



# Health Council of South Florida 2006-2007 Legislative Agenda

## Introduction

The **Health Council of South Florida** is a 501 (c) (3) nonprofit health planning organization serving Miami-Dade and Monroe Counties. It is part of a network of 11 local health councils across the state of Florida spearheading both **statewide and local health initiatives**. Local health councils provide services that encompass community assessment, planning and evaluation complemented by targeted programs for underserved populations and policy development for health systems reform.

## Guiding Principles

The Council's Board of Directors developed and adopted the following guiding principles to analyze the current legislative environment and select priorities for its 2006-2007 Legislative Agenda:

1. Equitable Access
2. Fiscal Responsibility and Stewardship of Public Resources
3. Promotion of Health and Wellness
4. Application of Advances in Science and Technology
5. Demonstrated Outcomes

To fulfill these principles, the Council recommends for legislative action to be taken during Florida's 2007 Legislative Session on the following two Critical Funding Issues and 10 Major Health Policy Issues. Please refer to the attached Legislative Agenda for more detailed information.

## Critical Funding Issues

- **Local Health Councils**  
*Restore funding for local health councils statewide to a minimum of \$1.65M as provided in FY04-05*
- **AIDS Insurance Continuation Program (AICP)**  
*Support a \$1.3M increase to maintain current enrollment levels*

## Major Health Policy Issues

- Florida KidCare Program
- Medicaid Reform
- Medicaid Access
- Florida Health Information Network (FHIN)
- Emergency Readiness Registry
- Healthy Lifestyles
- Disease Management
- Rural Health
- Workforce Housing
- Mental Health

Questions or comments concerning the Council's 2006-2007 Legislative Agenda may be directed to Sonya Albury, Executive Director at (305) 592-1452 or at [salbury@healthcouncil.org](mailto:salbury@healthcouncil.org).

# Health Council of South Florida

## CRITICAL FUNDING ISSUES

### **LOCAL HEALTH COUNCILS**

*2006 Legislative Recap: Provided \$1.006M in grants and aids.*

**RESTORE** funding for local health councils to a minimum of \$1.65 million as provided in FY04-05 as a strategic partner for statewide health initiatives, meeting the strategic planning goals of the Agency for Health Care Administration and Department of Health for data collection, community planning, program development and evaluation. Funding cuts reduce the leveraging power of the network of 11 local health councils across the state of Florida which in FY04-05 was \$50 per \$1 provided by the state of Florida. (*Guiding Principles: 1,2,3,5*)

### **AIDS INSURANCE CONTINUATION PROGRAM (AICP)**

*2006 Legislative Recap: Provided \$2M increase in General Revenue to enroll an additional 40 clients per month or 480 clients per year.*

**SUPPORT** a \$1.3M increase to maintain current enrollment levels. As of June 30, 2006, AICP serves 1,832 clients statewide. An estimated 1,925 clients will be enrolled in the program by July 1, 2007. (*Guiding Principles: 2,5*)

## 10 MAJOR HEALTH POLICY ISSUES

### **FLORIDA KIDCARE PROGRAM**

*2006 Legislative Recap: Program reduced by a total of \$169.1M to align the state's budget with enrollment forecasts. Current Title XXI enrollment is approximately 189,000 kids (April 2006). The 2006 General Appropriations Act provides funding to cover an enrollment of approximately 229,000 children. This accounts for an additional 40,000 enrollment slots.*

**AUGMENT** marketing and outreach initiatives for the Florida KidCare Program and reintroduce case management in the program's benefit package. (*Guiding Principles: 1,5*)

**SUPPORT** federal reauthorization of the State Children's Health Insurance Program (SCHIP) and organizational streamlining and administrative simplification of the program, to include coverage for new immigrant children. (*Guiding Principles: 1,2,3,4,5*)

### **MEDICAID REFORM**

*2005-B Special Session Recap: HB 3-B provides AHCA the authority to implement the Medicaid capitated managed care pilot program in two demonstration sites (Broward and Duval Counties). 2006 Legislative Recap: SB838 was signed on June 3, 2005. AHCA submitted long-term care reform waivers to CMS in January 2006. Federal approval expected during the summer of 2006. AHCA will return to the Legislature for approval to implement the waivers by the proposed date of November 2006.*

