

<b>Tab 1</b>	<b>SB 590 by Detert; (Compare to H 0673) Adoption</b>						
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761816	A	S	FAV	CF, Detert	Delete L.26 - 28:	11/19 12:01 PM
432650	A	S	FAV	CF, Detert	Delete L.83 - 88:	11/19 12:01 PM

<b>Tab 3</b>	<b>SPB 7034 by CF; Prenatal Services and Early Childhood Development</b>						
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448330	D	S	FAV	CF, Sobel	Delete everything after	11/19 11:29 AM
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**The Florida Senate**  
**COMMITTEE MEETING EXPANDED AGENDA**

**CHILDREN, FAMILIES, AND ELDER AFFAIRS**  
**Senator Sobel, Chair**  
**Senator Altman, Vice Chair**

**MEETING DATE:** Thursday, November 19, 2015  
**TIME:** 9:00—11:00 a.m.  
**PLACE:** 301 Senate Office Building

**MEMBERS:** Senator Sobel, Chair; Senator Altman, Vice Chair; Senators Dean, Detert, Garcia, Hutson, and Ring

TAB	BILL NO. and INTRODUCER	BILL DESCRIPTION and SENATE COMMITTEE ACTIONS	COMMITTEE ACTION
1	<b>SB 590</b> Detert (Compare H 673)	Adoption; Revising the circumstances under which an adoption consent is valid, binding, and enforceable; providing an exception; requiring a court to determine, under certain circumstances, whether a change of placement of a child is in the child's best interests, rather than whether the change of placement is appropriate; deleting a determination that a court must consider under certain circumstances; revising when a court must advise a parent of specified information, etc.  CF 11/19/2015 Fav/CS JU FP	Fav/CS Yeas 5 Nays 0
2	Public Testimony on Early Steps Program		Discussed
Consideration of proposed bill:			
3	<b>SPB 7034</b>	Prenatal Services and Early Childhood Development; Revising the requirements for the Department of Health to maintain a clearinghouse of information for parents and health care providers on developmental evaluation and early intervention programs; renaming the "Infants and Toddlers Early Intervention Program" as the "Early Steps Program"; requiring the development of an individual family support plan for each child served in the program, etc.	Submitted as Committee Bill Yeas 4 Nays 0
Other Related Meeting Documents			

**The Florida Senate**  
**BILL ANALYSIS AND FISCAL IMPACT STATEMENT**

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

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Prepared By: The Professional Staff of the Committee on Children, Families, and Elder Affairs

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BILL: CS/SB 590

INTRODUCER: Children, Families, and Elder Affairs Committee and Senator Detert

SUBJECT: Adoption

DATE: November 19, 2015      REVISED: \_\_\_\_\_

	ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1.	Crosier	Hendon	CF	<b>Fav/CS</b>
2.			JU	
3.			FP	

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**Please see Section IX. for Additional Information:**

COMMITTEE SUBSTITUTE - Substantial Changes

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**I. Summary:**

CS/SB 590 revises the circumstances under which, for children under the supervision of the Department of Children and Families, an adoption consent from parents is valid, binding, and enforceable. The bill also requires the court to consider a child's best interest when changing a placement rather than the appropriateness of the placement. The bill requires courts in all dependency proceedings to advise the parent who is a party to the case at the arraignment hearing, in the order approving the case plan or in the order that changes the permanency goal to adoption and terminates the parental rights of the parent's right to participate in a private adoption plan.

The bill has an effective date of July 1, 2016.

**II. Present Situation:**

In Florida, chapter 39, F.S., governs proceedings relating to the involvement of children in the state's child protection system. When, allegations of abuse, neglect, or abandonment are reported an investigation is conducted by the Department of Children and Families (the department or DCF). Based on the results of the investigation, a petition may be filed requesting the court place the child in shelter and seeking adjudication that the child is dependent and should be placed in

the state's care.<sup>1</sup> When a child is placed in the state's care the state "acts in the protective and provisional role of in loco parentis" for the child.<sup>2</sup> While parents have a due process right to be heard regarding the full array of constitutional rights which may be exercised in connection with their children, parents cannot unilaterally make decisions regarding their children without court approval. The courts have broad discretion to rely on the standard of best interest of the child when making determinations of dependency and throughout the court's involvement in the matter.

Within 28 days after a child has been sheltered by the court, an arraignment hearing must be held.<sup>3</sup> At the arraignment hearing, the parent or legal guardian of the child may either admit, deny or consent to the findings of dependency alleged in the petition; however, if a parent or legal guardian denies any allegation contained in the petition the court must hold an adjudicatory hearing within 30 days of the arraignment.<sup>4</sup> If the court determines the child dependent at the adjudicatory hearing and the child is placed in out-of-home care, the court must inquire of the parent or parents whether the parents have relatives who might be considered as a placement for the child.<sup>5</sup> Placement of the child to the temporary, legal custody of the department invests the department with all rights and responsibilities of a legal custodian.<sup>6</sup> If a child cannot remain safely in the home with the parent with whom the child was residing at the time of the events that brought the child within the jurisdiction of the court and no adult relative is available for temporary, legal custody, then the state may place the child with an adult willing to care for the child under the protective supervision of the department.<sup>7</sup> However, any change in the temporary legal custody or the conditions of protective supervision must be brought before the court. The standard for determining a change in custody is the best interest of the child.<sup>8</sup>

Section 39.806, F.S., provides the grounds for when the department may file a petition for the termination of parental rights. A parent or parents may voluntarily execute a written surrender of the child and consent to an order giving custody of the child to the department for subsequent adoption.<sup>9</sup> If, after a hearing on the petition, the court terminates the parental rights, the department shall, within 30 days, provide the court with a case plan that identifies the permanency goals of the child.<sup>10</sup> When the department is given custody of a child for subsequent adoption under chapter 39, the department may place the child with an agency as defined in s. 63.032, F.S., with a child-caring agency registered under s. 409.176, or in a family home for prospective adoption.<sup>11</sup> Prospective adoptive parents may not file a petition for adoption until the judgment terminating parental rights becomes final. An adoption proceeding under s. 39.812,

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<sup>1</sup> s. 39.501(2), F.S.

<sup>2</sup> *Buckner v. Family Services of Central Florida, Inc.*, 876 So.2d 1285 (Fla.5<sup>th</sup> DCA 2004)

<sup>3</sup> s. 39.506(1), F.S.

<sup>4</sup> s. 39.506(1), F.S.

<sup>5</sup> s. 39.507(7)(c), F.S.

<sup>6</sup> s. 39.521((3)(d), F.S.

<sup>7</sup> s. 39.521((3)(c), F.S.

<sup>8</sup> s. 39.522(1), F.S.

<sup>9</sup> s. 39.806(1)(a), F.S.

<sup>10</sup> s. 39.811(8), F.S.

<sup>11</sup> s. 39.812(1), F.S.

F.S. is governed by chapter 63, F.S.<sup>12</sup> The court shall retain jurisdiction over any child for whom custody is given to a social service agency until the child is adopted.<sup>13</sup>

For children in the custody of the department, s. 63.082(6), F.S., provides that parental consent for placement of a minor with an adoption entity or qualified adoptive parents, but parental rights have not yet been terminated, is valid, binding, and enforceable by the court.<sup>14</sup> After the parent executes the consent, the adoption entity is permitted to intervene in the dependency case and provide the court with a copy of the preliminary home study of the prospective adoptive parents and any other evidence of the suitability of the placement.<sup>15</sup> The dependency court shall hold a hearing to determine if the required documents to intervene have been filed and whether a change in the child's placement is appropriate.<sup>16</sup> In determining whether the child's best interests are served by transferring custody to the prospective adoptive parent selected by the child's parent, the court shall consider the rights of the parent to determine an appropriate placement, the permanency offered, the child's bonding with any potential adoptive home that the child has been residing in, and the importance of maintaining sibling relationships, if any.<sup>17</sup> Upon the court's determination that the prospective adoptive parents are properly qualified and that the adoption appears to be in the best interest of the minor child, the court shall immediately order the transfer of custody of the minor child to the prospective adoptive parents, under the supervision of the adoption entity.<sup>18</sup> The adoption entity is responsible for keeping the dependency court informed of the status of the adoption proceedings at least every 90 days from the date of the order changing placement of the child until the date the adoption is finalized.<sup>19</sup>

### III. Effect of Proposed Changes:

**Section 1** amends s. 63.082(6), F.S., to allow a parent to execute a consent for placement of a minor with an adoption entity or qualified prospective adoptive parents when the child is under the supervision of the department. The consent is valid, binding, and enforceable by the court. This section is also amended to allow the court to consider the best interests of a child pursuant to s. 39.522(1), F.S., when making a determination of a child's change in placement instead of whether the change in placement is appropriate.

The bill amends s. 63.082(6), F.S., by striking subsection (e), which provides direction to the court when determining whether the best interests of the child are served by transferring the custody of the minor child to the prospective adoptive parent selected by the parent. The court should consider, among other considerations, the rights of the parent to determine an appropriate placement for the child.

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<sup>12</sup> s. 39.812(5), F.S.

<sup>13</sup> s. 39.811(9), F.S.

<sup>14</sup> s. 63.082(6)(a), F.S.

<sup>15</sup> s. 63.082(6)(b), F.S.

<sup>16</sup> s. 63.082(6)(c), F.S.

<sup>17</sup> s. 63.082(e), F.S.

<sup>18</sup> s. 63.072(d), F.S.

<sup>19</sup> s. 63.082(f), F.S.

Section 63.082(6), F.S., is also amended by the bill by instructing the court to advise the parent who is the party to the dependency case of their right to participate in a private adoption plan at the arraignment hearing held pursuant to s. 39.506, in the order approving the case plan pursuant to s. 39.603, or in the order that changes the permanency goal to adoption and terminates the parental rights pursuant to s. 39.621, F.S., in all dependency hearings. Currently the court advises the parent of the option to participate in a private adoption plan after it has been determined that reunification is not a viable alternative and before the filing of a petition of termination of parental rights.

**Section 2** of the bill provides an effective date of July 1, 2016.

**IV. Constitutional Issues:**

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

**V. Fiscal Impact Statement:**

A. Tax/Fee Issues:

None.

B. Private Sector Impact:

None.

C. Government Sector Impact:

None.

**VI. Technical Deficiencies:**

None.

**VII. Related Issues:****VIII. Statutes Affected:**

This bill substantially amends the following sections of the Florida Statutes: 63.082 (6)

**IX. Additional Information:****A. Committee Substitute – Statement of Substantial Changes:**

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

CS by Children, Families, and Elder Affairs on November 19, 2015:

- Allows a parent to execute a consent for placement of a minor that is under the supervision of the department with an adoption entity or qualified prospective adoptive parents and that the consent is valid, binding, and enforceable by the court.
- Revises the standard of review used by the court when making a determination of a change of placement of a child from the appropriateness of the placement to the best interests of the child.
- Ensures that the biological parent is provided written notice of his or her right to participate in a private adoption plan at the arraignment hearing held pursuant to s. 39.506, in the order approving the case plan pursuant to s. 39.603, or in the order that changes the permanency goal to adoption and terminates the parental rights pursuant to s. 39.621, F.S.

**B. Amendments:**

None.



761816

LEGISLATIVE ACTION

Senate	.	House
Comm: FAV	.	
11/19/2015	.	
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The Committee on Children, Families, and Elder Affairs (Detert) recommended the following:

**Senate Amendment (with title amendment)**

Delete lines 26 - 28  
and insert:  
enforceable by the court.

===== T I T L E A M E N D M E N T =====

And the title is amended as follows:

Delete lines 4 - 5  
and insert:





761816

11 consent is valid, binding, and enforceable; requiring  
12 a court to determine, under



432650

LEGISLATIVE ACTION

Senate	.	House
Comm: FAV	.	
11/19/2015	.	
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The Committee on Children, Families, and Elder Affairs (Detert) recommended the following:

**Senate Amendment (with title amendment)**

Delete lines 83 - 88

and insert:

(f) ~~(g)~~ At the arraignment hearing held pursuant to s. 39.506, in the order that approves the case plan pursuant to s. 39.603, or in the order that changes the permanency goal to adoption and terminates the parental rights pursuant to s. 39.621 ~~In all dependency proceedings, after it is determined that reunification is not a viable alternative and prior to the~~



432650

11 ~~filing of a petition for termination of parental rights,~~ the  
12 court shall provide written notice to advise the biological  
13 parent who is a party to the case of his or her ~~the~~ right to  
14 participate in a private adoption plan.  
15

16 ===== T I T L E   A M E N D M E N T =====

17 And the title is amended as follows:

18       Delete line 11

19 and insert:

20       must provide written notice to a parent of specified  
21       information;

By Senator Detert

28-00623-16

2016590\_\_

A bill to be entitled

An act relating to adoption; amending s. 63.082, F.S.; revising the circumstances under which an adoption consent is valid, binding, and enforceable; providing an exception; requiring a court to determine, under certain circumstances, whether a change of placement of a child is in the child's best interests, rather than whether the change of placement is appropriate; deleting a determination that a court must consider under certain circumstances; revising when a court must advise a parent of specified information; providing an effective date.

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

Section 1. Subsection (6) of section 63.082, Florida Statutes, is amended to read:

63.082 Execution of consent to adoption or affidavit of nonpaternity; family social and medical history; revocation of consent.—

(6) (a) If a parent executes a consent for placement of a minor with an adoption entity or qualified prospective adoptive parents and the minor child is under the supervision in the custody of the department, ~~but parental rights have not yet been terminated,~~ the adoption consent is valid, binding, and enforceable by the court unless a termination of parental rights petition has been filed and qualified adoptive parents have been identified.

(b) Upon execution of the consent of the parent, the

Page 1 of 4

**CODING:** Words ~~stricken~~ are deletions; words underlined are additions.

28-00623-16

2016590\_\_

adoption entity shall be permitted to intervene in the dependency case as a party in interest and must provide the court that acquired jurisdiction over the minor, pursuant to the shelter or dependency petition filed by the department, a copy of the preliminary home study of the prospective adoptive parents and any other evidence of the suitability of the placement. The preliminary home study must be maintained with strictest confidentiality within the dependency court file and the department's file. A preliminary home study must be provided to the court in all cases in which an adoption entity has intervened pursuant to this section. Unless the court has concerns regarding the qualifications of the home study provider, or concerns that the home study may not be adequate to determine the best interests of the child, the home study provided by the adoption entity shall be deemed to be sufficient and no additional home study needs to be performed by the department.

