

SENATE STAFF ANALYSIS AND ECONOMIC IMPACT STATEMENT

(This document is based on the provisions contained in the legislation as of the latest date listed below.)

BILL: SB 1422

SPONSOR: Health, Aging, and Long-Term Care Committee and Senator Wilson

SUBJECT: Human Immunodeficiency Virus

DATE: February 5, 2004 REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	<u>Harkey</u>	<u>Wilson</u>	<u>HC</u>	<u>Favorable/CS</u>
2.	_____	_____	<u>CJ</u>	_____
3.	_____	_____	<u>AHS</u>	_____
4.	_____	_____	<u>AP</u>	_____
5.	_____	_____	_____	_____
6.	_____	_____	_____	_____

I. Summary:

The bill amends provisions relating to the statewide human immunodeficiency virus (HIV) and acquired immune deficiency syndrome (AIDS) prevention campaign targeting minority communities to require that the campaign be expanded to include prevention information specifically targeted to Florida’s Hispanic and Haitian communities. The bill increases the number of state-funded HIV and AIDS regional coordinators from four to eight. The Department of Health must provide HIV/AIDS outreach programs in Florida’s minority communities to identify persons infected with HIV/AIDS and these programs must address real and perceived barriers to HIV testing among Florida’s minority populations. The program must ensure that HIV-positive persons are linked with prevention, care, and support services. The program must be provided in a culturally sensitive manner to promote prevention among persons who are HIV positive and foster the acceptance and delivery of care and support services in high-risk communities.

The Department of Health must expand testing programs for HIV, sexually transmissible diseases, and hepatitis in local county jails and establish programs for HIV-positive inmates to ensure coordination and linkage to treatment and secondary prevention messages upon their release. To promote HIV testing among minority persons who are at risk of infection, the department must expand its HIV counseling, testing, and referral services.

The bill requires HIV and AIDS prevention programs implemented by the Department of Health to be consistent with the findings and recommendations of the Minority HIV and AIDS Task Force, the (Florida) HIV/AIDS Comprehensive Prevention Plan, and the recommendations of the Centers for Disease Control and Prevention.

This bill amends s. 381.0046, F.S.

II. Present Situation:

AIDS is the acronym for acquired immune deficiency syndrome. It is a fatal disease caused by a virus, a tiny organism similar to the organisms that cause colds and flu. The virus that causes AIDS is the human immunodeficiency virus, or HIV. HIV infection causes people to get AIDS by damaging their immune systems. The immune system is what defends the body against the many different organisms that can enter the body and cause sickness. Without the ability to resist disease, people with AIDS fall ill easily, get sick often, and have great difficulty recovering. People do not die from HIV infection directly. Rather, they die from the “opportunistic” infections and diseases they get because their immune system is not working properly.

The HIV virus may be passed from one person to another when infected blood, semen, or vaginal secretions come in contact with an uninfected person’s broken skin or mucous membranes. In addition, an infected pregnant woman can pass HIV to her baby during pregnancy or delivery, as well as through breast-feeding.

In 2002, Florida ranked second among states in the number of reported AIDS cases. Florida ranked second among states that report HIV cases in 2002. Florida reported a higher percentage of AIDS cases among blacks (53 percent) compared with the United States (50 percent). The state also reported a higher percentage of HIV cases among blacks (54 percent) compared with the United States (48 percent). Blacks comprise only 13 percent of Florida’s adult population, but 55 percent of the AIDS cases and 53 percent of the HIV cases reported in 2002. Hispanics comprise 16 percent of Florida’s adult population, 16 percent of the AIDS cases and 17 percent of the HIV cases.¹

In 1999, the Legislature passed s. 381.0046, F.S., to address HIV/AIDS in Florida’s minority communities. Under s. 381.0046, F.S., the Department of Health was required to develop and implement a statewide HIV and AIDS prevention media campaign directed towards minorities. Four regional minority coordinator positions and one statewide coordinator position were established in the department to facilitate statewide efforts to implement and coordinate HIV and AIDS prevention and treatment programs targeting the state’s minority communities. Today, there are seven regional minority HIV/AIDS coordinators to carry out these tasks; four positions are funded by the General Revenue Fund and three positions are funded by federal grants.

