

**STORAGE NAME:** h1413z.ep  
**DATE:** June 15, 1999

**\*\*FINAL ACTION\*\***  
**\*\*SEE FINAL ACTION STATUS SECTION\*\***

**HOUSE OF REPRESENTATIVES  
AS FURTHER REVISED BY THE COMMITTEE ON  
ENVIRONMENTAL PROTECTION  
FINAL ANALYSIS**

**BILL #:** HB 1413 (Substantial provisions were passed as HB 2231)  
**RELATING TO:** Community Environmental Health  
**SPONSOR(S):** Representative Bradley  
**COMPANION BILL(S):** SB 2352 (I) by Health, Aging and Long Term Care; and Senator Hargrett  
**ORIGINATING COMMITTEE(S)/COMMITTEE(S) OF REFERENCE:**  
(1) ENVIRONMENTAL PROTECTION YEAS 12 NAYS 0  
(2) COMMUNITY AFFAIRS YEAS 10 NAYS 0  
(3) HEALTH AND HUMAN SERVICES APPROPRIATIONS YEAS 8 NAYS 0  
(4)  
(5)

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**I. FINAL ACTION STATUS:**

On April 21, 1999, HB 1413 was placed on the House calendar where it remained until it died upon adjournment of regular session. The Senate companion, CS/SB 2352, died in the Committee on Fiscal Policy upon adjournment of regular session.

Substantial provisions of this bill (not including ss. 4 and 5) were amended onto HB 2231. On April 29, 1999, HB 2231 passed the Senate by a vote of YEAS 40 NAYS 0 and on April 30, 1999, it passed the House by a vote of YEAS 117 NAYS 0. On June 11, 1999, HB 2231 became law as Chapter Law #99-356.

**II. SUMMARY:**

This bill creates the "Florida Community Environmental Health Protection Act" to address environmental health risks associated with minority and low-income communities exposed to environmental contamination. This Act encompasses the existing Community Environmental Health Program in s. 381.1015, F.S. This bill establishes Community Environmental Health Program pilot projects which will seek to ensure equitable health care and disease prevention for persons who live in low-income communities exposed to environmental contamination. These pilot programs are to build upon the existing efforts which address contaminated sites such as the Brownfields Redevelopment Act, the Eastward Brownfields Showcase Partnership, the federal Superfund program and other state and federal programs.

The duties of the Department of Health, in regard to these pilot programs, are to be as follows: 1) facilitate the integration of the pilot programs with the ongoing departmental programs; 2) develop educational and outreach programs; 3) develop the capacity of the pilot projects to participate in certain research; 4) assist the pilot projects in obtaining certain low-cost health care services; 5) prepare a report to be submitted to the President of the Senate, Speaker of the House of Representatives and the Governor on the findings of the program and the projects; and 6) facilitate cooperation among communities, agencies and ongoing initiatives.

This bill does have a fiscal impact to the general revenue fund. This act is becomes effective on July 1, 1999.

*On March 30, 1999 the Committee on Environmental Protection adopted a strike everything amendment that traveled with the bill. The "strike everything" did the following:*

- Creates the Florida Community Health Protection Act.;
- Provides for Community Health Program pilot projects;
- Establishes pilot projects in designated counties;
- Designates certain duties to the Department of Health; and
- Requires a report be submitted to the President of the Senate, the Speaker of the House, and the Governor, on the findings, accomplishments, and recommendations of the pilot projects.

### III. SUBSTANTIVE ANALYSIS:

#### A. PRESENT SITUATION:

The environmental justice movement began in the early 1990's when activists contended that minorities and low-income communities suffered a disproportionate exposure to environmental health risks. In 1990, the Environmental Protection Agency ("EPA") formed an environmental work group which studied whether racial minorities and low-income communities bear a higher environmental health risk compared to that of the general population. In June 1992, the EPA issued its Workgroup Report, and reported, among other findings, that racial minority and low income populations experience a higher than average exposure to selected air pollutants, hazardous waste facilities, contaminated fish and agricultural pesticides in the workplace. Although, *exposure* does not always result in immediate health effects, it is a cause for concern.

