

By Representative Hafner

1                                   A bill to be entitled  
2           An act relating to older adult mental health  
3           and substance abuse services; providing a short  
4           title; providing legislative intent; directing  
5           the Department of Children and Family Services  
6           to develop a comprehensive plan for a mental  
7           health and substance abuse service delivery  
8           system for older adults; providing plan  
9           requirements; requiring reports; requiring  
10          collection and analysis of data; specifying  
11          populations to be served; providing for  
12          performance measures; requiring annual review  
13          thereof; directing the department to establish  
14          services, within available resources; directing  
15          the department to adopt by rule certain  
16          statewide standards; providing for a service  
17          planning process; providing for case management  
18          services; providing training requirements for  
19          service providers; directing the department to  
20          develop public education and outreach programs;  
21          providing for enhancement of existing community  
22          mental health and substance abuse systems;  
23          providing for solicitation of enhancement  
24          projects to be funded on a competitive basis;  
25          providing for project evaluation; requiring a  
26          report; providing for a consortium to oversee  
27          older adult interagency system of care  
28          demonstration models; providing for  
29          establishment of a local oversight body for  
30          each demonstration model; providing for  
31          purpose, funding, and evaluation of

1 demonstration models; requiring a report;  
2 providing rulemaking authority; providing  
3 authority to seek certain federal waivers;  
4 providing an effective date.

5  
6 Be It Enacted by the Legislature of the State of Florida:

7  
8 Section 1. Short title.--This act may be cited as the  
9 "Comprehensive Older Adult Mental Health and Substance Abuse  
10 Services Act."

11 Section 2. Legislative intent; guiding principles.--It  
12 is the intent of the Legislature that the following principles  
13 guide the development and implementation of the publicly  
14 funded older adult mental health and substance abuse treatment  
15 and support system:

16 (1) There should be a system of care for older adults  
17 which includes a continuum of aging, mental health, and  
18 substance abuse services which meet the needs of Florida's  
19 older adults.

20 (2) The system of care should be centered on the older  
21 adult, with the needs and strengths of the older adult and his  
22 or her family or support system dictating the types and mix of  
23 services provided.

24 (3) Older adults should be active participants in  
25 planning, selecting, and delivering mental health and  
26 substance abuse services at the local level, as well as in  
27 developing statewide policies for older adult mental health  
28 and substance abuse services. The families and support systems  
29 of older adults should be included where appropriate and in  
30 the best interests of the older adult.

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1       (4) Priorities and minimum standards should be  
2 established at the state level to foster consistency  
3 throughout the state in mental health and substance abuse  
4 services.

5       (5) The system of care should be community-based, with  
6 accountability, location of services, and responsibility for  
7 management and decisionmaking resting at the local level.

8       (6) The system should provide timely access to a  
9 comprehensive array of cost-effective mental health and  
10 substance abuse services.

11       (7) Older adults should receive individualized  
12 services, guided by an individualized service plan, in  
13 accordance with the unique needs and strengths of each older  
14 adult and his or her family or support system.

15       (8) The system should include comprehensive screening,  
16 assessment, internal case finding, and outreach to identify  
17 older adults who are in need of mental health or substance  
18 abuse services and should target known risk factors.

19       (9) Older adults should receive services within the  
20 least restrictive environment appropriate to the service needs  
21 and quality of life of the individual.

22       (10) Mental health and substance abuse programs and  
23 services should support and strengthen families and support  
24 systems so that the family or support system can more  
25 adequately meet the mental health and substance abuse needs of  
26 the older adult.

27       (11) Services should be delivered in a coordinated  
28 manner so that the older adult can move through the system of  
29 services according to his or her changing needs and in a way  
30 that meets those needs.

31

1       (12) The delivery of comprehensive mental health and  
2 substance abuse services should enable older adults to  
3 function more effectively at home and within the community.

4       (13) Community-based systems of care should educate  
5 persons, including health care, long-term care, and aging  
6 services providers, to recognize indicators of emotional  
7 distress, depression, suicide risk, and substance abuse in  
8 older adults and to provide information regarding referral,  
9 treatment, and support services.

10       (14) Mental health and substance abuse services should  
11 be delivered by staff specifically trained to work with older  
12 adult mental health and substance abuse consumers.