(c) If an adoption entity files a motion to intervene in the dependency case in accordance with this chapter, the dependency court shall promptly grant a hearing to determine whether the adoption entity has filed the required documents to be permitted to intervene and whether a change of placement of the child is in the best interests of the child pursuant to s. 39.522(1) appropriate.

(d) Upon a determination by the court that the prospective adoptive parents are properly qualified to adopt the minor child and that the adoption ~~is appears to be~~ in the best interests of the minor child, the court shall immediately order the transfer of custody of the minor child to the prospective adoptive

Page 2 of 4

**CODING:** Words ~~stricken~~ are deletions; words underlined are additions.

28-00623-16

2016590\_\_

59 parents, under the supervision of the adoption entity. The  
 60 adoption entity shall thereafter provide monthly supervision  
 61 reports to the department until finalization of the adoption. If  
 62 the child has been determined to be dependent by the court, the  
 63 department shall provide information to the prospective adoptive  
 64 parents at the time they receive placement of the dependent  
 65 child regarding approved parent training classes available  
 66 within the community. The department shall file with the court  
 67 an acknowledgment of the parent's receipt of the information  
 68 regarding approved parent training classes available within the  
 69 community.

70 ~~(e) In determining whether the best interests of the child~~  
 71 ~~are served by transferring the custody of the minor child to the~~  
 72 ~~prospective adoptive parent selected by the parent, the court~~  
 73 ~~shall consider the rights of the parent to determine an~~  
 74 ~~appropriate placement for the child, the permanency offered, the~~  
 75 ~~child's bonding with any potential adoptive home that the child~~  
 76 ~~has been residing in, and the importance of maintaining sibling~~  
 77 ~~relationships, if possible.~~

78 (e)(f) The adoption entity shall be responsible for keeping  
 79 the dependency court informed of the status of the adoption  
 80 proceedings at least every 90 days from the date of the order  
 81 changing placement of the child until the date of finalization  
 82 of the adoption.

83 (f)(g) At the arraignment hearing held pursuant to s.  
 84 39.506 in all dependency proceedings, ~~after it is determined~~  
 85 ~~that reunification is not a viable alternative and prior to the~~  
 86 ~~filing of a petition for termination of parental rights,~~ the  
 87 court shall advise the ~~biological~~ parent who is a party to the

Page 3 of 4

CODING: Words ~~stricken~~ are deletions; words underlined are additions.

28-00623-16

2016590\_\_

88 case of the right to participate in a private adoption plan.

89 Section 2. This act shall take effect July 1, 2016.

Page 4 of 4

CODING: Words ~~stricken~~ are deletions; words underlined are additions.



432650

LEGISLATIVE ACTION

Senate	.	House
Comm: FAV	.	
11/19/2015	.	
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	.	
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The Committee on Children, Families, and Elder Affairs (Detert) recommended the following:

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and insert:

(f) ~~(g)~~ At the arraignment hearing held pursuant to s. 39.506, in the order that approves the case plan pursuant to s. 39.603, or in the order that changes the permanency goal to adoption and terminates the parental rights pursuant to s. 39.621 ~~In all dependency proceedings, after it is determined that reunification is not a viable alternative and prior to the~~



432650

11 ~~filing of a petition for termination of parental rights, the~~  
12 court shall provide written notice to advise the biological  
13 parent who is a party to the case of his or her ~~the~~ right to  
14 participate in a private adoption plan.  
15

16 ===== T I T L E   A M E N D M E N T =====

17 And the title is amended as follows:

18       Delete line 11

19 and insert:

20       must provide written notice to a parent of specified  
21       information;



761816

LEGISLATIVE ACTION

Senate	.	House
Comm: FAV	.	
11/19/2015	.	
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and insert:  
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===== T I T L E A M E N D M E N T =====

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Delete lines 4 - 5  
and insert:





761816

11 consent is valid, binding, and enforceable; requiring  
12 a court to determine, under

THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

~~598~~ 590  
Bill Number (if applicable)

Topic ADOPTION

Name DIANA RAE BEER

Amendment Barcode (if applicable)

Job Title DIRECTOR, PUBLIC POLICY

Address 3150 SW 3RD AVE  
Street

Phone 305 571 5718

MIAMI FL 33129  
City State Zip

Email diana@thechildrenstrust.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing THE CHILDREN'S TRUST

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.

THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

590  
Bill Number (if applicable)

Topic Adoption

Name Judge Daniel Dawson

Job Title Circuit Judge, 9th Judicial Circuit

Address 2000 E. Michigan St.

Street

Phone \_\_\_\_\_

Orlando  
City

FL  
State

32801  
Zip

Email \_\_\_\_\_

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing self

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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**APPEARANCE RECORD**

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11-19-15

Meeting Date

590

Bill Number (if applicable)

Topic Adoption

Amendment Barcode (if applicable)

Name ALAN ABRAMOWITZ

Job Title Executive Director

Address 600 CALHOUN

Phone 850-241-3232

Tallahassee FL 32311

Email Alan.Abramowitz@get.fl.gov

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing GUARDIAN AD LITEM Program

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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**APPEARANCE RECORD**

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11/19/15  
Meeting Date

590  
Bill Number (if applicable)

Topic Adoption Intervention

Amendment Barcode (if applicable)

Name Allen Walker

Job Title Foster Parent / Pastor

Address 4031 Edgewood Dr  
Street

Phone 954-907-1179

Coconut Creek, FL 3066  
City State Zip

Email allenrwalker@gmail.com

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Self

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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**APPEARANCE RECORD**

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11/19/2015  
Meeting Date

590  
Bill Number (if applicable)

Topic adoptions

Name Amy Wragg

Job Title Foster parent

Address 21e Ridgewood Circle  
Street

Phone 561-351-7542

Tequesta FL 334109  
City State Zip

Email wraggers@hotmail.com

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing foster children

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15

Meeting Date

590

Bill Number (if applicable)

Topic Adoption

Amendment Barcode (if applicable)

Name James Walsh John Walsh

Job Title Attorney

Address 923 Fern St. West Palm Beach FL

Phone 561-922-9718

Street

West Palm Beach FL 33401

City

State

Zip

Email jim.walsh@legalaidpbcc.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Foster Childrens Project

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11-19-15  
Meeting Date

590  
Bill Number (if applicable)

Topic Adoptions

Name Liz Gnon

Job Title Attorney

Address 20000 NW 47 Avenue  
Street

Street

City

Opalucka, FL  
City State

State

Zip

33055  
Zip

Phone (786) 385-0218

Email lanon@hhch.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Foster Children

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

SB590  
Bill Number (if applicable)

Topic A Child's Best Hope

Amendment Barcode (if applicable)

Name Heather Rosenberg

Job Title President

Address 22 Shoemaker Ct.  
Street

Phone (850) 322-5425

Crawfordville FL 32327  
City State Zip

Email nolegin174@gmail.com

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Tallahassee Area Foster + Adoptive Parent Association

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/14/15  
Meeting Date

590  
Bill Number (if applicable)

Topic Adoption

Amendment Barcode (if applicable)

Name Dr. Thomas Croom

Job Title Go Foster President / CEO, Foster Parent, Adoptive Parent

Address 2112 Evergreen

Phone \_\_\_\_\_

Tallahassee FL 32303  
City State Zip

Email tcroom@gofoster.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Foster / Adoptive Parents

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11-19-15  
Meeting Date

590  
Bill Number (if applicable)

Topic ADOPTION

Amendment Barcode (if applicable)

Name CHRISTINA SPUDEAS

Job Title Exec. Dir.

Address 1801 N. University Dr.  
Street

Phone 954-796-0860

Cord Springs FL 33071  
City State Zip

Email christina.spudeas@floridachildrenfirst.org

*write in support*  
Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Florida's Children First

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15

Meeting Date

590  
Bill Number (if applicable)

Topic Adoption

Name Erika Lozano

Amendment Barcode (if applicable)

Job Title Director of Operations

Address 20000 NW 47 Ave

Street

Phone 305-793-4806

Miami Gardens FL

City

State

33085

Zip

Email etlozano@hchc.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing \_\_\_\_\_

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

Meeting Date

11/19

Bill Number (if applicable)

590

Topic

Adoption Bill S90

Name

Charles Bender - Place of Hope

Amendment Barcode (if applicable)

Job Title

Executive Director

Address

9078 Isaiah Ln

Phone

561 719 4896

Street

PBG

FL

33418

City

State

Zip

Email

Speaking:

For

Against

Information

Waive Speaking:

In Support

Against

(The Chair will read this information into the record.)

Representing

Place of Hope

Appearing at request of Chair:

Yes

No

Lobbyist registered with Legislature:

Yes

No

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11-19-15

Meeting Date

SB-590

Bill Number (if applicable)

Topic Childs Best Hope

Name Kim Leach

Job Title Foster Parent

Address 10706 Banfield Dr

Street

Riverview, FL

City

State

33579

Zip

Phone 813-205-4118

Email Kim.S.leach@gmail.com

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Foster Parents

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

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*Waive In Support*

11/19/15  
Meeting Date

590  
Bill Number (if applicable)

Topic \_\_\_\_\_

Amendment Barcode (if applicable)

Name JOE DURSO

Job Title VICE PRESIDENT FOR PUBLIC AFFAIRS

Address 4001 PELEE ST  
Street

Phone 407-722-1155

ORLANDO FL 32817  
City State Zip

Email \_\_\_\_\_

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing CBC OF CENTRAL FLORIDA

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

590  
Bill Number (if applicable)

Topic Adoption

Name VICTORIA ZEPP

Job Title Exec Dir Govt Affairs

Address 121 N. Monroe St. 9007

Street

JLH FL 32301

City

State

Zip

Phone

Email

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing FL Coalition for Children

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE

APPEARANCE RECORD

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11-19-15

Meeting Date

590

Bill Number (if applicable)

Topic Adoption

Name Colleen Mackin

Job Title Legis Affairs

Address 411 S. Magnolia Dr Suite 4

Street

Dalton City

FL State

Zip

Phone 850-425-2600

Email

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against (The Chair will read this information into the record.)

Representing The Children's Campaign

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11-19-15

Meeting Date

SB590

Bill Number (if applicable)

Topic Child's Best Hope

Amendment Barcode (if applicable)

Name Jamie Nestrick

Job Title Foster Parent

Address 1790 Oakley Ave

Phone 386-451-2556

Street

Deland, FL 32720

Email fostermomcfl@gmail.com

City

State

Zip

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing foster parents

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE

APPEARANCE RECORD

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11/19/15

Meeting Date

SB 590

Bill Number (if applicable)

76/816

Amendment Barcode (if applicable)

Topic Adoption

Name Dennis Moore

Job Title General Counsel, Statewide GAL Office

Address 600 S. Calhoun

Street

Tallahassee FL 32302

City

State

Zip

Phone (850) 445-5934

Email dennis.moore@gsf.fl.gov

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Statewide GAL Office

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

SB 590  
Bill Number (if applicable)

Topic Adoption

Amendment Barcode (if applicable)

Name Greg Pound

Job Title \_\_\_\_\_

Address 9166 Sunrise Dr.

Phone \_\_\_\_\_

Street

Largo Fla. 33773

Email \_\_\_\_\_

City

State

Zip

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing \_\_\_\_\_

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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## The Florida Senate COMMITTEE VOTE RECORD

**COMMITTEE:** Children, Families, and Elder Affairs  
**ITEM:** SB 590  
**FINAL ACTION:** Favorable with Committee Substitute  
**MEETING DATE:** Thursday, November 19, 2015  
**TIME:** 9:00—11:00 a.m.  
**PLACE:** 301 Senate Office Building

FINAL VOTE		SENATORS	11/19/2015 <sup>1</sup> Amendment 761816		11/19/2015 <sup>2</sup> Amendment 432650			
			Detert		Detert			
Yea	Nay		Yea	Nay	Yea	Nay	Yea	Nay
		Dean						
X		Detert						
X		Garcia						
X		Hutson						
		Ring						
X		Altman, VICE CHAIR						
X		Sobel, CHAIR						
5	0	<b>TOTALS</b>	FAV	-	FAV	-		
Yea	Nay		Yea	Nay	Yea	Nay	Yea	Nay

CODES: FAV=Favorable      RCS=Replaced by Committee Substitute      TP=Temporarily Postponed      WD=Withdrawn  
 UNF=Unfavorable      RE=Replaced by Engrossed Amendment      VA=Vote After Roll Call      OO=Out of Order  
 -R=Reconsidered      RS=Replaced by Substitute Amendment      VC=Vote Change After Roll Call      AV=Abstain from Voting

**The Florida Senate**  
**BILL ANALYSIS AND FISCAL IMPACT STATEMENT**

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

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Prepared By: The Professional Staff of the Committee on Children, Families, and Elder Affairs

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BILL: SPB 7034

INTRODUCER: Children, Families, and Elder Affairs Committee

SUBJECT: Prenatal Services and Early Childhood Development

DATE: November 23, 2015      REVISED: \_\_\_\_\_

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ANALYST	STAFF DIRECTOR	REFERENCE	ACTION
1. Hendon	Hendon		<b>CF Submitted as Committee Bill</b>

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**I. Summary:**

SPB 7034 revises the Early Steps program in the Department of Health. The program provides screening and early intervention services to parents with infants and toddlers who have or may have a developmental delay. The program is funded with both state and federal funds.

The bill expands the duties of the department's clearinghouse for information on early intervention services for parents and providers of early intervention services. The bill provides goals for the Early Steps program, defines terms, and assigns duties to the department as well as the local Early Steps offices. The bill sets eligibility criteria for the program. The bill requires a statewide plan, performance standards and an accountability report each year. The bill designates the Florida Interagency Coordinating Council for Infants and Toddlers as the state interagency coordination council required under federal law. The bill provides procedures for the successful transition of children from the Early Steps to the local school districts. Finally, the bill repeals outdated sections of statute relating to the Early Steps program.

The bill has an effective date of July 1, 2016.

**II. Present Situation:**

Florida's Early Steps Program has its foundation in federal law. The Individuals with Disabilities Education Act (IDEA) was originally enacted by Congress in 1975 to ensure that children with disabilities have the opportunity to receive a free appropriate public education, just like other children. The law has been revised many times over the years. The most recent amendments expanded the program to pre-school children and were passed by Congress in December 2004 with final regulations published in August 2006 (Part B for school-aged children) and in September 2011 (Part C, for babies and toddlers).