As a result of its studies, the EPA recognized the need to increase awareness of environmental equity issues and highlighted concerns to state and local governments. Accordingly, states were encouraged to reform environmental policies and laws which would prevent the alleged environmental inequities in the future. Studies indicate that Texas, Arkansas and Louisiana were the first states to address this issue.

In response to this movement, in 1994, President Clinton issued Executive Order #12898 which required certain Federal agencies to demonstrate that their programs did not inflict a disproportionately high environmental health risk upon minority and low-income populations in the United States. The agencies recommended that the EPA should act to reduce high concentrations of risk to minority and low-income groups. Accordingly, the EPA is conducting several more studies and taking steps to prioritize environmental concerns based on geographic location.

In 1994, the Florida Legislature recognized this movement and addressed a public interest within its state to determine the following: 1) whether penalties assessed against polluters in white communities are disproportionately larger than penalties assessed against polluters in minority communities; 2) whether hazardous waste site evaluations are conducted more slowly and cleanup efforts take longer; and 3) whether waste containment is more frequent in minority communities. The Florida Legislature enacted Chapter 94-219, Laws of Florida, which created and defined the responsibilities of the Environmental Equity and Justice Commission (Commission). This Commission was designed to examine and determine the possible disproportionate concentration of environmental hazards in low-income and minority communities. The Commission conducted several studies to determine whether low-income communities are at a higher risk of environmental hazards than the general population. The Commission's final report, issued in October 1996, suggested, among other recommendations, that an effective means of communicating between the government agencies and these communities should be implemented; funds should be appropriated to implement studies and analyses regarding health effects from exposure to environmental pollution; and environmental protection programs should be adjusted to be more responsive to the affected citizens.

In response to the Commission's final report, in 1997, the Florida Legislature found that hazardous waste disproportionately impacts minority and low-income communities and enacted the Brownfields Redevelopment Act (Chapter 97-277, L.O.F.) which encourages redevelopment and reuse of the Brownfields sites. According to the Brownfields' 1998 annual report, Brownfields sites are "sites that are generally abandoned, idled or under-used industrial and commercial properties where expansion or redevelopment is complicated by actual or perceived environmental contamination." This annual report states that Florida has several Brownfields pilot programs which are administered and funded by the EPA, e.g., Palm Beach, Broward and Miami-Dade counties. Florida also has several state and local designated Brownfields areas such as Clearwater, Ocala and Miami. This Act provides a framework for redevelopment of these sites while also providing environmental cleanup and protection of the public health and environment. Redevelopment of such Brownfields sites may address the overlapping concerns regarding the health risks of minority and low-income communities which are part of or nearby the Brownfields sites.

In 1998, the Florida Legislature also created the Community Environmental Health Program in s. 381.1015, F.S. The purpose of this program is to ensure the availability of health care services to low-income communities which may be adversely affected by nearby contaminated sites, e.g., the state and federal Brownfields and Superfund sites. The Department of Health also established a Community Environmental Health Advisory Board to administer this program. The advisory board is currently identifying the needs, types of services and available resources of the communities.

**B. EFFECT OF PROPOSED CHANGES:**

This bill establishes seven pilot programs under the Department of Health to address the healthcare needs among certain low-income persons. This bill

- provides for Community Health Program pilot projects;
- establishes pilot projects in designated counties;
- provides certain duties for the Department of Health;
- requires a report; and
- provides an appropriation for fiscal year 1999-2000.

See the "Section by Section Analysis" herein for more detail.

**C. APPLICATION OF PRINCIPLES:**

1. Less Government:

a. Does the bill create, increase or reduce, either directly or indirectly:

(1) any authority to make rules or adjudicate disputes?

No.

(2) any new responsibilities, obligations or work for other governmental or private organizations or individuals?

Yes.

**Section 2 of the "strike everything" amendment** requires the establishment of certain community health pilot projects.

**Section 3 of the "strike everything" amendment** requires the Department of Health to assist the pilot projects in certain activities.

(3) any entitlement to a government service or benefit?

No.

b. If an agency or program is eliminated or reduced:

An agency or program is not eliminated or reduced.

(1) what responsibilities, costs and powers are passed on to another program, agency, level of government, or private entity?

N/A

(2) what is the cost of such responsibility at the new level/agency?

N/A

(3) how is the new agency accountable to the people governed?

N/A

2. Lower Taxes:

a. Does the bill increase anyone's taxes?

