AARP Plan Drops Perks, Doctors

Roz Vellines' Medicare Advantage plan won't pay for her Silver Sneakers exercise classes next year. UnitedHealthcare's AARP Medicare Advantage plan is dropping thousands of physicians from its network, as well as extras like fitness classes through Silver Sneakers, the Tampa Bay Times reports (paywall alert). In the words of one beneficiary whose plan will soon stop paying for aqua aerobics classes at the YMCA, the change in benefits is "pretty dumb." In Tampa Bay, where the plan has about 50,000 enrollees, Moffitt Cancer Center and St. Luke's Cataract and Laser Institute will be out of the network in 2014. The insurer blames the changes on the federal government, which is trying to bring payments for Medicare Advantage plans more in line with original Medicare after two decades of being higher. And in 2014, insurers will be required to spend more on patient care and less on marketing and administrative costs. The feds are also offering bonuses for physicians who adhere to specific treatment guidelines. The CEO of UnitedHealthcare, Jack Larsen, told the Times that smaller networks are easier to monitor -- and shrinking networks aren't limited to his company. Larsen said Medicare Advantage plans are underfunded. But UnitedHealthcare, the largest health insurer in the nation, reported $2 billion in profit in the third quarter of this year. It's currently open enrollment season for Medicare, and beneficiaries have until Dec. 7 to switch plans if they want. As the Times reports, many AARP Medicare Advantage members are expected to find a new plan. (Health News Florida, 11/4/13)


Charlie Crist Files To Run For Florida Governor As A Democrat

Charlie Crist is running for Florida governor as a Democrat. The worst-kept secret in politics was confirmed Friday afternoon when the Republican Party of Florida spotted Crist's official filing with the state Division of Elections. The former Republican governor turned Democrat plans a formal announcement at 10 a.m. Monday at St. Petersburg's Albert Whitted Park, 480 Bayshore Drive SE, but the state GOP beat him to the punch. "Gov. Crist looks forward to discussing his priorities for moving Florida forward on Monday morning," said Steve Schale, a spokesman for Crist who led President Barack Obama's successful 2008 Florida campaign. Republicans managed to diminish whatever drama Crist hoped to preside over in his hometown Monday, but it was hardly a secret that Crist was preparing to run against Republican Gov. Rick Scott. Crist has been courting top Democratic fundraisers from across the state and country in recent months, has launched a new website, and lately is often accompanied by top Democratic strategist Schale. The sleuths at the Florida Republican Party this week also found a "CHARLIE CRIST FOR GOVERNOR — 2014" logo online. Republican Gov. Rick Scott leaves today for a trade mission to Japan, so he won't be in the state for Crist's official announcement. That won't stop him from responding to it, though. Let's Get to Work, Scott's political committee, late this week spent more than $500,000 to air a TV ad across the state starting Monday and continuing for two weeks. Seemingly aimed as much at sowing doubts among Democratic primary voters as general election voters, the ad features quotes from Democrats criticizing Crist in the past: Democrat Alex Sink says, "He failed to lay out a business plan to get Florida out of its worst recession." Democratic chair Karen Thurman said, "He has done nothing to create jobs...his only core belief is personal ambition." "He's an opportunist," says Tampa's Mayor Buckhorn. Congressman Kendrick Meek says he "can't be trusted." Al Gore said, "It's a little unusual to have someone flip-flop and...then flip-flop." Who are they all talking about? This man, Charlie Crist. Given Scott's stubbornly weak approval ratings in Florida public opinion polls, his campaign has little choice but to try to ensure that the Democrat challenging him is perceived as an unpalatable alternative. Public polls consistently show Crist beating Scott if the election were held today. Scott, a former health care executive, spent more than $75 million of his own money to narrowly win the governor's race in 2010, and his backers say he will likely spend closer to $100 million on his re-election. Let's Get to Work has raised more than $18 million. Crist, 57, faces a primary challenge from former state Sen. Nan Rich of Broward County, who argues that she is the true Democrat in the race. But Rich, 71, has raised little money and has yet to show she is a viable candidate. Crist, a former state senator, education commissioner, attorney general and governor, has been a champion fundraiser, but that was as a Republican. One big advantage for him is Obama, who asked Crist to speak at the Democratic National Convention last year and whose political team has introduced Crist to top money-raisers from New York to California. No elected official in Florida campaigned harder for Obama in Florida in 2012, and despite his GOP history, Crist has received enthusiastic receptions at recent gatherings of Democratic activists and teachers union members. "Charlie Crist has now officially filed to run for the position he once abandoned," Florida Republican Party chairman Lenny Curry said Friday. "When Florida needed Charlie Crist the most during difficult economic times, he ran away. If he really wants to be governor now, why did he quit the first time?" Under state election laws, Crist needed a campaign account in order to pay for a stage and other equipment at Monday's official campaign announcement. That apparently is how the state Republican Party managed to announce Crist's candidacy first. (Tampa Bay Times, 11/1/13)

Florida’s Top Obamacare Navigator Grant Recipient ‘Has No Enrollment Numbers’

It’s been a month since Florida’s Affordable Care Act health exchange opened for business. So how many uninsured residents has the state’s largest federal “navigator” grant recipient enrolled? They don’t know. At least, that’s what a University of South Florida official told Florida Watchdog. USF received $4.2 million to help uninsured Floridians enroll in the state’s Obamacare insurance exchange. “The USF Navigator program has no enrollment numbers,” said Anne DeLotto Baier, public affairs director for USF Health. It’s a response top government health officials have also been saying, raising transparency concerns among lawmakers. Health and Human Services Secretary Kathleen Sebelius testified at a congressional oversight committee Wednesday, saying, “We don’t have any reliable data around enrollment, which is why we haven’t given it to date.” Marilyn Tavenner, head of the Centers for Medicare and Medicaid Services, told Congress Tuesday, “We made the decision that we are not releasing the numbers until mid-November.” Which is also what Baier told Florida Watchdog. “Reports are not expected to be collected from the grant’s 10 consortium partners across the state until sometime later in November and will be reported to the sponsoring agency, U.S. Department of Health and Human Services,” Baier said. When asked how the malfunctioning healthcare.gov website was impacting USF’s enrollment efforts, Baier said USF navigators are busy helping consumers sign up regardless of technology problems. “While the technology gets worked out, the navigators continue to move ahead in helping consumers sign up, using paper applications and phone options, as well as online,” said Baier. But those paper and phone sign-ups have to be entered into the same glitch-ridden website. So how many uninsured Floridians has USF enrolled? It seems they don’t know, won’t say or it’s just too few for them to acknowledge. USF received $4,213,696 from HHS. Florida’s total naviga

http://www.sunshinestatenews.com/story/florida%E2%80%99s-top-obamacare-navigator-grant-recipient-%E2%80%98has-no-enrollment-numbers%E2%80%99

Lauderhill Fee Forcing Group Homes To Close

The city’s fire fee is accomplishing what previous city efforts could not: It’s putting Cannon Point’s adult living facilities out of business. City officials say they’re just recouping the true cost of providing fire service to the group homes, but providers say the city has been against them for years and its fee is too steep. The annual fee has increased close to 19-fold since 2010, after a new rate study was done based on calls for service. Three businesses have shut their doors in just over the past month, one is on the verge of closing and another has a pending court case trying to kill the higher fees. The facilities are concentrated in Cannon Point, on the west side of Northwest 56th Avenue, a few blocks south of Oakland Park Boulevard. Potter’s House may be forced to shut down in December because there’s no money left to keep up the payments, said Pat Buchanan, who has owned the 24-bed home with her husband, Neville, for 10 years. The fire fee for the facility’s two buildings jumped from $2,248 in 2010 to $42,252 this year. Buchanan said her monthly mortgage payments, which include escrow for taxes and fees, have gone from about $1,300 per building before the increase to $7,000 now. “We’re a registered nurse and minister of religion who took their 401ks and tried to do something [to help others],” Pat Buchanan said. “We were just two people with a dream and a desire to do good.” She doesn’t know what will happen to the 22 residents, almost all over 65, if Potter’s House is forced to close. The Broward Commission is also concerned about the prospect of elderly and mental health patients being turned out on the streets. Commissioner Barbara Sharief last month asked the board to consider setting aside $275,000 to deal with the potential costs of finding new placements for individuals displaced by the closings. The commission requested a staff report on the issue and will consider the matter on Tuesday. While commissioners might consider assistance to get clients into new space after a facility is shut down, they said they’re not going to pay the fire fees for those facilities. Sharief said the money would be used to place the clients so they don’t become homeless and end up going to hospitals for treatment. “There is an obligation to place these folks that are in these homes because of their medical conditions,” Sharief said. The city offered the facilities a discounted fire fee the first year of the increase in 2011, but there were no such reductions this year and last. “The alternative is to reduce their fees and make everyone else in the city pay [more],” Mayor Richard Kaplan said. “We feel everyone in the city should pay their fair share.” Of the recent closings, Loving Care and Loving Care II still owe $307,000 for unpaid taxes the past two years because of the fee, and face another $142,520 in fire fees this year. Omega Group of South Florida, which also shut its doors, owes $99,000 in back taxes and its new tax bills include $40,320 in fire fees. Spaw Family Holdings, which operates the Lauderdale Family Care Retirement Residence, is challenging the fees in court. The company owes $224,688 in taxes for the past two years and another $127,316 for this year’s fees. The company’s 2010 total fire fee: $6,744. "The city has had an agenda since 2006 to put all the facilities out of business," Chris Spaw said. His company has had to shut down half its facility, going from a clientele of 128 to 66, he said. In 2006, the city changed zoning to no longer allow new facilities in the Cannon Point area.
It grandfathered in the existing facilities, although it had sought to phase them out over a five-year period. (Orlando Sentinel, 11/2/13)


**WellCare Earnings Up; Abrupt CEO Replacement**

Tampa-based WellCare Health Plans, Inc. has replaced chief executive officer Alec Cunningham with chairman David Gallitano.

“As the company continues to expand and grow, the board felt that it was necessary to identify a new experienced leader to help write the next chapter for WellCare,” the managed-care services company said in a news release. A national search for a new CEO is underway. Gallitano will not be considered in the nationwide search, according to Jack Maurer, WellCare’s vice president for corporate communications. Meanwhile, the company also released its results for the third quarter, which showed earnings increased 67 percent. The company attributes its higher revenues in part to increased revenue in its Medicaid and Medicare Advantage plans in Florida and other states. That earnings report also mentioned the contracts the company expects to get in Florida in the switch to statewide managed care by Florida’s Agency for Health Care Administration. WellCare serves about 2.8 million Medicare and Medicaid members nationwide. (Health News Florida, 11/1/13)

http://wusfnews.wusf.usf.edu/post/wellcare-earnings-abrupt-ceo-replacement

**Insurer WellCare’s Board Fires CEO Alec Cunningham**

The board of insurer WellCare Health Plans Inc. has fired CEO Alec Cunningham, replacing him temporarily with its recently appointed chairman, David J. Gallitano, while it searches for a permanent successor. Gallitano said in a statement Friday that the board "felt that as the company continues to expand and grow, it was necessary to identify a new experienced leader to help write the next chapter for WellCare." The Medicare and Medicaid coverage provider reported the move while also announcing that its third-quarter earnings had jumped 67 percent compared to last year, when high costs in Kentucky and an $18 million premium hit in Georgia hurt results. The results beat Wall Street expectations. WellCare shares sank $5.33, or 8 percent, to $61.35 in afternoon trading. Its shares are up 37 percent so far this year. A company spokeswoman said in an email that Cunningham left WellCare on Thursday. WellCare is conducting a national search for a new CEO. Gallitano became chairman May 22 and has been on the company board since 2009, when Cunningham became CEO. Citi analyst Carl McDonald said in a research note the board must have been fairly unhappy "since this kind of change creates a significant distraction, particularly for the senior executives hired by Cunningham." For the quarter, WellCare earned $64 million, or $1.45 per share. That compares to earnings of $38.3 million, or 87 cents per share, last year. Its adjusted earnings for the latest quarter came to $1.56 per share. Analysts surveyed by FactSet expected $1.51 per share. Revenue was $2.5 billion. Analysts expected $2.38 billion in revenue. WellCare runs Medicaid coverage in several states. That state and federally funded program provides coverage for poor and disabled people. The company also sells Medicare prescription drug coverage and Medicare Advantage plans, which are privately run versions of the government's Medicare program. (Bay News 9, 11/1/13)

http://www.baynews9.com/content/news/baynews9/news/article.html/content/news/articles/ap/2013/11/01/Insurer_WellCare_s_board_fires_CEO_Alec_Cunningham.html

**Ousted WellCare CEO Walks Away With More Than $3M**

Former WellCare Health Plans Inc. CEO Alec Cunningham is in line for more than $3 million in severance. Cunningham, who was fired by the WellCare board on Oct. 31, is entitled to benefits under an executive severance plan adopted late last year, a filing with the U.S. Securities and Exchange Commission said. That plan provides 1.5 times the CEO’s base salary and 1.5 times the CEO’s bonus in cash if terminated without cause. Cunningham received $969,231 in base salary in 2012, the last year for which pay information is available. His bonus in 2012 was $1.5 million. Based on regulatory filings, he would get $3.7 million, but a spokeswoman for WellCare said it’s closer to $3.2 million. WellCare (NYSE: WCG), a Tampa-based managed care company, will record a one-time charge for severance benefits in the...
fourth quarter of 2013, the company said during a conference call with analysts. The company also recorded a 15-cent per share charge in the third quarter of 2013, related to severance and impairment. A restructuring over the summer included a workforce reduction of 280 workers, and the addition of a much smaller number of new jobs more closely aligned with the company’s new priorities, said Thomas Tran, CFO. (Tampa Bay Business Journal, 11/1/13)


Ousted WellCare CEO Cites ‘Different Perspectives’

