

The Florida Senate
BILL ANALYSIS AND FISCAL IMPACT STATEMENT

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

Prepared By: The Professional Staff of the Health Policy Committee

BILL: PCS/SB 896

INTRODUCER: Health Policy Committee and Senator Dawson

SUBJECT: Rheumatoid Arthritis/Department of Health

DATE: April 13, 2008

REVISED: _____

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Garner	Wilson	HP	Pre-meeting
2.			GO	
3.			HA	
4.			RC	
5.				
6.				

I. Summary:

The proposed committee substitute modifies the “Arthritis Prevention and Education Act” established s. 385.210, F.S. The bill revises the legislative findings to update certain statistics related to the prevalence and costs associated with arthritis. The bill requires the Florida Department of Health (DOH) to coordinate research on arthritis with the activities of the Scripps Research Institute. The DOH must also conduct a needs assessment, which shall be prioritized on determining the prevalence of rheumatoid arthritis, especially within women in Florida. The bill requires the DOH to include representatives of the Scripps Research Institute in the statewide partnership on arthritis. The bill requires the State Surgeon General to coordinate through the Office of the Governor to obtain funding in conjunction with appropriations to the Scripps Research Institute.

This bill amends s. 385.210, F.S.

II. Present Situation:

Rheumatoid Arthritis: Definition and Prevalence

The word arthritis means joint inflammation. In Florida, the prevalence of doctor-diagnosed arthritis is estimated to be 27.5 percent, and 18 percent of the adult population may have arthritis.¹ The term arthritis is used to describe more than 100 rheumatic diseases and conditions that affect joints, the tissues that surround the joint, and other connective tissue. The pattern, severity, and location of symptoms can vary depending on the specific form of the disease.

¹ Department of Health. Found at: <http://www.doh.state.fl.us/Family/arthritis/overview.html> (last visited on April 13, 2008)

Typically, rheumatic conditions are characterized by pain and stiffness in and around one or more joints. The symptoms can develop gradually or suddenly.

One form of arthritis is rheumatoid arthritis. Rheumatoid arthritis is an autoimmune condition. It is an inflammatory type of arthritis that attacks the joints in the body, causing swelling which results in aching and throbbing joints and even deformity of the limbs.

Rheumatoid arthritis tends to strike people between the ages of 40 and 60, and women are two to three times more likely than men to suffer from the effects of the disease. As a result, women account for 75 percent of the estimated 20,000 hospitalizations related to rheumatoid arthritis each year.

Rheumatoid arthritis affects every aspect of daily life from dressing in the morning, to work productivity, to preventing exercise, to sleeping well at night. People with this condition have been reported to experience more losses in function than people without arthritis in every domain of human activity including work, leisure and social relations.

People with rheumatoid arthritis are 40 percent more likely to report fair or poor general health, 30 percent more likely to need help with personal care, and twice as likely to have a health-related activity limitation compared with those without arthritis. According to the federal Centers for Disease Control and Prevention, over 36 percent of Florida's working population reports that they have some type of arthritis-related work limitation, ranking Florida 14th in the nation in terms of work limitations.

Rheumatoid Arthritis: Symptoms

The symptoms of rheumatoid arthritis come and go, depending on the degree of tissue inflammation. When the disease is active, symptoms can include fatigue, lack of appetite, low grade fever, muscle and joint aches, and stiffness. Joints frequently become red, swollen, painful, and tender. Since rheumatoid arthritis is a systemic disease, its inflammation can affect other organs and areas of the body other than the joints, as well. Inflammation of the glands of the eyes and mouth can cause dryness of these areas and inflammation of the lung lining (pleuritis) causes chest pain with deep breathing or coughing.

The chronic and painful nature of the disease results in most rheumatoid arthritis patients experiencing some degree of depression, anxiety, and feelings of helplessness. People with this condition often feel alone in their suffering and some people with the condition find that the legitimacy of their pain and condition are questioned, even by family and friends.

