

Health Care in the 2024 Florida Legislative Session





Who We Are

- Florida Voices for Health is a 501(c)(3) health care advocacy organization. We promote reforms through story collection, community outreach and education, and through relationships with media and lawmakers.
- We lead some coalition-based campaigns on different healthcare issues.
- Our issues include:
 - Strengthening Florida Medicaid
 - Improving access to Oral Health
 - Increasing access for Floridians with disabilities
 - Protecting Floridian Health Care Consumers
- Our main function is **capturing the health care stories** of Floridians and sharing them with lawmakers, the media, and our communities.



Today's Meeting...

The Budget

We'll review the topline of the final proposed budget for FY 24-25

"Live Healthy" Review

We will look at the provisions of this session's priority initiative.

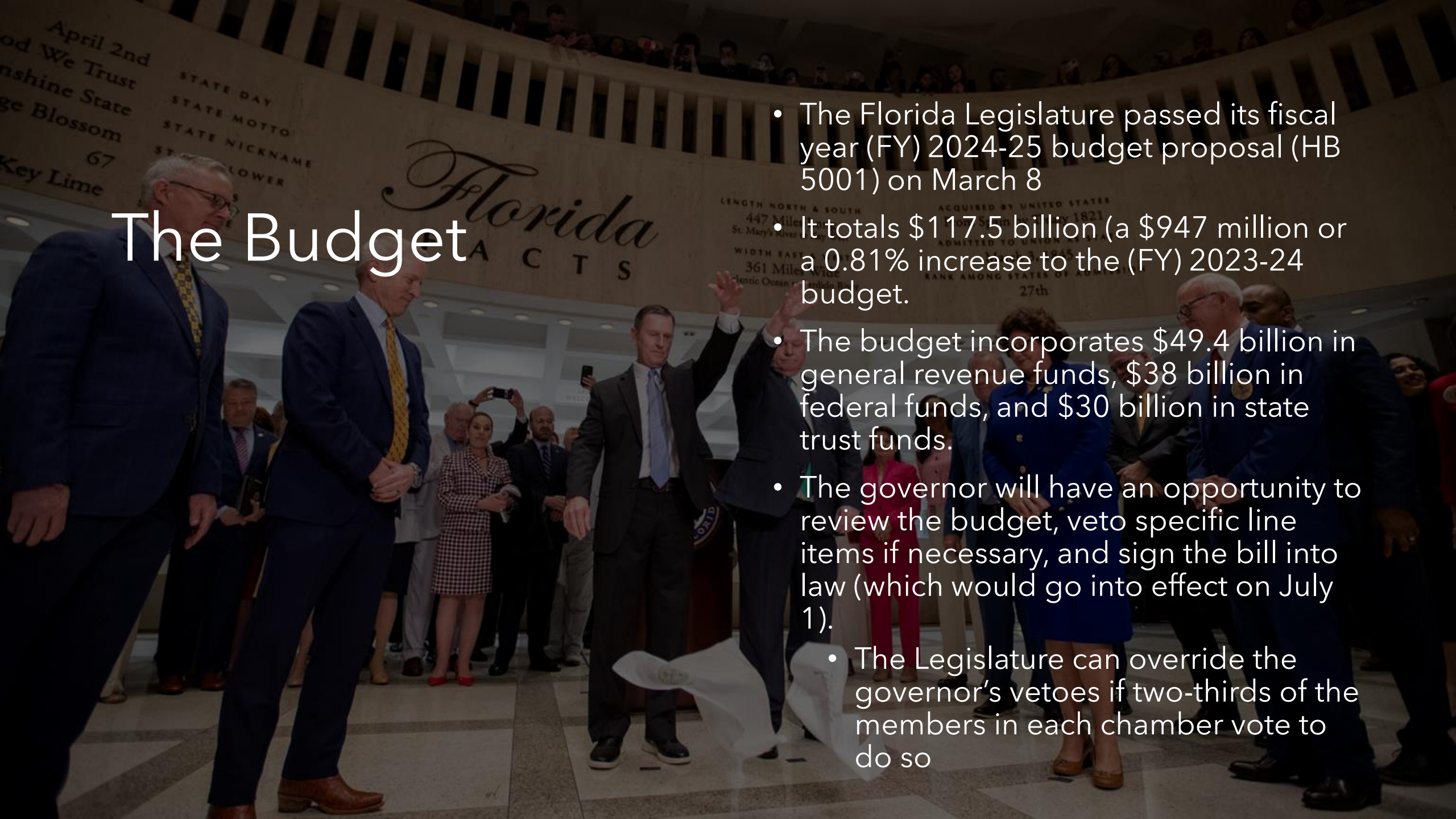
Other Health Care Bills in 2024

We'll breakdown the other meaningful health access bills that passed and a couple of the ones that didn't.

Opportunities for Action

We'll discuss opportunities to get involved in efforts to improve Florida's health care system.



A group of men in suits are standing in a large, ornate hall with a curved wall. The wall is covered in text about Florida, including "Florida ACTS", "STATE DAY", "STATE MOTTO", "STATE NICKNAME", "STATE LOWER", "LENGTH NORTH & SOUTH", "WIDTH EAST & WEST", "ACQUIRED BY UNITED STATES", "ADMITTED TO UNION", "RANK AMONG STATES BY AREA", and "27th". The men are dressed in business attire, and one man in the center is gesturing with his hands raised. The overall atmosphere is formal and celebratory.

The Budget

- The Florida Legislature passed its fiscal year (FY) 2024-25 budget proposal (HB 5001) on March 8
- It totals \$117.5 billion (a \$947 million or a 0.81% increase to the (FY) 2023-24 budget).
- The budget incorporates \$49.4 billion in general revenue funds, \$38 billion in federal funds, and \$30 billion in state trust funds.
- The governor will have an opportunity to review the budget, veto specific line items if necessary, and sign the bill into law (which would go into effect on July 1).
- The Legislature can override the governor's vetoes if two-thirds of the members in each chamber vote to do so

The Health Care Budget

- Health and Human Services received the largest portion of funding for the budget in SFY 2024-25, totaling approximately \$46.5 billion.
- This represents a 1.51% decrease in appropriation from the current year.
- The legislature allocated \$1.5 billion (over 10 years) for *Live Healthy*, the healthcare initiatives lawmakers prioritized during this year's legislative session

The “Live Healthy” Session

“People love moving to the state of Florida. Here's the problem. Many of them, probably most of them, are older and they're going to need healthcare. We do not have enough providers, whether it be physicians, nurses, technicians, facilities, to handle our current population comfortably and easily.

You know, I hear often times from constituents that **if they want to have some kind of elective surgery, they have to wait eight months** to a year to get in.”



