

OUR COMMUNITY PARTNERS

- RYAN WHITE CARE PROGRAM
- HEALTHY START OF NORTH CENTRAL FLORIDA
- CENTRAL HEALTHY START
- RURAL HEALTH PARTNERSHIP OF NORTH CENTRAL FLORIDA



A Message

EXECUTIVE DIRECTOR

Steven Oliva



WellFlorida has been renting facilities since its origins. But that is about to change. On June 22, WellFlorida was presented a check by the USDA Rural Development for a \$1,477,000 loan for the purchase of a new office in the Ft. Clarke Business Center in Gainesville. This purchase helps to advance our financial sustainability and long-term plans for expanding and developing programs that build healthy communities throughout Florida.

“WellFlorida Council’s efforts are evident throughout the region,” said Becky Dobbin, representing Sen. Rod Smith at the USDA check presentation ceremony.

We concur. In partnership with others, WellFlorida has developed programs serving at-risk populations, helped to create Community Health Centers, and obtained large grants for community-based programs throughout the region.

We invite you to partner with us in future endeavors. And look for us in our new home come August.

Understanding Florida’s Certificate of Need (CON) Program



The Certificate of Need (CON) process, a health facility planning and regulatory tool, originated in 1964 in Rochester, New York, where a community health planning council composed of consumers, insurers and healthcare providers was established to study the need for hospital beds. CON is a highly detailed and often complex process. Earlier this year, the Health Council of East Central Florida, one of WellFlorida's 10 sister local health councils, took much of the mystery out of this process by publishing an exceptional issue brief

entitled *Understanding Florida's Certificate of Need Program*. Excerpts of this article are reprinted here so that we can share the important information throughout North Central Florida.

Rochester's efforts to monitor the number of healthcare facilities and the need for hospital beds resulted in New York's passage of the nation's first CON law in 1966. In 1972, the federal government amended Section 1122 of the Social Security Act to require all states to review healthcare capital expenditures in excess of \$100,000.

continued on next page

Arguments For CON Regulation

CON regulation is one of the few practical tools available to policymakers to influence quality, cost and access concerns.

CON regulation helps ensure reasonable geographic distribution of services and facilities.

CON regulation helps achieve better pertinent outcomes by ensuring high program volume.

CON regulation is useful in encouraging competition.

Arguments Against CON Regulation

CON programs are not effective in meeting goals relating to cost containment and access to care.

CON hinders diffusion of new and more effective technologies and models of care.

CON promotes local healthcare monopolies and oligopolies, stifling innovation and competition.

CON process is costly and time consuming, discouraging investment in healthcare.

For more information on Florida's CON program, please visit the state web page at: http://ahca.myflorida.com/MCHQ/CON_FA/

*This article was excerpted from a policy brief, **Understanding Florida's Certificate of Need (CON) Program**, commissioned by the Health Council of East Central Florida and made possible through the support of the Winter Park Health Foundation. The author is The Lewin Group, which was supplied with Health Council research.*

Florida's CON Program—an overview, cont.

This provision served as the beginning of a national Certificate of Need law. Federal support for regional health planning under the auspices of CON laws was further strengthened in 1974 with Congressional passage of the National Health Planning and Resources Development Act. This made state CON programs mandatory and included guidelines for CON reviews. In the years following, every state adopted CON regulations.

The momentum for a national approach faded in 1982, when the inability of national CON laws to reduce healthcare costs was acknowledged. Since then, only 36 states, including Florida, retained their CON programs after a mandatory repeal of the health planning law by the federal government.

Florida's CON program

In 1973, Florida enacted the CON program as a policy-driven response to the increasing costs of state and federal health programs. The primary reason for establishing the CON program was to promote containment by controlling unnecessary duplication of healthcare services and facilities. At the time the program was established, there were concerns that the growing supply of inpatient beds and other healthcare services would exceed demand in many local markets, resulting in excess capacity and increased healthcare costs.

Additionally, the CON program is designed to ensure that all Floridians, regardless of insurance or socio-economic status, have access to quality healthcare services and facilities. In the CON review process, preference is given to providers that indicate that they will serve clients who have certain

disabling conditions or receive Medicaid coverage.

To achieve these health policy goals, Florida's CON regulatory review process seeks to establish an appropriate capacity and mix of services for most provider types through a comparative review process based on state planning standards.

To determine the appropriate balance between healthcare capacity and community need, the Agency for Health Care Administration is required under Florida Statutes, Section 408.034(3) to develop and project need for CON regulated health facilities and services that at a minimum consider:

- The demographic characteristics of the population
- The health status of the population
- Service use patterns, standards and trends
- Geographic accessibility to needed services
- Market economics

In addition to analyzing the healthcare needs of the population to be served, the CON regulatory review process also assesses the capabilities of project applicants, including their relevant strengths and weaknesses, alternatives to proposed projects and their anticipated healthcare cost impact.