The Early Steps Program (Part C of the IDEA) provides services to families with infants and toddlers from birth to three years of age who have or at risk of developmental delays or

disabilities.<sup>1</sup> The federal government created grants to assist states in providing early intervention programs under Part C of the IDEA.<sup>2</sup> The program has no financial eligibility requirements and is an entitlement to any eligible child.<sup>3</sup> Florida's Early Steps Program is administered by Children's Medical Services within the Department of Health. The department contracts with hospitals and non-profit organizations such as the Easter Seals across the state for coordination and delivery of services.<sup>4</sup>

Part 303 of Section 34 Code of Federal Regulations are the federal rules governing early intervention programs for infants and toddlers with disabilities. The rules provide the purpose of the early intervention program, the activities that may be supported, the children that are eligible to be served, the types of services available, and the definition of service coordination activities and use of service coordinators.

Subpart D of Part 303 provides for a statewide system of early intervention services. This system must include a public awareness program; a comprehensive "child find" system that includes referral procedures; and procedures and timelines for a comprehensive, multidisciplinary evaluations of children and an identification of family needs. States must also develop policies and procedures for individualized family support plans (IFSP). Early Steps lead agencies must ensure the IFSP is developed and implemented for each eligible child.

The federal law allows for early intervention services for an eligible child and the child's family to begin before the completion of the evaluation and assessment under certain conditions. While each agency or person involved in the provision of early intervention services is responsible for making good faith efforts to assist the eligible child in achieving the outcomes in the IFSP, the law states that any agency or person cannot be held accountable if an eligible child does not achieve the growth projected in the child's IFSP.

States must establish qualifications for personnel providing early intervention services to eligible children and families.<sup>5</sup> States must have standards to ensure that necessary personnel carry out the purposes of the program and are appropriately and adequately prepared and trained.<sup>6</sup> Parents must give written consent before the Early Steps program may evaluate, assess, and provide early intervention services to a child.<sup>7</sup> In the event parents do not give consent, reasonable efforts should be made to ensure the parent is aware of the nature of the evaluation, assessment and services available and understands that without consent the child will not be able to receive the evaluation, assessment or services.<sup>8</sup>

The federal rule requires that service providers give written notice to parents before the provider initiates or changes the identification, evaluation, or placement of the child, or provides the

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<sup>1</sup> s. 391.302, F.S.

<sup>2</sup> 34 *Code of Federal Regulations* Part 303

<sup>3</sup> *Id.*

<sup>4</sup> Office of Program Policy Analysis & Government Accountability. Florida Legislature, Early Steps Has Revised Reimbursement Rates but Needs to Assess Impact of Expanded Outreach on Child Participation, Report No. 08-44, (July 2008) <http://www.oppaga.state.fl.us/MonitorDocs/Reports/pdf/0844rpt.pdf>.

<sup>5</sup> 34 CFR. s. 303.361

<sup>6</sup> *Id.*

<sup>7</sup> 34 CFR. s 303.404

<sup>8</sup> *Id.*

appropriate early intervention services to the child and the child's family.<sup>9</sup> Procedures to resolve disputes through a mediation process, at a minimum, must be available whenever a parent requests a hearing.<sup>10</sup> The mediation process is voluntary, must be conducted by a qualified mediator, and cannot be used to deny or delay a parent's right to a due process hearing.<sup>11</sup> Mediation must be timely scheduled, any agreement reached by the parties to the dispute must be in writing, and discussions that occur during mediation are confidential and cannot be used as evidence in any subsequent proceeding.<sup>12</sup> The state must bear the cost of the mediation process.<sup>13</sup> During the mediation, the child must continue to receive early intervention services currently being provided.<sup>14</sup> If the complaint involves an application for initial services, the child must receive any services that are not in dispute.<sup>15</sup>

State policy must specify which functions and services will be provided at no cost to all parents and which will be subject to a system of payments.<sup>16</sup> The inability of parents of an eligible child to pay for services must not result in a denial of services to the child or the child's family.<sup>17</sup> States may establish a schedule of sliding fees for early intervention services but some functions such as evaluation and assessment, and service coordination are not subject to fees.<sup>18</sup>

Funds provided by the federal grant may be used only for early intervention services for an eligible child who is not entitled to these services under any other Federal, State, local or private source.<sup>19</sup> Interim payments to avoid delay in providing needed services to an eligible child are allowed but the agency that has ultimate responsibility for the payment must reimburse the program.<sup>20</sup>

Each State that receives financial assistance for the program must establish a State Interagency Coordinating Council. The Council must be appointed by the Governor and membership must reasonably represent the population of the State.<sup>21</sup> The Council is to advise and assist the lead agency in:

- the development and implementation of the policies that constitute the statewide system,
- achieving the full participation, coordination and cooperation of all appropriate public agencies in the State, and
- the integration of services for infants and toddlers with disabilities and at-risk toddlers and their families regardless of whether at-risk infants and toddlers are eligible for early intervention services.<sup>22</sup>

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<sup>9</sup> 34 CFR s. 303.403

<sup>10</sup> 34 CFR s. 303.419

<sup>11</sup> *Id.*

<sup>12</sup> *Id.*

<sup>13</sup> *Id.*

<sup>14</sup> 34 CFR s. 303.425

<sup>15</sup> *Id.*

<sup>16</sup> 34 CFR s. 303.520

<sup>17</sup> *Id.*

<sup>18</sup> 34 CFR s. 303.521

<sup>19</sup> 34 CFR s.303.527

<sup>20</sup> *Id.*

<sup>21</sup> 34 CFR s. 303.600

<sup>22</sup> 34 CFR s. 303.650



Eligible infants and toddlers are identified through referrals from hospitals, healthcare providers, and childcare staff who may interact on a regular basis with infants and toddlers. Parents may also contact the state's program directly for an evaluation and assessment. Before any evaluation can be conducted, parental consent is required. Evaluations and assessments must be completed within 45 days of the referral.<sup>23</sup>

Early intervention skills for this population focus on 5 areas:

- Physical (reaching, rolling, crawling, and walking),
- Cognitive (thinking, learning, and solving problems),
- Communication (talking, listening, and understanding),
- Social/emotional (playing and feeling secure and happy), and
- Adaptive/self-help (eating and dressing).<sup>24</sup>

States must have various components under 20 U.S.C. 1435, which broadly covers administrative, oversight and regulatory functions, such as:

- Policies to ensure appropriate delivery of early intervention services to infants, toddlers and their families,
- Individualized family service plans (IFSP) for each infant or toddler with a disability,
- A properly functioning administrative structure that identifies eligible infants and toddlers using a rigorous definition of "developmental delay," makes referrals, centrally collects information, provides directory of services and resources, incorporates data, and has a comprehensive system for personnel development,
- A single line of responsibility in a lead agency designated by the Governor, including financial responsibility, provision of services, resolution of disputes, and development of procedures to ensure timeliness of services, and
- A state interagency coordination council.

The IDEA requires that early intervention services be provided, to the maximum extent appropriate, in natural environments such as the child's home.<sup>25</sup> Florida has increased the delivery of services in the home or community based setting since 2008, but still falls below the national average for home-based services.<sup>26</sup>

Allocation of federal funds to the states annually are based on the number of children in the general population aged birth through age 2 in each state using United States Census Bureau

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<sup>23</sup> Center for Parent Information and Resources, *Basics of the Early Intervention Process under Part C of the IDEA - Handout I*, [http://www.parentcenterhub.org/wp-content/uploads/repo\\_items/legacy/partc/handout1.pdf](http://www.parentcenterhub.org/wp-content/uploads/repo_items/legacy/partc/handout1.pdf) (last visited: Nov. 16, 2015).

<sup>24</sup> Center for Parent Information and Resources, *Overview of Early Intervention - What is Early Intervention?* <http://www.parentcenterhub.org/repository/ei-overview/> (last visited: Nov. 16, 2015).

<sup>25</sup> U.S. Department of Education, Office of Special Education (OSEP), *Grants for Infants and Families, Part C of IDEA, Grants for Infants and Toddlers*, <http://www2.ed.gov/programs/osepeip/index.html> (last visited: Nov. 16, 2015).

<sup>26</sup> U.S. Department of Education, *36th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2014*, pg. 120-121, <http://www2.ed.gov/about/reports/annual/osep/2014/parts-b-c/36th-idea-arc.pdf> (last visited: Nov. 16, 2015).

data.<sup>27</sup> Federal data indicates that Florida served 1.9 percent of the population of infants and toddlers from birth through age 2 in 2012 or 12,036.<sup>28</sup>

### III. Effect of Proposed Changes:

**Section 1** amends s. 383.141, F.S., to provide additional direction to the information clearinghouse administered by the Department of Health (department). The bill requires the clearinghouse to provide comprehensive information to educate parents and providers of early intervention services. The department is directed to refer to children with developmental disabilities or delays as children with “unique abilities” whenever possible in the clearinghouse. The department is to provide education and training to parents and providers through the clearinghouse. The clearinghouse is to promote public awareness of intervention services available to parents of children with developmental disabilities or delays.

**Section 2** amends s. 391.025, F.S., to rename the Florida Infants and Toddlers Early Intervention Program under the Children’s Medical Services program as the Early Steps program.

**Section 3** amends s. 391.026, F.S., to add to the department’s responsibilities the administration of the Early Steps program.

**Section 4** amends s. 391.301, F.S., to update the legislative intent of the Early Steps program and to establish goals for the program. The program must:

- Enhance the development of infants and toddlers,
- Increase the awareness among parents and health care providers of the importance of the first three years of life for the development of the brain,
- Maintain the importance of the family in early intervention services,
- Provide comprehensive and coordinated services,
- Ensure timely evaluation of infants and toddlers and provide individual planning for intervention services.
- Improve the capacity of health care providers to serve children with unique needs, and
- Ensure program and financial accountability.

**Section 5** amends s. 391.302, F.S., to add definitions for “developmental delay”, “developmental disability”, “habilitative services and devices”, and “local program office” of the Early Steps program.

**Section 6** amends s. 391.308, F.S., to provide additional structure and guidance for the Early Steps program. The bill establishes performance standards for the program relating to services and referrals, individualized family support plans, and outcomes for infants and toddlers served.

The bill provides new duties to the department for the Early Steps program. The bill requires the department to:

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<sup>27</sup> U.S. Department of Education, Office of Special Education (OSEP), *Grants for Infants and Families, Part C of IDEA, Grants for Infants and Toddlers*, <http://www2.ed.gov/programs/osepeip/index.html> (last visited: Nov. 16, 2015).

<sup>28</sup> U.S. Department of Education, *36th Annual Report to Congress on the Implementation of the Individuals with Disabilities Education Act, 2014*, pg. 261, <http://www2.ed.gov/about/reports/annual/osep/2014/parts-b-c/36th-idea-arc.pdf> (last visited: Nov. 16, 2015).

- Develop a statewide plan for the program,
- Ensure that screening is continued at hospitals providing Level II and Level III neonatal intensive care,
- Establish standards and qualifications for service providers used by the program,
- Develop uniform procedures to determine eligibility for the program,
- Provide a statewide format for individualized family support plans,
- Promote interagency cooperation with the Medicaid program and the Department of Education,
- Provide guidance to local program offices for coordinating Early Step program benefits with other programs such as Medicaid and private insurance.
- Provide an appeals procedure for parents whose infant or toddler is determined not to be eligible for Early Steps services,
- Competitively procure local offices to administer the Early Steps program,
- Establish performance measures and standards to evaluate local Early Step offices, and
- Provide technical assistance to local Early Step offices.

The bill establishes eligibility for the Early Steps program. The eligibility criteria is based on federal law and funds appropriated by the General Appropriations Act. All infant and toddlers are eligible for evaluation for developmental disabilities. Infants and toddlers with a developmental disability based on a specific condition or based on an informed clinical opinion are eligible. In addition, infants and toddlers with a specific score on a standardized evaluation instrument are eligible for Early Steps.

The bill provides duties to the Early Steps offices. These offices must:

- Evaluate a child within 45 days after referral,
- Notify parents if the child is eligible for services, and provide an appeal process to those parents whose child is found ineligible,
- Make interagency agreements with local school districts and local Medicaid managed care organizations,
- Provide services directly or procure early intervention services,
- Provide services in the natural environment to the extent possible,
- Develop an individualized family support plan for each child served in the program,
- Assess the progress of the child in meeting the goals of the individualized family support plan,
- Provide service coordination to ensure that assistance for families is properly managed whether the program provides the services directly or through referral to other service providers,
- Make agreements with local Medicaid managed care organizations,
- Make agreements with local private insurers, and
- Provide data required by the department to assess the performance of the program.

The bill requires the department to report to the Governor and legislature on the performance of the Early Steps program December 1<sup>st</sup> each year.

The bill designates the Florida Interagency Coordinating Council for Infants and Toddlers as the state interagency coordination council required under federal law.

The bill provides requirements to the local Early Steps offices to improve the transition to the local school district where the child may need special education or related services.

**Section 7** amends s. 413.092, F.S., relating to the Blind Babies program to conform the name change of the Florida Infants and Toddlers Early Intervention Program to the Early Steps program.

**Section 8** amends s. 1003.575, F.S., relating to assistive technology devices for special education to conform the name change of the Florida Infants and Toddlers Early Intervention Program to the Early Steps program.

**Section 9** repeals s. 391.303, F.S., relating to program requirements of the Florida Infants and Toddlers Early Intervention Program.

**Section 10** repeals s. 391.304, F.S., relating to program coordination of the Florida Infants and Toddlers Early Intervention Program.

**Section 11** repeals s. 391.305, F.S., relating to program standards for the Florida Infants and Toddlers Early Intervention Program.

**Section 12** repeals s. 391.306, F.S., relating to funding and contracts for the Florida Infants and Toddlers Early Intervention Program.

**Section 13** repeals s. 391.307, F.S., relating to program reviews under the Florida Infants and Toddlers Early Intervention Program.

**Section 14** provides an effective date of July 1, 2016.

#### **IV. Constitutional Issues:**

A. Municipality/County Mandates Restrictions:

None.

B. Public Records/Open Meetings Issues:

None.

C. Trust Funds Restrictions:

None.