13       (15) Mental health and substance abuse services for  
14 older adults should be provided in a manner which is sensitive  
15 and responsive to the special needs that derive from cultural  
16 or gender differences, without regard to race, religion,  
17 national origin, gender, disability, or payment source.

18       Section 3. Comprehensive plan.--

19       (1) The Department of Children and Family Services  
20 shall develop a comprehensive plan which shall address the  
21 mental health and substance abuse needs of older adults and  
22 provide strategies to meet those needs through the interagency  
23 coordination of services. The plan shall identify the unique  
24 service needs of older adults, determine the types of services  
25 delivered, project the services needed, provide an analysis of  
26 costs associated with existing and projected services, and  
27 recommend modifications to programs and services to more  
28 effectively meet the unique mental health and substance abuse  
29 needs of older adults, especially underserved populations.

30       (2) Elements of the comprehensive plan shall be  
31 coordinated and integrated with other mental health planning

1 and with the plans of other state agencies which administer  
2 programs or services that are or should be components of a  
3 comprehensive mental health and substance abuse service  
4 delivery system for older adults. To this end, such state  
5 agencies shall coordinate with the department the development  
6 and integration of elements of the comprehensive plan  
7 appropriate to their respective programmatic responsibilities.

8 (3) The comprehensive plan shall be presented to the  
9 Governor, the President of the Senate, and the Speaker of the  
10 House of Representatives every 3 years on or before August 1,  
11 beginning in the year 2001. On or before August 1 of each  
12 year, the department shall submit a report to the Governor,  
13 the President of the Senate, and the Speaker of the House of  
14 Representatives which analyzes the status of the  
15 implementation of each element of the comprehensive plan and  
16 the relationship of that status to the department's budget  
17 request.

18 Section 4. Data collection.--To ensure the adequate  
19 provision of services and to meet the needs of older adults in  
20 need of mental health and substance abuse services, the  
21 department shall ensure that detailed statistical and  
22 empirical information on Florida citizens is collected,  
23 maintained, and analyzed for the purpose of improving the  
24 system. As part of the development of the comprehensive plan,  
25 the department shall include provisions regarding data needed,  
26 and a time schedule and method for obtaining this information.

27 Section 5. Target populations.--

28 (1) State-funded older adult mental health and  
29 substance abuse services shall serve, to the extent that  
30 resources are available, the following groups of older adults:  
31

1       (a) Adults age 55 and older who are experiencing an  
2 acute mental or emotional health or substance abuse crisis.

3       (b) Adults age 55 and older who have a severe and  
4 persistent mental or emotional illness or substance abuse  
5 problem.

6       (c) Adults age 55 and older who are at risk for a  
7 mental or emotional health or substance abuse crisis event or  
8 are at risk of institutionalization in a long-term care  
9 setting or state institution.

10       (2) Older adults who meet the target population  
11 criteria of this section shall be served to the extent  
12 possible within available resources and consistent with a  
13 state plan of care developed by the department. The plan shall  
14 specify a service mandate for Florida's underserved older  
15 population. Services shall be targeted to prevent further need  
16 for the substance abuse, mental health, or aging continuum of  
17 services. Services shall be readily available along the mental  
18 health, substance abuse, and aging continuum to older adults  
19 residing in the community as well as those residing in state  
20 institutions. To the extent possible, services shall be  
21 community-based. To achieve the continuum of services, the  
22 department may develop public-private partnerships as well as  
23 sliding fee-scale programs.

24       Section 6. Performance measures.--

25       (1) The older adult mental health treatment and  
26 support system shall develop performance measures for older  
27 Floridians with mental health and substance abuse problems who  
28 are within the target populations.

29       (2) After the development of the initial  
30 age-appropriate performance measures, the department shall  
31 annually review and adjust as needed the specific performance

1 outcomes and performance measures to assess the performance of  
2 the older adult mental health treatment and support system in  
3 achieving the intent of this act.

4 Section 7. Programs and services.--

5 (1) The department shall establish, within available  
6 resources, an array of services to meet the individualized  
7 service and treatment needs of older adults who are members of  
8 the target populations and their families and caregivers.

9 (2) The array of services shall include comprehensive  
10 holistic assessment services that provide a competent  
11 interpretation of the nature of the problems of the older  
12 adult and, when appropriate, his or her family or support  
13 systems; family issues that may impact such problems;  
14 additional factors that contribute to such problems; and the  
15 assets, strengths, and resources of the older adult and his or  
16 her family or support systems. The assessment services to be  
17 provided shall be determined by the clinical needs of each  
18 individual.

