

## Committee on Criminal Justice

### **CS/CS/SB 168 — Mental Health**

by Appropriations Committee; Criminal Justice Committee; and Senators Bradley, Garcia, Albritton, Arrington, Avila, Berman, Bernard, Boyd, Brodeur, Burgess, Burton, Calatayud, Collins, Davis, DiCeglie, Gaetz, Grall, Gruters, Harrell, Hooper, Ingoglia, Jones, Leek, Martin, McClain, Osgood, Passidomo, Pizzo, Polsky, Rodriguez, Rouson, Sharief, Simon, Smith, Truenow, Trumbull, Wright, and Yarborough

The bill, entitled the “Tristin Murphy Act,” aims to add alternative pathways to prosecuting defendants with mental illnesses.

The bill amends s. 916.105, F.S., to provide legislative intent that a defendant who is charged with certain felonies, any misdemeanor, or any ordinance violation and who has a mental illness, intellectual disability, or autism be evaluated and provided services in a community setting, when this is a feasible alternative to incarceration. Additionally, it is the intent of the legislature to provide law enforcement officers with crisis intervention team training.

### ***Misdemeanor and Felony Diversion***

The bill creates ss. 916.135, and 916.136, F.S., to provide model processes for misdemeanor and pretrial felony mental health diversion programs. The bill provides the process for screening a defendant to determine if there is an indication of a mental illness and diverting certain defendants to treatment. Defendants must consent to treatment and participation in the diversion program. A defendant may be released on his or her own recognizance on the condition that all treatment recommendations must be followed, and upon successful completion of all recommendations, the state attorney must consider the dismissal of the defendant’s charges and may refer the case to another mental health court if the dismissal of charges is deemed inappropriate.

The bill expands programs and diversion initiatives supported by the Criminal Justice, Mental Health, and Substance Abuse Reinvestment Grant Program to include veterans’ treatment court programs, specialized training for 911 public safety telecommunicators and emergency medical technicians, and specialized responses by crisis intervention teams. The bill provides an exception from providing matching local funds for fiscally constrained counties. A community desiring to establish a misdemeanor or felony mental health diversion program is encouraged to apply for such grants. A community that receives grant funds to create a misdemeanor mental health diversion program must follow the model program created in the bill, but the model program may be modified to meet the community’s specific needs.

### ***Additional Mental Health Provisions***

The bill amends s. 916.185, F.S., to authorize the Department of Children and Families to implement a Forensic Hospital Diversion Pilot Program modeled after the Miami-Dade Forensic Alternative Center in Hillsborough County, in conjunction with the Thirteenth Judicial Circuit in Hillsborough County.

The bill requires the Department of Corrections (DOC) to evaluate and document, at a minimum, the physical and mental health of each inmate eligible for a work assignment or correctional work program. The bill allows the DOC to use discretion in determining the appropriate work assignment for each inmate.

The bill requires a defendant who was adjudicated incompetent to proceed due to a mental illness and later regained competency, and who is sentenced to probation, to have a mental health evaluation and follow recommendations as a condition of such probation.

### ***The Florida Behavioral Health Care Data Repository***

The bill creates the Florida Behavioral Health Care Data Repository (data repository) within the Northwest Regional Data Center (NWRDC). The data repository will collect and analyze existing statewide data related to behavioral health care in the state, and develop useful analytics, metrics and visual representations of such analytics and metrics. This data analysis results are intended to:

- Better understand the scope and trends in behavioral health services, spending, and outcomes to improve patient care and enhance the efficiency and effectiveness of behavioral health services.
- Better understand the scope of, trends in, and relationship between behavioral health, criminal justice, incarceration, and the use of behavioral health services as a diversion from incarceration for individuals with mental illness.
- Enhance the collection and coordination of treatment and outcome information as an ongoing evidence base for research and education related to behavioral health.

The bill requires the NWRDC to collaborate with the Data Analysis Committee of the Commission on Mental Health and Substance Use Disorder, and relevant stakeholders to develop and submit an implementation plan and proposed budget for the data repository to the Governor, the President of the Senate, and the Speaker of the House of Representatives by December 1, 2025. Additionally, the NWRDC must submit an annual report on the trends and issues the repository has identified to the same principles beginning July 1, 2026.

If approved by the Governor, or allowed to become law without the Governor's signature, these provisions take effect October 1, 2025.

*Vote: Senate 37-0; House 99-0*