#### **V. Fiscal Impact Statement:**

A. Tax/Fee Issues:

None.

**B. Private Sector Impact:**

Additional guidance provided for the administration of the Early Steps program may result in additional opportunities for private providers of early childhood interventions.

**C. Government Sector Impact:**

The bill is not expected to have a fiscal impact on the Department of Health. Many of the provisions of the bill are already required under federal law. Eligibility for the program is dependent on the funding appropriated in the General Appropriations Act.

**VI. Technical Deficiencies:**

None.

**VII. Related Issues:**

None.

**VIII. Statutes Affected:**

This bill substantially amends the following sections of the Florida Statutes: 383.141, 391.025, 391.026, 391.301, 391.302, 391.308, 413.092, 1003.575,

This bill repeals the following sections of the Florida Statutes: 391.303, 391.304, 391.305, 391.306, and 391.307.

**IX. Additional Information:****A. Committee Substitute – Statement of Changes:**

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

None.

**B. Amendments:**

None.



448330

LEGISLATIVE ACTION

Senate	.	House
Comm: FAV	.	
11/19/2015	.	
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The Committee on Children, Families, and Elder Affairs (Sobel) recommended the following:

**Senate Amendment (with title amendment)**

Delete everything after the enacting clause  
and insert:

Section 1. Subsections (2) and (3) of section 383.141,  
Florida Statutes, are amended to read:

383.141 Prenatally diagnosed conditions; patient to be  
provided information; definitions; information clearinghouse;  
advisory council.—

(2) When a developmental disability is diagnosed based on



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11 the results of a prenatal test, the health care provider who  
12 ordered the prenatal test, or his or her designee, shall provide  
13 the patient with current information about the nature of the  
14 developmental disability, the accuracy of the prenatal test, and  
15 resources for obtaining relevant support services, including  
16 hotlines, resource centers, and information clearinghouses  
17 related to Down syndrome or other prenatally diagnosed  
18 developmental disabilities; support programs for parents and  
19 families; and developmental evaluation and intervention services  
20 under this part ~~s. 391.303~~.

21 (3) The Department of Health shall develop and implement a  
22 comprehensive information clearinghouse to educate health care  
23 providers, inform parents, and increase public awareness  
24 regarding brain development, developmental disabilities and  
25 delays, and all services, resources, and interventions available  
26 to mitigate the effects of impaired development among children.  
27 The clearinghouse must use the term "unique abilities" as much  
28 as possible when identifying infants or children with  
29 developmental disabilities and delays. The clearinghouse must  
30 provide:

31 (a) Health information on conditions that may lead to  
32 impaired development of physical, learning, language, or  
33 behavioral skills.

34 (b) Education and information to support parents whose  
35 unborn children have been prenatally diagnosed with  
36 developmental disabilities or whose children have diagnosed or  
37 suspected developmental delays.

38 (c) Education and training for health care providers to  
39 recognize and respond appropriately to developmental



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40 disabilities, delays, and conditions related to disabilities or  
41 delays. Specific information approved by the advisory council  
42 shall be made available to health care providers for use in  
43 counseling parents whose unborn children have been prenatally  
44 diagnosed with developmental disabilities or whose children have  
45 diagnosed or suspected developmental delays.

46 (d) Promotion of public awareness of availability of  
47 supportive services, such as resource centers, educational  
48 programs, other support programs for parents and families, and  
49 developmental evaluation and intervention services.

50 (e) Hotlines specific to Down syndrome and other prenatally  
51 diagnosed developmental disabilities. The hotlines and the  
52 department's clearinghouse must provide information to parents  
53 and families or other caregivers regarding the Early Steps  
54 Program under s. 391.301, the Florida Diagnostic Learning and  
55 Resource System, the Early Learning program, Healthy Start, Help  
56 Me Grow and any other intervention programs. Information offered  
57 must include directions on how to obtain early intervention,  
58 rehabilitative, and habilitative services and devices establish  
59 on its Internet website a clearinghouse of information related  
60 to developmental disabilities concerning providers of supportive  
61 services, information hotlines specific to Down syndrome and  
62 other prenatally diagnosed developmental disabilities, resource  
63 centers, educational programs, other support programs for  
64 parents and families, and developmental evaluation and  
65 intervention services under s. 391.303. Such information shall  
66 be made available to health care providers for use in counseling  
67 pregnant women whose unborn children have been prenatally  
68 diagnosed with developmental disabilities.





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69           (4) (a) There is established an advisory council within the  
70 Department of Health which consists of health care providers and  
71 caregivers who perform health care services for persons who have  
72 developmental disabilities, including Down syndrome and autism.  
73 This group shall consist of nine members as follows:

- 74           1. Three members appointed by the Governor;  
75           2. Three members appointed by the President of the Senate;  
76 and  
77           3. Three members appointed by the Speaker of the House of  
78 Representatives.

79           (b) The advisory council shall provide technical assistance  
80 to the Department of Health in the establishment of the  
81 information clearinghouse and give the department the benefit of  
82 the council members' knowledge and experience relating to the  
83 needs of patients and families of patients with developmental  
84 disabilities and available support services.

85           (c) Members of the council shall elect a chairperson and a  
86 vice chairperson. The elected chairperson and vice chairperson  
87 shall serve in these roles until their terms of appointment on  
88 the council expire.

89           (d) The advisory council shall meet quarterly to review  
90 this clearinghouse of information, and may meet more often at  
91 the call of the chairperson or as determined by a majority of  
92 members.

93           (e) The council members shall be appointed to 4-year terms,  
94 except that, to provide for staggered terms, one initial  
95 appointee each from the Governor, the President of the Senate,  
96 and the Speaker of the House of Representatives shall be  
97 appointed to a 2-year term, one appointee each from these



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98 officials shall be appointed to a 3-year term, and the remaining  
99 initial appointees shall be appointed to 4-year terms. All  
100 subsequent appointments shall be for 4-year terms. A vacancy  
101 shall be filled for the remainder of the unexpired term in the  
102 same manner as the original appointment.

103 (f) Members of the council shall serve without  
104 compensation. Meetings of the council may be held in person,  
105 without reimbursement for travel expenses, or by teleconference  
106 or other electronic means.

107 (g) The Department of Health shall provide administrative  
108 support for the advisory council.

109 Section 1. Paragraph (c) of subsection (1) of section  
110 391.025, Florida Statutes, is amended to read:

111 391.025 Applicability and scope.—

112 (1) The Children's Medical Services program consists of the  
113 following components:

114 (c) The developmental evaluation and intervention program,  
115 including the Early Steps Florida Infants and Toddlers Early  
116 Intervention Program.

117 Section 2. Subsection (19) is added to section 391.026,  
118 Florida Statutes, to read:

119 391.026 Powers and duties of the department.—The department  
120 shall have the following powers, duties, and responsibilities:

121 (19) To serve as the lead agency to administer the Early  
122 Steps Program pursuant to part C of the federal Individuals with  
123 Disabilities Education Act and part III of this chapter.

124 Section 3. Section 391.301, Florida Statutes, is amended to  
125 read:

126 391.301 Early Steps Program; establishment and goals



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127 ~~Developmental evaluation and intervention programs; legislative~~  
128 ~~findings and intent.-~~

129       (1) The Early Steps Program is established within the  
130 department to serve infants and toddlers who are at risk of  
131 developmental disabilities and infants and toddlers with  
132 developmental delays by providing developmental evaluation and  
133 early intervention and by providing families with training and  
134 support services in a variety of home and community settings ~~The~~  
135 ~~Legislature finds that the high-risk and disabled newborn~~  
136 ~~infants in this state need in-hospital and outpatient~~  
137 ~~developmental evaluation and intervention and that their~~  
138 ~~families need training and support services. The Legislature~~  
139 ~~further finds that there is an identifiable and increasing~~  
140 ~~number of infants who need developmental evaluation and~~  
141 ~~intervention and family support due to the fact that increased~~  
142 ~~numbers of low-birthweight and sick full-term newborn infants~~  
143 ~~are now surviving because of the advances in neonatal intensive~~  
144 ~~care medicine; increased numbers of medically involved infants~~  
145 ~~are remaining inappropriately in hospitals because their parents~~  
146 ~~lack the confidence or skills to care for these infants without~~  
147 ~~support; and increased numbers of infants are at risk due to~~  
148 ~~parent risk factors, such as substance abuse, teenage pregnancy,~~  
149 ~~and other high-risk conditions.-~~

150       (2) The program may include screening and referral ~~It is~~  
151 ~~the intent of the Legislature to establish developmental~~  
152 ~~evaluation and intervention services at all hospitals providing~~  
153 ~~Level II or Level III neonatal intensive care services, in order~~  
154 ~~to promptly identify newborns with disabilities or with~~  
155 ~~conditions associated with risks of developmental delays so that~~



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156 families ~~with high risk or disabled infants~~ may gain as early as  
157 possible the services and skills they need to support their  
158 infants' development ~~infants~~.

159 (3) The program must ~~It is the intent of the Legislature~~  
160 ~~that a methodology be developed to~~ integrate information and  
161 coordinate services ~~on infants with potentially disabling~~  
162 ~~conditions~~ with other early intervention programs, including,  
163 but not limited to, Part C of Pub. L. No. 105-17 and the Healthy  
164 Start program, the newborn screening program, and the Blind  
165 Babies Program.

166 (4) The program must:

167 (a) Provide services to enhance the development of infants  
168 and toddlers with disabilities delays.

169 (b) Expand the recognition by health care providers,  
170 families, and the public of the significant brain development  
171 that occurs during a child's first 3 years of life.

172 (c) Maintain the importance of the family in all areas of  
173 the child's development and to support the family's  
174 participation in early intervention services and decisions  
175 affecting the child.

176 (d) Operate a comprehensive, coordinated interagency system  
177 of early intervention services and supports in accordance with  
178 part C of the federal Individuals with Disabilities Education  
179 Act.

180 (e) Ensure timely evaluation, individual planning, and  
181 early intervention services necessary to meet the unique needs  
182 of eligible infants and toddlers.

183 (f) Build the service capacity and enhance the competencies  
184 of health care providers serving infants and toddlers with



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185 unique needs and abilities.

186 (g) Ensure programmatic and fiscal accountability through  
187 establishment of a high-capacity data system, active monitoring  
188 of performance indicators, and ongoing quality improvement.

189 Section 4. Section 391.302, Florida Statutes, is amended to  
190 read:

191 391.302 Definitions.—As used in ss. 391.301-391.308 ~~ss.~~  
192 ~~391.301-391.307~~, the term:

193 (1) “Developmental delay” means a condition, identified and  
194 measured through appropriate instruments and procedures, which  
195 may delay physical, cognitive, communication, social/emotional,  
196 or adaptive development.

197 (2) “Developmental disability” means a condition,  
198 identified and measured through appropriate instruments and  
199 procedures, which may impair physical, cognitive, communication,  
200 social/emotional, or adaptive development.

201 (3) “Developmental intervention” or “early intervention”  
202 means individual and group ~~individualized~~ therapies and services  
203 needed to enhance both the infant’s or toddler’s growth and  
204 development and family functioning. The term includes  
205 habilitative services and assistive technology devices,  
206 rehabilitative services and assistive technology devices, and  
207 parent support and training.

208 (4) “Habilitative services and devices” means health care  
209 services and devices that help a child maintain, learn, or  
210 improve skills and functioning for daily living.

211 (5) ~~(2)~~ “Infant or toddler” or “child” means a child from  
212 birth until the child’s third birthday.

213 (6) ~~(3)~~ “In-hospital intervention services” means the



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214 provision of assessments; the provision of individual  
215 ~~individualized~~ services; ~~monitoring and modifying the delivery~~  
216 ~~of medical interventions;~~ and enhancing the environment for the  
217 high-risk, developmentally disabled, or medically involved  
218 infant or toddler in order to achieve optimum growth and  
219 development.

220 (7) "Local program office" means an office that administers  
221 the Early Steps Program within a municipality, county, or  
222 region.

223 (8)(4) "Parent support and training" means a range of  
224 services to families of high-risk, developmentally disabled, or  
225 medically involved infants or toddlers, including family  
226 counseling; ~~financial planning;~~ agency referral; development of  
227 parent-to-parent support groups; education concerning growth,  
228 development, and developmental intervention and objective  
229 measurable skills, including abuse avoidance skills; and  
230 training of parents to advocate for their child; ~~and bereavement~~  
231 counseling.

232 (9) "Rehabilitative services and devices" means restorative  
233 and remedial services that maintain or enhance the current level  
234 of functioning of a child if there is a possibility of  
235 improvement or reversal of impairment.

236 Section 5. Section 391.308, Florida Statutes, is amended to  
237 read:

238 391.308 Early Steps ~~Infants and Toddlers Early Intervention~~  
239 ~~Program.~~—The department shall ~~Department of Health may~~ implement  
240 and administer part C of the federal Individuals with  
241 Disabilities Education Act (IDEA), which shall be known as the  
242 "Early Steps" ~~"Florida Infants and Toddlers Early Intervention~~



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243 Program.”

244 (1) PERFORMANCE STANDARDS.—The department shall ensure that  
245 the Early Steps Program complies with the following performance  
246 standards:

247 (a) The program must provide services from referral through  
248 transition in a family-centered manner that recognizes and  
249 responds to unique circumstances and needs of infants and  
250 toddlers and their families as measured by a variety of  
251 qualitative data, including satisfaction surveys, interviews,  
252 focus groups, and input from stakeholders.

253 (b) The program must provide individualized family support  
254 plans that are understandable and usable by families, health  
255 care providers, and payers and that identify the current level  
256 of functioning of the infant or toddler, family supports and  
257 resources, expected outcomes, and specific early intervention  
258 services needed to achieve the expected outcomes, as measured by  
259 periodic system independent evaluation.

260 (c) The program must help each family to use available  
261 resources in a way that maximizes the child’s access to services  
262 necessary to achieve the outcomes of the individualized family  
263 support plan, as measured by family feedback and by independent  
264 assessments of services used by each child.

265 (d) The program must offer families access to quality  
266 services that effectively enable infants and toddlers with  
267 developmental disabilities and developmental delays to achieve  
268 optimal functional levels as measured by an independent  
269 evaluation of outcome indicators in social emotional skills,  
270 communication, and adaptive behaviors.

