A bill to be entitled
An act relating to the Comprehensive Statewide Tobacco
Education and Use Prevention Program; amending s. 381.84,
F.S.; providing for the counter-marketing and advertising
campaign to include innovative communication strategies;
revising terminology; providing requirements for
administration and management of the program by the
Department of Health; specifying purpose of certain funds
distributed under the program; revising the area health
education center network program component functions and
requirements; deleting obsolete language; providing an
effective date.

Be It Enacted by the Legislature of the State of Florida:

Section 1. Subsection (3), paragraph (a) of subsection
(4), and subsections (6) and (9) of section 381.84, Florida
Statutes, are amended to read:

381.84 Comprehensive Statewide Tobacco Education and Use
Prevention Program.—
(3) PROGRAM COMPONENTS AND REQUIREMENTS.—The department
shall conduct a comprehensive, statewide tobacco education and
use prevention program consistent with the recommendations for
effective program components contained in the 1999 Best
Practices for Comprehensive Tobacco Control Programs of the CDC,
as amended by the CDC. The program shall include the following
components, each of which shall focus on educating people,
particularly youth and their parents, about the health hazards
of tobacco and discouraging the use of tobacco:

   (a) Counter-marketing and advertising; Internet cyberspace
resource center.—The counter-marketing and advertising campaign
shall include, at a minimum, Internet, print, radio, and
television advertising and shall be funded with a minimum of
one-third of the total annual appropriation required by s. 27,
Art. X of the State Constitution.

   1. The campaign shall include an Internet cyberspace
resource center for copyrighted materials and information
concerning tobacco education and use prevention, including
cessation, shall be maintained by the program. The Internet
resource center must be accessible to the public, including
parents, teachers, and students, at each level of public and
private schools, universities, and colleges in the state and
shall provide links to other relevant resources. The Internet
address for the resource center must be incorporated in all
advertising. The information maintained in the resource center
shall be used by the other components of the program.

   2. The campaign shall use innovative communication
strategies, such as targeting specific audiences who use
personal communication devices and frequent social networking
websites.

   (b) Cessation programs, counseling, and treatment.—This
program component shall include two subcomponents:

   1. A statewide toll-free cessation service, which may
include counseling, referrals to other local resources and
support services, and treatment to the extent funds are available for treatment services; and

2. A local community-based program to disseminate information about tobacco-use smoking cessation, how tobacco-use smoking cessation relates to prenatal care and obesity prevention, and other chronic tobacco-related diseases.

(c) Surveillance and evaluation.—The program shall conduct ongoing epidemiological surveillance and shall contract for annual independent evaluations of the effectiveness of the various components of the program in meeting the goals as set forth in subsection (2).

(d) Youth school programs.—School and after-school programs shall use current evidence-based curricula and programs that involve youth to educate youth about the health hazards of tobacco, help youth develop skills to refuse tobacco, and demonstrate to youth how to stop using tobacco.

(e) Community programs and chronic disease prevention.—The department shall promote and support local community-based partnerships that emphasize programs involving youth, including programs for the prevention, detection, and early intervention of tobacco-related smoking-related chronic diseases.

(f) Training.—The program shall include the training of health care practitioners, tobacco-use cessation smoking cessation counselors, and teachers by health professional students and other tobacco-use prevention specialists who are trained in preventing tobacco use and health education. Tobacco-use cessation smoking cessation counselors shall be trained by specialists who are certified in tobacco-use cessation.
Administration and management, statewide programs, and
county health departments.—The department shall administer the
program within the expenditure limit established in subsection
(8). Each county health department is eligible to receive a
portion of the annual appropriation, on a per capita basis, for
coordinating tobacco education and use prevention programs
within that county. Appropriated funds may be used to improve
the infrastructure of the county health department to implement
the comprehensive, statewide tobacco education and use
prevention program. Each county health department shall
prominently display in all treatment rooms and waiting rooms,
counter-marketing and advertisement materials in the form of
wall posters, brochures, television advertising if televisions
are used in the lobby or waiting room, and screensavers and
Internet advertising if computer kiosks are available for use or
viewing by people at the county health department.

Enforcement and awareness of related laws.—In
coordination with the Department of Business and Professional
Regulation, the program shall monitor the enforcement of laws,
rules, and policies prohibiting the sale or other provision of
tobacco to minors, as well as the continued enforcement of the
Clean Indoor Air Act prescribed in chapter 386. The
advertisements produced in accordance with paragraph (a) may
also include information designed to make the public aware of
these related laws and rules. The departments may enter into
interagency agreements to carry out this program component.

AHEC tobacco-use cessation smoking-cessation
initiative. For the 2009-2010 fiscal year, The AHEC network may
administer shall expand the AHEC tobacco-use cessation initiative to each county within the state and perform other activities as determined by the department.