**Florida Senate President
Kathleen Passidomo**

Live Healthy Overview

- **SPB 7016: Health Care**
 - Regarding growing Florida's health care workforce, removing regulations to increase workforce mobility, expanding access to quality, efficient health care
- **SPB 7018: Health Care Innovation**
 - Regarding incentivizing innovation through technology.
- **SB 330: Behavioral Health Teaching Hospitals**
 - Authorizes a behavioral health teaching hospital designation and establishes a grant program for BHTs
- **SB 1758: Individuals with Disabilities**
 - Requires APD to develop and implement an online application process; Provides waitlist funding



Live Healthy Appropriations

- **SPB 7016: Health Care**
 - *\$717 million total appropriation*
 - \$437 million - increase in Medicaid reimbursements
 - \$50 million - increasing the number of medical school residencies
 - \$23 million - expanding the telehealth minority maternity care program
- **SPB 7018: Health Care Innovation**
 - \$50 million (each year until 2033-2034)
- **SB 330: Behavioral Health Teaching Hospitals**
 - \$313 million to support facilities, residency slots, and research center
- **SB 1758: Individuals with Disabilities**
 - \$38 million - to fund services for Floridians with disabilities on the waitlist for the iBudget waiver Medicaid program.



SB 7016: Health Care

The Florida Reimbursement Assistance for Medical Education Program (FRAME) and the Dental Student Loan Repayment Program

- Expands DSLR Program to include dental hygienists and to include private dental practices that are located in dental health professional shortage areas
- Expands list of eligible practitioners for FRAME program to include mental health professionals, clinical social workers, licensed marriage and family therapists, licensed mental health counselors, and licensed psychologists.
 - Previously just: medical and osteopathic doctors with primary care specialties, PA's, LPNs, and RNs
- AHCA required to seek federal matching funds and the bill provides a sunset date for both programs of July 1, 2034.



SB 7016: Health Care

Health Care Screening and Services Grant Program (HCSSGP)

- Requires the DOH to implement a HCSSGP to fund the provisions of no cost health care screenings or services for the general public by nonprofit entities.
- The bill requires the DOH to:
 - Publicize the availability of funds and partner with county health departments for outreach
 - Establish an application process for submitting a grant proposal and eligibility criteria
 - Develop expenditure guidelines and reporting requirements
- The bill requires the DOH to:
 - Maintain an Internet-based portal
 - Direct the general public to events, organizations, and venues from which health care screenings or services may be obtained at no cost or at a reduced cost and
 - Direct licensed health care practitioners to opportunities to volunteer their services for such screenings and services.



SB 7016: Health Care

Advanced Birth Centers

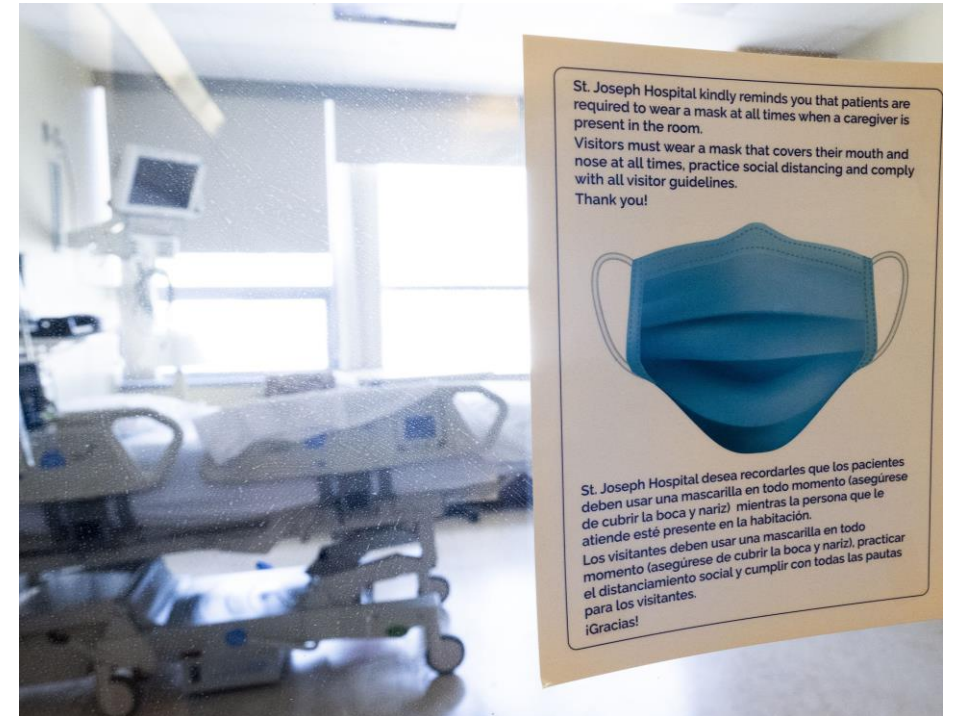
- Licensed birth centers can be designated as an *advanced birth center* meaning they may perform:
 - Trial of labor after cesarean deliveries for screened patients who qualify,
 - Planned low-risk cesarean deliveries
 - Anticipated vaginal deliveries for laboring patients from the beginning of the 37th week of gestation through the end of the 41st week of gestation
- To be designated as an ABC, a birth center is required to maintain all of the statutory requirements for both birth centers and advanced birth centers and:
 - Be operated and staffed 24 hours per day, 7 days per week.
 - Employ two medical directors (a board-certified obstetrician and a board-certified anesthesiologist).
 - Have at least one properly equipped, dedicated surgical suite for the performance of cesarean deliveries.
 - Employ at least one registered nurse and ensure that at least one registered nurse is present in the center at all times



SB 7016: Health Care

Hospital Requirements

- Prohibits a hospital from accepting any payment from a medical school directly, or indirectly, related to allowing students from the medical school to obtain clinical hours or instruction at the hospital.
- Requires all hospitals with emergency departments (ED) to submit a diversion plan to the AHCA for assisting patients with non-emergent health care needs and no regular primary care gain access to appropriate care settings
- Requires all hospitals to submit data to the AHCA demonstrating the effectiveness of its ED diversion plan annually and update the plan as necessary, or as directed by the AHCA, prior to licensure renewal.
- The ED diversion plan must include at least one of the following:
 - A partnership agreement with one or more nearby FQHCs or other primary care settings.
 - The establishment, construction, and operation of a hospital-owned urgent care center adjacent to the hospital ED or an agreement with an urgent care center located within three miles in an urban area or 10 miles in a rural area.