271 (2) DUTIES OF THE DEPARTMENT.—The department shall: 7



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272 (a) ~~Jointly with the Department of Education, shall~~  
273 Annually prepare a grant application to the United States  
274 Department of Education for funding early intervention services  
275 for infants and toddlers with disabilities, from birth through  
276 36 months of age, and their families pursuant to part C of the  
277 federal Individuals with Disabilities Education Act.

278 (b) ~~(2) The department, Jointly with the Department of~~  
279 Education, provide ~~shall include~~ a reading initiative as an  
280 early intervention service for infants and toddlers.

281 (c) Annually develop a state plan for the Early Steps  
282 Program.

283 1. The plan must assess the need for early intervention  
284 services, evaluate the extent of the statewide need that is met  
285 by the program, identify barriers to fully meeting the need, and  
286 recommend specific action steps to improve program performance.

287 2. The plan must be developed through an inclusive process  
288 that involves families, local program offices, health care  
289 providers, and other stakeholders.

290 (d) Ensure the provision of developmental evaluation and  
291 intervention services in each hospital that provides Level II  
292 and Level III neonatal intensive care services to an infant or a  
293 toddler identified as being at risk for developmental  
294 disabilities who along with his or her family, would benefit  
295 from early intervention services.

296 (e) Establish standards and qualifications for  
297 developmental evaluation and early intervention service  
298 providers, including standards for determining the adequacy of  
299 provider networks in each local program office service area.

300 (f) Establish statewide uniform protocols and procedures to





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301 determine eligibility for developmental evaluation and early  
302 intervention services.

303 (g) Establish a consistent, statewide format and procedure  
304 for preparing and completing an individualized family support  
305 plan.

306 (h) Promote interagency cooperation and coordination, with  
307 the Medicaid program, the Department of Education program  
308 pursuant to part B of the federal Individuals with Disabilities  
309 Education Act, and programs providing child screening such as  
310 the Florida Diagnostic Learning and Resource System, the Early  
311 Learning program, Healthy Start, and Help Me Grow program.

312 1. Coordination with the Medicaid program shall be  
313 developed and maintained through written agreements with the  
314 Agency for Health Care Administration and Medicaid managed care  
315 entities as well as through active and ongoing communication  
316 with these entities. The department shall assist local program  
317 offices to negotiate agreements with Medicaid managed care  
318 entities in the service areas of the local program offices. Such  
319 agreements may be formal or informal.

320 2. Coordination with education programs pursuant to part B  
321 of the federal Individuals with Disabilities Education Act shall  
322 be developed and maintained through written agreements with the  
323 Department of Education. The department shall assist local  
324 program offices to negotiate agreements with school districts in  
325 the service areas of the local program offices.

326 (i) Develop and disseminate the knowledge and methods  
327 necessary to effectively coordinate benefits among various payor  
328 types.

329 (j) Provide an appeals process under chapter 120 for



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330 applicants found ineligible for developmental evaluation or  
331 early intervention services or denied financial support for such  
332 services.

333 (k) Competitively procure local program offices to provide  
334 services throughout the state in accordance with chapter 287.  
335 The department shall specify the requirements and qualifications  
336 for local program offices in the procurement document.

337 (l) Establish performance standards and other metrics for  
338 evaluation of local program offices, including standards for  
339 measuring timeliness of services, outcomes of early intervention  
340 services, and administrative efficiency. Performance standards  
341 and metrics shall be developed in consultation with local  
342 program offices.

343 (m) Provide technical assistance to the local program  
344 offices.

345 (3) ELIGIBILITY.—The department shall apply the following  
346 eligibility criteria as authorized in the General Appropriations  
347 Act.

348 (a) All infants and toddlers in this state are eligible for  
349 an evaluation to determine the presence of a developmental  
350 disability or conditions that cause or increase the risk of  
351 developmental delays.

352 (b) All infants and toddlers determined to have a  
353 developmental disability based on an established condition or  
354 determined to be at risk of developmental delays based on an  
355 informed clinical opinion are eligible for Early Steps Program  
356 services.

357 (c) A child is eligible for Early Steps Program services if  
358 the application of a standardized evaluation instrument results



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359 in a score that is 1.5 standard deviations from the mean in two  
360 or more of the following domains: physical, cognitive,  
361 communication, social or emotional, and adaptive.

362 (d) A child is eligible for Early Steps Program services if  
363 the application of a standardized evaluation instrument results  
364 in a score that is 2.0 standard deviations from the mean in one  
365 of the following domains: physical, cognitive, communication,  
366 social or emotional, and adaptive.

367 (e) A child is eligible for Early Steps Program services if  
368 diagnosed with a physical or mental condition that has a high  
369 probability of resulting in a developmental delay.

370 (4) DUTIES OF THE LOCAL PROGRAM OFFICES.—A local program  
371 office shall:

372 (a) Evaluate a child to determine eligibility within 45  
373 calendar days after the child is referred to the program.

374 (b) Notify the parent or legal guardian of his or her  
375 child's eligibility status initially and at least annually  
376 thereafter. If a child is determined not to be eligible, the  
377 local program office must provide the parent or legal guardian  
378 with written information on the right to an appeal and the  
379 process for making such an appeal.

380 (c) Secure and maintain interagency agreements or contracts  
381 with local school districts and the Medicaid managed care plans  
382 in a local service area.

383 (d) Provide services directly or procure services from  
384 health care providers that meet or exceed the minimum  
385 qualifications established for service providers. The local  
386 program office must become a Medicaid provider if it provides  
387 services directly.



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388       (e) Provide directly or procure services that are, to the  
389 extent possible, delivered in a child's natural environment,  
390 such as in the child's home or community setting. The inability  
391 to provide services in the natural environment is not a  
392 sufficient reason to deny services.

393       (f) Develop an individualized family support plan for each  
394 child served. The plan must:

395           1. Be completed within 45 calendar days after referral in  
396 the program;

397           2. Be developed in conjunction with the child's parent or  
398 legal guardian who provides written consent for the services  
399 included in the plan;

400           3. Be reviewed at least every six months with the parent or  
401 legal guardian and updated if needed; and

402           4. Include steps to transition to school or other future  
403 services by the child's third birthday.

404       (g) Assess the progress of the child and his or her family  
405 in meeting the goals of the individualized family support plan.

406       (h) For each service required by the individualized family  
407 support plan, refer the child to an appropriate service provider  
408 or work with Medicaid managed care entities or private insurers  
409 to secure the needed services.

410       (i) Provide service coordination services, including  
411 contacting the appropriate service provider to determine whether  
412 the provider can timely deliver the service, providing the  
413 parent or legal guardian with the name and location of the  
414 service and the date of any appointment made on behalf of the  
415 child, and contacting the parent or legal guardian after the  
416 service is provided to ensure that the service is delivered



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417 timely and to determine whether the family requests additional  
418 services.

419 (j) Negotiate and maintain agreements with Medicaid  
420 providers and Medicaid managed care entities in its area.

421 1. With the parent's or legal guardian's permission, the  
422 services in the child's approved individualized family support  
423 plan shall be communicated to the Medicaid managed care entity.  
424 Services that cannot be funded by Medicaid must be specifically  
425 identified and explained to the family.

426 2. The agreement between the local program office and  
427 Medicaid managed care entities must establish methods of  
428 communication and procedures for the timely approval of services  
429 covered by Medicaid.

430 (k) Develop agreements and arrangements with private  
431 insurers in order to coordinate benefits and services for any  
432 mutual enrollee.

433 1. The child's approved individualized family support plan  
434 may be communicated to the child's insurer with the parent's or  
435 legal guardian's permission.

436 2. The local program office and private insurers shall  
437 establish methods of communication and procedures for the timely  
438 approval of services covered by the child's insurer, if  
439 appropriate and approved by the child's parent or legal  
440 guardian.

441 (l) Provide to the department data necessary for an  
442 evaluation of the local program office performance.

443 (5) ACCOUNTABILITY REPORTING.—By December 1 of each year,  
444 the department shall prepare and submit a report that assesses  
445 the performance of the Early Steps Program to the Governor, the



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446 President of the Senate, the Speaker of the House of  
447 Representatives, and the Florida Interagency Coordinating  
448 Council for Infants and Toddlers. The department must address  
449 the performance standards in subsection (1) and report actual  
450 performance compared to the standards for the prior fiscal year.  
451 The data used to compile the report must be submitted by each  
452 local program office in the state. The department shall report  
453 on all of the following measures:

454 (a) Number and percentage of infants and toddlers served  
455 with an individualized family support plan.

456 (b) Number and percentage of infants and toddlers  
457 demonstrating improved social/emotional skills after the  
458 program.

459 (c) Number and percentage of infants and toddlers  
460 demonstrating improved use of knowledge and cognitive skills  
461 after the program.

462 (d) Number and percentage of families reporting positive  
463 outcomes in their infant and toddler's development as a result  
464 of early intervention services.

465 (e) Progress toward meeting the goals of individualized  
466 family support plans.

467 (f) Any additional measures established by the department.

468 (6) STATE INTERAGENCY COORDINATING COUNCIL.—The Florida  
469 Interagency Coordinating Council for Infants and Toddlers shall  
470 serve as the state interagency coordinating council required by  
471 34 C.F.R. s. 303.600. The council shall be housed for  
472 administrative purposes in the department, and the department  
473 shall provide administrative support to the council.

474 (7) TRANSITION TO EDUCATION.—



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475       (a) At least 90 days before a child reaches 3 years of age,  
476 the local program office shall initiate transition planning to  
477 ensure the child's successful transition from the Early Steps  
478 Program to a school district program for children with  
479 disabilities or to another program as part of an individual  
480 family support plan.

481       (b) At least 3 months before a child reaches 3 years of  
482 age, the local program office shall:

483       1. Notify the local school district in which the child  
484 resides and the Department of Education that the child may be  
485 eligible for special education or related services as determined  
486 by the local school district pursuant to ss. 1003.21 and  
487 1003.57, unless the child's parent or legal guardian has opted  
488 out of such notification; and

489       2. Upon approval by the child's parent or legal guardian,  
490 convene a transition conference that includes participation of a  
491 local school district representative and the parent or legal  
492 guardian to discuss options for and availability of services.

493       (c) The local school district shall evaluate and determine  
494 a child's eligibility to receive special education or related  
495 services pursuant to part B of the federal Individuals with  
496 Disabilities Education Act and ss. 1003.21 and 1003.57.

497       (d) The local program office, in conjunction with the local  
498 school district, shall modify a child's individual family  
499 support plan or, if applicable, the local school district shall  
500 develop an individual education plan for the child pursuant to  
501 ss. 1003.57, 1003.571, and 1003.5715, which identifies special  
502 education or related services that the child will receive and  
503 the providers or agencies that will provide such services.



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504       (e) If a child is determined to be ineligible for school  
505 district program services, the local program office and the  
506 local school district shall provide the child's parent or legal  
507 guardian with written information on other available services or  
508 community resources.

509       (f) The local program office shall negotiate and maintain  
510 an interagency agreement with each local school district in its  
511 service area pursuant to the federal Individuals with  
512 Disabilities Education Act, 20 U.S.C. s. 1435(a)(10)(F). Each  
513 interagency agreement must be reviewed at least annually and  
514 updated upon review, if needed.

515       Section 6. Subsections (1) and (2) of section 413.092,  
516 Florida Statutes, are amended to read:

517       413.092 Blind Babies Program.—

518       (1) The Blind Babies Program is created within the Division  
519 of Blind Services of the Department of Education to provide  
520 community-based early-intervention education to children from  
521 birth through 5 years of age who are blind or visually impaired,  
522 and to their parents, families, and caregivers, through  
523 community-based provider organizations. The division shall  
524 enlist parents, ophthalmologists, pediatricians, schools, the  
525 Early Steps Program Infant and Toddlers Early Intervention  
526 Programs, and therapists to help identify and enroll blind and  
527 visually impaired children, as well as their parents, families,  
528 and caregivers, in these educational programs.

529       (2) The program is not an entitlement but shall promote  
530 early development with a special emphasis on vision skills to  
531 minimize developmental delays. The education shall lay the  
532 groundwork for future learning by helping a child progress





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533 through normal developmental stages. It shall teach children to  
534 discover and make the best use of their skills for future  
535 success in school. It shall seek to ensure that visually  
536 impaired and blind children enter school as ready to learn as  
537 their sighted classmates. The program shall seek to link these  
538 children, and their parents, families, and caregivers, to other  
539 available services, training, education, and employment programs  
540 that could assist these families in the future. This linkage may  
541 include referrals to the school districts and the Early Steps  
542 ~~Infants and Toddlers Early Intervention~~ Program for assessments  
543 to identify any additional services needed which are not  
544 provided by the Blind Babies Program. The division shall develop  
545 a formula for eligibility based on financial means and may  
546 create a means-based matrix to set a copayment fee for families  
547 having sufficient financial means.

548 Section 7. Subsection (1) of section 1003.575, Florida  
549 Statutes, is amended to read:

550 1003.575 Assistive technology devices; findings;  
551 interagency agreements.—Accessibility, utilization, and  
552 coordination of appropriate assistive technology devices and  
553 services are essential as a young person with disabilities moves  
554 from early intervention to preschool, from preschool to school,  
555 from one school to another, and from school to employment or  
556 independent living. If an individual education plan team makes a  
557 recommendation in accordance with State Board of Education rule  
558 for a student with a disability, as defined in s. 1003.01(3), to  
559 receive an assistive technology assessment, that assessment must  
560 be completed within 60 school days after the team's  
561 recommendation. To ensure that an assistive technology device



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562 issued to a young person as part of his or her individualized  
563 family support plan, individual support plan, or an individual  
564 education plan remains with the individual through such  
565 transitions, the following agencies shall enter into interagency  
566 agreements, as appropriate, to ensure the transaction of  
567 assistive technology devices:

568 (1) The Early Steps Florida Infants and Toddlers Early  
569 ~~Intervention~~ Program in the Division of Children's Medical  
570 Services of the Department of Health.

571  
572 Interagency agreements entered into pursuant to this section  
573 shall provide a framework for ensuring that young persons with  
574 disabilities and their families, educators, and employers are  
575 informed about the utilization and coordination of assistive  
576 technology devices and services that may assist in meeting  
577 transition needs, and shall establish a mechanism by which a  
578 young person or his or her parent may request that an assistive  
579 technology device remain with the young person as he or she  
580 moves through the continuum from home to school to postschool.

