

By the Committee on Elder Affairs & Long-Term Care and
Representatives Argenziano, Fiorentino, Levine, Reddick,
Littlefield, Kosmas and Jacobs

1 A bill to be entitled
2 An act relating to substance abuse and mental
3 health services; amending s. 394.455, F.S.;
4 redefining the term "mental illness" for
5 purposes of part I of ch. 394, F.S.; amending
6 s. 394.492, F.S.; redefining the term "child or
7 adolescent who is experiencing an acute mental
8 or emotional crisis" for purposes of part III
9 of ch. 394, F.S.; amending s. 394.493, F.S.;
10 revising the income standard that is the basis
11 for a sliding fee scale adopted by the
12 Department of Children and Family Services for
13 mental health services provided to children and
14 adolescents; amending s. 394.65, F.S.;
15 redesignating part IV of ch. 394, F.S., as "The
16 Community Substance Abuse and Mental Health
17 Services Act"; amending s. 394.66, F.S.;
18 providing legislative intent with respect to
19 substance abuse and mental health services;
20 amending s. 394.67, F.S.; revising definitions;
21 creating s. 394.674, F.S.; providing clinical
22 eligibility for substance abuse and mental
23 health services funded by the Department of
24 Children and Family Services; providing fee
25 collection requirements; providing for
26 availability of crisis services, substance
27 abuse services, and mental health services;
28 requiring that the Department of Children and
29 Family Services adopt rules; requiring
30 contracting service providers to establish a
31 sliding fee scale; providing for copayments;

1 amending s. 394.675, F.S.; revising the types
2 of services provided by the department under
3 the substance abuse and mental health service
4 system; creating s. 394.676, F.S.; authorizing
5 the Department of Children and Family Services
6 to establish an indigent psychiatric medication
7 program; requiring the department to adopt
8 rules; providing for certain continued
9 treatment of persons discharged from
10 facilities; amending s. 394.74, F.S.;
11 conforming provisions relating to contracts for
12 substance abuse and mental health programs to
13 changes made by the act; amending s. 394.75,
14 F.S.; providing for a state master plan for
15 financing and delivery of community-based
16 substance abuse and mental health services;
17 providing plan requirements; providing for
18 annual update and submission to the
19 Legislature; requiring district health and
20 human services boards, rather than planning
21 councils, to prepare district substance abuse
22 and mental health plans; providing plan
23 requirements; revising the population groups to
24 be addressed in the plans to conform to changes
25 made by the act; amending ss. 394.4574, 394.76,
26 394.77, 394.78, 394.908, and 397.321, F.S.,
27 relating to department responsibilities for
28 mental health residents who reside in certain
29 assisted living facilities, the financing of
30 district programs and services, uniform
31 information and reporting systems, procedures

1 for audits and dispute resolution, distribution
2 of appropriations, and development of a
3 district plan for substance abuse services;
4 conforming provisions to changes made by the
5 act; requiring the department to submit a
6 report to the Legislature which describes the
7 compliance of providers with performance
8 outcome standards; directing the Commission on
9 Mental Health and Substance Abuse to conduct a
10 study and make certain recommendations to the
11 Legislature; repealing s. 394.79, F.S.,
12 relating to a state alcohol, drug abuse, and
13 mental health plan; providing an effective
14 date.

15
16 Be It Enacted by the Legislature of the State of Florida:

17
18 Section 1. Subsection (18) of section 394.455, Florida
19 Statutes, is amended to read:

20 394.455 Definitions.--As used in this part, unless the
21 context clearly requires otherwise, the term:

22 (18) "Mental illness" means an impairment of the
23 mental or emotional processes that exercise conscious control
24 of one's actions or of the ability to perceive or understand
25 reality, which impairment substantially interferes with a
26 person's ability to meet the ordinary demands of living,
27 regardless of etiology. For the purposes of this part, the
28 term does not include retardation or developmental disability
29 as defined in chapter 393, intoxication, or conditions
30 manifested only by antisocial behavior or substance abuse
31 impairment.

1 Section 2. Subsection (7) of section 394.492, Florida
2 Statutes, is amended to read:

3 394.492 Definitions.--As used in ss. 394.490-394.497,
4 the term:

5 (7) "Child or adolescent who is experiencing an acute
6 mental or emotional crisis" means a child or adolescent who
7 experiences a psychotic episode or a high level of mental or
8 emotional distress which may be precipitated by a traumatic
9 event or a perceived life problem for which the individual's
10 typical coping strategies are inadequate. The term ~~an acute~~
11 ~~mental or emotional problem and~~ includes a child or adolescent
12 who meets the criteria for involuntary examination specified
13 in s. 394.463(1).