Different points of view on how best to move forward was behind the firing of Alec Cunningham as CEO of WellCare Health Plans Inc. Cunningham provided a statement on his termination to the Tampa Bay Business Journal. “For nearly nine years, I’ve had the privilege of being a part of WellCare, the last four as CEO. It was a time of great growth and profitability, and I’m very proud about what we accomplished for our shareholders, our stakeholders, and all those we serve. “The Board and I have different perspectives on how best to move forward in a very complicated healthcare marketplace, but I want to wish them – and the entire WellCare family – all the best.” Cunningham was named CEO of WellCare in December 2009. He did one of his first media interviews with the TBBJ about one year ago, opening the company’s playbook and describing the economic impact the managed care provider has on the Tampa Bay area. Cunningham’s severance is expected to be about $3.7 million. David Gallitano, who was named chairman of the WellCare board of directors earlier this year, is serving as interim CEO. (Tampa Bay Business Journal, 11/1/13)

http://www.bizjournals.com/tampabay/news/2013/11/01/ousted-

Prison Near Polk City Could Reopen

Demilly Correctional Institution near Polk City, shuttered in July 2012 as part of a statewide belt-tightening, is one of nine facilities that could potentially reopen next year in light of an expected rise in Florida’s prison population. Last year’s closures were the result of a decline in prison admissions, but projections from the state Criminal Justice Estimating Conference show new admissions are on the rise despite a downward trend in crime. Included in the Department of Corrections’ 2014-15 budget request is nearly $57 million to prepare for a projected increase of more than 1,000 inmates. The request was presented Wednesday at a public hearing in Tallahassee by DOC budget director Mark Tallent. “Based on those numbers the department has proposed that we need additional dollars to meet those projections,” said DOC spokeswoman Misty Cash. “If for some reason those numbers don’t go up then we might not need the extra money.” The targeted facilities include five work camps, two re-entry centers and two prisons, one in Raiford and the Demilly facility, according to the Tampa Bay Times. Based on its July projections, conference warns of an increase in admissions of 2.7 percent next year and 1.4 percent the following year. The prison population at the end of June was 100,884. State Rep. Neil Combee, R-Polk City, whose district includes the Demilly site, said he had not heard of the new estimates, but that he intends to look into why more beds are being filled in the face of declining crime statistics. “It’ll make you scratch your head if crime’s going down,” he said. In its summary report, the estimating conference said the number of index offenses decreased in 2012 by 43,536 (down 5.7%) from the 2011 level of 769,480. The 725,944 index crimes reported in 2012 was lower than reported in any year since 1983. “This is the fourth year in a row in which index offenses declined after three years of increases,” the report said. Violent offenses decreased by 4.3 percent in 2012. Those offenses, which include murder, forcible sexual offenses, robbery, and
agrivated assault, were 12.9 percent of all index offenses in 2012, up from 12.8 percent in 2011. At the time of its closure, the Demilly facility had a staff of 118 and a capacity for 342 inmates. It was established in 2008 to prepare inmates for work release. The nearby Polk Correctional Institution, which has room for 1,200 inmates, remains open. Gov. Rick Scott, who's seeking re-election in 2014, recently asked state agencies to cut spending by $100 million, but the prison system alone wants $124 million more next year, including money for more officers, new buses and vans, the food service system and an electronic timekeeping system. The sudden shift is reviving the debate over whether Florida locks up too many nonviolent drug offenders who should get treatment, not just punishment. Florida has the nation's third-largest prison system and spends about $18,000 a year on average to house each of its inmates. Nearly three of every 10 inmates are back behind bars within three years. "They're not getting treatment. They're being housed, and I don't know how smart that is," said Sen. Rob Bradley, R-Fleming Island, at a recent hearing of the committee he chairs, which oversees the prison system's $2.4 billion budget. "This is the perfect opportunity for us to re-engineer our criminal sentencing laws and save money at the same time," said Sen. Jeff Clemens, D-Lake Worth, also a member of the Senate budget committee overseeing prisons. "We need to have a real conversation about who we're putting in prison and whether that's best for the state." Across the country, bipartisan support has been building for a concept known as "smart justice," which includes putting fewer nonviolent offenders in prison, improving re-entry and probation programs, and teaching inmates skills so they can acquire jobs. At Florida State University's Project for Accountable Justice, researcher Deborrah Brodsky said Florida should follow the example of Georgia, whose conservative Republican leaders have embraced the "smart justice" concept. "Other very conservative states have shown that you can choose different paths," said Allison deFoer, a former Monroe County sheriff and judge and chairman of the FSU project's board. Moreover, they say, the prison system should become more strategic, like Florida's Department of Juvenile Justice, which stresses prevention, diversion and intervention with families instead of incarceration. But talk of modifying Florida's sentencing laws is an especially tough sell in an election year when most lawmakers will make traditional appeals to voters that they are tough on crime. A study released last year by the Pew Center on the States found that the average offender spent 166 percent more time in prison in 2009 than in 1990 and that nonviolent drug offenders served 194 percent more time — a bigger increase than any other state at an annual cost to Florida taxpayers of about $1.4 billion. In its budget request for next year, the Florida prison system is seeking $56.8 million to hire 862 workers by June. That would undercut Scott's emphasis on steadily cutting the size of the state workforce. Scott must decide whether to include the request to reopen the prisons and work camps in the election-year budget he'll send to the Legislature in February. (Lakeland Ledger, 11/1/13)


Crist Primed For Comeback Campaign

Charlie Crist's comeback pitch has a little of something for everyone. It's a mix of contrition, outrage and pride tempered by humility as the former governor launches his second bid for the office, this time as a Democrat. But above all, it's Crist himself that the consummate politician is banking on in his attempt to capture the hearts - and votes - of Floridians. "Each voter should do what they feel in their heart. Men, women, gay, straight, black, white, young, old, it doesn't matter. They should vote for who they feel will fight for them the best, whoever it is," Crist said this week during a wide-ranging interview outside a downtown Starbucks not far from his waterfront condo in St. Petersburg. Crist will formally announce his candidacy for governor Monday in his hometown, which he fondly calls "The Burg." The interview, an appearance last weekend at the Florida Democratic Party's annual conference in Orlando and Crist's history as what a Democratic consultant called one of the country's best retail politicians shine a light on what to expect in the year to come. The longtime Republican and short-time independent before his conversion into a Democrat last year is parlaying his partisan passage into a play on voters' frustrations with government. The ever-cordial, exceedingly polite Crist - who credits his parents and three sisters for instilling respect in him at an early age - grows fiery when speaking of his successor, Gov. Rick Scott, and the Republican's policies. "It breaks my heart" is the common refrain Crist uses when speaking of Scott's actions on education, the environment, health care and voting rights, among other issues. "What breaks my heart is what I have seen over the past three years from the administration in Tallahassee," Crist told the LGBT caucus at the Democratic conference on Sunday before blasting Scott's treatment of public schools. "You come in and your first act is to whack (education) $1.3 billion. And then follow that incredible act with a second go-round, where you whack higher ed $300 million. And then you have the gall to go to the education community and teachers and say you know what I think I can give them $2,500 (salary increases) and that'll take care of it and they'll forget," Crist said. "I've got news for you buddy. Teachers are smart and they cannot be bought." But Republican Party of Florida Chairman Lenny Curry said Crist's agenda lacks any discussion of jobs and economy, the backbone of Scott's election in 2010 and his re-election campaign. Curry said Crist "was a complete failure" as governor. "Right now education funding is at the highest level in the state's history," Curry said. "It's all negativity (by Crist). He's not
offering a vision for the state of Florida." During the next year, voters should expect to see Crist criticize Scott about issues such as the state's rejection of expanding Medicaid and about Lake Okeechobee discharges that are polluting the Caloosahatchee and St. Lucie rivers. Crist grew so animated about the Lake Okeechobee issue during the interview that he sketched a map of the river system on the back of a napkin. Scott blames the Obama administration and the U.S. Army Corps of Engineers for the recent pollution problems, which are a huge issue in the Treasure Coast region and in Southwest Florida. Crist also has already started hammering Scott for refusing $2.4 billion from the Obama administration, which Crist had accepted, for a high-speed rail project connecting Tampa to Orlando. "Unbelievable. That could have created tens of thousands of jobs," Crist said. "Have you driven on I-4? I wonder if he has. He doesn't have to. He flies over it in his jet. How does he have a clue what we're feeling? It's hard to have empathy if you haven't suffered like that and been on I-4. I'm on it once a week, man." Crist also raised questions about Scott's character, reviving attacks by former Attorney General Bill McCollum who lost to Scott in a bitter primary in 2010. Scott earned his fortune as the former CEO of Columbia/HCA, the health care giant which paid $1.7 billion in fines and settlements to resolve accusations of Medicare and Medicaid fraud after he left the company. "I don't know much about him that isn't ethically challenged," Crist said of Scott. "It troubles me that the leader of our state is not acting like a good servant. Being a good person starts with honesty and integrity. The notion that we've elected an individual who was the head of a company that had to pay the largest fine for fraud at the time in the history of our country is just mind-boggling." After Monday, Crist will be in a primary against former Senate Minority Leader Nan Rich, who has been in the governor's race for more than a year. Rich, a favorite of progressives, is having a difficult time raising money and has less than $100,000 in cash in her campaign account, which Crist may eclipse on his first official day on the trail. Some insiders are predicting that, if elected, Crist will reward Rich with a spot as secretary of the Department of Children and Families if she drops out of the race. In the meantime, Crist is reaching out to shore up support from the Democratic base that helped President Obama turn Florida blue in 2008 and 2012. In an appeal to gay Democrats this weekend, Crist tried to make amends for signing onto a constitutional amendment that banned same-sex marriage in Florida. "Please forgive me for not getting where I am now sooner. But I'm there," he said. Crist - dubbed Florida's "first black governor" by a former state representative - has had rock star status among some African-Americans, who make up about 27 percent of Democratic registered voters. He extended early voting during the 2008 election, which some credit with Obama's win in Florida. Crist also refused to play Florida's state song, "Old Folks at Home," at his gubernatorial inaugural celebration in 2007. At Crist's behest, he and the Florida Cabinet created an "automatic" restoration of rights for convicted felons, ending a complicated and drawn-out process that kept convicted felons, many of whom are black, from being able to vote. Soon after taking office in 2011, Scott and the all-GOP Cabinet reversed that process and instead imposed a five-year wait before felons can apply to have their rights restored. "It's horrific. Talk about mean, un-Christian, unforgiving. That's like heartless. That's a heartless policy," Crist said. Crist said Scott and the Cabinet members - Attorney General Pam Bondi, Chief Financial Officer Jeff Atwater and Agriculture Commissioner Adam Putnam - who unanimously supported the new policy "all gotta go." "Who among them doesn't believe in forgiveness and second chances? We all make mistakes but my God can't you give them a second chance? They've paid their debt to society. If you've paid it, restore. Give them a second chance. Give them hope. Because otherwise you demoralize them for the rest of their lives. That's a sin. It's just not nice. It's not right," he said. Scott has vowed to spend at least $25 million "defining" Crist, and reports this week said a Scott political committee will unleash as much as a $525,000 ad campaign against Crist on Monday, the day Crist makes his candidacy official. Republican leaders are even boasting of a scorched-earth campaign attacking Crist for fleeing the GOP in 2010 and becoming an independent to avoid a U.S. Senate primary with Marco Rubio. Crist gave up the possibility of a second term as governor to run for the Senate. Curry said Crist made a play for Washington when Florida's unemployment rate skyrocketed during the great recession. "He bailed on the state when they needed him most, and now for some reason he feels he wants to be back in Florida when he abandoned us when we needed a governor most," Curry said. "He's not a serious person. He's not fit to govern. He's a campaigner. That's it. He's good-time Charlie." The one-time "People's Governor" insists he hasn't changed and scoffs at accusations that he can't be trusted. "Trusted to do what? To stay in the crazy club? Well I hope not," Crist said. Crist emphasized that it is GOP leaders who appear out of touch with mainstream Americans, pointing to former Gov. Jeb Bush's critique of his own party. "God does not want people to be anti-women, anti-minority, anti-immigration, anti-gay. Pretty soon the room's empty. And when you are that intolerant, at least the leadership of the party, trust me, I'm out of there. You can trust me. It's just not right," he said. (Highlands Today, The News Service of Florida, 11/2/13)

believe, the best way they can build the party for the future. So far, however, with almost exactly a year to go before the Nov. 4, 2014, election, they're not yet living up to state party Chairman Allison Tant's promise to compete strongly for the other three statewide elections on the ballot – seats on the Florida Cabinet. Democrats have two prominent candidates for attorney general who could end up in a primary battle – former Tampa legislator George Sheldon and state Rep. Perry Thurston of Fort Lauderdale. Both are known and respected within the party, but neither has ever won a statewide election. One will take on Republican Attorney General Pam Bondi. Democrats have no well-known challenger, meantime, for either of the other two Republican Cabinet officials, agriculture Commissioner Adam Putnam and Chief Financial Officer Jeff Atwater. The party suffered an embarrassment in August when Central Florida Urban League President Allie Braswell announced for CFO, but dropped out less than a week later when it was revealed he'd had repeated personal bankruptcies. William Rankin, an experienced South Florida businessman and former fraud investigator, has filed to run for CFO. But while Democrats praise his qualifications, he has never run for office, while Atwater is one of the GOP's best-known officeholders and has a reputation for strong fundraising from his base in Palm Beach. So far, the only Democratic candidate in the agriculture race is Thaddeus Hamilton, who got 2 percent of the vote running as a no-party candidate in 2010. Tant told reporters at a Democratic Party gathering in June the party was “actively recruiting for the Cabinet right now ... not leaving any stone unturned.” The deadline to qualify for state offices is more than six months away – June 16 to 20, 2014 – but there are no indications on the horizon of other prominent Democrats considering those races. Meanwhile, Democrats say they are laying groundwork for flipping Republican seats in the state Legislature, including some in the Tampa area and some in South Florida — and have realistic chances of flipping at least two U.S. House seats, including the Pinellas County seat of the late Rep. C.W. Bill Young. But in a non-presidential election year, when Democrats traditionally suffer lower voter turnout than in presidential years, those eggs are a long way from hatched. “There has definitely been a slow start to the campaign season this year,” state Democratic Party spokesman Max Steele acknowledged, partly because new, higher campaign contributions limits that took effect caused some candidates to delay starting their race. But he said Democrats “look forward to aggressively challenging every member” the state Cabinet. “From city council to Florida’s Cabinet we are building the infrastructure and assembling the resources to win races.” Republicans have said they conducted the 2014 elections reveal that the Democrats have “no bench.” “While Democrats are continuing to sort out candidate recruitment and vetting issues, we're very proud of our Republican Cabinet and the record they will run on,” said state GOP Chairman Lenny Curry. Most Democrats say winning the governor's mansion is by far the most important step for the party to regain influence in Tallahassee. Currently, besides the governor’s office and all three Cabinet seats, Republicans hold large majorities in both houses of the state Legislature — until the 2012 election, those majorities were greater than two-thirds. Winning the governor’s office would give Democrats fundraising clout and put the veto power in Democratic hands — a key power now that Republicans no longer have veto-proof 2-1 majorities. Florida’s line-item veto gives the governor influence over legislators through their pet district projects. But Sheldon said it’s important to hold at least one Cabinet seat. Under Florida’s Cabinet system, the governor shares executive power with the Cabinet members, who are elected independently of the governor and don’t work for him. On the four-member Cabinet, Sheldon noted, a two-two tie is decided by the governor’s vote, meaning one additional Democratic Cabinet member could give the Democrats a majority. Some Democrats question how much energy and money the party should devote to putting candidates on every line in the 2014 ballot, suggesting it’s better to concentrate on a few important seats where it has a realistic chance of success — including the governor’s race, where Republican Gov. Rick Scott faces low approval ratings, and the District 13 House race, an open seat in a district that leans Democratic. Democratic political strategist Ana Cruz of Tampa said there “absolutely” will be more Cabinet-level candidates, although she couldn’t name any. But, she added, “We understand the need to make sure our resources are targeted. We’re never going to be able to compete with Republicans dollar for dollar, but independents and Democrats across Florida are fed up, and our grass roots organization is the strongest it’s been in 10 years.” South Florida Democratic political consultant Millie Herrera, however, said it’s important to have candidates in as many races as possible. “Leaving seats without opponents is not a good thing,” she said. If Democrats lose, “Having run may make them successful down the line. In the past, we haven’t been doing a good job of building the bench.” Sheldon and Thurston both say they think it’s better not to have a primary battle in the attorney general race, but Sheldon, who left a high-level administrative post at the U.S. Department of Health and Human Services to run, said he’s not dropping out. “I got in this to make a difference,” he said. “That’s why I came back from Washington. I’m in it for the long haul.” Thurston appeared to leave open the possibility that he could leave the race, “if it’s in the best interest of the party.” “Whoever the party thinks has the most to offer should be the one to do it,” he said. “Sometimes tough decisions have to be made. The party sometimes has to make a difficult call.” Sheldon said his qualifications — having run large federal and state agencies and served as a deputy attorney general as well as a state legislator — make him the best candidate. Thurston said as a current legislator, he knows the issues and can draw an important
Peace River Center Operates Pilot Program