581 Section 8. Section 391.303, Florida Statutes, is repealed.

582 Section 9. Section 391.304, Florida Statutes, is repealed.

583 Section 10. Section 391.305, Florida Statutes, is repealed.

584 Section 11. Section 391.306, Florida Statutes, is repealed.

585 Section 12. Section 391.307, Florida Statutes, is repealed.

586 Section 13. This act shall take effect July 1, 2016.

587  
588  
589 ===== T I T L E A M E N D M E N T =====

590 And the title is amended as follows:



448330

591 Delete everything before the enacting clause  
592 and insert:

593 A bill to be entitled  
594 An act relating to prenatal services and early  
595 childhood development; amending s. 383.141, F.S.;  
596 revising the requirements for the Department of Health  
597 to maintain a clearinghouse of information for parents  
598 and health care providers on developmental evaluation  
599 and early intervention programs; requiring the  
600 clearinghouse to use a specified term; revising the  
601 information to be included in the clearinghouse;  
602 amending s. 391.025, F.S.; revising the components of  
603 the Children's Medical Services program; amending s.  
604 391.026, F.S.; requiring the department to serve as  
605 the lead agency to administer the Early Steps Program;  
606 amending s. 391.301, F.S.; deleting a provision  
607 relating to legislative findings and establishing the  
608 Early Steps Program within the department; providing  
609 requirements and responsibilities for the program;  
610 amending s. 391.302, F.S.; defining terms; revising  
611 the definitions of certain terms; amending s. 391.308,  
612 F.S.; renaming the "Infants and Toddlers Early  
613 Intervention Program" as the "Early Steps Program";  
614 requiring, rather than authorizing, the department to  
615 implement and administer the program; providing  
616 performance standards; revising the duties of the  
617 department; establishing eligibility criteria for the  
618 program; providing duties for local program offices;  
619 requiring the development of an individualized family



448330

620 support plan for each child served in the program;  
621 requiring referral for services by a local program  
622 office under certain circumstances; requiring the  
623 local program office to negotiate and maintain  
624 agreements with specified providers and managed care  
625 plans; requiring the local program office to  
626 coordinate with managed care plans; requiring the  
627 department to submit an annual report to the Governor,  
628 the Legislature, and the Florida Interagency  
629 Coordinating Council for Infants and Toddlers;  
630 designating the Florida Interagency Coordinating  
631 Council for Infants and Toddlers as the state  
632 interagency coordinating council required by federal  
633 rule; providing requirements for the local program  
634 office and local school district to prepare children  
635 for the transition to school; amending s. 413.092,  
636 F.S.; conforming provisions to changes made by the  
637 act; amending s. 1003.575, F.S.; conforming provisions  
638 to changes made by the act; repealing ss. 391.303,  
639 391.304, 391.305, 391.306, and 391.307, F.S., relating  
640 to requirements for the Children's Medical Services  
641 program, program coordination, program standards,  
642 program funding and contracts, and program review,  
643 respectively; providing an effective date.  
644

**FOR CONSIDERATION** By the Committee on Children, Families, and Elder Affairs

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1 A bill to be entitled  
 2 An act relating to prenatal services and early  
 3 childhood development; amending s. 383.141, F.S.;  
 4 revising the requirements for the Department of Health  
 5 to maintain a clearinghouse of information for parents  
 6 and health care providers on developmental evaluation  
 7 and early intervention programs; requiring the  
 8 clearinghouse to use a specified term; revising the  
 9 information to be included in the clearinghouse;  
 10 amending s. 391.025, F.S.; revising the components of  
 11 the Children's Medical Services program; amending s.  
 12 391.026, F.S.; requiring the department to serve as  
 13 the lead agency to administer the Early Steps Program;  
 14 amending s. 391.301, F.S.; deleting a provision  
 15 relating to legislative findings and establishing the  
 16 Early Steps Program within the department; providing  
 17 requirements and responsibilities for the program;  
 18 amending s. 391.302, F.S.; defining terms; revising  
 19 the definitions of certain terms; amending s. 391.308,  
 20 F.S.; renaming the "Infants and Toddlers Early  
 21 Intervention Program" as the "Early Steps Program";  
 22 requiring, rather than authorizing, the department to  
 23 implement and administer the program; providing  
 24 performance standards; revising the duties of the  
 25 department; establishing eligibility criteria for the  
 26 program; providing duties for local program offices;  
 27 requiring the development of an individual family  
 28 support plan for each child served in the program;  
 29 requiring referral for services by a local program

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30 office under certain circumstances; requiring the  
 31 local program office to negotiate and maintain  
 32 agreements with specified providers and managed care  
 33 plans; requiring the local program office to  
 34 coordinate with managed care plans; requiring the  
 35 department to submit an annual report to the Governor,  
 36 the Legislature, and the Florida Interagency  
 37 Coordinating Council for Infants and Toddlers;  
 38 designating the Florida Interagency Coordinating  
 39 Council for Infants and Toddlers as the state  
 40 interagency coordinating council required by federal  
 41 rule; providing requirements for the local program  
 42 office and local school district to prepare children  
 43 for the transition to school; amending s. 413.092,  
 44 F.S.; conforming provisions to changes made by the  
 45 act; amending s. 1003.575, F.S.; conforming provisions  
 46 to changes made by the act; repealing ss. 391.303,  
 47 391.304, 391.305, 391.306, and 391.307, F.S., relating  
 48 to requirements for the Children's Medical Services  
 49 program, program coordination, program standards,  
 50 program funding and contracts, and program review,  
 51 respectively; providing an effective date.  
 52  
 53 Be It Enacted by the Legislature of the State of Florida:  
 54  
 55 Section 1. Subsections (2) and (3) of section 383.141,  
 56 Florida Statutes, are amended to read:  
 57 383.141 Prenatally diagnosed conditions; patient to be  
 58 provided information; definitions; information clearinghouse;

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59 advisory council.—

60 (2) When a developmental disability is diagnosed based on  
61 the results of a prenatal test, the health care provider who  
62 ordered the prenatal test, or his or her designee, shall provide  
63 the patient with current information about the nature of the  
64 developmental disability, the accuracy of the prenatal test, and  
65 resources for obtaining relevant support services, including  
66 hotlines, resource centers, and information clearinghouses  
67 related to Down syndrome or other prenatally diagnosed  
68 developmental disabilities; support programs for parents and  
69 families; and developmental evaluation and intervention services  
70 under this part s. 391.303.

71 (3) The Department of Health shall develop and implement a  
72 comprehensive information clearinghouse to educate health care  
73 providers, inform parents, and increase public awareness  
74 regarding brain development, developmental disabilities and  
75 delays, and all services, resources, and interventions available  
76 to mitigate the effects of impaired development among children.  
77 The clearinghouse must use the term "unique abilities" as much  
78 as possible when identifying infants or children with  
79 developmental disabilities and delays. The clearinghouse must  
80 provide:

81 (a) Health information on conditions that may lead to  
82 impaired development of physical, learning, language, or  
83 behavioral skills.

84 (b) Education and information to support parents whose  
85 unborn children have been prenatally diagnosed with  
86 developmental disabilities or whose children have diagnosed or  
87 suspected developmental delays.

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88 (c) Education and training for health care providers to  
89 recognize and respond appropriately to developmental  
90 disabilities, delays, and conditions related to disabilities or  
91 delays. Specific information approved by the advisory council  
92 shall be made available to health care providers for use in  
93 counseling parents whose unborn children have been prenatally  
94 diagnosed with developmental disabilities or whose children have  
95 diagnosed or suspected developmental delays.

96 (d) Promotion of public awareness of availability of  
97 supportive services, such as resource centers, educational  
98 programs, other support programs for parents and families, and  
99 developmental evaluation and intervention services.

100 (e) Hotlines specific to Down syndrome and other prenatally  
101 diagnosed developmental disabilities. The hotlines and the  
102 department's clearinghouse must provide information to parents  
103 and families or other caregivers regarding the Early Steps  
104 Program under s. 391.301 and any other developmental evaluation  
105 and intervention program. Information offered must include  
106 directions on how to obtain early intervention, rehabilitative,  
107 and habilitative services and devices ~~establish on its Internet~~  
108 ~~website a clearinghouse of information related to developmental~~  
109 ~~disabilities concerning providers of supportive services,~~  
110 ~~information hotlines specific to Down syndrome and other~~  
111 ~~prenatally diagnosed developmental disabilities, resource~~  
112 ~~centers, educational programs, other support programs for~~  
113 ~~parents and families, and developmental evaluation and~~  
114 ~~intervention services under s. 391.303. Such information shall~~  
115 ~~be made available to health care providers for use in counseling~~  
116 ~~pregnant women whose unborn children have been prenatally~~

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117 ~~diagnosed with developmental disabilities.~~

118 (4) (a) There is established an advisory council within the  
119 Department of Health which consists of health care providers and  
120 caregivers who perform health care services for persons who have  
121 developmental disabilities, including Down syndrome and autism.  
122 This group shall consist of nine members as follows:

- 123 1. Three members appointed by the Governor;
- 124 2. Three members appointed by the President of the Senate;
- 125 and
- 126 3. Three members appointed by the Speaker of the House of  
127 Representatives.

128 (b) The advisory council shall provide technical assistance  
129 to the Department of Health in the establishment of the  
130 information clearinghouse and give the department the benefit of  
131 the council members' knowledge and experience relating to the  
132 needs of patients and families of patients with developmental  
133 disabilities and available support services.

134 (c) Members of the council shall elect a chairperson and a  
135 vice chairperson. The elected chairperson and vice chairperson  
136 shall serve in these roles until their terms of appointment on  
137 the council expire.

138 (d) The advisory council shall meet quarterly to review  
139 this clearinghouse of information, and may meet more often at  
140 the call of the chairperson or as determined by a majority of  
141 members.

142 (e) The council members shall be appointed to 4-year terms,  
143 except that, to provide for staggered terms, one initial  
144 appointee each from the Governor, the President of the Senate,  
145 and the Speaker of the House of Representatives shall be

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146 appointed to a 2-year term, one appointee each from these  
147 officials shall be appointed to a 3-year term, and the remaining  
148 initial appointees shall be appointed to 4-year terms. All  
149 subsequent appointments shall be for 4-year terms. A vacancy  
150 shall be filled for the remainder of the unexpired term in the  
151 same manner as the original appointment.

152 (f) Members of the council shall serve without  
153 compensation. Meetings of the council may be held in person,  
154 without reimbursement for travel expenses, or by teleconference  
155 or other electronic means.

156 (g) The Department of Health shall provide administrative  
157 support for the advisory council.

158 Section 2. Paragraph (c) of subsection (1) of section  
159 391.025, Florida Statutes, is amended to read:

160 391.025 Applicability and scope.—

161 (1) The Children's Medical Services program consists of the  
162 following components:

163 (c) The developmental evaluation and intervention program,  
164 including the Early Steps Florida Infants and Toddlers Early  
165 ~~Intervention~~ Program.

166 Section 3. Subsection (19) is added to section 391.026,  
167 Florida Statutes, to read:

168 391.026 Powers and duties of the department.—The department  
169 shall have the following powers, duties, and responsibilities:

170 (19) To serve as the lead agency to administer the Early  
171 Steps Program pursuant to part C of the federal Individuals with  
172 Disabilities Education Act and part III of this chapter.

173 Section 4. Section 391.301, Florida Statutes, is amended to  
174 read:

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175       391.301 Early Steps Program; establishment and goals  
 176 Developmental evaluation and intervention programs; legislative  
 177 findings and intent.-  
 178       (1) The Early Steps Program is established within the  
 179 department to serve infants and children who are at risk of  
 180 developmental disabilities and infants and children with  
 181 developmental delays by providing developmental evaluation and  
 182 early intervention and by providing families with training and  
 183 support services in a variety of home and community settings The  
 184 Legislature finds that the high-risk and disabled newborn  
 185 infants in this state need in-hospital and outpatient  
 186 developmental evaluation and intervention and that their  
 187 families need training and support services. The Legislature  
 188 further finds that there is an identifiable and increasing  
 189 number of infants who need developmental evaluation and  
 190 intervention and family support due to the fact that increased  
 191 numbers of low-birthweight and sick full-term newborn infants  
 192 are now surviving because of the advances in neonatal intensive  
 193 care medicine; increased numbers of medically involved infants  
 194 are remaining inappropriately in hospitals because their parents  
 195 lack the confidence or skills to care for these infants without  
 196 support; and increased numbers of infants are at risk due to  
 197 parent risk factors, such as substance abuse, teenage pregnancy,  
 198 and other high-risk conditions.  
 199       (2) The program must include ~~It is the intent of the~~  
 200 ~~Legislature to establish~~ developmental evaluation and early  
 201 intervention services at all hospitals providing Level II or  
 202 Level III neonatal intensive care services, in order to promptly  
 203 identify newborns with disabilities or with conditions

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204 associated with risks of developmental delays so that families  
 205 with high-risk or disabled infants may gain as early as possible  
 206 the services and skills they need to support their infants'  
 207 development infants.  
 208       (3) The program must ~~It is the intent of the Legislature~~  
 209 ~~that a methodology be developed to~~ integrate information and  
 210 coordinate services on infants with potentially disabling  
 211 ~~conditions~~ with other early developmental evaluation and  
 212 intervention programs, including, but not limited to, Part C of  
 213 Pub. L. No. 105-17 and the Healthy Start program, the newborn  
 214 screening program, and the Blind Babies Program.  
 215       (4) The program must:  
 216       (a) Enhance the development of infants and toddlers with  
 217 disabilities in order to mitigate any potential developmental  
 218 delay.  
 219       (b) Expand the recognition by health care providers,  
 220 families, and the public of the significant brain development  
 221 that occurs during a child's first 3 years of life.  
 222       (c) Affirm the importance of the family in all areas of the  
 223 child's development and to support the family's participation in  
 224 early intervention services and decisions affecting the child.  
 225       (d) Operate a comprehensive, coordinated interagency system  
 226 of early intervention services and supports in accordance with  
 227 part C of the federal Individuals with Disabilities Education  
 228 Act.  
 229       (e) Ensure timely evaluation, individual planning, and  
 230 early intervention services necessary to meet the unique needs  
 231 of eligible children.  
 232       (f) Build the service capacity and enhance the competencies

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233 of health care providers serving children with unique needs and  
 234 abilities.

235 (g) Ensure programmatic and fiscal accountability through  
 236 establishment of a high-capacity data system, active monitoring  
 237 of performance indicators, and ongoing quality improvement.