SB 7016: Health Care

Statewide Medicaid Residency Program (SMRP)

- Slots for Doctors Program - The SDP requires the AHCA to annually allocate \$100,000 to hospitals and qualifying institutions for each newly created slot that is first filled on or after June 1, 2023, and remains filled thereafter.
 - The bill amends SDP to allow the AHCA to fund up to 200 residency slots
- The bill establishes the Graduate Medical Education Committee (GMEC) Beginning July 1, 2025, the committee is required to submit an annual report to the Governor and the Legislature detailing:
 - The role of residents and medical faculty in the provision of health care.
 - The relationship of graduate medical education to the state's physician workforce.
 - The typical workload for residents and the role such workload plays in retaining physicians in the long-term workforce. ...etc



SB 7016: Health Care

Training, Education, and Clinicals in Health (TEACH) Funding Program

- The bill requires the AHCA to develop an application process for qualified facilities (federally qualified health centers, community mental health centers, rural health clinics, and certified community behavioral health clinics) to apply for funds to offset administrative costs and loss of revenue associated with establishing, maintaining, or expanding a clinical training program.
- Subject to appropriation, AHCA has a reimbursement fee schedule



SB 7016: Health Care

Charitable Care at Free Clinics

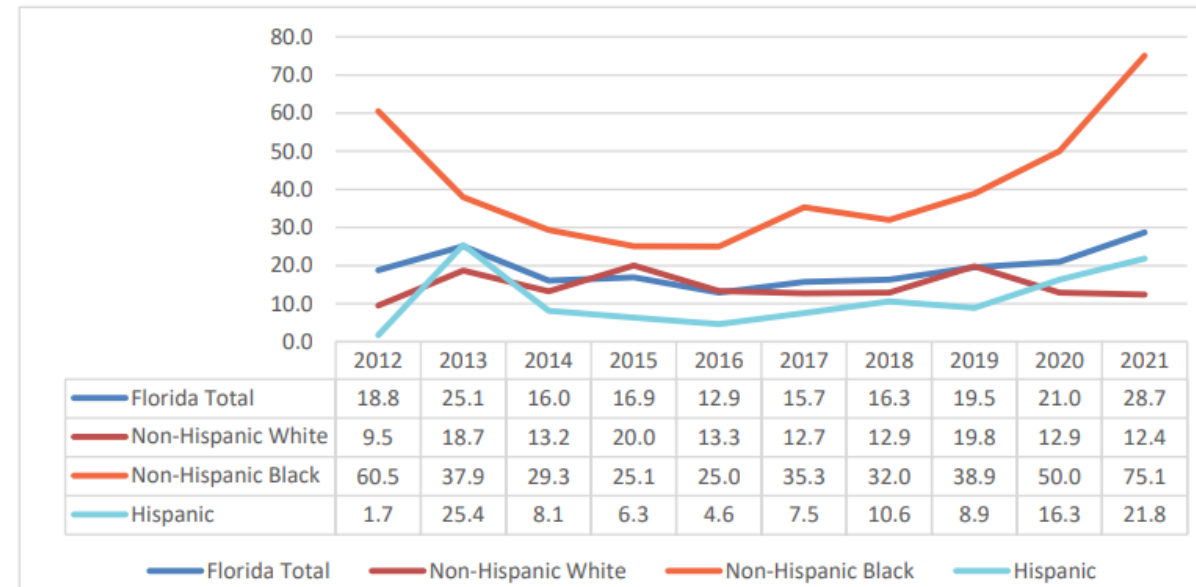
- The bill amends s. 766.1115, F.S., to increase the maximum income a patient can have in order to be considered low-income from 200 percent to 300 percent of FPL.
- In order for a free clinic to qualify as a health care provider and be eligible for sovereign immunity under the section, the free clinic must serve exclusively low-income patients.
- This change will increase the number of people a free clinic can serve while still maintaining its eligibility for sovereign immunity under the section.



SB 7016: Health Care

Telehealth Minority Maternity Care Pilot Program

- The bill expands the current Telehealth Minority Maternity Care pilot program into a statewide program.
- Beginning October 31, 2025, requires the DOH to annually report on the program
 - The total number of clients served and demographic information for the population served, including ethnicity and race, age, education levels, and geographic location;
 - The total number of screenings performed, by type;
 - The number of participants identified as having experienced pregnancy-related complications, the number who received treatments for such complications, and the final outcome of the pregnancy for such participants;
- The bill appropriates \$29,760,062 in recurring funds from the General Revenue Fund to the Grants and Aids - Minority Health Initiative Category, to the DOH to expand the telehealth minority maternity care program statewide.



SB 7016: Health Care

Clinical Psychologists

- The bill revises the definition of “clinical psychologist” to remove the three years of experience required under current law
- Authorizes a licensed clinical psychologist of any experience to:
 - Perform an involuntary examination under the Baker Act;
 - If a psychiatrist or clinical psychologist with three years’ experience is unavailable, provide a second opinion to support a recommendation that a patient receive involuntary outpatient services;
 - Determine if the treatment plan for a patient is clinically appropriate; and
 - If a psychiatrist or clinical psychologist with three years’ experience is unavailable, provide a second opinion to support a recommendation that a patient receive involuntary inpatient services.



SB 7016: Health Care

Psychiatric Nurses

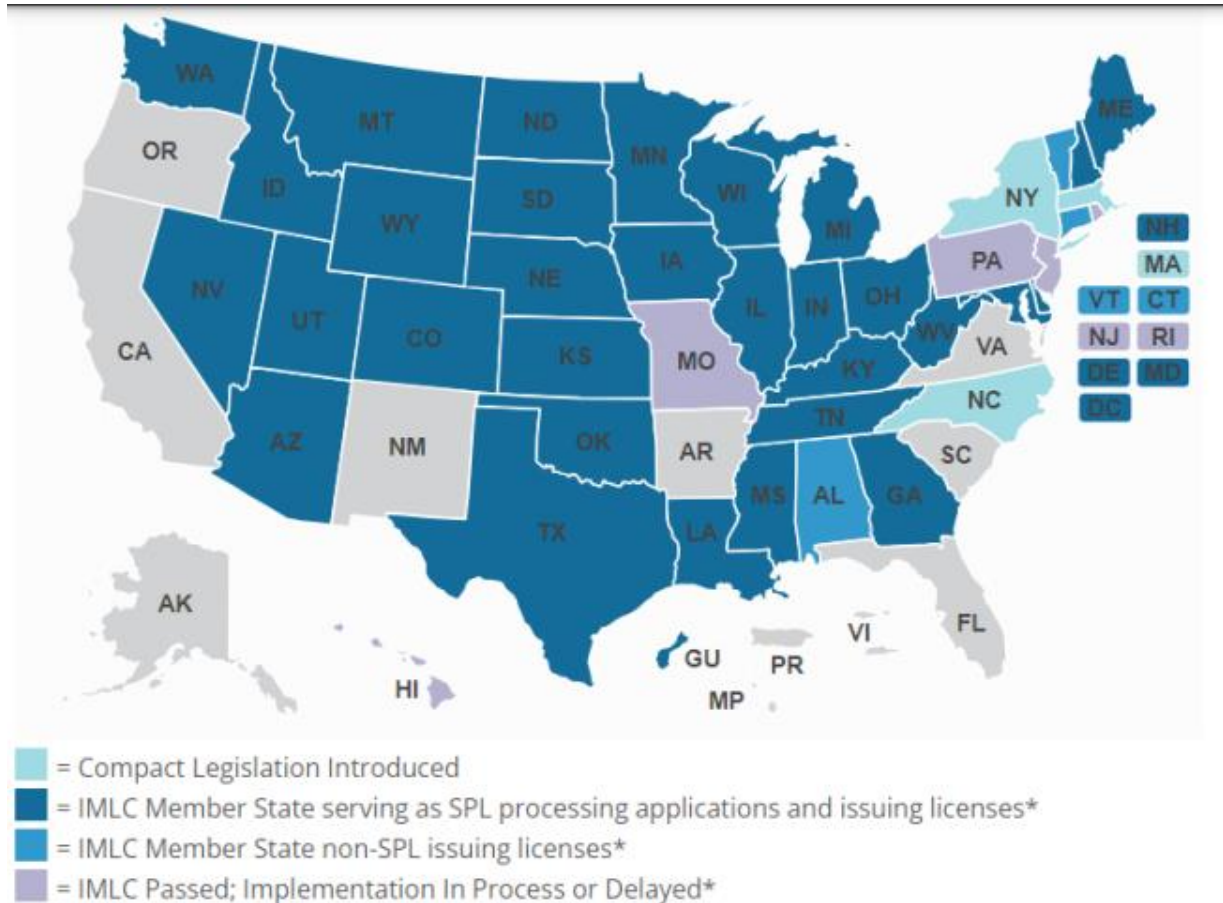
- The bill revises the definition of “psychiatric nurse” to reduce the experience requirement from two years to one year
- Authorizes a psychiatric nurse with one year of experience to:
 - Prohibit a patient from accessing clinical records if the psychiatric nurse determines such access would be harmful to the patient;
 - Determine if the treatment plan for a patient is clinically appropriate;
 - Authorize a person who is 14 years of age or older to be admitted to a bed in a room or ward in a mental health unit with an adult if the psychiatric nurse documents that such placement is medically indicated or for safety reasons; and
 - Authorize the substitution of medications upon discharge of certain indigent patients if the psychiatric nurse determines such substitution is clinically indicated