19 (3) The department shall adopt by rule statewide  
20 standards for mental health and substance abuse assessments  
21 and definitions of the service array appropriate to older  
22 adults.

23 (4) The array of services shall include, but is not  
24 limited to:

25 (a) Case management.

26 (b) Prevention services.

27 (c) Home and community-based services and systems of  
28 care.

29 (d) Family therapy and support.

30 (e) Respite services and day care.

31 (f) Outpatient treatment.

- 1       (g) Day treatment.  
2       (h) Crisis intervention and stabilization.  
3       (i) Residential treatment facilities.  
4       (j) Inpatient hospitalization.  
5       (k) Medical services.  
6       (l) Overlay services.  
7       (m) Supported housing.  
8       (n) Transportation services.  
9       (o) Consumer-operated and peer support services.  
10      (p) Vocational services.  
11      (q) Individual counseling, both in-home and  
12 community-based.  
13      (r) Partial hospitalization.  
14      (s) Transitional services.  
15      (t) Outreach, including to in-home settings.  
16      (u) Residential services.  
17      (v) Services to victims of sex offenses.  
18      (w) Medication management.  
19      (x) Mobile crisis intervention.  
20      (y) Therapeutic foster and family care homes.  
21      (z) Caregiver support.  
22      Section 8. Service planning.--  
23      (1) The service planning process shall:  
24      (a) Focus on individualized treatment aligned with the  
25 highest priority needs of the older adult.  
26      (b) Concentrate on the service needs of the older  
27 adult's formal and informal support system.  
28      (c) Involve appropriate family and support system  
29 members and pertinent community-based health, education, and  
30 social agencies.  
31



- 1           (2) The principles of the service planning process  
2 shall:
- 3           (a) Enable case management.
- 4           (b) Include a mechanism to discern opportunities for  
5 early intervention in developing cases of older adult mental  
6 health or substance abuse problems. The same mechanism shall  
7 afford crisis intervention and prevention capacity.
- 8           (c) Assist the family and other caregivers in  
9 developing and implementing a workable services plan for  
10 treating the mental health or substance abuse problems of the  
11 older adult.
- 12           (d) Use all available resources in the community,  
13 including informal support services, which will assist in  
14 carrying out the goals and objectives of the services plan.
- 15           (e) Maintain the older adult in the most normal  
16 environment possible and as close to home, family, or support  
17 system as is feasible.
- 18           (f) Ensure the ability of family to participate in the  
19 treatment of the older adult, when appropriate, and strive to  
20 enhance the older adult's independence by building on family  
21 strengths and assets.
- 22           (3) The services plan shall include:
- 23           (a) A mental health description of the older adult and  
24 his or her personal perspective of the problem being  
25 addressed.
- 26           (b) A description of the services or treatment to be  
27 provided to the older adult, and his or her family or support  
28 system, if appropriate, which address the identified problem,  
29 including:
- 30           1. The frequency and duration of services or  
31 treatment.

1           2. The location at which the services or treatment are  
2 to be provided.

3           3. The name of each accountable provider of services  
4 or treatment.

5           4. Medication management and continuity of care.

6           (c) A description of the measurable objectives of  
7 treatment which, if met, will result in measurable  
8 improvements in the condition of the older adult.

9           (d) The older adult's personal vision and goals.

10           (4) The department shall adopt by rule criteria for  
11 determining when an older adult who receives mental health  
12 services must have an individualized services plan.

13           (5) The services plan shall be driven by the needs of  
14 the older adult upon whom it is centered. The services plan,  
15 where possible, shall be developed in conference with the  
16 older adult and, if appropriate, family or primary support  
17 members. An appeal process shall be established.

18           (6) The services plan shall be reviewed with changes  
19 in client status or level of care, or at least annually, for  
20 programmatic and financial appropriateness.

21           (7) The department shall adopt by rule criteria that  
22 define the population to be assigned case managers. The  
23 department shall develop standards for case management  
24 services and procedures for appointing case managers. It is  
25 the intent of the Legislature that case management services  
26 not be duplicated or fragmented and that such services promote  
27 the continuity and stability of a case manager assigned to an  
28 older adult. For the purpose of this section, case management  
29 includes:

30           (a) Developing and implementing the services plan.