Rheumatoid Arthritis: Treatments

There is no cure for rheumatoid arthritis, but there are treatments. The goal of treatment aims to achieve the lowest possible level of arthritis disease activity and remission if possible, the minimization of joint damage, and enhancing physical function and quality of life. The optimal treatment of rheumatoid arthritis requires a comprehensive program that combines medical, social, and emotional support for the patient.

Treatment strategies are all aimed at reducing pain and discomfort, preventing deformities and loss of joint function, and maintaining a productive and active life. Inflammation must be suppressed and mechanical and structural abnormalities corrected or compensated by assistive devices. Treatment options include medications, reduction of joint stress, physical and occupational therapy, and surgical intervention.

However, many of the treatments have serious side effects and each person reacts differently to these treatments, so many strategies must be tried before some individuals find relief. Some of the side effects include gastrointestinal disturbances, weight gain, increased blood pressure, increased blood sugar, increased risk of cataracts, and avascular necrosis of bones.

Arthritis Prevention and Education Program

Arthritis prevention and education began in the DOH through a 4-year cooperative agreement with the Centers for Disease Control and Prevention (CDC) in September 1999.² Florida is one of 36 states in the nation funded by the CDC to implement an arthritis program. This program marks the first time in history that the DOH has dedicated a program specifically towards arthritis, the leading cause of disability in the nation.³ Services provided through the department's arthritis program include:

- Collection of data through the Behavioral Risk Factor Surveillance System (BRFSS), county health departments and Arthritis Foundation branch offices to determine prevalence, occurrence, impairment, activity limitations, and self-management behaviors.
- Technical assistance to all county health departments on arthritis issues.
- Development of a statewide arthritis partnership to develop and implement efforts to increase mobility and self-management behaviors; improve quality of life; decrease pain and disability; and, reduce occurrence, impairment, limitations, and restrictions due to arthritis and other rheumatic conditions.
- Strategic planning to develop a statewide strategic/action plan that includes goals, strategies, and activities to reduce the burden of arthritis on Floridians.
- Implementation of a CDC campaign – “Physical Activity-The Arthritis Pain Reliever.” The campaign includes radio and print ads along with brochures and posters, and is designed to target 45-64 year olds, Caucasian and African Americans, with a high school education or less and a household annual income of \$35,000 or less.
- Implementation of evidence-based arthritis self-management interventions through several county health departments. The program works closely with the Arthritis Foundation, Florida Chapter to implement these interventions.
- Distribution of educational/promotional materials to county health departments and various partners throughout Florida.
- Ongoing evaluation of the program's effectiveness and quality.

² S. 385.210, F.S.

³ Department of Health. Found at: <http://www.doh.state.fl.us/Family/arthritis/overview.html> (last visited on April 13, 2008)

III. Effect of Proposed Changes:

The bill amends s. 385.210, F.S., cited as the “Arthritis Prevention and Education Act.” The bill:

- Revises the legislative findings to update certain statistics related to the prevalence and costs associated with arthritis;
- Requires the DOH to coordinate research on arthritis with the activities of the Scripps Research Institute;
- Requires the DOH to conduct a needs assessment, which shall be prioritized on determining the prevalence of rheumatoid arthritis, especially within women in Florida;
- Requires the DOH to include representatives of the Scripps Research Institute in the statewide partnership on arthritis; and,
- Requires the State Surgeon General to coordinate through the Office of the Governor to obtain funding in conjunction with appropriations to the Scripps Research Institute’s funding pursuant to s. 288.955, F.S.

The bill takes effect on July 1, 2008.

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. Fiscal Impact Statement:**A. Tax/Fee Issues:**

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

None.

VI. Technical Deficiencies:

None.

VII. Related Issues:

None.

VIII. Additional Information:

A. Committee Substitute – Statement of Substantial Changes:

(Summarizing differences between the Committee Substitute and the prior version of the bill.)

None.

B. Amendments:

None.

This Senate Bill Analysis does not reflect the intent or official position of the bill's introducer or the Florida Senate.
