



## FULL ANALYSIS

### I. SUBSTANTIVE ANALYSIS

#### A. HOUSE PRINCIPLES ANALYSIS:

Limited government - The bill requires the Agency for Health Care Administration (agency) to establish a two-year pilot program to offer health care services during the weekend and after regular business hours during the week. The bill directs the agency to develop procedures for operating the pilot program.

Empower families - The bill provides greater access to health care services at Primary Care Access Network (PCAN) clinics in Orlando and Pasco counties by offering services during the weekday after regular business hours and on the weekend.

#### B. EFFECT OF PROPOSED CHANGES:

House Bill 977 establishes a two-year pilot program to offer health care services during the weekend and after regular business hours during the week at existing Primary Care Access Networks (PCAN) in Orlando and Pasco counties. The effect of extending clinic hours of operation should provide uninsured individuals and families with greater access to health care services and delivery of care.

#### **Present Situation**

Primary Care Access Networks (PCAN) are currently established in Orlando and Pasco counties and provide access to health care services to persons who are not eligible for Medicaid coverage and who do not have other health care insurance. These networks represent a collaborative approach to health care delivery that includes county health departments, primary health care centers, community agencies, hospitals and state and local social services. The overall mission of PCANs is to improve the access, quality and coordination of health care services to the under insured and uninsured populations.

One of the primary missions of PCANs is to establish a "Medical Home" for individuals and families. Having a "Medical Home" means an individual or family has a doctor, or belongs to a health center. According to the Orange County PCAN informational website, "Medical Homes" help individuals and families avoid emergency room use by more regularly seeing their doctor when they are sick, even if they do not have health insurance. PCAN offers guidance regarding a health care center services, including immunizations and dental care for children, health care center locations, hours of operation and important emergency telephone numbers.<sup>1</sup>

#### C. SECTION DIRECTORY:

Section 1. Creates an unnumbered section of Florida Statutes; provides legislative intent regarding Primary Care Access Networks; creates a pilot program; provides reporting requirements.

Section 2. Provides an appropriation.

Section 3. Provides an effective date of July 1, 2007.

### II. FISCAL ANALYSIS & ECONOMIC IMPACT STATEMENT

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<sup>1</sup> [www.PCANOrangeCounty.com](http://www.PCANOrangeCounty.com)

A. FISCAL IMPACT ON STATE GOVERNMENT:

1. Revenues:

None.

2. Expenditures:

Recurring

1 FTE

Salaries/Benefits

\$55,838

\$55,838

Expense

11,200

11,200

Human Resources Services

401

401

Provider Care Access Networks

2,229,441

2,232,441

Subtotal Recurring

2,297,000

2,300,000

Nonrecurring

Expense

3,000

Subtotal Nonrecurring

3,000

Total Expenditures

2,300,000

2,300,000

General Revenue Fund

B. FISCAL IMPACT ON LOCAL GOVERNMENTS:

1. Revenues:

None.

2. Expenditures:

None.

C. DIRECT ECONOMIC IMPACT ON PRIVATE SECTOR:

None.

D. FISCAL COMMENTS:

According to the Agency for Health Care Administration, the bill would require additional staff to develop procedures for the pilot, to establish the data and reporting system, and to prepare the annual report.

**III. COMMENTS**

A. CONSTITUTIONAL ISSUES:

1. Applicability of Municipality/County Mandates Provision:

This bill does not require counties or municipalities to spend funds or take action requiring the expenditure of funds. This bill does not reduce the percentage of a state tax shared with counties or municipalities. This bill does not reduce the authority that municipalities have to raise revenues.

2. Other:

None.

B. RULE-MAKING AUTHORITY:

None.

C. DRAFTING ISSUES OR OTHER COMMENTS:

None.

D. STATEMENT OF THE SPONSOR

No statement provided.

**IV. AMENDMENTS/COUNCIL SUBSTITUTE CHANGES**

On March 20, 2007, the Health Innovation Committee adopted one amendment.

The amendment:

- Revised the effective date to include specific fiscal appropriations.

The bill was reported favorably with one amendment.