One child receiving help from Peace River Center's new Community Action Treatment team is a psychotic, hallucinating teenager who lives in a family where at least one other person, often the adult, struggles with unsolved traumatic issues. Short-term hospitalizations haven't fixed their problems. They struggle to fit within society and their families. Family members struggle too. "These are the families who have been through the gamut of every service you can imagine," said Angela Jones, a licensed clinical social worker who heads the team of eight. Peace River Center has one of 11 teams statewide that won funding this year for the pilot program focusing new resources on children with severe emotional disturbances. Its funding is for $670,000, said Cathy Hatch, Peace River's development director. As Jones described the team and its ongoing challenges, she noted some of its patients last week, visitors from Winter Haven Hospital's mental health units nodded in recognition of the difficulties. For the 40 children accepted, it will be a mobile mental health hospital. Crisis intervention and on-call coverage and around-the-clock support are part of its services. Other services include mentoring, building family support networks, teaching life skills, doing medicine management and giving individual, group and family therapy. Because it's a specially designed program, team members have more latitude in trying different approaches, incorporating things they used to do more often before Medicaid and other programs became more restrictive. With these children and young adults, trust often is hard to win. One early technique they use is individually created toolboxes. They contain items suited to a child's interests, such as arts and crafts. For one young man, the biggest desire was clothes that fit. "It takes a while to get them to talk with us," said Mandy Rushing, a case manager. "They have trust issues." In time, she said, team members and a person being helped do start bonding. In its intensity, the Community Action Treatment team resembles existing Florida Assertive Community Treatment teams for adults with severe mental illnesses. A key difference between the two, besides the younger age of its clients, is that Community Action Treatment team clients need to be living within a family. Relatives who aren't their parents can be raising the children, but they can't be in other types of foster care. Families are an important part of the process, and some planned activities, such as a women's group, will be geared to their needs. "The parents really need to be involved," said Heather Hutton, a mentor. "They can't just drop their kids off." Mentors provide support and skill-building, working with the parent and child. Children eligible for the new program will have had several of these situations:

- Diagnosed with a mental-health condition.
- Hospitalized more than once for psychiatric issues.
- Involved with the Department of Juvenile Justice.
- Had multiple episodes involving law enforcement.
- Struggled with school, having poor academic performance and/or suspension.

The program is targeted to children and youths, ages 11-21, but children younger than 11 could qualify if they meet two or more of the criteria. Team members' goal is to help them and their families break that cycle of crises. To do that, adults have to be involved and accept team members' visits to the home. "We've had some families turn down the services because we explain this is not a once-a-week or a once-a-month visit," Jones said. (Lakeland Ledger, 11/3/13)

Three Women Plea For Prescription Drug Safety: 'Life Can Be Taken Away And Altered Too Quickly - Don't Risk It'

Karen Ellis Bailey lost her 24-year-old son to a prescription drug overdose. Jill Motsett Neel watched her ex-husband's battle with prescription and illegal drugs. Kelly M. Corredor discovered she knew people battling addictions to medications. Those personal experiences led each of the North Florida women — Bailey lives in Ocala, Neel and Corredor in the...
Jacksonville area — to help end what they view as an epidemic. They met as advocates for the same goal and shared their stories. In March, Corredor formed The Skeeterhawk Experiment to seek innovative solutions, with Neel as vice president and Bailey as director. The nonprofit recently launched a multimedia public-awareness campaign, "Now You Know Florida," with backing from various national and local organizations to help prevent, treat and end prescription-drug abuse. Bailey, whose son, Corey Langdale, died in 2011, wants to prevent other families from experiencing her pain. “Talk to your children about the dangers of taking a prescription pill that is not prescribed for them. They must understand that even one pill can kill,” she said. “Life can be taken away and altered too quickly — don’t risk it.” In Duval, Clay and Nassau counties, the number of accidental deaths caused by prescription drugs rose by 13 percent from 2011 to 2012, according to the 2012 Florida Medical Examiners Commission Drug Report, the latest available accounting. Oxycodone was the prescription drug most frequently identified as cause of death. The total number of prescription-drug-related deaths, accidental and otherwise, in the three-county area — deaths where prescription drugs were the cause or present in the victim’s system — rose by 2 percent in the same period, according to the report. Statewide, prescription drug-related deaths dropped 8.8 percent in 2012 compared with 2011. Skeeterhawk is researching why deaths rose in Duval, Clay and Nassau counties and declined statewide, but is not ready to offer theories, Corredor said. Too many variables exist to answer the question easily, said Susan Pitman, executive director of Drug Free Duval, a community coalition working to prevent and reduce substance abuse and underage drinking. The variables include the specific circumstances, drugs involved and locations of the deaths; the age and sex of the victims and whether they had a history of drug abuse; and whether there was a “common or prevalent prescribing physician or clinic,” she said. “We cannot give an educated opinion of why the accidental death due to prescription drug numbers are higher in the Duval/Clay/Nassau region than in some other parts of the state,” Pitman said. “As the experts review that additional information, it is our role to try to understand the contributing factors — not just about the death of the users — but also the reasons they were using.” The coalition is “working diligently with all sectors of the community to understand the factors that have led to this behavior,” she said, and is partnering with Skeeterhawk “to help people understand that there is an issue.” Kelli Wells, Duval County Health Department director, also said there is no ready answer for the numbers, but they warrant discussion and monitoring. “I don’t know that there has been an investigation to attempt to answer that question,” she said. Research is underway, however, into drug abuse among students in Duval County schools, which could help pinpoint the cause. Also, the higher rate of 2012 prescription deaths in the Jacksonville area “could be related,” Wells said, to the proliferation of so-called “pill mills” despite a law-enforcement crackdown that has closed many pill mills over the past few years. “It’s hard to say that that’s the reason for the uptick,” she said. But Skeeterhawk’s work will be invaluable in the battle against prescription drug abuse, she said. “Any time we’ve got a partner … it works to our advantage,” Wells said. The “Now You Know Florida” campaign provides strategies to combat prescription-drug abuse, such as showing parents how to talk with children about the dangers of medicine misuse and abuse and how to monitor, safeguard and dispose of unwanted medications. Also, the campaign provides national and local resources to help the recovery of those suffering with prescription drug addictions. The campaign will be spreading the word via a comprehensive website, as well as print materials, social media posts, public-service announcements and digital billboards. The women behind the campaign hope to reach “just one more parent, one more grandparent, one more child, before it is too late,” Corredor said. “I have heard so many stories over the years and have personally known too many people, of all ages, who have struggled with prescription-drug addictions.” Neel said her ex-husband’s addiction to prescription pills and eventually street drugs led to the demise of their marriage and his incarceration. “I knew I needed to find a way to help others become more educated about the signs of addiction and available treatment options,” she said, adding that Skeeterhawk “has given me the platform I was looking for to reach others.” (Florida Times Union, 11/4/13)


Can Charlie Crist Shape His Own Florida Democrats?

Charlie Crist might have just joined the Democrats but he’s trying to build his own base in the party. Crist launched his campaign against Rick Scott in St. Petersburg on Monday. The timing and location wasn’t a coincidence since St. Petersburg will be holding its mayoral election on Tuesday. Republican incumbent Bill Foster is facing a serious challenge from Rick Kriseman and Crist gave the Democratic challenger a little help on Monday. Kriseman was a featured speaker at Crist’s kickoff and the former governor has been helping his mayoral bid. There’s little to lose for Crist in backing Kriseman despite some past tensions between the two. Kriseman even hit Crist over supporting the NRA and honoring Marion Hammer as late as 2012. Despite the past problems, Crist gave Kriseman a boost on Monday. Crist’s announcement won media attraction throughout the state and Kriseman could shine in a little reflected glory. Kriseman also got a final opportunity to rally St. Petersburg Democrats a day before the mayoral election.
Kriseman wasn’t the only Democrat to get a little attention from Crist’s event. Dan Gelber stood at Crist’s side as the former governor launched his campaign. Gelber has a strange history with Crist. In Crist’s first two years as governor, Gelber led Democrats in the Florida House and was a fierce critic of the then-Republican governor. When Crist was the front-runner to be the Republican candidate for the U.S. Senate in 2010, Gelber was running for the Democratic nomination and going all out in attacking the governor. But both Crist’s and Gelber’s Senate plans were dashed. Crist ended up running with no party affiliation while Gelber ended up as the Democratic nominee for attorney general. Both men ended up losing in 2010. Since then, Gelber has remained a leading liberal voice in Florida and has been a key ally in introducing Crist to Democrats across the state. There’s even been talk about Gelber ending up as Crist’s running mate. Gelber would certainly make Crist more appealing to liberals and help reach out to voters in South Florida. It won’t help the Democrats appeal to the center but Crist’s camp has to figure that’s the former governor’s responsibility. There were certainly other big-name Democrats in attendance, like Kathy Castor and Bob Butterworth who led DCF in the Crist administration. While Crist’s old friend George LeMieux tried to breathe life into the rumors that Bill Nelson will run for governor on Monday, Democrats are starting to fall in line behind the former Republican. Crist has a long way to go but he’s starting to leave his fingerprints on Florida Democrats. (Sunshine State News, 11/4/13)


A Full Year Of Negative Campaigning Starts As Charlie Crist Bids For Governor

The Sunshine State will be a dark place for politics over the next year. On Monday, just before former Gov. Charlie Crist officially announced his bid for his old job, Gov. Rick Scott’s political committee officially unveiled its first negative ad attacking his predecessor as untrustworthy. Crist gave more than he got when he took the stage in St. Petersburg. “Governor Scott has led like this,” Crist said from the stage. “Embrace the ideological fringes, take care of his friends, bully his opponents, hide from the public and the press and run from tough issues.” A Republican-turned-independent-turned-Democrat, Crist also pointed out that Scott’s former hospital company once paid a record $1.7 billion Medicare-fraud fine. Republicans hit back quickly, hosting a conference call with Crist’s former friend and adviser, George LeMieux, whom Crist tapped to fill a vacant U.S. Senate seat before 2010. LeMieux said Crist is now “unrecognizable to me.” One day down, 364 more to go for a campaign. Election Day is Nov. 4, 2014. The pervasively negative tone — far earlier than any recent previous governor’s races — carries more risks for Democrats than for Republicans. Negative campaigning can depress turnout, studies show, and smaller turnout elections generally favor Republicans in Florida; polls indicate Crist would handily beat both Democratic
candidate Nan Rich and then Scott right now. Scott plans to spend upward of $100 million through his Let's Get to Work political committee, which now has about $16.9 million in the bank. His advisers are considering whether to help support Rich, a former state senator from Weston, to help scuttle Crist’s nomination. Rich said she’ll take all the help she can get. But she lamented the negative Crist-centric tone that has already beset the campaign. “The unfortunate thing is negative campaigning works,” Rich said. “I want to talk about the issues...My beliefs are stable. I’ve been a Democrat for 12 years in the Legislature and long before that. Crist will have to explain his beliefs.” The latest ad from Scott’s committee quotes numerous Democrats calling Crist an untrustworthy “opportunist.” “He has done nothing to create jobs, his only core belief is personal ambition,” the ad quotes former Florida Democratic chair Karen Thurman as having said. Crist, who never mentioned Nan Rich in his speech, plans to remain competitive with Scott by tapping some of President Barack Obama’s donors. Crist already has surrounded himself with the president’s Florida advisers and pollster. “He’s trying to bully me by waving around his $100 million checkbook,” Crist said Monday. “I don’t have their special interest checkbook.” But Crist did in 2010, when the then-Republican governor ran for Senate and tapped a passel of special interests in the state Capitol to fund his campaign, from sugar companies to now-convicted Ponzi schemer Scott Rothstein. Crist, while he was a Republican, also had a reputation of running negative ads as well. Crist made no mention of that part of his past on Tuesday and instead pointed out that Scott took contributions from the likes of a politically influential insurance company that was then granted a “sweetheart deal” by Citizens Property Insurance. Before Crist even announced, a Republican Party of Florida strategist filed an elections complaint that alleged Crist unlawfully created and displayed a campaign logo before filing his campaign paperwork. Crist said Scott and his former party had nothing positive to boast about. But Republicans pointed out that Crist’s last year in office coincided with the collapse of the economy. In contrast to Scott’s term, Florida’s unemployment rate increased from 3.5 percent to 11.1 percent under Crist. Florida is now a job-growth leader. Crist’s 2010 rival, Sen. Marco Rubio, drew the distinction in a written statement that the Republican Party of Florida issued later in the day. “Rick Scott has proven himself very capable of cleaning up after Charlie’s mess, creating jobs, and restoring Floridians’ hope about the future,” Rubio said. At this pace, though, the future of the campaign doesn’t look like an exercise in appealing to Floridians’ hopes. (Miami Herald, 11/4/13)

Is CONNECT Rick Scott’s Obamacare?