The CON program has undergone a number of reforms brought about by developments in the local and national healthcare markets. Since the mid-1990s, the growth of managed care in Florida and the federal budget cuts brought about by the Balanced Budget Act of 1997 have resulted in changes in reimbursement policy. The most significant reforms to the CON laws

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Rural Health Partnership of North Central Florida

Training Gilchrist and Dixie County Emergency Medical Services agencies received two days of mock emergency training in May. This hands-on training was provided by the Emergency Medicine Learning and Resource Center's Mobile Simulation Lab. The Lab is a state-of-the-art, 45-foot motor coach with emergency room and ambulance settings and lifelike manikins. The training is designed to provide realistic emergency experiences to EMTs, paramedics, emergency physicians and nurses, and disaster preparedness and response professionals throughout Florida. Funding for the training was made available through the Rural Health Partnership of North Central Florida (RHP).

AEDs The RHP recently received 35 Automated External Defibrillators (AEDs) complete with ready kits, pads, and cases. This was made possible through a grant to the State Bureau of Emergency Medical Services. The devices were distributed among the Bradford, Dixie, Gilchrist, Hamilton, Levy, Suwannee, and Union County EMS agencies.

AEDs are portable electronic devices used to

treat cardiac arrest. Operation of AEDs does not require training; a voice prompt walks the user through each step.

AEDs are often placed in high-population locations such as schools, airports, stadiums and shopping malls. In our rural counties, they will likely be placed in patrol cars and emergency vehicles, enabling first responders to administer the electrical therapy.



Calendar

July 2006

The 2006 National Conference on Latinos and AIDS—A National Forum on HIV/AIDS for Health Professionals Who Provide Care for Latinos
July 24-25, Miami, FL
Contact: Minority Healthcare Communications at www.minority-healthcare.com

August 2006

Medical Spanish Course
This 20-hour course is designed to teach health professionals easy and effective Spanish phrases to improve communication with clients.
August 10, Ocala, FL
Contact: Rachel Chase, Suwannee River Area Health Education Center at 386-462-1551

Domestic Violence Update
This event is designed to teach the process and intervention used with a child suspected of being abused.
August 23, Ocala, FL
Contact: Rachel Chase, Suwannee River Area Health Education Center at 386-462-1551

September 2006

Center for Disease Control and Prevention's National Health Promotion Conference
September 12-14, Atlanta, GA
Contact: <http://www.cdc.gov/cochp/conference/>

Visit our website:
www.wellflorida.org

Working Together to Build Healthy Communities

A check presentation ceremony for WellFlorida Council brought together community leaders and local, state and federal elected officials at the Ft. Clarke Business Center in Gainesville on Thursday, June 22. WellFlorida Council was presented a check by the United States Department of Agriculture Rural Development for a \$1,477,000 loan for the purchase of a new office for the organization.

Speakers included Alachua County Commissioner Cynthia Chestnut; state representatives Ed Jennings, Jr. and Larry Cretul; representatives for Sen. Rod Smith, US House Rep. Cliff Stearns and US Sen. Bill Nelson; and Charles W. Clemons, Sr., State Director for USDA Rural Development.

Mary Johnson, representing U.S. House Rep. Cliff Stearns, referred to WellFlorida as “a boots on the ground organization” for its involvement in the health needs of local communities. “You’ve shown vision and wisdom in the choice of building and in the plans you have to continue your work. Federal money is not easy to come by. You are one of the organizations that are worthy of our tax dollars’ support,” Johnson said.





Understanding Florida's CON Program, cont.

took place in 2004 when changes to the laws included provisions preventing the licensure of niche and specialty hospitals. It also eliminated CON requirements for interventional cardiology and open heart surgery, burn units, additional acute care, mental health and neonatal intensive care beds at existing hospitals.

There remain many policy issues to address with Florida's CON program as well as practical concerns regarding the current review process. These issues continue to be raised by stakeholders both in favor and opposed to CON regulations. Oftentimes, one of the most contentious issues is the CON application review timeline. The timeline, which includes public hearings and appeals, can be quite lengthy and costly for providers.

As a follow-up to *Understanding Florida's Certificate of Need Program*, the Health Council of East Central Florida, the Health Planning Council of Northeast Florida and WellFlorida Council are working together on an issue brief that focuses on the hearing and appeals processes. This follow-up will help clarify the hearing and appeal process and provide case studies on recent CON hearing and appeal activities in the areas served by the three councils.

If you would like a full copy of *Understanding Florida's Certificate of Need Program*, it is available at the Health Council of East Central Florida's web site at www.hcecf.org/hcdata.html. For more information on Florida's CON program, please visit the Agency for Health Care Administration at http://ahca.myflorida.com/MCHQ/CON_FA.