238 Section 5. Section 391.302, Florida Statutes, is amended to  
 239 read:

240 391.302 Definitions.—As used in ss. 391.301-391.308 ~~ss.~~  
 241 ~~391.301-391.307~~, the term:

242 (1) “Developmental delay” means a condition, identified and  
 243 measured through appropriate instruments and procedures, which  
 244 may delay physical, cognitive, communication, social or  
 245 emotional, or adaptive development.

246 (2) “Developmental disability” means a condition,  
 247 identified and measured through appropriate instruments and  
 248 procedures, which may impair physical, cognitive, communication,  
 249 social or emotional, or adaptive development.

250 (3) “Developmental intervention” or “early intervention”  
 251 means individual ~~individualized~~ therapies and services needed to  
 252 enhance both the infant’s or toddler’s growth and development  
 253 and family functioning. The term includes habilitative services  
 254 and devices, rehabilitative services and devices, and parent  
 255 support and training.

256 (4) “Habilitative services and devices” means health care  
 257 services and devices that help a child maintain, learn, or  
 258 improve skills and functioning for daily living.

259 (5) ~~(2)~~ “Infant or toddler” or “child” means a child from  
 260 birth until the child’s third birthday.

261 (6) ~~(3)~~ “In-hospital intervention services” means the

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262 provision of assessments; the provision of individual  
 263 ~~individualized~~ services; monitoring and modifying the delivery  
 264 of medical interventions; and enhancing the environment for the  
 265 high-risk, developmentally disabled, or medically involved  
 266 infant or toddler in order to achieve optimum growth and  
 267 development.

268 (7) “Local program office” means an office that administers  
 269 the Early Steps Program within a municipality, county, or  
 270 region.

271 (8) ~~(4)~~ “Parent support and training” means a range of  
 272 services to families of high-risk, developmentally disabled, or  
 273 medically involved infants or toddlers, including family  
 274 counseling; financial planning; agency referral; development of  
 275 parent-to-parent support groups; education concerning growth,  
 276 development, and developmental intervention and objective  
 277 measurable skills, including abuse avoidance skills; training of  
 278 parents to advocate for their child; and bereavement counseling.

279 (9) “Rehabilitative services and devices” means restorative  
 280 and remedial services and mechanisms that maintain or enhance  
 281 the current level of functioning of a child if there is a  
 282 possibility of improvement or reversal of impairment.

283 Section 6. Section 391.308, Florida Statutes, is amended to  
 284 read:

285 391.308 ~~Early Steps Infants and Toddlers Early Intervention~~  
 286 ~~Program.—The department shall Department of Health may~~ implement  
 287 and administer part C of the federal Individuals with  
 288 Disabilities Education Act (IDEA), which shall be known as the  
 289 “Early Steps” ~~“Florida Infants and Toddlers Early Intervention~~  
 290 ~~Program.”~~

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291 (1) PERFORMANCE STANDARDS.—The department shall ensure that  
 292 the Early Steps Program complies with the following performance  
 293 standards:

294 (a) The program must provide services from referral through  
 295 transition in a family-centered manner that recognizes and  
 296 responds to unique circumstances and needs of children and their  
 297 families as measured by a variety of qualitative data, including  
 298 satisfaction surveys, interviews, focus groups, and input from  
 299 stakeholders.

300 (b) The program must provide individual family support  
 301 plans that are understandable and usable by families, health  
 302 care providers, and payors and that identify the current level  
 303 of functioning of the family, family supports and resources,  
 304 expected outcomes, and specific early intervention services  
 305 needed to achieve the expected outcomes, as measured by user  
 306 feedback and periodic independent evaluation.

307 (c) The program must help each family to use available  
 308 resources in a way that maximizes the child's access to services  
 309 necessary to achieve the outcomes of the individual family  
 310 support plan, as measured by family feedback and by independent  
 311 assessments of services used by each child.

312 (d) The program must offer families access to quality  
 313 services that effectively enable children with developmental  
 314 disabilities and developmental delays to achieve optimal  
 315 functional levels as measured by an independent evaluation of  
 316 outcome indicators in social relationships, communication, and  
 317 adaptive behaviors.

318 (2) DUTIES OF THE DEPARTMENT.—The department shall:—

319 (a) Jointly with the Department of Education, shall

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320 annually prepare a grant application to the United States  
 321 Department of Education for funding early intervention services  
 322 for infants and toddlers with disabilities, from birth through  
 323 36 months of age, and their families pursuant to part C of the  
 324 federal Individuals with Disabilities Education Act.

325 ~~(b)(2) The department,~~ Jointly with the Department of  
 326 Education, provide shall include a reading initiative as an  
 327 early intervention service for infants and toddlers.

328 (c) Annually develop a state plan for the Early Steps  
 329 Program.

330 1. The plan must assess the need for early intervention  
 331 services, evaluate the extent of the statewide need that is met  
 332 by the program, identify barriers to fully meeting the need, and  
 333 recommend specific action steps to improve program performance.

334 2. The plan must be developed through an inclusive process  
 335 that involves families, local program offices, health care  
 336 providers, and other stakeholders.

337 (d) Ensure the provision of developmental evaluation and  
 338 intervention services in each hospital that provides Level II  
 339 and Level III neonatal intensive care services to an infant or a  
 340 toddler identified as being at risk for developmental  
 341 disabilities or identified as medically involved who, along with  
 342 his or her family, would benefit from early intervention  
 343 services.

344 (e) Establish standards and qualifications for  
 345 developmental evaluation and early intervention service  
 346 providers, including standards for determining the adequacy of  
 347 provider networks in each local program office service area.

348 (f) Establish statewide uniform protocols and procedures to

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349 determine eligibility for developmental evaluation and early  
 350 intervention services.

351 (g) Establish a consistent, statewide format and procedure  
 352 for preparing and completing an individual family support plan.

353 (h) Promote interagency cooperation and coordination,  
 354 particularly with the Medicaid program and the Department of  
 355 Education program pursuant to part B of the federal Individuals  
 356 with Disabilities Education Act.

357 1. Coordination with the Medicaid program shall be  
 358 developed and maintained through written agreements with the  
 359 Agency for Health Care Administration and Medicaid managed care  
 360 entities as well as through active and ongoing communication  
 361 with these entities. The department shall assist local program  
 362 offices to negotiate agreements with Medicaid managed care  
 363 entities in the service areas of the local program offices.

364 2. Coordination with education programs pursuant to part B  
 365 of the federal Individuals with Disabilities Education Act shall  
 366 be developed and maintained through written agreements with the  
 367 Department of Education. The department shall assist local  
 368 program offices to negotiate agreements with school districts in  
 369 the service areas of the local program offices.

370 (i) Develop and disseminate the knowledge and methods  
 371 necessary to effectively coordinate benefits among various payor  
 372 types.

373 (j) Provide an appeals process under chapter 120 for  
 374 applicants found ineligible for developmental evaluation or  
 375 early intervention services or denied financial support for such  
 376 services.

377 (k) Competitively procure local program offices to provide

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378 services throughout the state in accordance with chapter 287.

379 The department shall specify the requirements and qualifications  
 380 for local program offices in the procurement document.

381 (l) Establish performance standards and other metrics for  
 382 evaluation of local program offices, including standards for  
 383 measuring timeliness of services, outcomes of early intervention  
 384 services, and administrative efficiency.

385 (m) Provide technical assistance to the local program  
 386 offices.

387 (3) ELIGIBILITY.—The department shall apply the following  
 388 eligibility criteria as authorized in the General Appropriations  
 389 Act.

390 (a) All children in this state are eligible for an  
 391 evaluation to determine the presence of a developmental  
 392 disability or conditions that cause or increase the risk of  
 393 developmental delays.

394 (b) All children determined to have a developmental  
 395 disability based on an established condition or determined to be  
 396 at risk of developmental delays based on an informed clinical  
 397 opinion are eligible for Early Steps Program services.

398 (c) A child is eligible for Early Steps Program services if  
 399 the application of a standardized evaluation instrument results  
 400 in a score that is 1.5 standard deviations from the mean in two  
 401 or more of the following domains: physical, cognitive,  
 402 communication, social or emotional, and adaptive.

403 (d) A child is eligible for Early Steps Program services if  
 404 the application of a standardized evaluation instrument results  
 405 in a score that is 2.0 standard deviations from the mean in one  
 406 of the following domains: physical, cognitive, communication,

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407 social or emotional, and adaptive.

408 (e) A child is eligible for Early Steps Program services if  
 409 diagnosed with a physical or mental condition that has a high  
 410 probability of resulting in a developmental delay.

411 (4) DUTIES OF THE LOCAL PROGRAM OFFICES.—A local program  
 412 office shall:

413 (a) Evaluate a child to determine eligibility within 45  
 414 calendar days after the child is referred to the program.

415 (b) Notify the parent or legal guardian of his or her  
 416 child's eligibility status initially and at least annually  
 417 thereafter. If a child is determined not to be eligible, the  
 418 local program office must provide the parent or legal guardian  
 419 with written information on the right to an appeal and the  
 420 process for making such an appeal.

421 (c) Secure and maintain interagency agreements or contracts  
 422 with local school districts and the Medicaid managed care plans  
 423 in a local service area.

424 (d) Provide services directly or procure services from  
 425 health care providers that meet or exceed the minimum  
 426 qualifications established for service providers. The local  
 427 program office must become a Medicaid provider if it provides  
 428 services directly.

429 (e) Provide directly or procure services that are, to the  
 430 extent possible, delivered in a child's natural environment,  
 431 such as in the child's home or community setting. The inability  
 432 to provide services in the natural environment is not a  
 433 sufficient reason to deny services.

434 (f) Develop an individual family support plan for each  
 435 child served. The plan must:

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436 1. Be completed within 45 calendar days after enrollment in  
 437 the program;

438 2. Be developed in conjunction with the child's parent or  
 439 legal guardian who provides written consent for the services  
 440 included in the plan;

441 3. Be reviewed at least annually with the parent or legal  
 442 guardian and updated if needed; and

443 4. Include steps to transition to school or other future  
 444 services by the child's third birthday.

445 (g) Assess the progress of the child and his or her family  
 446 in meeting the goals of the individual family support plan.

447 (h) For each service required by the individual family  
 448 support plan, refer the child to an appropriate service provider  
 449 or work with Medicaid managed care entities or private insurers  
 450 to secure the needed services.

451 (i) Provide care coordination services, including  
 452 contacting the appropriate service provider to determine whether  
 453 the provider can timely deliver the service, providing the  
 454 parent or legal guardian with the name and location of the  
 455 service provider and the date of any appointment made on behalf  
 456 of the child, and contacting the parent or legal guardian after  
 457 the service is provided to ensure that the service is delivered  
 458 timely and to determine whether additional services are needed.

459 (j) Negotiate and maintain agreements with Medicaid  
 460 providers and Medicaid managed care entities in its area.

461 1. With the parent's or legal guardian's permission, the  
 462 services in the child's approved individual family support plan  
 463 shall be communicated to the Medicaid managed care entity.  
 464 Services that cannot be funded by Medicaid must be specifically

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465 identified and explained to the family.

466 2. The agreement between the local program office and  
 467 Medicaid managed care entities must establish methods of  
 468 communication and procedures for the timely approval of services  
 469 covered by Medicaid.

470 (k) Develop agreements and arrangements with private  
 471 insurers in order to coordinate benefits and services for any  
 472 mutual enrollee.

473 1. The child's approved individual family support plan may  
 474 be communicated to the child's insurer with the parent's or  
 475 legal guardian's permission.

476 2. The local program office and private insurers shall  
 477 establish methods of communication and procedures for the timely  
 478 approval of services covered by the child's insurer, if  
 479 appropriate and approved by the child's parent or legal  
 480 guardian.

481 (l) Provide to the department data necessary for an  
 482 evaluation of the local program office performance.

483 (5) ACCOUNTABILITY REPORTING.—By October 1 of each year,  
 484 the department shall prepare and submit a report that assesses  
 485 the performance of the Early Steps Program to the Governor, the  
 486 President of the Senate, the Speaker of the House of  
 487 Representatives, and the Florida Interagency Coordinating  
 488 Council for Infants and Toddlers. The department must address  
 489 the performance standards in subsection (1) and report actual  
 490 performance compared to the standards for the prior fiscal year.  
 491 The data used to compile the report must be submitted by each  
 492 local program office in the state. The department shall report  
 493 on all of the following measures:

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494 (a) Number and percentage of children served.

495 (b) Number and percentage of children demonstrating  
 496 improved social or emotional skills after the program.

497 (c) Number and percentage of children demonstrating  
 498 improved use of knowledge and cognitive skills after the  
 499 program.

500 (d) Number and percentage of families reporting positive  
 501 outcomes in the development of children as a result of early  
 502 intervention services.

503 (e) Progress toward meeting the goals of individual family  
 504 support plans.

505 (f) Any additional measures established by the department.

506 (6) STATE INTERAGENCY COORDINATING COUNCIL.—The Florida  
 507 Interagency Coordinating Council for Infants and Toddlers shall  
 508 serve as the state interagency coordinating council required by  
 509 34 C.F.R. s. 303.600. The council shall be housed for  
 510 administrative purposes in the department, and the department  
 511 shall provide administrative support to the council.

512 (7) TRANSITION TO EDUCATION.—

513 (a) At least 6 months before a child reaches 3 years of  
 514 age, the local program office shall:

515 1. Initiate transition planning to ensure the child's  
 516 successful transition from the Early Steps Program to a school  
 517 district program for children with disabilities or to another  
 518 program as part of an individual family support plan.

519 2. Notify the appropriate local school district located in  
 520 its service area that the child may be eligible for specialized  
 521 instruction or related services as determined by the local  
 522 school district pursuant to ss. 1003.21 and 1003.57.

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523 (b) The local program office shall convene a transition  
 524 conference that includes participation by a local school  
 525 district representative and a child's parent or legal guardian  
 526 to discuss options for and availability of services at least 3  
 527 months before the child reaches 3 years of age.

528 (c) The local school district shall evaluate and determine  
 529 a child's eligibility for receiving specialized instruction or  
 530 related services pursuant to ss. 1003.21 and 1003.57.