During a second day of legislative hearings into the technical problems plaguing the launch of the state’s new $63 million CONNECT unemployment website, the chorus of Democratic lawmakers seeking answers grew louder. “I can’t think of a more critical issue for us to demand action on,” said Sen. Darren Soto of Orlando during a Tuesday Senate Democratic caucus meeting. “When you think of a single mom who is waiting for that check and who can’t buy groceries, you think of an elderly person who is too old to be in the workforce, they may fall through the cracks and god knows what will happen to them.” Since the Oct. 15 launch of CONNECT, which processes unemployment claims for 230,000 recipients, the offices of Gov. Rick Scott, state lawmakers and DEO officials have been besieged with thousands of emails and phone calls complaining about crashes, delays and glitches that are making it difficult for many to collect the money they need to pay rent, bills and groceries. Because of a requirement passed during the 2011 legislative session, those receiving unemployment benefits must register online to get them. Earlier this year, federal officials found that Florida violated the civil rights of unemployed individuals by requiring them to apply online and take an “assessment” before they receive any unemployment check. Senate Minority Leader Chris Smith of Fort Lauderdale said he will write a letter outlining his concerns as well as request a meeting with DEO staff to discuss CONNECT next week. He joins two other Democratic lawmakers, state Rep. Irv Slosberg, of Boca Raton, and U.S. Senator Bill Nelson, who have both asked for investigations into the system. Meanwhile, the director of the agency that oversees the system said it is working close to normal and was already processing and paying about as many claims as the system it replaced. Still, he had to deliver some bad news to lawmakers that further undermined his message that CONNECT is working properly. “We had a server go down for about a half hour that caused some technical issues,” Jesse Panuccio, the executive director of the Florida Department of Economic Opportunity, told the House Appropriations committee on transportation and economic development Tuesday morning. “It is now back up, but those are the type of issues that can cause problems.” Later Tuesday, Panuccio said he didn’t know how long it was down, but added the server crashed again at noon. Internal DEO emails suggest that the situation was worse than what Panuccio initially reported to lawmakers. According to a 7:59 a.m. email from Chris Sharples, a DEO benefits services specialist, associates were unable to log into CONNECT to process claims. An email sent at 9:03 a.m., this time from Shawn Brown, a DEO internal security administrator, told employees the CONNECT system is “currently down.” It’s not until an email sent at 9:13 a.m. that CONNECT is reported to be up and running. So how exactly did Panuccio, who was already into his presentation before the House TED committee, know that CONNECT was back up? And why did he say it was down for “about a half hour” when emails show it was down for at least twice that? Asked about these inconsistencies, DEO spokeswoman Monica Russell responded in an email that during Tuesday morning’s committee presentation, Panuccio was
providing the information he had at the time. “We have since been updated that the issue had to do with web servers, two of which (there are five) had overloaded capacity and those two servers were intermittently down from 7:30 a.m. to 9:30 a.m. and then for a few minutes around noon.” Those users and staffers on either of those servers would have seen an error message when attempting to log on, but those on the other three servers would have been able to process claims, she said. The entire system was down for about 10 minutes while the project team restarted the servers, but she didn’t say when that shutdown took place. Since Oct. 15, the DEO hasn’t been completely forthcoming about the problems with CONNECT. On Oct. 16, the Times/Herald asked DEO if it had warned the vendor, Deloitte Consulting, of performance issues. It was told by a spokeswoman that the project was within its anticipated time frame. Only later did the Times/Herald discover that DEO didn’t disclose a 2012 letter from the agency to Deloitte stating its intent to terminate the contract. Sen. Audrey Gibson, D-Jacksonville, said the DEO made no mention of its concerns with Deloitte or CONNECT during a committee hearing days before the launch. “They knew then they were having problems with it and not one word was mentioned during the committee meeting,” Gibson said. “They knew it was an issue and it needed to delay the switch over. We’re getting into Thanksgiving and people are still having problems.” But because of the problems with the Obama administration’s roll out of the federal government’s health care website, the response from Democrats to CONNECT’s difficulties has been, until now, mostly subdued. After all, how do Democrats harp on the technical shortcomings of the debut of a complicated website that must handle millions of transactions when they’re begging for patience with the federal website and its glitches? That conundrum was noted during Tuesday’s Senate Democratic caucus meeting. “Sen. (Gwen) Margolis and I said (CONNECT) sounded like the roll out of the Obamacare Act, but nobody wanted to say that,” joked Sen. Geraldine Thompson, D-Orlando. “No, we don’t,” said Margolis, D-Coconut Grove. But for many Democrats, the CONNECT site is different. People depend on unemployment benefits to survive. “It’s fine to compare this to the whole marketplace thing,” Gibson said. “But the (CONNECT) money is critical for groceries and things like that.” Meanwhile, Rep. Darryl Rouson, D-St. Petersburg, worried Republicans were taking advantage. “It’s kind of hypocritical that they’re slamming Obamacare when we have problems with our own website,” he said Tuesday. But because of CONNECT, Republicans have been put in the position of telling the public to give a government website more time to work out its problems before rejecting it. “We’re going to see the efficiencies from the new system,” said Sen. Garrett Richter, R-Naples during a Monday Senate hearing into CONNECT. “But there is a learning curve that you have to get through before you get the efficiencies.” It’s hard to imagine Republican lawmakers asking for similar patience with the Obamacare website or the lack of zeal in figuring out if there are any issues as they are with CONNECT. Sen. Nancy Detert, R-Venice, told Deloitte during Monday’s hearing that her committee wouldn’t ask probing questions about its $63 million contract with Florida. “We’re not here to rake people over the amount of the money,” Detert said. Later, after a series of softball questions, she lauded the project team for their honesty. During Tuesday’s second hearing into CONNECT, when Slosberg sought to ask Panuccio how many eligible recipients have failed to get paid since CONNECT launched, he was cut off by Rep. Carlos Trujillo, R-Miami, the chair of the economic development and tourism committee. “If this is a cross examination, if these are open-ended questions that you know the answer to I’d be happy to entertain them, but, ‘Is it true? Is it not true?’ I will not entertain those questions,” Trujillo said. After the hearing, Slosberg said he would continue to push for answers. “He didn’t want me to ask questions I knew the answers to,” Slosberg said. “But I do know the answers to the questions. If something’s wrong, something’s wrong. The state of Florida has to get this under control.”


Senate Seeks ‘Culture Of Safety’ To Prevent Child Deaths

The question before the Senate committee was simple: Why did Florida’s child welfare system fail to protect the more than 40 children who are known to have died under its care between January and July? Six experts, including the secretary of the Department of Children and Families, had theories, but no answers, at the three-hour hearing of the Senate Children and Families Committee. Child protective investigators and caseworkers are ill-equipped and over-worked, was a common conclusion. The family safety plans -- programs designed by the department to keep children safe -- are inadequate, ineffective or unused, others said. And all concluded that Florida does little to break the recurring cycle of abused kids becoming abusive parents. The goal of the committee is to convert those theories into legislation “to create a culture of safety for our most vulnerable children,” said Sen. Eleanor Sobel, D-Hollywood, the committee chair. The experts made recommendations: from hiring skilled social workers, curbing turnover, drastically reducing worker caseloads, restoring budget cuts to providing more resources for mental health and substance abuse programs. “There are no silver bullets,” Sobel concluded. “But I really believe there might be a silver lining if we all work together.” Christina Spudeas, executive director of the non-profit advocacy group Florida Children’s First, chastised the DCF for reducing its quality assurance staff by 72 percent and allowing agencies to contract with
Each other to provide the required third party review. “In order for us as a community to put in place the proper system is to No. 1, have an awareness that these things are happening,” Spudeas said. “This recent rash of child deaths is alarming but how do we know this is unusual. If it weren't for the Miami Herald and that series of reports, I don't know that we would be here today.” Between Jan. 1 and Oct. 31, 365 children have died because of reported abuse in Florida, said DCF Secretary Esther Jacobo, as horrendous as this sounds, she said, it’s lower than in recent years. DCF asked the Casey Family Programs to study 40 of those deaths in which families had interactions with the child welfare system. The scathing report, delivered Monday, found that when the agency was warned that children in high risk situation were vulnerable to abuse, it rarely intervened in a meaningful way, botched its investigations and left children in a troubled homes without a plan to protect them. Jacobo summarize the findings of the Casey Report to the Senate committee and, at a hearing before the House Healthy Families Subcommittee, she outlined her agency’s response. Neither committee had seen the report and did not discuss it. “We've seen these for many years,” Jacobo told the Senate committee. “These are not something new.” Jacobo said a principle focus of her agency will be on training child protection investigators in new safety plans that, she said, will be a “national model.” While there is no additional money set aside for the program, she was confident there would be more resources in the future. “We’re already I discussions with the gov’s office about additional resources in child welfare,” she said. “So yes, we are going to be talking about more resources.” Jacobo acknowledged that Gov. Rick Scott has asked her agency to cut its budget next year despite these needs and has acknowledged that if hundreds of positions are not restored the ability of the agency to protect children will be hurt. But, she said, she is confident the cuts won’t come from child welfare programs and is hopeful that previous budget cuts will be restored. “Less positions in the field or less positions in quality assurance are big issues for us and we are definitely talking about how to restore those things,” she said. She said that protecting children is “a top priority for the governor” “We're going to ask for what we need,” she said. “I'm very confident that with the kind of information that we now have, and the kind of analysis, we will get what we need and the governor will be happy to champion that for us.” She added, however, that she cannot predict there will not be another child death. “What I can assure everyone is we are working towards making the system better. We are putting in safeguards,” she said. “... but can I guarantee it to you and the public? I can't guarantee what people are going to do to children but we will do our best to keep them safe.” Sen. Jeff Clemens, D-Lake Worth, asked why the agency did not follow up on safety plans, as recommended by agency policy. Jacobo said case workers too often “weren't educated on what a real safety plans is and what that means. “You can't walk away from a family and understand that the loop is closed,” she said. “That has been a problem for many years.” Katherine Essrig, a judge from the 13th Judicial Circuit, said that the vast majority of families she deals with have mental health and substance abuse issues but “we have such a dearth of good services and we really aren't solving that problem.” Sobel asked Jacobo what recommendations she had for legislation to fix the problems. “I will think about it and get back to you but I'm not prepared to do it today,” she replied. That brought a scolding from Sobel, who said a summer of bad publicity should have given her time “to formulate legislation so we don't have the 25 deaths.” “We could study ideas and philosophies to death,” Sobel said. “But its time for us to change the system...I expected from you more of a definitive answer.” The Senate panel also spent much of the meeting discussing the governmental structure in place to protect children and whether the privatized model that has created local Community-Based Care organizations in partnership with the state is still the best approach. Kurt Kelly, CEO of the Florida Coalition for Children, the advocacy group for the community based care organizations, lauded the arrangement as so innovative that other states want to model it. “Under no circumstances, do I want to come in here and say we have arrived,” he said. “Florida has done amazing work in this area. Is it perfect? Of course not.” But Pam Graham, associate professor at the Florida State University School of Social Work, and Spudeas said the system is clearly in need of work. “I don't know that one system or the other is better or worse,” she said. “It's looking at what the end results are.” Graham said the privatized model is fragmented, lacks consistency and inefficiently uses and deploys resources. Spudeas spoke of the heartwarming story of 15-year-old Damien Only who put on a ill-fitting suit and walked into a Pinellas County church in September and asked to be adopted. Born to a mother in prison, he had been in the child protective system since birth, lived in multiple foster care homes, attended numerous schools and only learned that his mother had died when he asked for a copy of his own birth certificate and looked it up online. "I know it's a wonderful story for the rest of the nation, but to me it's alarming," she said. "No, we don't have a perfect system. We do need to look at it. I think the jury's out." (Tampa Bay Times, 11/5/13)


