes for racial and ethnic minority communities by developing or advancing policies, programs, and practices that address health, social, economic, environmental, and other factors which impact health.

The bill requires the Office to develop and promote statewide implementation of policies, programs, and practices that increase health equity for racial and ethnic minority populations in Florida. The bill requires the Office to work with other state agencies, organizations, and providers to improve the health of racial and ethnic minority populations through data analysis and the development of health policies and programs that will help eliminate health disparities.

The bill requires one representative from each county health department to serve as a minority health liaison and requires minority health liaisons to assist the Office in the implementation of the bill. The bill also authorizes the Office to serve as a liaison to and assist the federal Offices of Minority Health and Regional Health Operations, as appropriate.

The bill has an insignificant, negative fiscal impact on the DOH, which current resources are adequate to absorb, and no fiscal impact on local governments.

The bill was approved by the Governor on June 17, 2021, ch. 2021-117, L.O.F, and will become effective on July 1, 2020.

I. SUBSTANTIVE INFORMATION

A. EFFECT OF CHANGES:

Present Situation

Health Disparities

In Florida, minority populations experience higher rates of illness and death from health conditions such as heart disease, stroke, specific cancers, diabetes, HIV/AIDS, mental health, asthma, and obesity.¹ Poor health outcomes for Blacks, Hispanic Americans, American Indians, Alaska Natives, Asian Americans, Native Hawaiians, and Pacific Islanders are also apparent when comparing their health indicators to Florida's general population.²

Office of Minority Health and Health Equity

In 2004, the Florida Legislature established the Office of Minority Health and Health Equity (Office) to serve as the coordinating office within the Florida Department of Health (DOH) for consultative services and training in the areas of cultural and linguistic competency, coordination, partnership building, program development and implementation, and other related comprehensive efforts to address the health needs of Florida's minority and underrepresented populations statewide.³ The Office is responsible for helping to improve health and healthcare outcomes for racial and ethnic minority communities by developing or advancing policies, programs, and practices that address health, social, economic, environmental, and other factors which impact health.⁴ The Office is headed by the Senior Health Equity Officer.⁵

The DOH currently gathers, analyzes, and publishes data regarding disparities in health status and access to health care services on its Florida Health Community Health Assessment Resource Tool Set website, but not on quality of health care.⁶ However, the federal Agency for Healthcare Research and Quality does publish data on the quality of health care and provides a list of measures and supporting data that can be viewed by race and ethnicity at the state level.⁷ Currently, there are no statutory requirements relating to the maintenance of the Office's website, including what information should be maintained on it or how often it should be updated.

The Office has a broad vision under current law, and is not expressly directed in some areas. Current law does not require the Office to develop and promote statewide implementation of any policies, programs, and practices to increase health equity for racial and ethnic minority populations in Florida. The Office is also not required to work with other state agencies, organizations, and providers or the federal government to improve the health of racial and ethnic minority populations through data analysis and the development of health policies and programs that will help eliminate health disparities.

Minority Health Initiatives

¹ Florida Department of Health (DOH), *Health Equity Profile 2019, Health Equity Profile - State Total, Florida 2019*, <http://www.flhealthcharts.com/ChartsReports/RdPage.aspx?rdReport=ChartsProfiles.HealthEquityMergeMHPProfile> (last visited May 4, 2021).

² *Id.*

³ S. 20.43 (9), F.S. See also, Florida Department of Health (DOH), *Minority Health and Health Equity*, <http://www.floridahealth.gov/programs-and-services/minority-health/index.html> (last visited May 4, 2021).

⁴ DOH, *Minority Health Liaisons*, <http://www.floridahealth.gov/programs-and-services/minority-health/minority-health-liaisons.html> (last visited May 4, 2021).

⁵ S. 20.43(9), F.S.

⁶ DOH, 2021 Agency Legislative Bill Analysis for HB 183, p. 7 (Feb. 3, 2021).

⁷ Agency for Healthcare Research and Quality, *National Healthcare Quality and Disparities Reports: Florida*, https://nhqrnet.ahrq.gov/inhqrdr/Florida/benchmark/summary/All_Measures/All_Topics (last visited May 4, 2021).

Closing the Gap Grant Program

The Office administers the Closing the Gap (CTG) grant program.⁸ In 2000, the Legislature created the CTG grant program to improve health outcomes and eliminate racial and ethnic health disparities in Florida by providing grants to increase community-based health and disease prevention activities.⁹ The Senior Health Office must administer the CTG grant program in a manner that maximizes the impact of the grants in achieving health equity.¹⁰ Grants 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.¹¹

In administering the CTG grant program, the Senior Health Equity Officer must disseminate information on best practices to stakeholders.¹² He or she must also evaluate the awarded grants to assess the effectiveness and efficiency of the use of funds, and ensure that the assessments inform future grant award decisions.¹³

Implementation of the CTG grant program is subject to a specific appropriation provided in the General Appropriations Act.¹⁴ In Fiscal Year 2020-2021, the Legislature appropriated \$4,850,354 to the program.