SB 7016: Health Care

Multistate Compacts

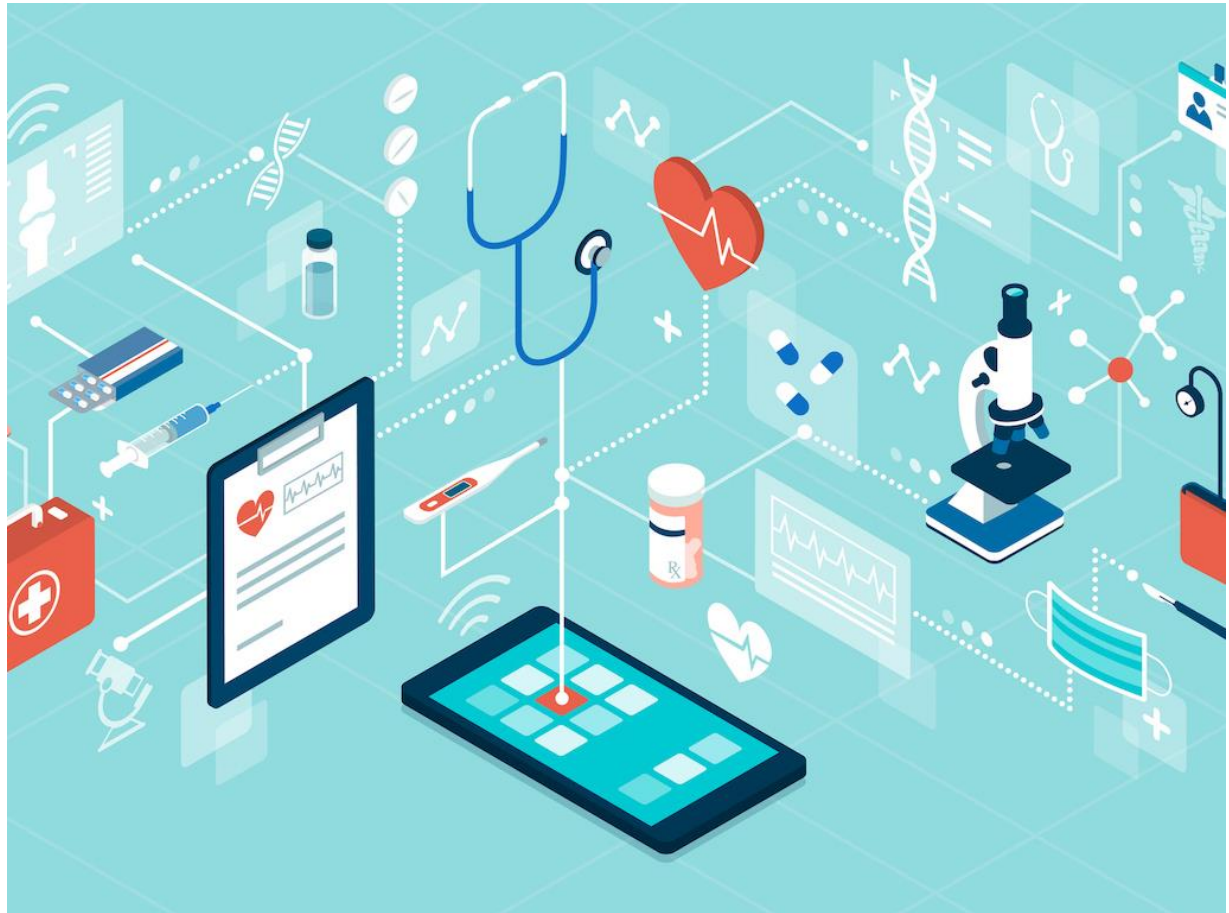
- The bill enacts the Interstate Medical Licensure Compact, Audiology and Speech-Language Pathology Interstate Compact, and Physical Therapy Compact, authorizing Florida to enter into the compacts.
 - The Interstate Medical Licensure Compact (IMLC) offers an expedited pathway to licensure for qualified physicians. Physicians complete a single application and receive separate licenses from each state they intend to practice.
- An interstate compact is a contract between two or more states. It carries the force of law and may establish uniform guidelines, standards, or procedures for the compact's member states