No.

b. Does the bill require or authorize an increase in any fees?

No.

c. Does the bill reduce total taxes, both rates and revenues?

No.

d. Does the bill reduce total fees, both rates and revenues?

No.

e. Does the bill authorize any fee or tax increase by any local government?

No.

3. Personal Responsibility:

a. Does the bill reduce or eliminate an entitlement to government services or subsidy?

No.

b. Do the beneficiaries of the legislation directly pay any portion of the cost of implementation and operation?

No.

4. Individual Freedom:

a. Does the bill increase the allowable options of individuals or private organizations/associations to conduct their own affairs?

No.

b. Does the bill prohibit, or create new government interference with, any presently lawful activity?

No.

5. Family Empowerment:

a. If the bill purports to provide services to families or children:

This bill does purport to provide services to families or children of low-income communities.

(1) Who evaluates the family's needs?

The various pilot projects will evaluate the family's needs. The Department of Health will also identify the health needs for low-income persons living in urban and rural communities.

(2) Who makes the decisions?

The various pilot projects will evaluate the family's needs. The Department of Health will also identify the health needs for low-income persons living in urban and rural communities.

(3) Are private alternatives permitted?

Yes.

(4) Are families required to participate in a program?

No.

(5) Are families penalized for not participating in a program?

No.

b. Does the bill directly affect the legal rights and obligations between family members?

No.

c. If the bill creates or changes a program providing services to families or children, in which of the following does the bill vest control of the program, either through direct participation or appointment authority:

This bill does create a pilot program providing services to families or children.

(1) parents and guardians?

Yes.

(2) service providers?

Yes.

(3) government employees/agencies?

Yes.

D. STATUTE(S) AFFECTED:

Creates ss. 381.100; 381.102 and 381.103, F.S.

E. SECTION-BY-SECTION ANALYSIS:

***The bill as introduced:***

**Section 1:** Creates s. 381.100, F.S., which enacts the Florida Community Environmental Health Protection Act.

**Section 2:** Creates s. 381.102, F.S., which establishes seven pilot projects to promote disease prevention and health care among low-income persons living near environmentally contaminated areas.

**Section 3:** Creates s. 381.103, F.S., which sets forth the duties of the Department of Health in regard to the pilot programs, and provides reporting requirements.

**Section 4:** Provides a \$1.825 million appropriation from the General Revenue Fund per year for the fiscal years 1999-2000 through 2002-2003 to support the Community Environmental Health Program pilot projects.

***On March 30, 1999, the Committee on Environmental Protection adopted a strike everything amendment that is traveling with the bill. The "strike everything" amendment is, as follows:***

**Section 1:** Creates s. 381.100, F.S., which enacts the Florida Community Health Protection Act.

**Section 2:** Creates s. 381.102, F.S., which establishes eight pilot projects to promote disease prevention and health promotion among low-income persons living in urban and rural communities.

**Section 3:** Creates s. 381.103, F.S., which sets forth the duties of the Department of Health in regard to the pilot programs and provides reporting requirements.

**Section 4:** Provides a \$1.825 million appropriation from the General Revenue Fund for the fiscal years 1999-2000 to the Health Services Administrative Trust Fund in the Department of Health for the Community Health pilot projects. From the appropriation, the following projects will receive \$380,000 each:

- Greenwood Community Health Center in Clearwater, Pinellas County;
- Palafox Redevelopment Area in Escambia County;
- Challenge 2001 Area in the City of St. Petersburg; and
- City of Riviera Beach in Palm Beach County.

From the appropriation, the Urban League of Pinellas County will receive \$100,000. From the appropriation, the Department of Health will receive \$205,000 to assist in the implementation of the pilot projects.

Funding for the pilot projects must be used for the delivery of health services, including the following:

- Screening;
- Diagnosis of disease;
- Treatment or routing for treatment of disease;
- Preventative annual physical examinations;
- Consultation on measures to prevent diseases;
- Construction costs associated with the delivery of health services; or
- Operation costs associated with the delivery of health services.