Consumers Foresee Winners And Losers Under Obamacare

After 13 years without insurance, Cindy McNulty is planning to celebrate the New Year by getting a
colonoscopy and a mammogram. For her and many other consumers with pre-existing health problems, the dawn of Obamacare coverage Jan. 1 is a long-overdue blessing. But for every Cindy McNulty, there's a Chuck Longazel, a retired teacher convinced that new rates under Obamacare would cost him hundreds of dollars a month more than his current policy and not provide the same access to doctors and hospitals. These two Floridians reflect winners and losers under the new health-care law — at least as they perceive it. Consumers with health problems and those who qualify for tax credits — a form of subsidy that can cut their premiums by hundreds of dollars a month — are among the big winners. Many others fear they stand to lose money as well as the type of coverage they prefer if their current policies are canceled because they don't meet the new law's requirements. The trouble is, most consumers who are shopping for policies remain unsure of just what they would pay and what coverage it would buy because the Obamacare website for enrolling patients so far has been nearly impenetrable, snagged by glitches that may take another month to fix. "We're telling people they may want to wait a couple of weeks to get all [the computer problems] resolved," said Dawn Steward, who helps administer a "navigator" grant in Orange County to help consumers enroll in insurance plans. "It's a bit of a barrier because sometimes people want to be able to look at the plans first before they answer all these personal questions." Defenders of the law point to many positive examples of consumers who for the first time can find affordable coverage. But the computer problems and other uncertainties leave a cloud of confusion, leading to a wide range of perceptions about what the new policies would cost and cover. "I am anxious to get some major testing: a colonoscopy for New Year's," said McNulty, 59, a diabetic with high blood pressure and a family history of cancer. The single mom in Largo with two children in college said she could not afford $900 a month for insurance through her employer, a nonprofit health group. Unable to tap into HealthCare.gov, the federal website for buying insurance, she submitted a paper application to establish an account. Based on her income, she expects to find a suitable policy for $120 a month, with help from a tax credit. Longazel, 63, of Boynton Beach, who is paying $600 a month as a retired Broward County teacher, said his insurance company already has warned that he would pay far more if forced to buy a new policy on the Obamacare marketplace, known as an exchange. "Even if I pay an extra $300 or $400 a month, would I still get the same quality of care?" Longazel said. "If my current policy is canceled, what's in store for me?" His policy has not been canceled, but hundreds of thousands of others across the nation have been dropped because they don't meet the new law's requirements, raising fears that more cancellations will follow. The law requires insurers to include coverage for mental health, maternity care and medication. They may not exclude people who already are sick or charge them more than healthier patients. As a result, many policies now cost more but have broader coverage and more benefits. Those insured through their employers' group plans can keep their policies, but some consumers may look for a better deal in the individual market. U.S. Rep. Debbie Wasserman Schultz, D-Weston, and other promoters of the law say it will be especially helpful for those with pre-existing health problems, who could hardly find insurance at any price, and for those with modest incomes who next year can get tax credits to help pay for insurance. The refundable tax credits for buying insurance are available to individuals with incomes up to $46,000 a year and families up to $92,000. They are applied at the time of purchase so that consumers do not have to wait for a refund check. "The country needed something like this for all the uninsured, one of them being my son," said Stan Levin, 76, of Altamonte Springs, who is helping his 50-year-old son shop for policies. "In the past he has had to go to the emergency rooms at hospitals," Levin said. "He's quite healthy. He has such an extremely low income. A plan for him might be less than $100 a month because of the [tax credit] subsidy. That's what I was trying to find out on the website, and I still don't know the answer." Stephen Arnold, a retired sailboat captain in Hollywood, resorted to a private insurer's website for information about policies. But he is delighted about his prospects after being unable to get adequate insurance since moving to Florida a year ago, shortly after being diagnosed with a rare form of bone cancer. Arnold and his partner qualify for an $888 federal subsidy, which will reduce their premium to $712 a month — less than his old plan — for a policy that also covers expensive chemotherapy drugs. The cancer "has been depleting my life savings very rapidly," Arnold said. Obamacare "has taken that stress away. This has allowed me to focus on my illness instead of my medical bills. I couldn't say enough good things about it." But to skeptics such as Jerry Pierce of Orlando, all these subsidies and benefits are bound to create a costly burden for somebody. "So what groups do the insurance companies go after when they are squeezed in the other areas? Who's left to give premium increases to?" asked Pierce, founder of a restaurant-equipment company and Florida chairman of the National Federation of Independent Business. "That's small businesses and individuals who are not allowed to have tax deductions. They are being nailed big-time by the cost of this." Defenders of the law dispute that prediction. But it will be hard to settle the matter until a functioning government website clears up much of the confusion over costs and plans. In the meantime, the consequences for consumers remain caught in a politically charged debate. (South Florida Sun-Sentinel, 11/3/13)

http://www.sun-sentinel.com/health/fl-health-signup-winners-losers-20131101_0,1168298.story
1.6 Million Floridians Could Get Tax Credits Through Health-Care Exchange, Study Says

Once the federal health-insurance-exchange website starts working correctly, 1.6 million Floridians could find that they are eligible for tax credits, says a new study released Tuesday. Florida ranks third, after Texas and California, for the state having the most residents that could get subsidies if they purchase coverage through the exchange, according to the report from the Kaiser Family Foundation, a nonprofit health-advocacy group. The state-by-state analysis based estimates on how many residents currently lack insurance and their income levels. Nationwide, 17 million people will be eligible for tax credits, the reports estimates. This includes 2 million in Texas and 1.9 million in California. Florida ranks third for the largest number of residents eligible for tax credits. Norma Orta Simmons of Kissimmee is one of them. Simmons, 62, looks forward to seeing her monthly insurance payment go from $451 a month to $30 a month, thanks to a tax credit she will begin getting next year. Simmons had to quit her pharmaceutical job last year after she was diagnosed with breast cancer. She has since had a double mastectomy and lives on $1,281 a month from Social Security. More than one-third of that goes to pay for her health insurance, which she gets through COBRA. She learned of her options Monday with the help of a navigator at an enrollment event at the Osceola Council on Aging. The new study provides a glimpse into the potential reach of the law’s tax credits, which are designed to help low- and moderate-income people buy health insurance, Kaiser spokesman Craig Palosky said. The wild card is how many actually will. Currently about 3.5 million Floridians, or one in five, lack health-care coverage. "We can't speculate how many of those eligible will actually sign up," Palosky said. Not helping is the fact that healthcare.gov, the insurance exchange website governing the enrollment, hasn't worked well since it launched Oct. 1. The site's problems have prevented many consumers from signing up. Obama administration officials promise the glitches will be worked out by the end of this month. The number of Florida residents eligible for the tax subsidies is high in Florida mostly because it's the fourth-most-populous state. Brian Klepper, a health-care analyst and partner in WeCare TLC, a Lake Mary-based medical-management company that helps employers reduce health-care costs, offers another reason: The state has a small number of large businesses. "Large businesses provide good coverage for their workers," Klepper said. "However, in Florida, the insurance environment is dominated by small businesses, which often either don't offer insurance or provide poor coverage options." To qualify for tax credits, people must earn 100 percent to 400 percent of the federal poverty level, or $23,550 to $94,200 annually for a family of four, and must not be eligible for affordable coverage from an employer or from Medicaid or Medicare. In Florida, one of 23 states that opted not to expand Medicaid, uninsured residents who earn less than 100 percent of the federal poverty limit and who don't qualify for Medicaid could be left without assistance. An earlier analysis by Kaiser Foundation estimated that 763,000 Floridians will fall into that coverage gap, or 27 percent of noninsured adults not covered by Medicare. Meanwhile, those who are eligible for a tax credit are sometimes surprised. "I thought I would have to pay a lot more," Simmons said. Though she technically isn't enrolled in the silver-level plan she selected on the exchange, she looks forward to confirming that plan once the site is working. (South Florida Sun-Sentinel, 11/5/13)

http://www.sun-sentinel.com/business/os-aca-tax-subsidies-20131105,0,996923.story

Poor Floridians Stuck In Health 'Coverage Gap'

Because state Republican leaders decided not to expand Medicaid, 763,890 low-income Floridians are stuck in a health care "coverage gap." They earn too much to be eligible for Medicaid but not enough to qualify for tax credits worth hundreds of dollars a month to pay for insurance premiums under Obamacare. This coverage gap will leave them without an affordable health-care option, according to a report released on Tuesday by the Kaiser Family Foundation. The new health-care law was designed to cover millions of the uninsured nationwide by expanding the number of people eligible for Medicaid. Those who would qualify for Medicaid, based on incomes up to 138 percent of the poverty level, presumably would be covered. So the law did not provide them with tax credits, an enormous help for buying health insurance under Obamacare. Lawmakers had assumed that states would go along with the expansion, knowing Uncle Sam would pay most of the added cost. But Florida and some other Republican-run states, deeply resistant to Obamacare, decided not to expand. About 5 million nationwide are in the coverage gap. Just over 1 million – one-fifth of the total – live in Texas. About 16 percent – 763,890 – live in Florida. "People in the coverage gap are likely to face barriers to needed health services or, if they do require medical care, potentially serious financial consequences," the Kaiser report concluded. "Millions will be helped by the insurance provisions in the law; however, more than 5 million poor adults in states not expanding Medicaid coverage will be ineligible for assistance, while millions more who earn more than they do will receive tax credits to help them pay for coverage in the new insurance Marketplaces." (South Florida Sun-Sentinel, 11/5/13)


Florida DCF Savaged For Failing To Save More Children
Two years ago, Destene Simmons grabbed a pillow and held it over the face of her son in an apparent attempt to smoother him. Antwan Hope screamed. Simmons' mother barged in the room. Tragedy was averted. The Department of Children & Families took no action -- despite a police report on the incident -- explaining later Antwan never bothered to tell them what his mother tried to do. Antwan was 2. That story and others emerged Tuesday in a scathing report on DCF's systemic failure to protect children in dangerously dysfunctional households. The child welfare agency commissioned the report by the respected Casey Family Programs after the Herald catalogued the stories of children from families with DCF histories who had died over the spring and summer. The report, released to committees of the Florida Senate and House in Tallahassee, paints a particularly bleak picture of DCF's child protection system. Among its findings:

- Though the leading cause of death among the 40 children in the review was smothering in bed by parents or family members -- many of them drug addicts -- DCF seldom intervened in a meaningful way, other than requiring parents from troubled families to promise to stop sleeping in the same bed as their infants. Those promises were quickly forgotten in a drug- or booze-addled haze. "Giving information regarding co-sleeping to drug-addicted parents, or to substance-abusing parents not established in a recovery process, and having these parents sign agreements to refrain from co-sleeping with infants, is a highly risky and questionable basis for safety planning," the report said.
- Investigators often failed miserably to assess and understand the dangers children faced with violent, drug-abusing parents.
- "Domestic violence and substance abuse dynamics were woefully underexplored," the report said of one case, adding: "The overall thoroughness of the investigations leading up to the child's death is highly questionable."
- Investigators left children in troubled homes without developing a plan to protect them, and often relied on nothing more than a parent's pledge to protect their children. With few exceptions, the report said, investigators failed to ensure troubled parents received state services designed to protect the children -- such as free child care, which would have guaranteed objective caregivers kept an eye on them or home visits by specially trained nurses.

In general, the report said, investigators were often beset by tunnel vision, considering only the narrow allegations of an abuse report rather than the overall functioning of a family. DCF's interim secretary, Esther Jacobo, wrote in a memo Tuesday that she initiated and released the review because "we must be open about our failures in order to improve."

"We cannot lose sight of the fact that each individual case represents a young life that was tragically cut short," Jacobo wrote. "These innocent victims should serve as our inspiration." In comments before the Senate's Children & Families Committee Tuesday morning, Jacobo acknowledged few of the report's findings or recommendations were new. "We've seen these for many years," she told lawmakers, in a sentiment echoed by the head of the state's private foster care coalition. "What we just heard about the findings was not surprising to us," said Kurt Kelley, CEO of the Florida Coalition for Children. The committee also heard from a panel of experts about what changes should be made to prevent future child deaths. Recommendations ranged from hiring skilled social workers, dramatically reducing worker caseloads, restoring budget cuts and providing more resources for mental health and substance abuse programs to keep families safe. Christina Spudeas, executive director of the nonprofit advocacy group Florida Children's First, chastised DCF for reducing its quality assurance staff by 72 percent and allowing agencies to contract with each other to provide the required third-party review. Jacobo acknowledged Gov. Rick Scott has asked her agency to cut its budget next year, but said she is confident critical services will be protected. Scott spokesman John Tupps said the cuts are because the governor is "prioritizing spending on critical services" and he emphasized "vital child protective services will not be reduced." Included among 13 specific recommendations: The state should develop an array of services, including free child care, in-home parenting instruction and respite care, to help struggling families take better care of their children. Investigators should avoid pledges by parents, or "promissory plans," as a method for protecting children, and instead rely on concrete measures, including more frequent home visits. DCF should create a computer-based system for "flagging" cases where parents are reported to the state's abuse hotline again and again. Among the child deaths examined by the Casey organization: Antwan Hope. Although it took no action at the time of the would-be smothering, DCF removed the child from his mother months later after she was repeatedly committed for psychiatric treatment and had threatened to hurt Antwan. Last summer, DCF's private child welfare group in Broward, ChildNet, made a disastrous decision. They gave Antwan back to his mom. He was dead within hours, under circumstances still not been explained by DCF or anyone else. After Antwan's death, his mother waited roughly 15 hours to call police. She has not been charged. The Casey group said DCF workers should have seen it coming. "What may have been the attempted murder of this child in 2011 was disregarded because the child, less than 3-years-old at the time of the attempted suffocation, did not 'disclose' that the incident had occurred," the report noted. Antwan's case was among several, the report said, in which child abuse investigators failed to intervene even when parents had exhibited "hostility or possible homicidal intent." (Bradenton Herald, Miami Herald, 11/6/13)
E-Newsletter – State News
Florida Council
November 11, 2013

