

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 Committee on Health Policy

BILL: SB 1442

INTRODUCER: Senator Jones

SUBJECT: Medical Education Reimbursement and Loan Repayment Program

DATE: February 9, 2022

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Smith	Brown	HP	Favorable
2.			ED	
3.			RC	

I. Summary:

SB 1442 expands the eligibility criteria for health care practitioners to participate in the Medical Education Reimbursement and Loan Repayment Program. Specifically, the bill provides for the reimbursement of loans and educational expenses of a physician, physician assistant, or nurse who provides proof that at least 50 percent of his or her primary care patient population consists of racial or ethnic minorities in Florida, regardless of whether he or she practices in an underserved geographic location or service area.

The bill provides an effective date of July 1, 2022.

II. Present Situation:

Section 1009.65, F.S., establishes the Medical Education Reimbursement and Loan Program to encourage qualified medical professionals to practice in underserved locations. The program provides payments that offset loans and educational expenses incurred by students for studies leading to a medical or nursing degree, medical or nursing licensure, or advanced practice registered nurse (APRN) licensure or physician assistant (PA) licensure.

The following health care practitioners may participate in the program¹:

- Medical doctors with primary care specialties;
- Doctors of osteopathic medicine with primary care specialties;
- PAs;
- Licensed practical nurses and registered nurses;
- APRNs with primary care specialties, such as certified nurse midwives;

¹ Section 1009.65(1), F.S.

- APRNs registered to engage in autonomous practice under s. 464.0123, F.S., and practicing in the primary care specialties of family medicine, general pediatrics, general internal medicine, or midwifery.²

From the funds available for the program, the Department of Health (DOH) is required to make payments of up to \$4,000 per year for licensed practical nurses and registered nurses, up to \$10,000 per year for APRNs and PAs, and up to \$20,000 per year for physicians.³ To receive payment, the practitioner must prove that he or she is practicing primary care in a rural hospital⁴ or an underserved area designated by the DOH, including all correctional facilities, state hospitals, and other state institutions that employ medical personnel; and including locations with high incidences of infant mortality, high morbidity, or low Medicaid participation by health care professionals as designated.⁵ The practitioner must accept Medicaid reimbursement if eligible.⁶

For these practitioners, educational expenses include costs for: tuition, matriculation, registration, books, laboratory and other fees, other educational costs, and reasonable living expenses as determined by the DOH.⁷

Specific to APRNs registered to engage in autonomous practice, from the funds available, the DOH is required to make payments of up to \$15,000 per year to such an APRN who demonstrates active employment providing primary care services in a public health program,⁸ an independent practice, or a group practice that serves Medicaid recipients and other low-income patients and that is located in a primary care health professional shortage area.⁹ For these APRNs, only loans to pay the costs of tuition, books, medical equipment and supplies, uniforms, and living expenses may be covered.¹⁰

The DOH may use funds appropriated for the program as matching funds for federal loan repayment programs such as the National Health Service Corps State Loan Repayment Program.¹¹

The DOH may adopt rules necessary to administer the program.¹² It may solicit technical advice regarding conduct of the program from the Department of Education and Florida universities and

² Section 1009.65(1)(a)1., F.S.

³ Section 1009.65(1), F.S.

⁴ As defined in s. 395.602(2)(b), F.S.

⁵ Section 1009.65(1)(a)2., F.S.

⁶ *Id.*

⁷ *Id.*

⁸ Section 1009.65(1)(b)2., F.S. “Public health program” means a county health department, the Children’s Medical Services program, a federally funded community health center, a federally funded migrant health center, or any other publicly funded or nonprofit health care program designated by the department.

⁹ Section 1009.65(1)(b)1., F.S. “Primary care health professional shortage area” means a geographic area, an area having a special population, or a facility with a score of at least 18, as designated and calculated by the Federal Health Resources and Services Administration or a rural area as defined by the Federal Office of Rural Health Policy.

¹⁰ Section 1009.65(1)(b), F.S.

¹¹ Section 1009.65(2), F.S.

¹² Section 1009.65(3), F.S.

Florida College System institutions.¹³ It must submit a budget request for an amount sufficient to fund medical education reimbursement, loan repayments, and program administration.¹⁴ At this time, the program is unfunded. See “Fiscal Impact Statement” section of this analysis.

III. Effect of Proposed Changes:

SB 1442 bill adds to the statutory purpose of the Medical Education Reimbursement and Loan Repayment Program to include the provision of primary care to racial and ethnic minority populations that experience health disparities due to limited access to quality health care.

The bill expands eligibility criteria for health care practitioners to participate in the program. Specifically, the bill provides for the reimbursement of loans and educational expenses of a physician, PA, or nurse who provides proof that at least 50 percent of his or her primary care patient population consists of racial or ethnic minorities in Florida, regardless of whether he or she practices in an underserved geographic location or service area.

The DOH may adopt rules necessary to administer the program and the changes made to the program by this bill.

The bill provides an effective date of July 1, 2022.

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.

¹³ *Id.*

¹⁴ *Id.*

V. Fiscal Impact Statement:**A. Tax/Fee Issues:**

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

The DOH is required to submit a budget request for an amount sufficient to fund medical education reimbursement, loan repayments, and program administration.¹⁵ The DOH is directed in s. 1009.65, F.S., to make payments under the program from available funds. If additional health care practitioners qualify for and receive payments through the loan repayment program under the bill, it is possible that the DOH will need to increase its budgetary requests.

At this time, the program is unfunded. For the 2020-2021 fiscal year, the sum of \$5 million in recurring funds was appropriated from the General Revenue Fund to fund the program exclusively for APRNs registered to engage in autonomous practice.¹⁶ The \$5 million was not spent as the DOH did not have infrastructure in place to administer the program, such as an administrative position or a database for fund distribution. The program's funding was cut in the 2021-22 General Appropriations Act.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Statutes Affected:

This bill substantially amends the following section 1009.65 of the Florida Statutes.

IX. Additional Information:**A. Committee Substitute – Statement of Changes:**

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

None.

¹⁵ Section 1009.65(3), F.S.

¹⁶ Chapter 2020-9, Laws of Fla.

B. Amendments:

None.

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