14 Section 3. Subsections (2) and (3) of section 394.493,
15 Florida Statutes, are amended to read:

16 394.493 Target populations for child and adolescent
17 mental health services funded through the department.--

18 (2) Each mental health provider under contract with
19 the department to provide mental health services to the target
20 population shall collect fees from the parent or legal
21 guardian of the child or adolescent receiving services. The
22 fees shall be based on a sliding fee scale for families whose
23 net family income is at or above 150 ~~between 100 percent and~~
24 ~~200 percent~~ of the Federal Poverty Income Guidelines. The
25 department shall adopt, by rule, a sliding fee scale for
26 statewide implementation. ~~A family whose net family income is~~
27 ~~200 percent or more above the Federal Poverty Income~~
28 ~~Guidelines is responsible for paying the cost of services.~~
29 Fees collected from families shall be retained in the service
30 district and used for expanding child and adolescent mental
31 health treatment services.

1 (3) Each child or adolescent who meets the target
2 population criteria of this section shall be served to the
3 extent possible within available resources and consistent with
4 the portion of the district substance ~~alcohol, drug~~ abuse, and
5 mental health plan specified in s. 394.75 which pertains to
6 child and adolescent mental health services.

7 Section 4. Section 394.65, Florida Statutes, is
8 amended to read:

9 394.65 Short title.--This part may be cited ~~shall be~~
10 ~~known~~ as "The Community Substance ~~Alcohol, Drug~~ Abuse, and
11 Mental Health Services Act."

12 Section 5. Section 394.66, Florida Statutes, is
13 amended to read:

14 394.66 Legislative intent with respect to substance
15 ~~alcohol, drug~~ abuse, and mental health services.--It is the
16 intent of the Legislature to:

17 (1) Recognize that mental illness and substance abuse
18 impairment are diseases that are responsive to medical and
19 psychological interventions and management that integrate
20 treatment, rehabilitative, and support services to achieve
21 quality and cost-efficient outcomes for clients and for
22 community-based treatment systems.

23 (2)(1) Promote and improve the mental health of the
24 citizens of the state by making substance abuse and mental
25 health treatment and support services available to those
26 persons who are most in need and least able to pay, through a
27 community-based system of care ~~comprehensive, coordinated~~
28 ~~alcohol, drug abuse, and mental health services.~~

29 (3)(2) Involve local citizens in the planning of
30 substance ~~alcohol, drug~~ abuse, and mental health services in
31 their communities.

1 (4) Ensure that the department and the Agency for
2 Health Care Administration work cooperatively in planning and
3 designing comprehensive community-based substance abuse and
4 mental health programs that focus on the individual needs of
5 clients.

6 ~~(5)(3)~~ Ensure that all activities of the Department of
7 Children and Family Services and the Agency for Health Care
8 Administration, and their respective contract providers,
9 involved in the delivery of substance ~~its contractors are~~
10 ~~directed toward the coordination of planning efforts in~~
11 ~~alcohol, drug abuse, and mental health treatment and~~
12 prevention services are coordinated and integrated with other
13 local systems and groups, public and private, such as juvenile
14 justice, criminal justice, child protection, and public health
15 organizations; school districts; and local groups or
16 organizations that focus on services to older adults.

17 ~~(6)(4)~~ Provide access to crisis services to all
18 residents of the state with priority of attention being given
19 to individuals exhibiting symptoms of acute ~~or chronic~~ mental
20 illness, ~~alcohol abuse, or~~ substance drug abuse.

21 (7) Ensure that services provided to persons with
22 co-occurring mental illness and substance abuse problems be
23 integrated across treatment systems.

24 ~~(8)(5)~~ Ensure continuity of care, consistent with
25 minimum standards, for persons who are released from a state
26 treatment facility into the community.

27 ~~(9)(6)~~ Provide accountability for service provision
28 through statewide standards for treatment and support
29 services, and statewide standards for management, monitoring,
30 and reporting of information.

31

1 ~~(10)(7)~~ Include substance ~~alcohol, drug~~ abuse, and
2 mental health services as a component of the integrated
3 service delivery system of the Department of Children and
4 Family Services.

5 ~~(11)(8)~~ Ensure that the districts of the department
6 are the focal point of all substance ~~alcohol, drug~~ abuse, and
7 mental health planning activities, including budget
8 submissions, grant applications, contracts, and other
9 arrangements that can be effected at the district level.