http://www.bradenton.com/2013/11/06/4812481/dcf-savage-for-failing-to-save.html

Committee Seeks Changes Aimed At Preventing Future Child Deaths

The question before the Senate committee was simple: Why did Florida’s child welfare system fail to protect the more than 40 children who are known to have died under its care between January and July? Six experts, including the secretary of the Department of Children and Families, had theories, but no answers, at the three-hour hearing of the Senate Children and Families Committee. Child protective investigators and caseworkers are ill-equipped and over-worked, was a common conclusion. The family safety plans — programs designed by the department to keep children safe — are inadequate, ineffective or unused, others said. And all concluded that Florida does little to break the recurring cycle of abused kids becoming abusive parents. The committee’s goal is to convert those theories into legislation “to create a culture of safety for our most vulnerable children,” said Sen. Eleanor Sobel, D-Hollywood, the committee chair. The experts made recommendations: from hiring skilled social workers, curbing turnover, drastically reducing worker caseloads, restoring budget cuts to providing more resources for mental health and substance abuse programs. “There are no silver bullets,” Sobel concluded. “But I really believe there might be a silver lining if we all work together.” Christina Spudeas, executive director of the non-profit advocacy group Florida Children’s First, chastised the DCF for reducing its quality assurance staff by 72 percent and allowing agencies to contract with each other to provide the required third party review. “In order for us as a community to put in place the proper system is to No. 1, have an awareness that these things are happening,” Spudeas said. “This recent rash of child deaths is alarming but how do we know this is unusual. If it weren’t for the Miami Herald and that series of reports, I don’t know that we would be here today.” Between Jan. 1 and Oct. 31, 365 children have died because of reported abuse in Florida, said DCF Secretary Esther Jacobo, as horrendous as this sounds, she said, it’s lower than in recent years. DCF asked the Casey Family Programs to study 40 of those deaths in which families had interactions with the child welfare system. The scathing report, delivered Monday, found that when the agency was warned that children in high risk situation were vulnerable to abuse, it rarely intervened in a meaningful way, botched its investigations and left children in a troubled homes without a plan to protect them. Jacobo summarize the findings of the Casey Report to the Senate committee and, at a hearing before the House Healthy Families Subcommittee, she outlined her agency’s response. Neither committee had seen the report and did not discuss it. “We’ve seen these for many years,” Jacobo told the Senate committee. “These are not something new.” Jacobo said a principal focus of her agency will be on training child protection investigators in new safety plans that, she said, will be a “national model.” While there is no additional money set aside for the program, she was confident there would be more resources in the future. “We’re already I discussions with the governor’s office about additional resources in child welfare,” she said. “So yes, we are going to be talking about more resources.” Jacobo acknowledged that Gov. Rick Scott has asked her agency to cut its budget next year despite these needs and has acknowledged that if hundreds of positions are not restored the ability of the agency to protect children will be hurt. But, she said, she is confident the cuts won’t come from child welfare programs and is hopeful that previous budget cuts will be restored. “Less positions in the field or less positions in quality assurance are big issues for us and we are definitely talking about how to restore those things,” she said. She said that protecting children is “a top priority for the governor.” “We’re going to ask for what we need,” she said. “I’m very confident that with the kind of information that we now have, and the kind of analysis, we will get what we need and the governor will be happy to champion that for us.” She added, however, that she cannot predict there will not be another child death. “What I can assure everyone is we are working towards making the system better. We are putting in safeguards,” she said. “... but can I guarantee it to you and the public? I can’t guarantee what people are going to do to children but we will do our best to keep them safe.” Sen. Jeff Clemens, D-Lake Worth, asked why the agency did not follow up on safety plans, as recommended by agency policy. Jacobo said case workers too often “weren’t educated on what a real safety plans is and what that means. “You can’t walk away from a family and understand that the loop is closed,” she said. “That has been a problem for many years.” Katherine Essrig, a judge from the 13th Judicial Circuit, said that the vast majority of families she deals with have mental health and substance abuse issues but “we have such a dearth of good services and we really aren’t solving that problem.” Sobel asked Jacobo what recommendations she had for legislation to fix the problems. “I will think about it and get back to you, but I’m not prepared to do it today,” she replied. That brought a scolding from Sobel, who said a summer of bad publicity should have given her time “to formulate legislation so we don’t have the 25 deaths.” “We could study ideas and philosophies to death,” Sobel said. “But its time for us to change the system...I expected from you more of a definitive answer.” The Senate panel also spent much of the meeting discussing the governmental structure in place to protect children and whether the privatized model that has created local Community-Based Care organizations in partnership with the state is still the best approach. Kurt Kelly, CEO of the Florida Coalition for Children, the advocacy group for the community based care organizations, lauded the arrangement as so innovative that other states want to
model it. "Under no circumstances, do I want to come in here and say we have arrived," he said. "Florida has done amazing work in this area. Is it perfect? Of course not." But Pam Graham, associate professor at the Florida State University School of Social Work, and Spudeas said the system is clearly in need of work. "I don't know that one system or the other is better or worse," she said. "It's looking at what the end results are." Graham said the privatized model is fragmented, lacks consistency and inefficiently uses and deploys resources. Spudeas spoke of the heartwarming story of 15-year-old Damien Only who put on a ill-fitting suit and walked into a Pinellas County church in September and asked to be adopted. Born to a mother in prison, he had been in the child protective system since birth, lived in multiple foster care homes, attended numerous schools and only learned that his mother had died when he asked for a copy of his own birth certificate and looked it up online. "I know it's a wonderful story for the rest of the nation, but to me it's alarming," she said. "No, we don't have a perfect system. We do need to look at it. I think the jury's out." (Miami Herald, 11/5/13)

http://www.miamiherald.com/2013/11/05/vprint/3733664/committee-seeks-changes-aimed.html

**DCF Consultant Rips Agency For Fatally Bungled Child Safety Efforts**

Antwan Hope, who died at age 4. Two years ago, Destene Simmons grabbed a pillow and held it over the face of her son in an apparent attempt to smother him. Antwan screamed. Simmons’ mother barged in the room. Tragedy was averted. The Department of Children & Families took no action — despite a police report on the incident — explaining later that Antwan never bothered to tell them what his mother tried to do. Antwan was 2. That story, and others, emerged Tuesday in a scathing report on DCF’s systemic failure to protect children in dangerously dysfunctional households. The child welfare agency commissioned the report, by the respected Casey Family Programs, after the Herald catalogued the stories of children from families with DCF histories who had died over the spring and summer. The report, released to committees of the Florida Senate and House in Tallahassee, paints a particularly bleak picture of DCF’s child protection system. Among its findings:

- Though the leading cause of death among the 40 children in the review was smothering in bed by parents or family members — many of them drug addicts — DCF seldom intervened in a meaningful way, other than requiring parents from troubled families to promise to stop sleeping in the same bed as their infants. Those promises were quickly forgotten in a drug- or booze-addled haze. “Giving information regarding co-sleeping to drug-addicted parents, or to substance-abusing parents not established in a recovery process, and having these parents sign agreements to refrain from co-sleeping with infants, is a highly risky and questionable basis for safety planning,” the report said.

- Investigators often failed miserably to assess and understand the dangers children faced with violent, drug-abusing parents. "Domestic violence and substance abuse dynamics were woefully underexplored," the report said of one case, adding: "The overall thoroughness of the investigations leading up to the child’s death is highly questionable.”

- Investigators left children in troubled homes without developing a plan to protect them, and often relied on nothing more than a parent’s pledge to protect their children. With few exceptions, the report said, investigators failed to ensure that troubled parents received state services designed to protect the children — such as free child care, which would have guaranteed that objective caregivers kept an eye on them, or home visits by specially trained nurses.

In general, the report said, investigators were often beset by tunnel vision, considering only the narrow allegations of an abuse report, rather than the overall functioning of a family. DCF’s interim secretary, Esther Jacobo, wrote in a memo Tuesday that she initiated and released the review because “we must be open about our failures in order to improve.” “We cannot lose sight of the fact that each individual case represents a young life that was tragically cut short,” Jacobo wrote. “These innocent victims should serve as our inspiration.” In comments before the Senate’s Children & Families Committee Tuesday morning, Jacobo acknowledged that few of the report’s findings or recommendations were new. “We’ve seen these for many years,” she told the lawmakers, in a sentiment that was echoed by the head of the state’s private foster care coalition. “What we just heard about the findings was not surprising to us,” said Kurt Kelley, CEO of the Florida Coalition for Children. The committee also heard from a panel of experts about what changes should be made to prevent future child deaths. The recommendations ranged from hiring skilled social workers, dramatically reducing worker caseloads, restoring budget cuts and providing more resources for mental health and substance abuse programs to keep families safe. Christina Spudeas, executive director of the non-profit advocacy group Florida Children’s First, chastised DCF for reducing its quality assurance staff by 72 percent and allowing agencies to contract with each other to provide the required third party review. Jacobo acknowledged that Gov. Rick Scott has asked her agency to cut its budget next year, but said she is confident critical services will be protected. Scott spokesman John Tupps said the cuts are because the governor is “prioritizing spending on critical services” and he emphasized that “vital child protective services will not be reduced.” Among 13 specific recommendations, the Casey staff said: The state should develop an array of
services, including free child care, in-home parenting instruction and respite care, to help struggling families take better care of their kids. Investigators should avoid pledges by parents, or “promissory plans,” as a method for protecting kids, and instead rely on concrete measures, including more frequent home visits. DCF should create a computer-based system for “flagging” cases where parents are reported to the state’s abuse hotline again and again. Among the child deaths examined by the Casey organization: Antwan Hope. Although it took no action at the time of the would-be smothering, DCF removed the child from his mother months later after she was repeatedly committed for psychiatric treatment and had made threats that she would hurt Antwan. This past summer, DCF’s private child welfare group in Broward, ChildNet, made a disastrous decision. They gave Antwan back to his mom. He was dead within hours, under circumstances that still have not been explained by DCF or anyone else. After Antwan’s death, his mother waited 10 to 15 hours to call police. She has not been charged. The Casey group said DCF workers should have seen it coming. “What may have been the attempted murder of this child in 2011 was disregarded because the child, less than 3-years-old at the time of the attempted suffocation, did not ‘disclose’ that the incident had occurred,” the report noted. Antwan’s case was among several, the report said, in which child abuse investigators failed to intervene even when parents had exhibited “hostility or possible homicidal intent.” (Miami Herald, 11/5/13)

http://www.miamiherald.com/2013/11/05/print/3733166/dcf-consultant-rips-agency-for.html

David Lawrence Center Adds Aaron Lapp to Development Team

The David Lawrence Center is pleased to welcome Aaron Lapp as Director of Development. In this role, he will be responsible for major gift solicitations and will oversee the grant and corporate partner programs. In addition, he will manage the David Lawrence Foundation’s newest signature fundraiser the “Music Festival for Mental Health” symposium coming spring 2014. Hailing from New York, Lapp has more than 18 years of non-profit fundraising experience with seven years as a Director of Development. In his most previous position with the Guidance Center of Westchester in Mount Vernon, New York, Lapp was responsible for developing diverse, innovative solicitation programs, stewarding major individuals, corporations and foundations, researching and writing grant proposals, and coordinating special events. He also previously held management and consulting positions with RKG Fundraising Services, the Cenacle Retreat Center, Project Morry and Consulting for a Cause. Lapp graduated with his bachelor of science in graphic design from State University College at Buffalo. His professional affiliations include membership with the Association of Development Officers, where he held the office of Vice President of External Communications and Co-Vice President of Membership. David Lawrence Center is the Southwest Florida-based, not-for-profit leading provider of behavioral health solutions dedicated to inspiring and creating life-changing wellness for every individual. The Center provides innovative, comprehensive inpatient, outpatient, residential and community based prevention and treatment services for the one in four local children and adults who experience mental health, emotional, psychological and substance abuse challenges. David Lawrence Center has eight locations in Collier County and touches the lives of more than 30,000 people each year. (Naples Daily News, 11/5/13)

a sign of progress. But much of the drop has been linked to a shrinking labor-force participation rate — the percentage of people who are either working or looking for work. When that rate falls, it tends to make the jobless rate appear better than it really is. In Florida, the labor-force participation rate is just under 60 percent. The national rate in September was 63.2 percent. It has been gradually declining for more than a decade. The state’s labor-force participation rate had been climbing until the economy fell apart in 2008. The Florida forecast is produced quarterly by UCF’s Institute for Economic Competitiveness. Researchers review data on a range of economic indicators — both national and statewide — to make projections for a three-year period. (Orlando Sentinel, 11/6/13)

http://www.orlandosentinel.com/business/os-ucf-economic-forecast-20131104,0,5455722.story

Pinellas Program For At-Risk Girls Celebrates 17 Years

The lobby of the St. Petersburg Marriott was full of poised young women Tuesday, hobnobbing with judges and state senators, and addressing some of Pinellas County’s key political players by name. Not long ago, though, the 12- to 18-year-old girls of Pinellas County’s PACE Center for Girls were on a path many feared would land them in jail. The organization celebrated its 17th anniversary Tuesday with a fundraiser to help expand the program, the only one of its kind for at-risk teenage girls in Pinellas County. There’s a pressing need for financial donations to fill a 30-percent gap — about $250,000 — in the program’s budget but also people to become mentors and volunteers, said Executive Director Sally Zeh. “The girls have so many risk factors coming in and so many burdens that I think adults would just collapse under the pressure,” Zeh said. “But every day I come to work I see miracles.” A majority of the 3,000 girls that have filtered through the PACE Center since its inception in 1997 were living at or below the poverty level and were sexually or physically abused, Zeh said. Others struggle with drug addiction, depression, homelessness and difficult home situations. Yet statistics show that as more girls enter the PACE system, more are also graduating high school. Female high school graduation rates in Pinellas County have slowly grown from 70 percent in the 2010-2011 school year to 77.5 percent in 2011-2012, the latest data available. PACE has helped, but there is still much work to be done, especially with minority students and those living in poverty, Zeh said. Only 64 percent of black females in the county graduate high school, compared to 82 percent for white female students and 86 percent for Asian girls. PACE has become an essential resource for the county, and girls who find themselves in the juvenile justice system are often mandated to attend their courses, said Pinellas Sheriff Bob Gualtieri. Girls can live at the Pinellas Park center free of charge for as long as a year, attend classes with certified teachers, make up missing school credits and participate in community service projects. The staff of 17 also includes nurses and counselors that help girls overcome mental illness, drug addiction, obesity and other diseases that come from living in a broken home. “And it does help that boys aren’t around,” said 17-year-old Kayla Corretjer, who hopes to use her time at PACE to catch up on her credits and graduate with her class at Dixie Hollins High School in St. Petersburg. Boys are one of the biggest distractions that lead to young girls getting in trouble, causing many to “do things they wouldn’t normally do at the behest of their boyfriends,” said Sally Parks, the former county commissioner and School Board member who started the Pinellas chapter of PACE. About 55 girls are currently enrolled in PACE, but there are countless others who “fly under the radar” each year while their male counterparts receive specialized attention, particularly in the juvenile justice system, she said. (Tampa Tribune, 11/5/13)

http://tbo.com/pinellas-county/pinellas-program-for-at-risk-girls-celebrates-17-years-20131105/