(4) ADVISORY COUNCIL; MEMBERS, APPOINTMENTS, AND MEETINGS.—The Tobacco Education and Use Prevention Advisory Council is created within the department.

(a) The council shall consist of 23 members, including:

1. The State Surgeon General, who shall serve as the chairperson.

2. One county health department director, appointed by the State Surgeon General.

3. Two members appointed by the Commissioner of Education, of whom one must be a school district superintendent.

4. The chief executive officer of the Florida Division of the American Cancer Society, or his or her designee.

5. The chief executive officer of the Greater Southeast Affiliate of the American Heart Association, or his or her designee.

6. The chief executive officer of the American Lung Association of Florida, or his or her designee.

7. The dean of the University of Miami School of Medicine, or his or her designee.

8. The dean of the University of Florida College of Medicine, or his or her designee.

9. The dean of the University of South Florida College of Medicine, or his or her designee.

10. The dean of the Florida State University College of Medicine, or his or her designee.
11. The dean of Nova Southeastern College of Osteopathic Medicine, or his or her designee.

12. The dean of the Lake Erie College of Osteopathic Medicine in Bradenton, Florida, or his or her designee.

13. The chief executive officer of the Campaign for Tobacco Free Kids, or his or her designee.

14. The chief executive officer of the Legacy Foundation, or his or her designee.

15. Four members appointed by the Governor, of whom two must have expertise in the field of tobacco-use prevention and education or tobacco-use smoking cessation and one individual who shall be between the ages of 16 and 21 at the time of his or her appointment.

16. Two members appointed by the President of the Senate, of whom one must have expertise in the field of tobacco-use prevention and education or tobacco-use smoking cessation.

17. Two members appointed by the Speaker of the House of Representatives, of whom one must have expertise in the field of tobacco-use prevention and education or tobacco-use smoking cessation.

(6) CONTRACT REQUIREMENTS.—Contracts or grants for the program components or subcomponents described in paragraphs (3)(a)–(f) shall be awarded by the State Surgeon General, after consultation with the council, on the basis of merit, as determined by an open, competitive, peer-reviewed process that ensures objectivity, consistency, and high quality. The department shall award such grants or contracts no later than October 1 for each fiscal year. A recipient of a contract or
grant for the program component described in paragraph (3)(c) is not eligible for a contract or grant award for any other program component described in subsection (3) in the same state fiscal year. A school or college of medicine that is represented on the council is not eligible to receive a contract or grant under this section. For the 2009-2010 fiscal year only, the department shall award a contract or grant in the amount of $10 million to the AHEC network for the purpose of developing the components described in paragraph (3)(i). The AHEC network may apply for competitive contracts or grants under this section.

(a) In order to ensure that all proposals for funding are appropriate and are evaluated fairly on the basis of merit, the State Surgeon General, in consultation with the council, shall appoint a peer review panel of independent, qualified experts in the field of tobacco control to review the content of each proposal and establish its priority score. The priority scores shall be forwarded to the council and must be considered in determining which proposals will be recommended for funding.

(b) The council and the peer review panel shall establish and follow rigorous guidelines for ethical conduct and adhere to a strict policy with regard to conflicts of interest. A member of the council or panel may not participate in any discussion or decision with respect to a research proposal by any firm, entity, or agency with which the member is associated as a member of the governing body or as an employee or with which the member has entered into a contractual arrangement. Meetings of
the council and the peer review panels are subject to chapter 119, s. 286.011, and s. 24, Art. I of the State Constitution.

(c) In each contract or grant agreement, the department shall limit the use of food and promotional items to no more than 2.5 percent of the total amount of the contract or grant and limit overhead or indirect costs to no more than 7.5 percent of the total amount of the contract or grant. The department, in consultation with the Department of Financial Services, shall publish guidelines for appropriate food and promotional items.

(d) In each advertising contract, the department shall limit the total of production fees, buyer commissions, and related costs to no more than 10 percent of the total contract amount.

(e) Notwithstanding the competitive process for contracts prescribed in this subsection, each county health department is eligible for core funding, on a per capita basis, to implement tobacco education and use prevention activities within that county.

(8) LIMITATION ON ADMINISTRATIVE EXPENSES.—From the total funds appropriated for the Comprehensive Statewide Tobacco Education and Use Prevention Program in the General Appropriations Act, an amount of up to 5 percent may be used by the department for administrative expenses.

(9) RULEMAKING AUTHORIZED.—By January 1, 2008, the department shall adopt rules pursuant to ss. 120.536(1) and 120.54 to administer this section.

Section 2. This act shall take effect July 1, 2010.