**MONITOR** implementation of the managed care demonstration program in Broward and Duval counties followed by Duval's surrounding rural counties of Baker, Clay and Nassau. (*Guiding Principles: 2,5*)

**MONITOR** long-term care demonstration programs to assess the statewide phase-in of managed care networks as a replacement for the current Medicaid program. (*Guiding Principle: 5*)

**ENSURE** demonstrated improvements in efficiencies and effectiveness take place prior to expansion to other counties. (*Guiding Principles: 4,5*)

### **MEDICAID ACCESS**

**SUPPORT** reimbursement rate and capitation rate increases for primary care physicians to promote the delivery of health care services in primary care settings. (*Guiding Principles: 1,2*)

### **FLORIDA HEALTH INFORMATION NETWORK**

**2006 Legislative Recap:** \$2M match appropriated to fund Florida Health Information Network pilot projects.

**SUPPORT** the development of the Florida Health Information Network, which would be a statewide health information infrastructure operating over the Internet. The FHIN is designed to share access to a patient's medical records from participating provider databases connected to the network. (*Guiding Principles: 3,5*)

## **EMERGENCY PREPAREDNESS REGISTRY**

**2006 Legislative Recap:** *HB 89 withdrawn prior to introduction. HB 7121 enrolled.*

**SUPPORT** passage of Emergency Management legislation to increase awareness of emergency preparedness registries and provide incentives for program participation by special needs populations. (*Guiding Principles: 1,4*)

## **HEALTHY LIFESTYLES**

**2006 Legislative Recap:** *CS/CS/SB 1324 requires the Department of Health, in addition to its current health promotion and prevention activities to: 1) collaborate with other state agencies to develop policies and strategies for preventing obesity; and 2) advise Florida-licensed health care practitioners about the morbidity, mortality, and costs associated with the conditions of being overweight or obese, clinical best practices for preventing obesity, and encourage practitioners to counsel their patients regarding adoption of healthy lifestyles.*

**SUPPORT** policies and strategies for preventing obesity, including employer-based wellness programs designed to reduce the prevalence of excess weight gain and obesity among employees and their families. Encourage workplace wellness through premium benefit rebates to employers/employees. (*Guiding Principle: 3*)

## **DISEASE MANAGEMENT**

**SUPPORT** expansion of disease management programs for chronic diseases, such as diabetes particularly among minority populations. (*Guiding Principles: 1,3,5*)

## **RURAL HEALTH**

**SUPPORT** rural health network initiatives and legislation to include participation in state health insurance groups, Monroe County rural health and local health council involvement. (*Guiding Principles: 1,3*)

## **WORKFORCE HOUSING**

**SUPPORT** affordable housing legislation for public service health professionals. (*Guiding Principle: 1*)

## **MENTAL HEALTH**

**2006 Legislative Recap:** *CS/HB 191 addresses conflict of interest representation and requires that a court consider all possible alternatives to guardianship. HB 457 emphasizes the importance of an incapacitated person's right to quality of life.*

**SUPPORT** Miami-Dade County's proposed **Gap Funding Pilot Project** to assist homeless individuals served by the 11<sup>th</sup> Judicial Circuit Criminal Mental Health Project's Jail Diversion Program. The proposed project will create a self-replenishing pool of funds to provide immediate access to housing and behavioral health services for individuals with serious mental illnesses being released from jail and awaiting approval of entitlement benefits such as Social Security. (*Guiding Principles: 1,2,3*)

**SEEK** additional Assisted Care Living Facilities and custodial support for the mentally ill. (*Guiding Principles: 1,2,3*)

**RESTORE** statewide funding for guardian advocates through a \$120,000 appropriation to the Department of Children and Families. Guardian advocates represent individuals who have been involuntarily committed to an institution for reason of demonstrating behavior that makes them a danger to themselves and the community. Guardian advocates facilitate consents for recommended inpatient services and promote follow-up care. (*Guiding Principles: 1,3*)