Minority Health Liaisons

The Office relies on county health departments (CHDs) and other programs within the DOH to achieve its goals. The minority health liaisons, comprised of a representative from each of the 67 CHDs, are the link between local communities and the Office.¹⁵

The objective of the Office and the minority health liaisons is to improve the health of all residents and visitors across Florida, primarily through increasing public awareness of the importance of minority health and partnering initiatives focused on minority health issues statewide. The Office helps to facilitate these partnerships by coordinating with CHDs, central office divisions/bureaus, and statewide stakeholders, and providing technical assistance to the minority health liaisons on issues related to minority health, health disparities, and other health issues within the state. Key components of the Office-Minority Health Liaisons partnership include:¹⁶

- Sharing information on minority health and health disparities;
- Coordinating events, such as Take a Loved One to the Doctor Day, National Minority Health Month, and other nationally recognized observances;
- Promoting state and local activities and events to raise awareness of programs and services available to minorities and the underserved populations; and
- Helping meet the mission of the DOH by achieving its primary responsibilities in eliminating health disparities.

Effect of the Bill

Office of Minority Health and Health Equity

⁸ DOH, *Minority Health and Health Equity*, <http://www.floridahealth.gov/%5C/programs-and-services/minority-health/index.html> (last visited May 4, 2021).

⁹ Ss. 381.7353–381.7356, F.S. See also, *Closing the Gap Grant*, <http://www.floridahealth.gov/programs-and-services/minority-health/closing-the-gap.html> (last visited May 4, 2021).

¹⁰ S. 381.7355, F.S.

¹¹ S. 381.7356(4), F.S.

¹² S. 20.43(9), F.S.

¹³ *Id.*

¹⁴ *Id.*

¹⁵ DOH, *supra* note 4.

¹⁶ *Id.*

The bill requires the Office of Minority Health and Health Equity to develop and promote the statewide implementation of policies, programs, and practices that increase health equity for racial and ethnic minority populations in Florida.

The bill also requires the Office to use all available resources and pursue funding opportunities to achieve the bill's purpose and work with other state agencies, organizations, and providers to:

- Gather and analyze data regarding disparities in health status, health outcomes, quality of health care, and access to health care services for racial and ethnic minority populations in Florida;
- Develop mechanisms that support better information dissemination and education about health disparities which lead to improved access to and delivery of health care services to racial and ethnic minority populations in Florida;
- Promote evaluations of demonstration projects and disseminate the evaluations findings to enhance the success and sustainability of policies, programs, and practices that increase health equity in Florida;
- Promote the use of community health workers to improve the cultural competency of services and build individual and community self-sufficiency; and
- Promote the development of programs that improve access to health care services for individuals with limited proficiency in the English language, including persons with disabilities.

The bill requires the DOH to maintain and annually update the following information on its website:

- Current state data on health disparities and issues affecting racial and ethnic minority populations;
- Information about and links to resources available to racial and ethnic minority populations in Florida;
- Resources for providers who wish to improve cultural competency, understand health disparities, and increase the quality of and access to health care services for racial and ethnic minority populations in Florida; and

The bill also authorizes the Office to serve as a liaison to and assist the federal Offices of Minority Health and Regional Health Operations, as appropriate.

Minority Health Liaisons

The bill requires the Office to support the minority health liaisons by facilitating access to and the exchange of information related to health promotion, preventive health services, and education in the appropriate use of care. The bill also requires one representative from each CHD to serve as the minority health liaison and requires minority health liaisons to assist the Office in implementation of the bill. The DOH must maintain and annually update contact information for local minority health liaisons on its website.

The bill provides rulemaking authority for the Office to implement the bill.

The bill provides an effective date of July 1, 2021.

II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

The DOH will experience an increase in workload and operational costs to implement this bill, which current resources are adequate to absorb. Currently, each CHD has one minority health liaison.¹⁷ The existing minority health liaison infrastructure is sufficient to carry out the bill's requirements.

The DOH will incur costs associated with rulemaking and publishing information on its website, which current resources are adequate to absorb.

The 2021-2022 General Appropriations Act appropriated \$9,160,233 in recurring and \$126,886 in nonrecurring funds from the General Revenue Fund to the Office of Minority Health and Health Equity.¹⁸ These funds will be used for the Closing the Gap Grant program and to develop and promote the statewide implementation of policies, programs, and practices that increase health equity, including increased access to quality health care services for racial and ethnic minority populations. Fiscal Year 2021-2022 funding represents an increase of \$4,436,765 over FY 20-21 funding. The additional funding includes 4 FTE and 15 OPS positions. This additional funding will complement the existing appropriation to the Office to implement the requirements of the bill.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

None.

¹⁷ DOH, *supra* note 6, at 5.

¹⁸ Ch. 2021-36, Laws of Fla. Specific Appropriation 420.