SB 7018: Health Care Innovation

Health Care Innovation Council & Innovation Loans

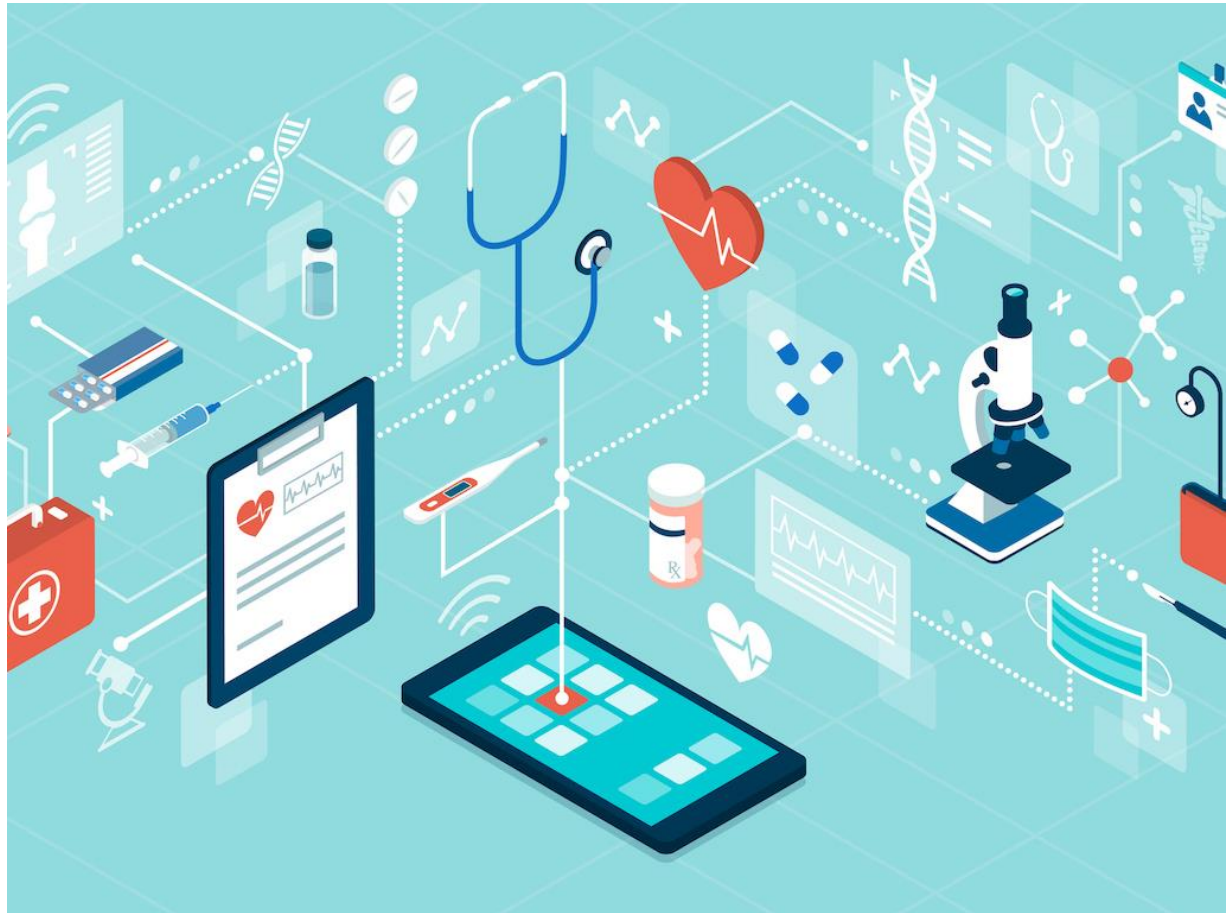
- The bill creates the Health Care Innovation Council, a 15-member council within DOH to facilitate public meetings across the state to lead discussions with innovators, developers, and implementers of technologies, workforce pathways, service delivery models, or other solutions.
- Based on the public input and information gathered at public meetings, the bill requires the council to create best practice recommendations and focus areas for the advancement of the delivery of health care in Florida, with an emphasis on:
 - Increasing efficiency in the delivery of health care;
 - Reducing strain on the health care workforce;
 - Increasing public access to health care;
 - Improving patient outcomes;
 - Reducing unnecessary emergency department visits; and
 - Reducing costs for patients and the state without reducing the quality of patient care.



SB 7018: Health Care Innovation

Health Care Innovation Council & Innovation Loans

- The bill creates a revolving loan program within the DOH to provide low-interest loans to applicants to implement one or more innovative technologies, workforce pathways, or service delivery models in order to:
 - Fill a demonstrated need;
 - Obtain or upgrade necessary equipment, hardware, and materials;
 - Adopt new technologies or systems;
 - A combination thereof to improve the quality and delivery of health care in measurable and sustainable ways that will lower costs and allow that value to be passed onto health care consumer



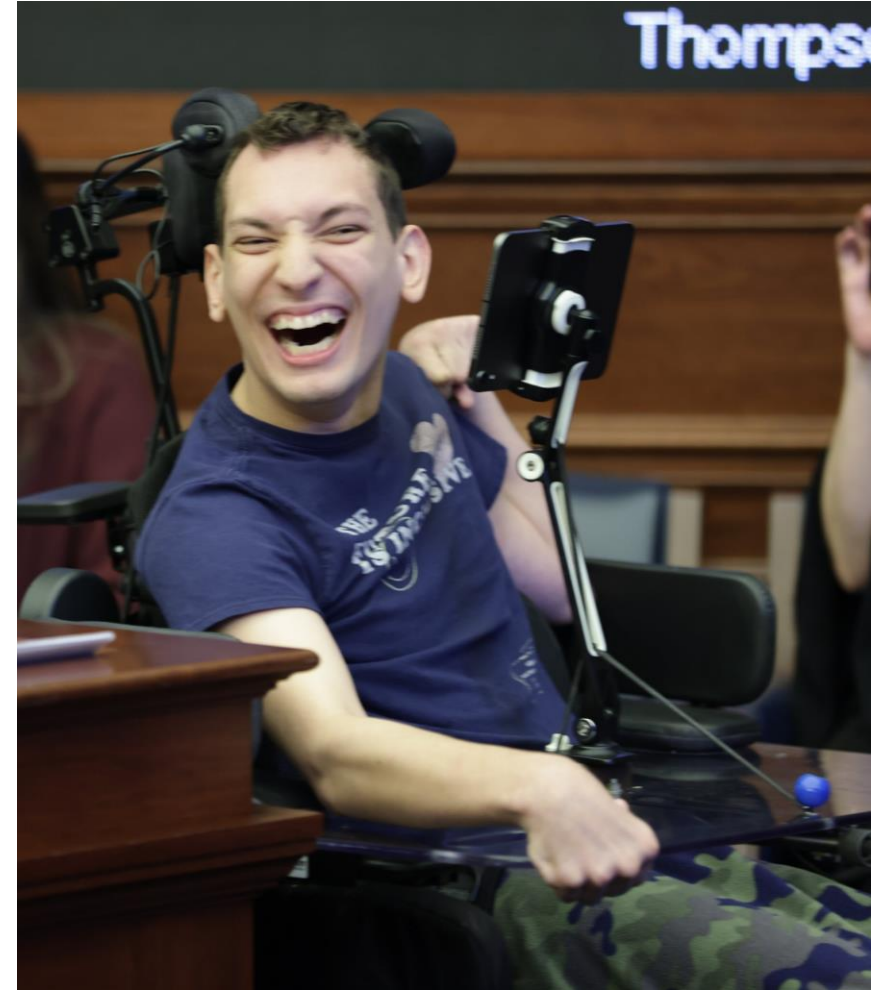
SB 330: Behavioral Health Teaching Hospitals

- Requires AHCA to designate four hospitals as behavioral health teaching hospitals within 30 days after the act becomes law.
 - Tampa General Hospital (USF).
 - UF Health Shands Hospital (UF)
 - UF Health Jacksonville (UF)
 - Jackson Memorial Hospital (UM)
- It establishes standards for behavioral health teaching hospitals for those and future BHTHs
- AHCA to award each BHTH funds for up to 10 new residency slots and for workforce development programs.
- Establishes a competitive grant program for BHTHs based on the hospitals' integrated workforce development plans.
- Establishes the Florida Center for Behavioral Health Workforce within the Louis de la Parte Florida Institute for Mental Health at USF.