531 (d) The local program office, in conjunction with the local  
 532 school district, shall modify a child's individual family  
 533 support plan, or, if applicable, the local school district shall  
 534 develop an individual education plan for the child pursuant to  
 535 ss. 1003.57, 1003.571, and 1003.5715, which identifies  
 536 specialized instruction or related services that the child will  
 537 receive and the providers or agencies that will provide such  
 538 services.

539 (e) If a child is determined to be ineligible for school  
 540 district program services, the local program office shall  
 541 provide the child's parent or legal guardian with written  
 542 information on other available services or community resources.

543 (f) The local program office shall negotiate and maintain  
 544 an interagency agreement with each local school district in its  
 545 service area pursuant to the federal Individuals with  
 546 Disabilities Education Act, 20 U.S.C. s. 1435(a)(10)(F). Each  
 547 interagency agreement must be reviewed at least annually and  
 548 updated upon review, if needed.

549 Section 7. Subsections (1) and (2) of section 413.092,  
 550 Florida Statutes, are amended to read:  
 551 413.092 Blind Babies Program.—

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552 (1) The Blind Babies Program is created within the Division  
 553 of Blind Services of the Department of Education to provide  
 554 community-based early-intervention education to children from  
 555 birth through 5 years of age who are blind or visually impaired,  
 556 and to their parents, families, and caregivers, through  
 557 community-based provider organizations. The division shall  
 558 enlist parents, ophthalmologists, pediatricians, schools, the  
 559 Early Steps Program ~~Infant and Toddlers Early Intervention~~  
 560 ~~Programs~~, and therapists to help identify and enroll blind and  
 561 visually impaired children, as well as their parents, families,  
 562 and caregivers, in these educational programs.

563 (2) The program is not an entitlement but shall promote  
 564 early development with a special emphasis on vision skills to  
 565 minimize developmental delays. The education shall lay the  
 566 groundwork for future learning by helping a child progress  
 567 through normal developmental stages. It shall teach children to  
 568 discover and make the best use of their skills for future  
 569 success in school. It shall seek to ensure that visually  
 570 impaired and blind children enter school as ready to learn as  
 571 their sighted classmates. The program shall seek to link these  
 572 children, and their parents, families, and caregivers, to other  
 573 available services, training, education, and employment programs  
 574 that could assist these families in the future. This linkage may  
 575 include referrals to the school districts and the Early Steps  
 576 ~~Infants and Toddlers Early Intervention~~ Program for assessments  
 577 to identify any additional services needed which are not  
 578 provided by the Blind Babies Program. The division shall develop  
 579 a formula for eligibility based on financial means and may  
 580 create a means-based matrix to set a copayment fee for families

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581 having sufficient financial means.

582 Section 8. Subsection (1) of section 1003.575, Florida  
583 Statutes, is amended to read:

584 1003.575 Assistive technology devices; findings;  
585 interagency agreements.—Accessibility, utilization, and  
586 coordination of appropriate assistive technology devices and  
587 services are essential as a young person with disabilities moves  
588 from early intervention to preschool, from preschool to school,  
589 from one school to another, and from school to employment or  
590 independent living. If an individual education plan team makes a  
591 recommendation in accordance with State Board of Education rule  
592 for a student with a disability, as defined in s. 1003.01(3), to  
593 receive an assistive technology assessment, that assessment must  
594 be completed within 60 school days after the team's  
595 recommendation. To ensure that an assistive technology device  
596 issued to a young person as part of his or her individualized  
597 family support plan, individual support plan, or an individual  
598 education plan remains with the individual through such  
599 transitions, the following agencies shall enter into interagency  
600 agreements, as appropriate, to ensure the transaction of  
601 assistive technology devices:

602 (1) The Early Steps Florida Infants and Toddlers Early  
603 ~~Intervention~~ Program in the Division of Children's Medical  
604 Services of the Department of Health.

605  
606 Interagency agreements entered into pursuant to this section  
607 shall provide a framework for ensuring that young persons with  
608 disabilities and their families, educators, and employers are  
609 informed about the utilization and coordination of assistive

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610 technology devices and services that may assist in meeting  
611 transition needs, and shall establish a mechanism by which a  
612 young person or his or her parent may request that an assistive  
613 technology device remain with the young person as he or she  
614 moves through the continuum from home to school to postschool.

615 Section 9. Section 391.303, Florida Statutes, is repealed.  
616 Section 10. Section 391.304, Florida Statutes, is repealed.  
617 Section 11. Section 391.305, Florida Statutes, is repealed.  
618 Section 12. Section 391.306, Florida Statutes, is repealed.  
619 Section 13. Section 391.307, Florida Statutes, is repealed.  
620 Section 14. This act shall take effect July 1, 2016.

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THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/21/15  
Meeting Date

~~CS~~  
SPB 4034  
Bill Number (if applicable)

Topic EARLY STEPS

Amendment Barcode (if applicable)

Name DIANA RAGREER

Job Title DIRECTOR, PUBLIC POLICY

Address 3050 SW 3RD AVE, 8TH FLOOR Phone 305 571 5712

MIAMI FL 33129  
City State Zip

Email diana@thechildrenstrust.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing THE CHILDREN'S TRUST

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

This form is part of the public record for this meeting.



THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/18/15

Meeting Date

\$ 7034

Bill Number (if applicable)

Topic Early Steps

Name CYN DY LOOMIS

Amendment Barcode (if applicable)

Job Title \_\_\_\_\_

Address 1215 Jeffrey Road

Street

Phone 8506680310

Tallahassee Fl 32312

City

State

Zip

Email loomis\_clews@a.com

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Parent of Early Step Child

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

Bill Number (if applicable)

Topic Early Steps

Name Doug Bell

Amendment Barcode (if applicable)

Job Title \_\_\_\_\_

Address 101 N. Monroe St

Phone 681-4270

Street

Call.

City

State

Zip

Email \_\_\_\_\_

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Pediatricians

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

FOR

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

SB 7034

Bill Number (if applicable)

448330

Amendment Barcode (if applicable)

Meeting Date \_\_\_\_\_

Topic Early Intervention

Name Mimi Graham

Job Title Director, FSU Center for Prevention of Early Intervention Policy

Address 1339 E Lafayette St

Phone 850 922 1302

Tell FL 32301

Email mgraham@fsu.edu

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing \_\_\_\_\_

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

*Waive In-Support*

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

7034  
Bill Number (if applicable)

Meeting Date \_\_\_\_\_

Topic Prenatal Services (EARLY STEPS)

Amendment Barcode (if applicable) \_\_\_\_\_

Name JESSICA SCHER

Job Title Director, Public Policy

Address 3250 SW 3<sup>rd</sup> AVE

Phone 305-322-6143

Miami FL  
City State Zip

Email schery@unitedwaymiami.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing United Way of Miami-Dade

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

**This form is part of the public record for this meeting.**

THE FLORIDA SENATE  
**APPEARANCE RECORD**

FOR

11/19/15  
Meeting Date

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

SPB 7034  
Bill Number (if applicable)

448330  
Amendment Barcode (if applicable)

Topic Prenatal Services & Early Childhood Development

Name Debra Dowds

Job Title Executive Director

Address 124 Marriott Dr., Suite 203

Phone 488-4180

Tallah FL 32301  
City State Zip

Email debrad@addc.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Florida Developmental Disabilities Council

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

*Waive In Support*

11/19/15  
Meeting Date

SPB 7034  
Bill Number (if applicable)

Topic \_\_\_\_\_

Amendment Barcode (if applicable)

Name Bob Asztalos

Job Title \_\_\_\_\_

Address 5013 Centennial Oak Cir  
Street  
Tallahassee FL 32308  
City State Zip

Phone 850-284-1166

Email AAASSOCIATE@comcast.net

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing Easter Seals Florida

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

*Waive In Support*

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

7034  
Bill Number (if applicable)

Topic EARLY STEPS

Amendment Barcode (if applicable)

Name Ted Granger

Job Title ~~MEMBER~~ PRESIDENT

Address 307 E 7<sup>th</sup> AVE  
Street

Phone 850-488-9276

Tallahassee FL 32303  
City State Zip

Email tgranger@uwof.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing United Way of Florida

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

*While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.*

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THE FLORIDA SENATE

APPEARANCE RECORD

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15

Meeting Date

7034

Bill Number (if applicable)

Topic Prenatal Services

Amendment Barcode (if applicable)

Name Greg Pound

Job Title

Address 9666 Sunrise Dr

Phone

Street

Largo

FL

State

33773

Zip

Email

Speaking: [ ] For [ ] Against [X] Information

Waive Speaking: [ ] In Support [ ] Against (The Chair will read this information into the record.)

Representing Saving Families

Appearing at request of Chair: [ ] Yes [X] No

Lobbyist registered with Legislature: [ ] Yes [X] No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15  
Meeting Date

\_\_\_\_\_  
Bill Number (if applicable)

Topic EARLY STEPS

\_\_\_\_\_  
Amendment Barcode (if applicable)

Name Theresa Bulger

Job Title Lobbyist / Advocate

Address 253 Hayden St.  
Street

Phone 904 880 9063

Tallahassee, FL.  
City State Zip

Email tbb@privatepublicsolutions.org

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing FLAA; CLARKE; Florida Coalition of Bilingual Language Options

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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THE FLORIDA SENATE  
**APPEARANCE RECORD**

(Deliver BOTH copies of this form to the Senator or Senate Professional Staff conducting the meeting)

11/19/15

Meeting Date

SPB 7034

Bill Number (if applicable)

Topic Early Steps

Amendment Barcode (if applicable)

Name Danielle Austin

Job Title \_\_\_\_\_

Address 9466 Rose Rd.

Phone 228-2185

Tallahassee FL 32311  
City State Zip

Email danielle\_harrison14@  
hotmail.com

Speaking:  For  Against  Information

Waive Speaking:  In Support  Against  
(The Chair will read this information into the record.)

Representing parent of an Early Steps child

Appearing at request of Chair:  Yes  No

Lobbyist registered with Legislature:  Yes  No

While it is a Senate tradition to encourage public testimony, time may not permit all persons wishing to speak to be heard at this meeting. Those who do speak may be asked to limit their remarks so that as many persons as possible can be heard.

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**The Florida Senate**  
**COMMITTEE VOTE RECORD**

**COMMITTEE:** Children, Families, and Elder Affairs  
**ITEM:** SPB 7034  
**FINAL ACTION:** Submitted as Committee Bill  
**MEETING DATE:** Thursday, November 19, 2015  
**TIME:** 9:00—11:00 a.m.  
**PLACE:** 301 Senate Office Building

FINAL VOTE		SENATORS	11/19/2015 Amendment 448330					
			Sobel					
Yea	Nay		Yea	Nay	Yea	Nay	Yea	Nay
		Dean						
		Detert						
X		Garcia						
X		Hutson						
		Ring						
X		Altman, VICE CHAIR						
X		Sobel, CHAIR						
4	0		FAV	-				
<b>Yea</b>	<b>Nay</b>	<b>TOTALS</b>	<b>Yea</b>	<b>Nay</b>	<b>Yea</b>	<b>Nay</b>	<b>Yea</b>	<b>Nay</b>

CODES: FAV=Favorable      RCS=Replaced by Committee Substitute      TP=Temporarily Postponed      WD=Withdrawn  
 UNF=Unfavorable      RE=Replaced by Engrossed Amendment      VA=Vote After Roll Call      OO=Out of Order  
 -R=Reconsidered      RS=Replaced by Substitute Amendment      VC=Vote Change After Roll Call      AV=Abstain from Voting



## THE FLORIDA SENATE

Tallahassee, Florida 32399-1100

### COMMITTEES:

Governmental Oversight and Accountability, *Chair*  
Appropriations Subcommittee on Finance and  
Tax, *Vice Chair*  
Appropriations  
Appropriations Subcommittee on Transportation,  
Tourism, and Economic Development  
Banking and Insurance  
Commerce and Tourism  
Judiciary  
Rules

### JOINT COMMITTEES:

Joint Legislative Auditing Committee  
Joint Select Committee on Collective Bargaining

SENATOR JEREMY RING  
29th District

November 19, 2015

Chair Eleanor Sobel  
410 Senate Office Building  
Tallahassee, FL 32399-1100

Dear Chairwoman Sobel,

Please accept this letter as a request to be excused from November 19, 2015 Children, Families and Elder Affairs meeting due to the fact I was delayed presenting a bill in another committee.

Please do not hesitate to contact me if you have any questions about this request.

Sincerely,

A handwritten signature in cursive script that reads "Jeremy Ring".

Senator Jeremy Ring

### REPLY TO:

- 5790 Margate Boulevard, Margate, Florida 33063 (954) 917-1392 FAX: (954) 917-1394
- 405 Senate Office Building, 404 South Monroe Street, Tallahassee, Florida 32399-1100 (850) 487-5029

Senate's Website: [www.flsenate.gov](http://www.flsenate.gov)

ANDY GARDINER  
President of the Senate

GARRETT RICHTER  
President Pro Tempore



## THE FLORIDA SENATE

Tallahassee, Florida 32399-1100

**COMMITTEES:**  
Environmental Preservation and  
Conservation, *Chair*  
Agriculture, *Vice Chair*  
Appropriations Subcommittee on General  
Government  
Children, Families, and Elder Affairs  
Communications, Energy, and Public Utilities  
Community Affairs

**SENATOR CHARLES S. DEAN, SR.**

5th District

November 19, 2015

The Honorable Eleanor Sobel  
410 Senate Office Building  
404 South Monroe St.  
Tallahassee, FL 32399-1100

Dear Chair Sobel,

The purpose of this letter is to seek your permission to be excused from the scheduled Children, Families, and Elder Affairs Committee meeting on November 19, 2015. Due to unforeseen circumstances, I will not be able to attend.

Should you have any questions concerning this matter, please do not hesitate to contact me personally.

Sincerely,

A handwritten signature in black ink that reads "Charles S. Dean".

Charles S. Dean  
State Senator District 5

CC: Claude Hendon, Staff Director

**REPLY TO:**

- 405 Tompkins Street, Inverness, Florida 34450 (352) 860-5175
- 311 Senate Office Building, 404 South Monroe Street, Tallahassee, Florida 32399-1100 (850) 487-5005
- 315 SE 25th Avenue, Ocala, Florida 34471-2689 (352) 873-6513

Senate's Website: [www.flsenate.gov](http://www.flsenate.gov)

**ANDY GARDINER**  
President of the Senate

**GARRETT RICHTER**  
President Pro Tempore