Section 381.0046, F.S., also created the Minority HIV and AIDS Task Force to provide recommendations to the Governor, the Legislature and the Department of Health on strategies to strengthen HIV/AIDS prevention, early intervention and treatment efforts in Florida’s minority communities. The Department of Health was directed to plan and conduct a statewide Black Leadership Conference with assistance from the task force, which was held in January, 2000. The task force held public forums around the state to elicit ideas on ways to improve HIV/AIDS prevention, treatment and care. The task force recommended the following strategies:

- Specific strategies for reducing the risk of HIV and AIDS in the state’s minority population.

¹ Florida HIV/AIDS Annual Report/Epidemiologic Profile 2002, Bureau of HIV/AIDS, Florida Department of Health.

- A plan for establishing mentor programs and exchanging information and ideas among minority, community-based organizations that provide HIV and AIDS prevention services.
- The needs of prevention and treatment programs within communities and the resources that are available within minority communities.
- Specific strategies for ensuring that minority persons who are at risk of HIV seek testing.
- Specific strategies for ensuring that persons who test positive for HIV or AIDS are provided with access to treatment and secondary prevention services.
- Specific strategies to help reduce or eliminate high-risk behaviors in persons who test negative but continue to practice high-risk behaviors.
- A plan to evaluate the implementation of the recommendations of the task force.

III. Effect of Proposed Changes:

This bill amends s. 381.0046, F.S., to expand the statewide HIV and AIDS prevention campaign to include prevention information specifically targeted to Florida's Hispanic and Haitian communities. The bill increases the number of state-funded HIV and AIDS regional coordinators from four to eight.

The Department of Health must provide a program to ensure that HIV-positive persons are linked with prevention, care, and support services. The program must be provided in a culturally sensitive manner to promote prevention among persons who are HIV positive and increase the acceptance and delivery of care and support services in high-risk communities. The department must expand testing programs for HIV, sexually transmissible diseases, and hepatitis in local county jails and establish programs for HIV-positive inmates to ensure coordination and linkage to treatment and secondary prevention messages upon their release. To promote HIV testing among minority persons who are at risk of infection, the department must expand its HIV counseling, testing, and referral services. These minority programs must be consistent with the findings and recommendations of the Minority HIV and AIDS Task Force, the HIV/AIDS Comprehensive Prevention Plan, and the recommendations of the Centers for Disease Control and Prevention.

The bill deletes an obsolete requirement that DOH plan and conduct a statewide Black Leadership conference on HIV and AIDS by January 2000.

The bill will take effect upon becoming a law.

IV. Constitutional Issues:

A. Municipality/County Mandates Restrictions:

The provisions of this bill have no impact on municipalities and the counties under the requirements of Article VII, Section 18 of the Florida Constitution.

B. Public Records/Open Meetings Issues:

The provisions of this bill have no impact on public records or open meetings issues under the requirements of Art. I, s. 24(a) and (b) of the Florida Constitution.

C. Trust Funds Restrictions:

The provisions of this bill have no impact on the trust fund restrictions under the requirements of Article III, Subsection 19(f) of the Florida Constitution.

V. Economic Impact and Fiscal Note:**A. Tax/Fee Issues:**

None.

B. Private Sector Impact:

The bill's requirements for the Department of Health's HIV and AIDS prevention efforts in minority communities may reduce the incidence of HIV/AIDS, and thus the cost associated with the disease, in these communities in Florida.

C. Government Sector Impact:

The Department of Health will incur expenses to implement the bill, including hiring of four regional minority coordinators for the HIV/AIDS program and costs associated with the media prevention campaign, prevention outreach, linkage projects, and expanded duties for counseling and testing. The department estimates such costs to equal \$4,998,987 for fiscal year 2004-2005 and \$5,013,662 for fiscal year 2005-2006.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Amendments:

None.