SB 1758: Individuals with Disabilities

- Requires APD to offer care navigation services to clients and their caregivers, including, but not limited to, creating care plans that address immediate and long-term needs and goals of the client.
- Requires the creation of an online application process for APD services and streamlines the timeframes the APD has to determine eligibility.
- Reduces the age requirement of a client's caregiver in pre-enrollment category 4 from 70 years of age to 60 years of age or older.
- Require iBudget waiver support coordinators to inform iBudget clients of the option to apply for the CDC+ program when creating family or individual support plans.
- Includes funds to expand the number of Floridians with Disabilities who receive home and community-based care waiver services.



The image features a large orange semi-circle on the right side, which serves as a background for the text. To the left of this semi-circle, there is a blue circle, a green square outline, and several yellow dashed lines of varying lengths. In the top right corner, a portion of a yellow circle is visible. The overall design is minimalist and modern, using a limited color palette of orange, blue, green, and yellow on a white background.

Health Access Beyond
Live Healthy

SB 644: Rural Emergency Hospitals

- The bill establishes a rural emergency hospital (REH) designation for rural or critical access hospitals that :
 - Meet federal requirements for an REH (Consolidated Appropriations Act of 2021)
 - Has no more than 50 beds;
 - Can adequately provide rural emergency services 24/7; and
 - Is sufficiently staffed and equipped to provide the types of services included in the application.
- “Rural emergency services” include:
 - Emergency services and other care that does not require treatment for more than 24 hours, provided in a REH;
 - Observation care; and
 - Outpatient services defined by HHS
- REHs are reimbursed through Medicare at an amount equal to what would be paid to a hospital for providing the equivalent outpatient service increased by five percent.



SB 1640: Payments for Health Care Services

- Regarding the collection of hospital/ASC medical debt, the bill:
 - Prohibits an entity from engaging in extraordinary collections actions, such as certain legal or judicial processes including commencing a civil action, garnishing wages or placing a lien on property.
 - Establishes a three-year statute of limitations for actions to collect medical debt. (Currently 5 years)
 - Exempts from attachment, garnishment or other legal process in an action on hospital medical debt:
 - A debtor's interest, not to exceed \$10,000 in value, in a single motor vehicle. (Currently \$1,000)
 - A debtor's interest in personal property, not to exceed \$10,000 in value. (Currently \$1,000).



SB 1640: Payments for Health Care Services

- SB 1640 also includes price transparency requirements:
 - A hospital or ASC must post standard charges for specified services on its website and establish a process for reviewing and responding to grievances from patients.
 - Hospitals and ASCs must provide estimates of anticipated charges for nonemergency services and provide such estimates to the patient's health insurer.
 - A health insurer, in turn, must prepare an "advanced explanation of benefits" for the patient, within a specified time frame prior to the service being provided, based on the facility's estimate.



SB 964: Coverage for Biomarker Testing

- Biomarker testing is a method to look for genes, proteins, and other substances (biomarkers or tumor markers) that can provide information about cancer and other conditions.
- Section 1 mandates the State Group Insurance program to cover biomarker testing for policies issued on or after January 1, 2025.
 - This only covers the diagnosis, treatment, management, or ongoing monitoring to guide treatment decisions when it provides clinical utility. It does not require coverage of biomarker testing for screening purposes.



SB 964: Coverage for Biomarker Testing

- Section 2 authorizes AHCA to pay for biomarker testing for diagnosis, treatment, management, or ongoing monitoring of recipients' disease or condition to guide treatment decisions.
 - AHCA is also required to outline a process for enrollees and providers to request an authorization for biomarker testing.
 - It does not require coverage of biomarker testing for screening purposes.
- Section 3 requires managed care plans to provide coverage for biomarker testing for enrollees, at the same scope, duration, and frequency as the Medicaid program provides for other medically necessary treatments.
 - Managed care plans are required to outline a process for enrollees and providers for requesting authorization of biomarker testing.
 - It does not require coverage of biomarker testing for screening purposes.



SB 1784: Mental Health and Substance Abuse

- The bill amends the Baker Act by:
 - Combining processes for courts to order individuals to involuntary outpatient services and involuntary inpatient placement
 - Streamlining the process for obtaining involuntary services
 - Providing more flexibility for courts to meet individuals' treatment needs.
- The bill also grants law enforcement officers discretion on initiating involuntary examinations.
- For both the Baker and Marchman Acts, the bill:
 - Creates a more comprehensive and personalized discharge planning process.
 - Removes limitations on APRNs and PAs serving the physical health needs of individuals receiving psychiatric care.
 - Allows a psychiatric nurse to release a patient from a receiving facility if certain criteria are met.
 - Removes the 30-bed cap for crisis stabilization units.

MARCHMAN ACT

- Applies to apprehension for substance abuse
- Likelihood person will harm themselves or others

BAKER ACT

- Applies to apprehension for mental health care
- Likelihood person will harm themselves or others



SB 1784: Mental Health and Substance Abuse

- The bill substantially amends the Marchman Act to:
 - Repeal existing provisions for court-ordered involuntary assessments and creates a new consolidated involuntary treatment process.
 - Prohibit courts from ordering an individual with a developmental disability who lacks a co-occurring mental illness to a state mental health treatment facility for involuntary inpatient placement.
 - Allows a minor's voluntary admission after a clinical review, rather than a hearing
 - Authorize a witness to appear remotely upon a showing of good cause and with consent by all parties.
 - Allow an individual to be admitted as a civil patient in a state mental health treatment facility without a transfer evaluation
 - Prohibits a court, in a hearing for placement in a treatment facility, from considering substantive information in the transfer evaluation unless the evaluator testifies at the hearing.

MARCHMAN ACT

- Applies to apprehension for substance abuse
- Likelihood person will harm themselves or others

BAKER ACT

- Applies to apprehension for mental health care
- Likelihood person will harm themselves or others



SB 436: Pregnancy and Parenting Resources Website

- The bill requires the Department of Health (DOH) to contract for the creation of a stand-alone pregnancy and parenting resources website that must be operational by January 1, 2025.
- DOH, in consultation with DCF and AHCA, is required to maintain the website, and each agency must post a clear and conspicuous link to the website on their respective webpages.
- The website must have information and links to public and private resources for expectant families which include, but are not limited to:
 - Educational materials on pregnancy and parenting;
 - Maternal health services;
 - Prenatal and postnatal services;
 - Educational and mentorship programs for fathers;
 - Social services;
 - Financial assistance; and
 - Adoption services.