WellCare Wins New Medicaid Contract

WellCare Health Plans is forecast to remain No. 1 in Florida Medicaid managed care enrollment next year after winning a challenge to a state contracting decision affecting patients in northeast Florida. According to a new report from the Wall Street firm Stifel, Nicolaus & Co., WellCare’s enrollment at the completion of the statewide Medicaid managed-care rollout will likely edge out that of Centene Corp., which does business in Florida as Sunshine State Health Plan. WellCare, based in Tampa, has held the largest market share of Florida Medicaid HMO enrollees for more than a decade. Centene, which is also publicly traded, had gained projected enrollment last month after challenging a contract decision in September by the Agency for Health Care Administration, as Health News Florida reported. But according to the latest report from Tom Carroll, a Stifel analyst, WellCare moved back into “pole position” on Oct. 31 after it was awarded contracts in Region 4, which includes Baker, Clay, Duval, Flagler, Nassau, St. Johns and Volusia counties. Based on all of the contract awards, including those announced in September and more recent additions in October, WellCare is likely to end up with 669,000 Florida Medicaid members, Carroll said. Centene is projected to have total membership of 606,000. Most of those members are young children and their mothers. Those who haven’t enrolled in an HMO by next year -- and many already have -- will be required to do so, region by region. AHCA is currently busy enrolling a different population in managed care: low-income elderly and disabled patients who are in nursing homes or in the community but need assistance to remain there.
The statewide Medicaid managed care initiative is aimed at improving coordination of care, keeping patients healthy and holding costs down, AHCA says. (Health News Florida, 11/6/13)

http://wusnews.wusf.usf.edu/post/wellcare-reclaims-medicaid-contracts-lead

**Florida TaxWatch Finds $1 Billion In Savings For Taxpayers**

Florida TaxWatch released its annual cost-savings and efficiency recommendations for Florida in "Modern Management & Sensible Savings" Wednesday, highlighting more than $1 billion in savings for Florida taxpayers without reducing state-provided services. "The TaxWatch recommendations are designed to identify opportunities to improve efficiency and accountability while saving taxpayer dollars," said Dominic M. Calabro, president and CEO of Florida TaxWatch, the independent, nonpartisan, nonprofit taxpayer research institute and government watchdog. "Each recommendation contains a solution that our state's elected leaders can act upon to help the Sunshine State better serve its customers, who are ultimately Florida taxpayers." Six comprehensive recommendations included in the report address replacement of the state's accounting system; information technology governance, procurement and state asset management; pension reform; criminal justice reform; state health insurance reforms; and revenue maximization. "This report presents ideas that have been fully vetted by business leaders, public servants with knowledge of government operations, and TaxWatch research staff," said John R. Alexander, chairman of the TaxWatch Center for Government Efficiency. "These recommendations are responsible, proactive, and the right solutions for all Floridians. I am confident in my hope that Florida's elected leaders take these recommendations into consideration as they determine how to allocate taxpayer dollars in the coming Session and beyond." One key recommendation of this year's report is to replace the state's antiquated accounting system, which is more than 30 years old. Replacing the Florida Accounting Information Resource (FLAIR) will, according to a press release from Florida TaxWatch, increase efficiency and transparency in Florida's $74 billion budget. The cost-savings recommendations included in the report may help offset the cost of a $500 million tax cut proposed by Florida lawmakers this year. "Florida lawmakers have done an incredible job incorporating cost-saving measures in the budget during the last several years, but TaxWatch continues to recommend a few key improvements that will have a significant impact on Florida and its taxpayers," added Calabro. TaxWatch has been publishing its annual cost-savings reports through the Florida TaxWatch Government Cost Savings Task Force since 2009. Since then, the Florida Legislature has incorporated many of TaxWatch's recommendations, resulting in more than $4.2 billion in savings for Florida taxpayers. "Even as our policymakers and elected officials enter the fiscal year with a budget surplus, it is crucial that reforms are made to increase efficiency and reduce spending to ensure that Florida faces an economically stable future," said John B. Zumwalt III, Florida TaxWatch chairman. "It is our hope that the Legislature considers these recommendations while they determine how to spend Floridians' hard-earned dollars in 2014." (Sunshine State News, 11/6/13)

http://www.sunshinestatenews.com/blog/florida-taxwatch-points-1-billion-savings-taxpayers-0

**NFRMC To Build $4M Behavioral Health Center**

North Florida Regional Medical Center is building a new behavioral health center, which is scheduled to open in February 2014, according to a NFRMC media release Tuesday. The center is for adult patients and will provide inpatient services. The new center at NFRMC is costing about $4 million. It will be located on the fourth floor of the North Tower. Mark Steinbauer, Interim Director of The Behavioral Center at NFRMC, said in the media release: "By increasing the number of psychiatric beds in our community, we're part of a much-needed solution that we believe will really make a difference for a group of people with very unique needs." Steinbauer said that Florida has 17 behavioral health beds per 100,000 residents. HCA, the hospital group that owns NFRMC, reports a 12.6 percent increase in behavioral health admissions in 2011-2012 among 54 hospitals across the country. (Gainesville Sun, 11/5/13)


**FL Shorted on Doctor-Training Funds**

Many have grumbled about it before, but now it’s been officially noted in the nation’s top health-policy journal, Health Affairs: Florida gets shortchanged when it comes to graduate medical education funding from Medicare.
As Kaiser Health News’ Phil Galewitz reports, the George Washington University study published Monday shows that states in the northeast receive a disproportionate share in funding per capita to provide hands-on residency training to newly minted physicians. New York State, which has about the same population as Florida, has five times as many training slots and seven times as much Medicare funding for them as this state, the study found. Each of these states gets more than $71 in funding per each resident compared to $14 for Florida and $11.50 for Texas, the study show. At the bottom is Montana, which gets $1.94 per resident. The funding imbalance matters because there is a shortage of physicians in Florida and they are most likely to practice in the state where they complete residency training. (Health News Florida, 11/5/13)

http://health.wusf.usf.edu/post/fl-shorted-doctor-training-funds

Lawmakers Look For Cures To Health System Needs

Baby boomers are getting older. So are primary-care doctors and nurses. And Florida’s population continues to grow. That combination could create a prescription for problems in Florida’s health-care system during the next two decades. A House committee Wednesday began studying the complex set of issues, as it looks for ways to make sure the state has enough doctors and other health-care workers to meet its needs. It’s too early to know what the committee will recommend, but ideas range from taking steps to train -- and keep -- more doctors in Florida to using new technology such as telemedicine. State economist Amy Baker presented information to the committee that pointed toward problems as the state moves toward 2030, the year when the first batch of baby boomers will hit their mid-80s. By that time, Florida's population is projected to grow to 23.6 million from the 2012 total of roughly 19 million, and nearly a quarter of the residents are expected to be ages 65 or older. Baker said baby boomers will be relatively healthy and have financial assets when they first retire, but they will need more health-care services and their bank accounts will shrink as 2030 gets closer. The baby boom generally includes people born from 1946 to 1964. "We're at the very front end of this demographic shift," Baker said. The health-care system's needs, however, involve far more factors than just a growing and aging population. As an example, the federal Affordable Care Act is designed to help uninsured people get coverage, which likely means they will go more often to doctors. Also, information presented to the committee showed that, overall, primary-care doctors and nurses are aging. That points to many younger physicians choosing specialties instead of primary care. "What I see there is our younger physicians are increasingly moving away from primary care," Rep. Cary Pignan, an Avon Park Republican who is a physician, said about some of the data presented to the committee. House Speaker Will Weatherford, R-Wesley Chapel, created the Select Committee on Health Care Workforce Innovation in July, with his office saying the panel "will study and pursue solutions for ensuring access to the right care in the right setting, including methods for increasing the number of practitioners educated in Florida, allowing practitioners to practice to the full extent of their education and training, and attracting a world-class health care workforce to Florida. It remains unclear, however, how lawmakers will carry out that mission, and health-care lobbyists fanned out across a committee room to listen Wednesday. Ideas such as shifting responsibilities from doctors to other types of medical professionals -- a possible way the state could try to meet some of the needs -- often touch off lobbying battles in Tallahassee. The Florida Medical Association, a politically powerful physicians group, has started circulating a list of proposals to help address the shortage of primary-care doctors and nurses. Among them: Increase funding for medical residency programs so that more primary-care doctors would be able to finish their training in the state, with the hope they would then stay in Florida to practice. Another FMA proposal would involve expanding the use of telemedicine, with doctors being able to use new technology to care for patients online. A major shift into telemedicine, however, would require addressing a series of sticky issues such as ensuring patient privacy and determining whether insurance companies would pay for telemedicine like they do for face-to-face treatment. (Sunshine State News, 11/7/13)
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Nelson Advises: 'Burn Their Fingers'

Sen. Bill Nelson is urging the Obama administration to go after the contractors who helped set up the problem-plagued HealthCare.gov website and “burn their fingers.” Speaking Wednesday at a Senate Finance Committee hearing to examine why millions of people have been unable to sign up for health coverage, the Florida Democrat called the situation “inexcusable.” “As someone who has fought and bled for this (law) and who sincerely thinks that it’s gonna work in the long run, I want you to hold them to account,” he told Health and Human Services Secretary Kathleen Sebelius. “I want you to burn their fingers and make ‘em pay for not being responsible and (not) producing a product that all of us could be proud of.” Republicans at the hearing focused their anger on Sebelius and voiced broad objections to the 2010 health care law, which they would like to defund or repeal. Representatives of the chief contractors who put together the HealthCare.gov website were not invited to testify at the hearing. But they told lawmakers at a House Energy and Commerce hearing last month that “end-to-end” testing of the site was incomplete and that confusion among the technology firms, as well as higher-than-expected demand for the online marketplace, led to its problems. Andrew Slavitt of Optum/QSSI said the contractors’ concerns, which mostly related to testing, were shared with officials at the Center for Medicare and Medicaid Services, the government agency directly in charge of the website. He said they understood the issues and were working on them. “We did fully talk about the risks that we saw, and we passed them along,” Slavitt told the lawmakers last month. The Congressional Budget Office initially projected that as many as 7 million Americans who don’t get health coverage through an employer or the government would get insurance through the exchanges in 2014. That number is forecast to reach 24 million within 10 years. The exchanges, essentially online marketplaces where consumers can shop for plans, officially opened Oct. 1. The federal website serves 36 states, including Florida. Other states set up their own sites under the 2010 health care law. Technical glitches with the federal site have slowed enrollment to a trickle. HHS officials are expected to release state-by-state data next week. Sebelius told senators Thursday that enrollment numbers “are likely to be quite low.” Consumers have until March 31 to sign up for coverage in 2014. Nearly one-quarter of Floridians under 65 lack health insurance, according to the independent Kaiser Family Foundation. Only Texas (27 percent) and Nevada (25 percent) have a greater portion of residents without coverage. Sebelius called access to the federal website “a miserably frustrating experience for far too many Americans,” and said the problems are being fixed with the help of outside experts. The average time it takes pages to load on HealthCare.gov has been cut from eight seconds to less than one, she told senators. Viewing and filtering health plans can be done in seconds today, compared to the minutes it took when the site opened. Many consumers who used to see a blank screen at the end of their application process now arrive at a page to assess whether they qualify for financial assistance. She said HHS and CMS hope to have most remaining problems fixed by the end of the month. Utah Sen. Orrin Hatch, the top Republican on the Senate Finance Committee, blasted Sebelius for ignoring alarms raised by independent watchdogs that identified “significant implementation challenges” months ahead of the site’s October 1 launch. “It is clear the problems you encountered so far were not unforeseen,” Hatch told her. Nelson said the contractors should shoulder much of the blame. He asked Sebelius what legal authority the agency had to pursue private companies who botched the job. “We will make sure that funding that has been provided delivers on the product that was promised,” she responded. “We’re working with auditors and our teams to make sure that as bills come in they are clearly reviewed and that we have the opportunity to make sure that the product that we need and have committed to is delivered.” A spokesman for CGI Federal, a key contractor, said the company would have no response to Nelson’s comments. Optum/QSSI did not immediately respond to requests for comment. As they have for weeks, Republicans pushed Wednesday to delay the implementation of the health care law while the technical hiccups are fixed and larger issues surrounding costs, coverage and privacy are sorted out. Nelson disagreed, as did Sebelius. Shelving the Affordable Care Act, she said, wouldn’t hold off the diseases facing the uninsured. “So for millions of Americans, delay is not an option.” she told senators. “People’s lives depend on this. Too many hard-working people have been waiting for too long for the ability to obtain affordable health insurance.” (Tallahassee Democrat, 11/7/13)


Florida Gets More Health Centers Through Obamacare

Florida will get 16 new federal health centers, paid by $8.3 million of grant money, to help low-income patients, including those who sign up for health insurance under Obamacare. Health and Human Services officials said the funds, available through the Affordable Care Act, will help care for 72,999 additional Floridians by establishing new health center service delivery sites. The federal centers are a major source of health care for the uninsured. And they are on the front lines of attempts to sign up patients to meet the insurance requirement next year. Florida health centers served 1,136,458 patients last year, 44 percent of them uninsured, officials said. (South Florida Sun-Sentinel, 11/7/13)
As Florida Ages, Lawmakers Ponder Future Of Health Care

Baby boomers are getting older. So are primary-care doctors and nurses. And Florida's population continues to grow. That combination could create a prescription for problems in Florida's health-care system during the next two decades. A House committee Wednesday began studying the complex set of issues, as it looks for ways to make sure the state has enough doctors and other health-care workers to meet its needs. It's too early to know what the committee will recommend, but ideas range from taking steps to train — and keep — more doctors in Florida to using new technology such as telemedicine. State economist Amy Baker presented information to the committee that pointed toward problems as the state moves toward 2030, the year when the first batch of baby boomers will hit their mid-80s. By that time, Florida's population is projected to grow to 23.6 million from the 2012 total of roughly 19 million, and nearly a quarter of the residents are expected to be ages 65 or older. Baker said baby boomers will be relatively healthy and have financial assets when they first retire, but they will need more health-care services and their bank accounts will shrink as 2030 gets closer. The baby boom generally includes people born from 1946 to 1964. "We're at the very front end of this demographic shift," Baker said. The health-care system's needs, however, involve far more factors than just a growing and aging population. As an example, the federal Affordable Care Act is designed to help uninsured people get coverage, which likely means they will go more often to doctors. Also, information presented to the committee showed that, overall, primary-care doctors and nurses are aging. That points to many younger physicians choosing specialties instead of primary care. "What I see there is our younger physicians are increasingly moving away from primary care," said Rep. Cary Pogman, an Avon Park Republican who is a physician. House Speaker Will Weatherford, R-Wesley Chapel, created the Select Committee on Health Care Workforce Innovation in July, with his office saying they will go more often to doctors. But even after those glitches are fixed, it won't help the 5 million people who fall into a coverage gap in states that failed to expand Medicaid. Florida alone accounts for 16 percent of all individuals in the gap, reports the Kaiser Family Foundation. Only Texas has a higher percentage. Medicaid traditionally provided health coverage for children, pregnant women and disabled people. The Affordable Care Act expanded the program to cover all individuals making up to 133 percent of the federal poverty level. However, the U.S Supreme Court's ruling upholding the act also allowed states to opt out of expanding Medicaid. Florida Gov. Rick Scott called for the state to expand the program but did nothing to convince conservative lawmakers, who rejected any expansion plans.

Problems with the federal health care website are making it difficult for uninsured Americans to determine their eligibility for coverage. But even after those glitches are fixed, it won't help the 5 million people who fall into a coverage gap in states that failed to expand Medicaid. Florida alone accounts for 16 percent of all individuals in the gap, reports the Kaiser Family Foundation. Only Texas has a higher percentage. Medicaid traditionally provided health coverage for children, pregnant women and disabled people. The Affordable Care Act expanded the program to cover all individuals making up to 133 percent of the federal poverty level. However, the U.S Supreme Court's ruling upholding the act also allowed states to opt out of expanding Medicaid. Florida Gov. Rick Scott called for the state to expand the program but did nothing to convince conservative lawmakers, who rejected any expansion plans.