Funding for the Department of Health must be used for the following:

- Identification of health needs for low-income persons living in urban and rural communities;
- Resources for accessing the delivery of health services through Medicare, Medicaid, and third-party coverage, among other sources;
- Resources for ensuring quality assurance and quality control for the implementation of the Community Health Pilot Projects; and
- Preparing a report to be submitted to the President of the Senate, the Speaker of the House of Representatives, and the Governor, on the findings, accomplishments, and recommendations of the Community Health Care Pilot Projects; and
- To administer the responsibilities in accordance with general law.

#### IV. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT:

##### A. FISCAL IMPACT ON STATE AGENCIES/STATE FUNDS:

1. Non-recurring Effects:

**The “strike everything” amendment:** A fiscal appropriation of \$1.825 million for fiscal year 1999-2000.

2. Recurring Effects:

None.

3. Long Run Effects Other Than Normal Growth:

Indeterminate.

4. Total Revenues and Expenditures:

**The “strike everything” amendment:** A fiscal appropriation of \$1.825 million for fiscal year 1999-2000.

B. FISCAL IMPACT ON LOCAL GOVERNMENTS AS A WHOLE:

1. Non-recurring Effects:

None.

2. Recurring Effects:

Indeterminate.

3. Long Run Effects Other Than Normal Growth:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

1. Direct Private Sector Costs:

None.

2. Direct Private Sector Benefits:

**The bill and the “strike everything” amendment:** These programs may save the private sector certain health care costs.

3. Effects on Competition, Private Enterprise and Employment Markets:

None.

D. FISCAL COMMENTS:

None.

V. CONSEQUENCES OF ARTICLE VII, SECTION 18 OF THE FLORIDA CONSTITUTION:

A. APPLICABILITY OF THE MANDATES PROVISION:

Neither this bill nor the “strike everything” amendment require counties or municipalities to spend funds or to take an action requiring the expenditure of funds.

**B. REDUCTION OF REVENUE RAISING AUTHORITY:**

Neither the bill nor the "strike everything" amendment reduces the authority that municipalities or counties have to raise revenues in the aggregate.

**C. REDUCTION OF STATE TAX SHARED WITH COUNTIES AND MUNICIPALITIES:**

Neither the bill nor the "strike everything" amendment reduces the percentage of a state tax shared with counties or municipalities.

**VI. COMMENTS:**

**Committee on Environmental Protection:** The Committee on Environmental Protection, makes the following comments:

- It appears that the relationships between the Department of Health, its Community Environmental Health Program and the pilot projects are undefined. It is indeterminable which entity will administer the pilot programs at the local level.
- It is uncertain when the department's report is to be submitted to the President of the Senate, the Speaker of the House of Representatives, and the Governor, regarding the findings, accomplishments, and recommendations of the program and its pilot projects.
- It is not certain to whom the fiscal appropriations are to be distributed.
- The term "department" is not defined in Section 3.

**VII. AMENDMENTS OR COMMITTEE SUBSTITUTE CHANGES:**

**Committee on Environmental Protection:** On March 30, 1999 the Committee on Environmental Protection adopted a strike everything amendment that substantially rewrote the bill. Analysis of the "strike everything" is contained in SECTION E of this analysis.

On April 20, 1999, the Health and Human Services Appropriations Committee adopted two amendments to the amendment as follows:

Amendment #1a added the Mills Health Center in the City of Ft. Lauderdale and changed the amount of funding going to each center to \$304,000 instead of \$380,000.

Amendment #2 was an amendment adding the Mills Health Center in the City of Ft. Lauderdale to the list of pilot projects created.

**VIII. SIGNATURES:**

**COMMITTEE ON ENVIRONMENTAL PROTECTION:**

Prepared by:

Christine Hoke

Staff Director:

Wayne S. Kiger

**AS REVISED BY THE COMMITTEE ON COMMUNITY AFFAIRS:**

Prepared by:

Tonya Sue Chavis, Esq.

Staff Director:

Joan Highsmith-Smith



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**DATE:** June 15, 1999  
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AS FURTHER REVISED BY THE COMMITTEE ON HEALTH AND HUMAN SERVICES  
APPROPRIATIONS:

Prepared by:

Staff Director:

Lynn Dixon

Lynn Dixon

**FINAL ANALYSIS PREPARED BY THE COMMITTEE ON ENVIRONMENTAL PROTECTION:**

Prepared by:

Staff Director:

Christine Hoke

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