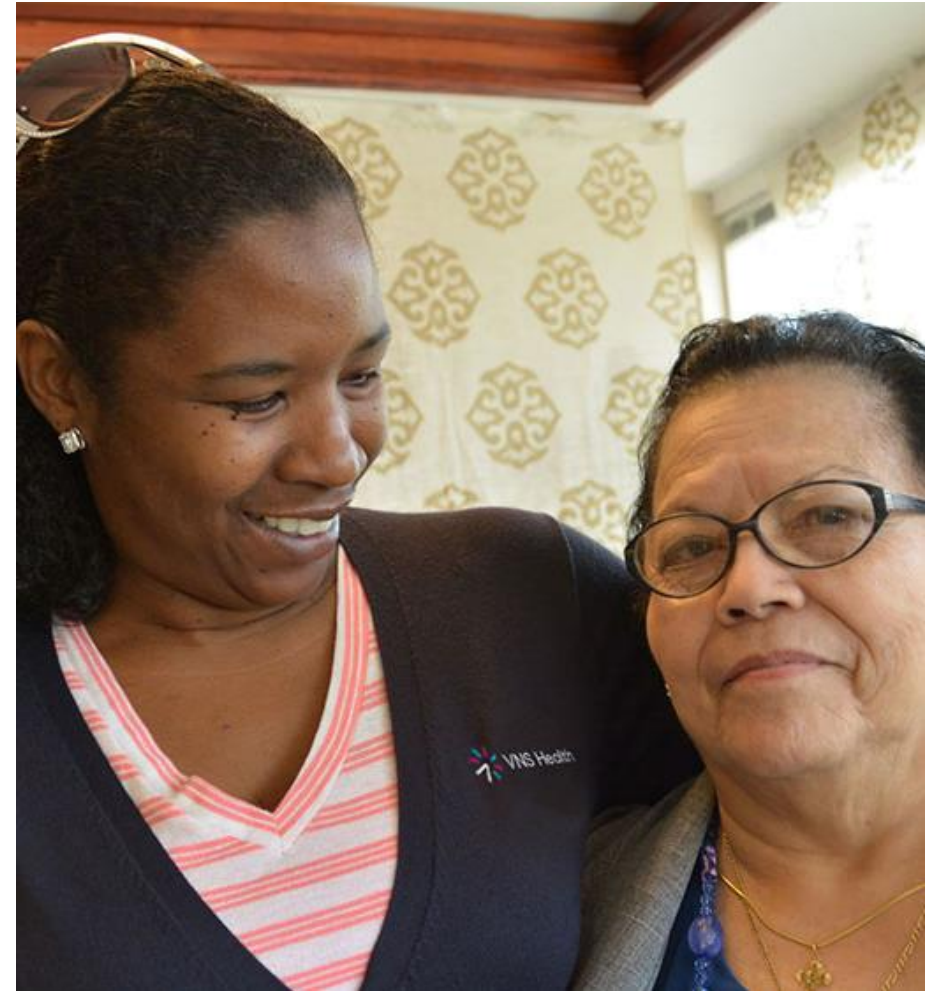
SB 302: Dental Services

- Requires dentists that provides dental services through telehealth to make available the dentist's name, telephone number, after-hours contact information for emergencies, and upon request, licensure information to patients.
- Requires the dentist of record to remain primarily responsible for all dental treatment for any patient who is treated through telehealth, whether care is rendered by the dentist of record, another dentist, dental hygienist, or dental assistant.
- Requires that an advertisement for dental services provided through telehealth must include a specific disclaimer that an in-person examination with a dentist is recommended before certain services are performed.
- Requires a dentist of record to perform an in-person examination of a patient or obtain records from an in-person examination within the last six months before the initial diagnosis and correction of a malposition of human teeth or initial use of an orthodontic appliance.



HB 935: Home Health Care Services

- Florida Medicaid pays for home health services necessary to assist a recipient living at home, including home health visits, nursing and home health aide services, supplies, appliances, and durable medical equipment.
- Under current law, Medicaid reimbursement is not available for home health services ordered by any practitioner other than a physician, such as a nurse.
- The bill allows Medicaid to pay for home health services ordered by advanced practice registered nurses and physician assistants.

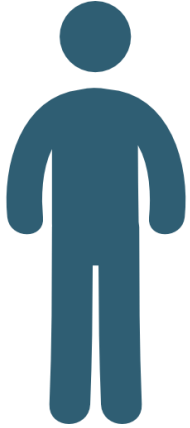




Missed Opportunities in 2024

Access and Equity for Low-Income Floridians

Who is left out of Florida Medicaid?



There is NO help for childless adults, regardless of how much you make.



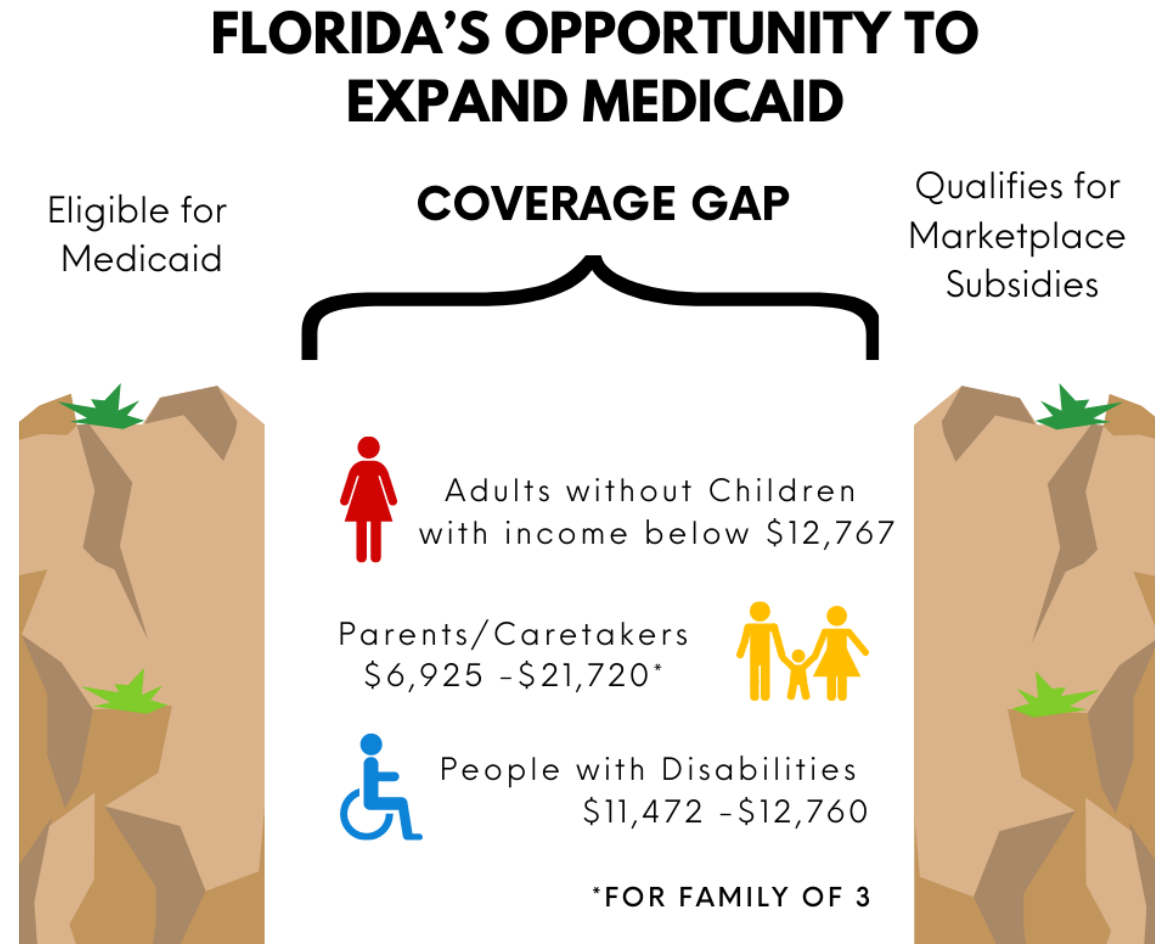
In Florida you must have a dependent child and make less than about \$7,000/yr (31% FPL) for a family of 3.