31           (b) Providing advocacy services.

1       (c) Linking service providers to an older adult and,  
2 when appropriate, his or her family or support system.

3       (d) Monitoring the delivery of services.

4       (e) Collecting information to determine the effect of  
5 services and treatment.

6       Section 9. Training requirements.--Individuals  
7 treating or serving older adults should have appropriate and  
8 ongoing training in aging and mental health and in substance  
9 abuse. The department shall work with providers, licensure  
10 boards, professional organizations, and educators to establish  
11 appropriate education and training. The department is  
12 encouraged to foster the development of continuing education  
13 by existing professional membership organizations and  
14 educational institutions.

15       Section 10. Public education and outreach.--The  
16 department shall develop methods of information dissemination  
17 designed to overcome the barriers to treatment within the  
18 target populations. Innovative outreach programs must be  
19 developed and promoted to improve the diversion of older  
20 persons from expensive and intensive forms of care. The  
21 department shall develop a marketing and public education plan  
22 for how best to develop prevention and treatment strategies  
23 aimed at an older audience. At least one of the older adult  
24 interagency system of care demonstration models shall be  
25 centered around the development of innovative marketing and  
26 public education materials and strategies.

27       Section 11. Community mental health and substance  
28 abuse system enhancement.--

29       (1) DEVELOPMENT.--The current community mental health  
30 and substance abuse systems shall be enhanced to identify,  
31 attract, and serve older adults. The system enhancement should

1 address staffing, training, and program development for older  
2 adults.

3 (2) IMPLEMENTATION.--

4 (a) As the Legislature provides funding for the  
5 enhancement of older adult mental health and substance abuse  
6 services, the Alcohol, Drug Abuse and Mental Health Program  
7 Office of the department shall create a competitive selection  
8 process for soliciting proposals for use of funds within the  
9 community mental health and substance abuse systems to  
10 implement this section.

11 1. The department shall use an independent review  
12 panel to evaluate the proposals.

13 2. Each project or initiative funded through the  
14 enhancement program shall be evaluated and continued based on  
15 whether the project or initiative achieves established goals.

16 (b) The department shall establish the proposal  
17 process by October 1, 2000, with project awards to be made no  
18 later than December 1, 2000. Evaluations of the enhancement  
19 projects shall be performed on a schedule to be determined by  
20 the department.

21 (3) EVALUATION.--An independent evaluation of each  
22 enhancement project shall be conducted to identify more  
23 effective ways in which to serve the most complex cases of  
24 older adults who have a serious emotional disturbance, mental  
25 illness, or substance abuse problem; to determine better  
26 utilization of public resources; to assess ways that community  
27 agencies may share pertinent client information; and to  
28 determine to what extent the project achieved its stated  
29 goals. The department shall identify each enhancement project  
30 to be evaluated. The evaluation must analyze all  
31 administrative costs associated with operating the enhancement

1 projects. The evaluator must be independent of the department  
2 and the service providers and must have demonstrated  
3 experience in evaluating mental health and substance abuse  
4 programs for older adults. The department shall submit a  
5 report to the President of the Senate and the Speaker of the  
6 House of Representatives by December 31, 2003, which must  
7 include findings and conclusions for each enhancement project  
8 and provide recommendations for statewide implementation.

9       Section 12. Older adult interagency system of care  
10 demonstration models.--

11           (1) DEVELOPMENT.--

12           (a) The Agency for Health Care Administration, the  
13 Department of Health, the Department of Children and Family  
14 Services, and the Department of Elderly Affairs shall form a  
15 consortium, hereinafter referred to as "the consortium," by  
16 entering into a partnership agreement to create and oversee  
17 older adult interagency system of care demonstration models.  
18 The partnership agreement may not divest any public or private  
19 agency of its responsibility for an older adult but may allow  
20 participating agencies to better meet the needs of older  
21 adults through the sharing of resources. The consortium shall  
22 ensure that funds appropriated in the General Appropriations  
23 Act for direct services to the target populations are not  
24 expended for any other purpose. The departments shall  
25 collaborate to implement this section, and the Department of  
26 Elderly Affairs shall be the lead agency.

27           (b) The consortium shall establish a local oversight  
28 body that is responsible for directing each demonstration  
29 model. The oversight body shall include representatives of the  
30 state agencies that comprise the consortium, representatives  
31

1 of local government as well as other appropriate community  
2 entities, and older adults.