Editorial: Medicaid Expansion: Florida Should Fill Health Gap

That hurts people such as Jacquie Garvey of Gainesville, who told The Gainesville Sun that she's worried about affording expenses related to cystic fibrosis. While the act means insurers can't deny her coverage because of a pre-existing condition, she can't afford rising premiums from her current provider but also doesn't qualify for subsidies. "I'm too poor to be subsidized for the ACA, and somehow I'm too rich for Medicaid," she said. The failure to expand Medicaid also affects some hospitals. Medicaid expansion would cover many of the people who are uninsured now. With Medicaid expansion, such hospitals will continue to bear the costs of uninsured people using their emergency rooms for primary care, and they will no longer get a federal subsidy for doing so. Only states expanding Medicaid receive the money. Florida is losing $55 billion in federal funding over 10 years because of its failure to expand Medicaid. The money would have covered the entire cost of the expansion for three years and 90 percent subsequently. Conservative lawmakers were worried about having to pay more later, so they decided that no one gets covered.
by the expansion now. At least 21 states have taken the money, including several with Republican-controlled statehouses. The politics that have led to the state’s failure to act will prove costly to its citizens and hospitals. The solution is for Florida to do the math and swallow the extreme, anti-Washington ideology — and accept the $55 billion in federal funding to expand Medicaid. (Lakeland Ledger, 11/6/13)

http://www.theledger.com/article/20131106/EDIT01/13109449/1036/edit03?p=all&tc=pall

**With FSU’s Help, Atwater Goes After Reporter Over Obamacare Insurance Report**

Florida Chief Financial Officer Jeff Atwater’s office has subpoenaed the audio and notes from WFSU reporter Lynn Hatter following a radio report on the federal health-care exchanges for the uninsured. The exchanges are a key component of the much-maligned roll-out of the Affordable Care Act this fall. In some cases, insurance agents are reportedly spreading inaccurate information on the exchanges to attempt to capture business. Hatter had visited an evening meeting put on by private insurance groups attempting to educate the public, but providing "misinformation" at a Tallahassee-area church. Here’s her story on the confusing meeting.

According to First Amendment Foundation President Barbara Petersen, Atwater’s office first attempted to request the audio and notes through a public records request since WFSU is part of Florida State University. Hatter refused to turn them over. Petersen said the case is a confusing one because WFSU may be considered a public "agency" under the public records law, but is also a media organization and should be covered by Florida’s shield law. She said FAF, a non-profit lobbying organization that represents media organizations including the Sentinel, had asked its general counsel for clarification. Atwater spokesman Chris Cate said the subpoena had been issued at the request of FSU’s lawyers but declined to say whether WFSU was involved in those negotiations. "In the course of an investigation in which Florida State University was providing assistance, a subpoena for audio was issued at the direct request of the university – in the alternative to a public records request," Cate said in an email. "The university has been very cooperative and their assistance in the investigation has been greatly appreciated." (South Florida Sun Sentinel, 11/6/13)


**Miami-Dade Community Health Centers Win Government Grants**

More than a dozen Florida community health centers — including seven in Miami-Dade County — were awarded $8.3 million in grants Thursday to expand their practices and hire more physicians, nurses, dentists, psychologists and other providers in an effort to increase Americans’ access to healthcare under the Affordable Care Act, federal officials announced. The grants from the U.S. Department of Health and Human Services are part of a national effort by the federal government, which awarded about $150 million to 236 health centers in 43 states, including 16 centers in Florida. Seven centers in Miami-Dade will share more than $3.9 million, with the largest single amounts awarded to Borinquen Health Care Center in Miami and the Center for Family and Child Enrichment in Miami Gardens. Each received grants of $775,000. Altogether, Florida’s grants will help deliver healthcare to approximately 73,000 Floridians who otherwise may not have had access to care. Florida has 48 health centers that served 1.1 million patients in 2012, with about 44 percent of them uninsured, according to HHS. Mary Wakefield, a registered nurse and administrator for the Health Resources and Services Administration, an agency within HHS, said the grants were written into the healthcare reform law. She said the ACA set aside $11 billion to be awarded over five years, beginning in 2011, to support the expansion of community health centers. Total grants to be awarded for 2014, including the ones announced Thursday, will total $2.2 billion. "All of us in the Obama administration are working hard to make sure that Americans who aren’t in the healthcare system finally get in,” Wakefield said. Wakefield added that community health centers can use the grants to hire more providers or to rent new healthcare delivery sites, but not for the construction of new clinics. They can also use the funds to purchase medical equipment. But the emphasis, Wakefield said, will be on providing more primary care services that will help individuals manage chronic diseases and prevent illnesses. Nationwide about 1,200 community health centers operate more than 9,000 delivery sites that provide care to more than 21 million patients in every state, according to HHS. Thursday’s grants are the latest round to be awarded to community health centers as part of the ACA. In July, HHS awarded 46 grants totaling $8 million to 46 Florida health centers to hire about 160 outreach workers who would help uninsured individuals obtain health coverage through the federally run online marketplace, or exchange. “Today’s investment,” Wakefield said, “is about expanding service capacity.” (Miami Herald, 11/7/13)


**Forum Tackles Trends In Juvenile Justice**
Government is intertwined with juvenile justice, but the change in family culture and an uncaring attitude toward crime by youth, said State Attorney Angela Corey, is the root of more severe punishments toward juvenile offenders. “Kids have changed,” said Corey, the lead prosecutor in Florida’s 4th Judicial Circuit, Wednesday at a forum addressing government’s relation to juvenile justice. “Now we have kids who don’t respect their family, don’t respect judges, don’t respect law enforcement officers and sadly, they don’t respect themselves.” The forum, hosted by the James Madison Institute and the Florida State University Project on Accountable Justice, put Corey alongside Vikrant Reddy, a policy analyst at the Texas Public Policy Foundation and Right on Crime, to discuss recent trends in prosecution and alternative actions that have surfaced in rehabilitating and evaluating youth offenders. Reddy said that government is too involved in schools, where most cases of youth finding themselves in the judicial system stem from. While Corey is known as a tough-on-crime prosecutor, Reddy’s approach leans more toward the fact that children operate differently than adults when involved in crime and should be treated as such. “The child brain is different,” Reddy said. “We have to be careful at looking at external appearance and saying that this person needs to be treated as an adult.” Corey attests that the quality and nature of a crime calls for evaluation of whether someone should be tried as an adult or a juvenile, noting that often diversion programs and alternatives are used repeatedly before a child makes it into an adult facility. It has to be taken on a case-by-case basis, Corey said. “We’ve got great laws,” she said. “They’re as tough as we need them to be when it comes to minimum mandatory, and they’re as discretionary as we need them to be.” Civil citation programs are used in 50 of Florida’s 67 counties currently, and offer those alternatives for misdemeanor and minor offenses, saving the state money on lockup costs. The Florida Department of Juvenile Justice estimates that implementation of civil citations in 30 percent of misdemeanor charges, as an alternative to arrest, saved the state $33.7 million in incarceration costs during 2012. Since 2004, when the agency started publishing reports on youth delinquency, the number of school-related arrests, which include those made at bus stops, on buses and at school-sponsored events, has declined by 48 percent. This week, Broward County officials came to an agreement to create alternatives to zero-tolerance policies wherein school principals, not school resource officers, have the say in disciplinary action for minor offenses. DJJ Secretary Wansley Walters said the strides in the Florida county with the highest school-based arrest rate is “a huge leap forward.” Walters said instead of drowning in minor offenses and recognizing that minute behavioral outbursts do not make children criminals are “important for us to prevent them from getting into the system,” she said. Both Reddy and Corey agree that vocational education and community involvement can help provide positive avenues for teens, reducing recidivism. “If we don’t pay for it with evidence-based programs,” Reddy said. “We will pay for it at some point down the line.” Finding a balance between punitive action against youth offenders without damaging the rest of their lives and victim restitution must be part of the process, Corey said. “You cannot sacrifice the rights of the victims to try and salvage a kid that might not be salvageable,” she said. “Our rights shouldn’t be secondary to the rights of the perpetrator.” (Tallahassee Democrat, 11/7/13)


Bradenton Concerns Rise As Heroin Use Multiplies

A local mother’s worst nightmare became reality this year when she walked into her living room where her son was watching television. His chest was not moving. She immediately began mouth-to-mouth resuscitation and called 911, performing CPR until paramedics arrived. Within 20 minutes her son was breathing, sitting up in a hospital bed and refusing treatment. Her son is a heroin addict. Naloxone, which reverses the effects of an opiate overdose, saved his life -- this time. The Manatee County High School teacher’s son, now 22, began abusing drugs at the age of 14. With the crackdown on pill mills, community concerns have risen over the possible re-emergence of heroin as a drug of choice in Manatee County. A recent string of heroin-related overdose deaths in Manatee County has many medical professionals increasingly concerned. At Manatee Glens, officials at the addiction center have seen a significant increase in patients. “What we have seen is an increase in heroin because the doctors are cracking down on prescribing pain medications,” director Jessica Crosby said. “Heroin is actually cheaper than pain medications." The spike in heroin use began about a year ago, and increased even more in recent months, according to Crosby. “Most of the time, it is that they have started with pain medications and switched over to heroin,” Crosby said. Most of the center’s patients have some sort of addiction to opiates, often a combination of pain pills and heroin. Crosby said many patients originally had medical reasons to be on pain medication, but soon begin to abuse them or seek alternative, cheaper ways to deal with the pain. For the high school teacher, the battle against her son’s heroin addiction has become an everyday challenge. She requested to remain anonymous, because her son is at a fragile stage right now. “I have gone through the tough love, the caring love,” she said. “I have tried everything.” Over the years, this mother of three said she spent more than $30,000 on her son’s treatment. Her son has been to rehab three times, incarcerated several times and even tried living in halfway houses. At times he reached the point of being suicidal, she said, because he can’t stand.
it all anymore. "He has lost more friends in his life than I have, and I am 61 years old," she said. The educator of 35 years says she doesn't know what the answer is, no longer having the money to seek treatment for her son and facing limited community resources. "The hospitals are crying out, the parents are crying out," she said. "People need to become aware that there is a lot of suffering going on in their community -- and it not just the addicts, but the families." Chief Medical Examiner Dr. Russell Vega said the community should be worried about heroin. "We have seen an increase in deaths attributed to heroin," Vega said. There were 524 drug-related deaths in 2012 in the 12th Judicial District, which includes Manatee, Sarasota and DeSoto counties. That was a 14 percent decrease from 609 in 2011. But deaths caused by heroin increased from two to eight. In the past week alone, there have been at least eight deaths as a result of 13 overdoses in Manatee County. Heroin was blamed for most of the deaths. Vega believes the number of deaths associated with heroin by the end of 2013 may be similar to the 2012. "Those numbers are still considerably low compared with prescription drugs," Vega said. "Relatively speaking, the prescription drug deaths have decreased." Prescription drug deaths in the judicial district added up to 196 in 2012, a 13 percent decrease from 225 in 2011. Other abused drugs also have officials worried. Synthetic drugs are of increasing concern to Vega, in part because they are difficult to identify. "I think we are seeing some deaths that could be attributed to them and that we are missing because that testing is difficult to do," Vega said. "The drugs are changing all the time." Manatee Substance Abuse Coalition Executive Director Sharon Kramer said the increase in heroin use comes as no surprise. "It's not showing up on our data yet, but we know it's happening," Kramer said. "When the prescription drugs became more difficult to get, heroin we thought is where it's happening," Kramer said. "They are still being drug of choice -- not to say that may not change soon." Arrests related to heroin in the first six months of 2013 came to 428, down 11 percent from 483 in the first six months of 2012. (Bradenton Herald, 11/8/13)


8% Of Orange High-Schoolers Have Tried Suicide, Study Finds

More than 8 percent of Orange County high-school students say they have attempted suicide, according to a new study of children's health in Central Florida that also reveals other disturbing trends. The sprawling survey by Nemours Children's Hospital in Orlando will be presented Friday at a "Children's Summit" expected to draw 400 community leaders from government, nonprofits, business and education. The conference — sponsored by Disney, Florida Hospital for Children and Heart of Florida United Way — aims to improve kids' health; safety; education; and emotional and economic well-being. The Nemours Child and Adolescent Community Health study, a year in the making, combines a recent survey of 1,000 Orange, Osceola, Seminole and Brevard families with data from focus groups, the federal Centers for Disease Control and Prevention and the Florida Department of Health, among other agencies. Among other significant findings:
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- More low-income and Hispanic kids are medicated for mental-health issues than their peers.
- Homicide is the third-leading cause of death for children age 1 to 4, an indication of the extent of child abuse.
- Though parents said obesity was their top health concern, nearly 60 percent of parents whose children are overweight and 46 percent of those whose children are obese said their kids were "about the right weight." Nearly 7 percent even said their kids were underweight.

"There's this notion that we don't want to stigmatize the child. No one wants to use the 'o' word," said Dr. Lloyd Werk, director of the Healthy Choices Clinic, a weight-management program at Nemours. "We need to get over this. It is not a character judgment; it's a health problem." Overall, the survey is intended to point out what needs to change in Central Florida. Though reports by both parents and teens on mental-health issues mirrored national figures, many parents also told researchers they didn't know where to turn for help. In the four-county area, 5.4 percent of parents said their children had depression and 6.5 percent said their kids had felt sad or hopeless for at least two weeks in the past year — giving up activities they previously enjoyed. And though the 8.1 percent of Orange County high-schoolers who reported attempting suicide may seem shocking to some, the figure — culled from data collected by the CDC — is only slightly above the 7.8 percent national average. "Whether or not it was an attempt that required medical attention, it is a cry for help," said Donna Wyche, manager of mental health and homelessness for Orange County Health Services. "It is a point in that teen's life when he feels helpless and hopeless — and you don't want to feel that way anymore. It needs to be taken very seriously." Suicide is now the third-leading cause of death for teens 15 to 19, and some say the problem has been exacerbated by bullying and sexual-identity issues. In September, 12-year-old Rebecca Sedwick jumped to her death after being cyberbullied by her Lakeland middle-school classmates. Dr. Neil Boris, chief of behavioral health at Nemours Children’s Hospital, said the figures did not surprise him — but they did emphasize the need to do more to help children in trouble. "Working here at a hospital, we see at least two ingestions a week" — cases where kids have tried to harm themselves by overdosing on pills or drinking chemicals, he said. "And I think when you look at the data on access to mental health in Central Florida, it's clear we're just not cutting it. There are a thousand reasons why, but it's very troubling. We have to do better." (Orlando Sentinel, 11/8/13)


http://www.orlandosentinel.com/health/os-childrens-health-study-20131107,0,5278647.story