In Florida, some **425,000 uninsured adults** in the coverage gap would become eligible if the state expanded Medicaid.

([Center on Budget and Policy Priorities](#))

Closing the Coverage Gap

- For people earning above the poverty level, the Affordable Care Act provided tax credits to purchase coverage in the Marketplace.
- For people earning below 100% of the federal poverty level, the ACA called on states to expand their Medicaid eligibility in return for billions of federal tax dollars.
- In 2012 Supreme Court upheld the ACA and the Marketplace, but the ruling made Medicaid expansion “optional” to states.
- Florida remains one of the last 10 states to expand.



Comprehensive Medicaid Adult Dental Benefit

- Florida's Medicaid adult dental benefit should be expanded to include:
 - Services necessary to prevent disease and promote oral health, restore oral structures to health and function
 - Treatment of emergency conditions
 - Routine diagnostic and preventive care, such as dental cleanings, exams and x-rays
 - Basic dental services such as fillings and extractions
 - Major dental services such as root canals, crowns and dentures and other dental prostheses
- According to the American Dental Association Health Policy Institute, the estimated annual net cost to the state of Florida of introducing comprehensive adult dental benefits in Medicaid is \$29.6 million after reaching a "steady state."
- The net cost translates to \$1.65 per enrollee per month. It is estimated that dental care spending will generate additional economic activity in the amount of \$223.2 million after reaching a "steady state" in year three.

Ways to Engage



HEALTH CARE *for* FLORIDA



Ways to Engage: Join our Grassroots Coalition



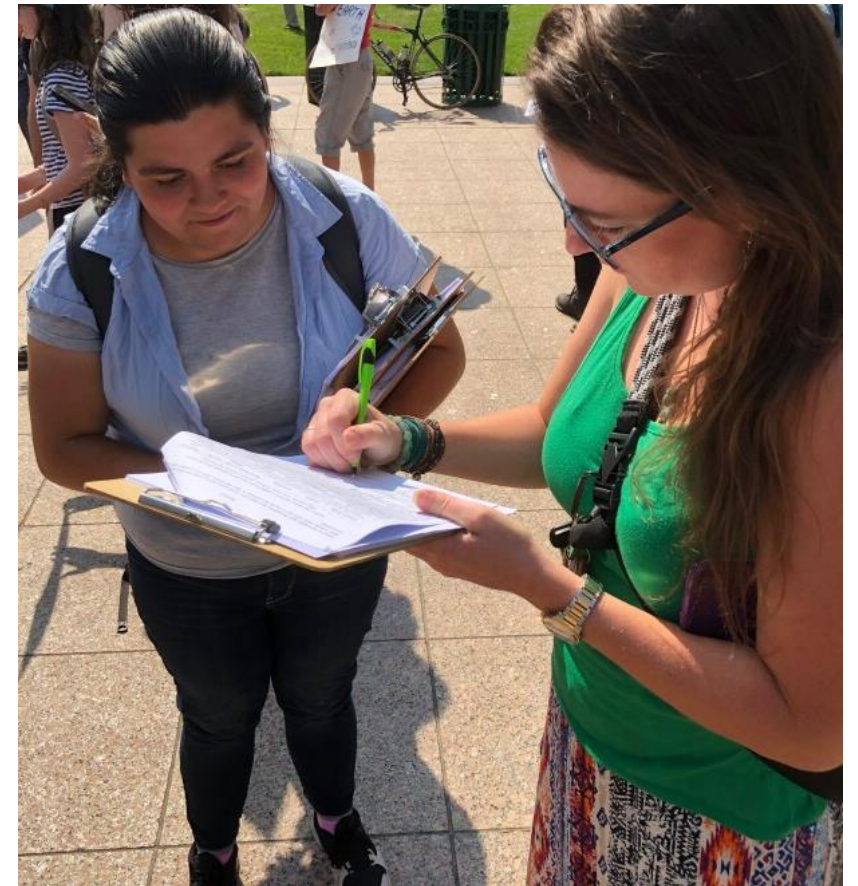
- **Join Health Care for FL - www.healthcareforfl.org/join**
 - Individuals and organizations
 - Select list of options and we'll follow up
- **Sign-up for Direct Advocacy- www.bit.ly/tally2024**
 - Join a small team in Tallahassee for visits with legislators
 - Participate in County delegation meetings
 - Receive trainings and support
- **Sign on Letter - www.healthcareforfl.org**
 - Or text MEDEX4FL to 52886



www.floridadecideshealthcare.org

How you can help!

- Volunteer signature collection began in February!
- Donate and help identify other sources for fundraising! Visit the website.
- Volunteer to be a petition collector and/or hub organization.
- Share the campaign with your networks.



Sharing Health Care Stories



"I've worked my entire life. I've always had health insurance. I was a surgical nurse until I had to leave my job in 2018 when I was diagnosed with Stage 4 Lung Cancer. I went on short-term and long-term disability through my employer so that I could undergo chemotherapy and radiation. When you're working you never think about needing or using your short- or long-term disability. You don't realize that there are time constraints. It runs out."

Sue E., Citrus County



Orlando Sentinel

LETTERS TO THE EDITOR

**Ignoring Medicaid shows lack of respect
Letters**

Orlando Sentinel • Mar 29, 2021 at 3:39 pm

Share Your Story:
www.healthyfla.org/shareyourstory

Stay Plugged In With Florida Voices for Health



Connect with Florida Voices for Health to stay updated on major health care policy threats and opportunities. We host monthly coalition calls and share regular updates via email. Email us at info@healthyfla.org.

2024 SUMMIT FloridaVoices forHealth

Building Beyond Live Healthy



Sister Simone Campbell
Former Executive Director
NETWORK Lobby



Rep. LaVon Bracy Davis
Florida House of Representatives
40th District



Rep. Susan L. Valdés
Florida House of Representatives
64th District

With featured panelist Christine Sexton, Health Care Reporter for Florida Politics

MAY 23 & 24 | Space Coast Health Foundation
www.fvhsummit.org

Questions?





Thank You!

Visit:

www.healthyfla.org or

email us at

Scott@healthyfla.org