3 (c) A demonstration model, unless otherwise authorized  
4 by the consortium, shall operate for 3 years, utilizing  
5 existing funds. Pursuant to the direction of the consortium,  
6 each demonstration model shall maintain appropriate program  
7 and fiscal accountability.

8 (2) PURPOSE.--The purpose of the older adult  
9 interagency system of care demonstration models is to test  
10 various designs and strategies for the planning, integration,  
11 or coordination of the interagency delivery of services to  
12 older adults who have mental health or substance abuse  
13 problems and their families or support systems. In addition to  
14 the guiding principles specified in section 2 and the  
15 principles of the service planning process specified in  
16 section 8(2), each demonstration model shall seek to:

17 (a) Enhance and expedite services to older adults with  
18 mental health or substance abuse problems.

19 (b) Refine the process of case management using the  
20 strengths approach in assessment and service planning and  
21 eliminate case management duplication.

22 (c) Employ natural supports in the family and the  
23 community to help meet the service needs of the older adult.

24 (d) Improve interagency planning efforts through  
25 greater collaboration between public and private  
26 community-based agencies.

27 (e) Test creative and flexible strategies for  
28 financing and purchasing mental health and substance abuse  
29 services for older adults.

30 (f) Establish information-sharing mechanisms with  
31 state and community agencies.

1           (3) MODEL ENHANCEMENTS.--  
2           (a) The Legislature finds that reimbursement  
3 restrictions, such as narrowly defined cost centers or  
4 appropriation categories, do not typically allow for the  
5 integrated and coordinated interagency purchase of formal and  
6 informal services that are needed by older adults who have  
7 mental health or substance abuse problems. Therefore, each  
8 demonstration model may use an integrated blend of state,  
9 federal, and local funds, and may expend funds, chapter 216,  
10 Florida Statutes, notwithstanding, for services without  
11 categorical or cost-center restraints. Funds shall be  
12 allocated so as to allow the demonstration models to provide  
13 the most appropriate care and treatment to the older adult,  
14 including a range of traditional and nontraditional services,  
15 in the least restrictive setting that is clinically  
16 appropriate to the needs of the older adult.  
17           (b) The consortium may use prospective payment  
18 mechanisms through which a demonstration model and its  
19 contracted service providers accept financial risk for  
20 producing outcomes for the target populations.  
21           (c) The consortium shall reinvest cost savings in the  
22 community-based older adult mental health and substance abuse  
23 services system.  
24           (d) The consortium shall establish a funding plan that  
25 allocates proportionate costs to the participating state  
26 agencies. The funding plan shall be developed based on an  
27 analysis of expenditures made by each participating state  
28 agency during the previous 2 fiscal years in which services  
29 were provided for members of the target populations or for  
30 individuals who have characteristics that are similar to the  
31 members of the target populations. Based on the results of

1 this cost analysis, funds shall be collected from each of the  
2 participating state agencies and deposited into a central  
3 financial account. A financial body shall be designated by the  
4 consortium to manage the pool of funds and shall have the  
5 capability to pay for individual services specified in a  
6 services plan.

7 (4) EVALUATION.--An independent evaluation of each  
8 demonstration model shall be conducted to identify more  
9 effective ways in which to serve the most complex cases of  
10 older adults who have a serious emotional disturbance, mental  
11 illness, or substance abuse problem; to determine better  
12 utilization of public resources; to assess ways that community  
13 agencies may share pertinent client information; and to  
14 determine to what extent the project achieved its stated  
15 goals. The consortium shall identify each demonstration model  
16 to be evaluated. The evaluation must analyze all  
17 administrative costs associated with operating the  
18 demonstration models. The evaluator must be independent of the  
19 consortium and the model service providers and must have  
20 demonstrated experience in evaluating mental health and  
21 substance abuse programs for older adults. The consortium  
22 shall submit a report to the President of the Senate and the  
23 Speaker of the House of Representatives by December 31, 2003,  
24 which must include findings and conclusions for each local  
25 demonstration model and provide recommendations for statewide  
26 implementation.

27 (5) RULES.--Each participating state agency shall have  
28 the authority to adopt rules for implementing the  
29 demonstration models. These rules shall be developed in  
30 cooperation with other appropriate state agencies for  
31 implementation within 90 days after obtaining any necessary