10 ~~(12)(9)~~ Organize and finance community substance
11 ~~alcohol, drug~~ abuse, and mental health services in local
12 communities throughout the state through locally administered
13 service delivery programs that are based on client outcomes,
14 are programmatically effective, and are financially efficient,
15 and that maximize the involvement of local citizens.

16 Section 6. Section 394.67, Florida Statutes, is
17 amended to read:

18 394.67 Definitions.--As used in this part, the term:

19 ~~(1)~~ "Advisory council" means ~~a district advisory~~
20 ~~council.~~

21 ~~(1)(2)~~ "Agency" means the Agency for Health Care
22 Administration.

23 ~~(2)(3)~~ "Applicant" means an individual applicant, or
24 any officer, director, agent, managing employee, or affiliated
25 person, or any partner or shareholder having an ownership
26 interest equal to a 5-percent or greater interest in the
27 corporation, partnership, or other business entity.

28 ~~(3)(4)~~ "Client" means any individual receiving
29 services in any substance ~~alcohol, drug~~ abuse, or mental
30 health facility, program, or service, which facility, program,
31

1 or service is operated, funded, or regulated by the agency and
2 the department or regulated by the agency.

3 (4) "Crisis services" means short-term evaluation,
4 stabilization, and brief intervention services provided to a
5 person who is experiencing an acute mental or emotional
6 crisis, as defined in subsection (22), or an acute substance
7 abuse crisis, as defined in subsection (23), to prevent
8 further deterioration of the person's mental health. Crisis
9 services are provided in settings such as a crisis
10 stabilization unit, an inpatient unit, a short-term
11 residential treatment program, a detoxification facility, or
12 an addictions receiving facility; at the site of the crisis by
13 a mobile crisis response team; or at a hospital on an
14 outpatient basis.

15 (5) "Crisis stabilization unit" means a program that
16 provides an alternative to inpatient hospitalization and that
17 provides brief, intensive services 24 hours a day, 7 days a
18 week, for mentally ill individuals who are in an acutely
19 disturbed state.

20 (6) "Department" means the Department of Children and
21 Family Services.

22 (7) "Director" means any member of the official board
23 of directors reported in the organization's annual corporate
24 report to the Florida Department of State, or, if no such
25 report is made, any member of the operating board of
26 directors. The term excludes members of separate, restricted
27 boards that serve only in an advisory capacity to the
28 operating board.

29 (8) "District administrator" means the person
30 appointed by the Secretary of Children and Family Services for
31

1 the purpose of administering a department service district as
2 set forth in s. 20.19.

3 (9) "District plan" or "plan" means the combined
4 district substance ~~alcohol, drug~~ abuse, and mental health plan
5 approved by the district administrator and governing bodies in
6 accordance with this part.

7 (10) "Federal funds" means funds from federal sources
8 for substance ~~alcohol, drug~~ abuse, or mental health facilities
9 and programs, exclusive of federal funds that are deemed
10 eligible by the Federal Government, and are eligible through
11 state regulation, for matching purposes.

12 (11) "Governing body" means the chief legislative body
13 of a county, a board of county commissioners, or boards of
14 county commissioners in counties acting jointly, or their
15 counterparts in a charter government.

16 (12) "Health and human services board" or "board"
17 means the board within a district or subdistrict of the
18 department which is established in accordance with s. 20.19
19 and designated in this part for the purpose of assessing the
20 substance abuse and mental health needs of the community and
21 developing a plan to address those needs.

22 (13)~~(12)~~ "Licensed facility" means a facility licensed
23 in accordance with this chapter.

24 (14)~~(13)~~ "Local matching funds" means funds received
25 from governing bodies of local government, including city
26 commissions, county commissions, district school boards,
27 special tax districts, private hospital funds, private gifts,
28 both individual and corporate, and bequests and funds received
29 from community drives or any other sources.

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1 ~~(15)(14)~~ "Managing employee" means the administrator
2 or other similarly titled individual who is responsible for
3 the daily operation of the facility.

4 (16) "Mental health services" means those therapeutic
5 interventions and activities that help to eliminate, reduce,
6 or manage symptoms or distress for persons who have severe
7 emotional distress or a mental illness and to effectively
8 manage the disability that often accompanies a mental illness
9 so that the person can recover from the mental illness, become
10 appropriately self-sufficient for his or her age, and live in
11 a stable family or in the community. The term also includes
12 those preventive interventions and activities that reduce the
13 risk for or delay the onset of mental disorders. The term
14 includes the following types of services:

15 (a) Treatment services, such as psychiatric
16 medications and supportive psychotherapies, which are intended
17 to reduce or ameliorate the symptoms of severe distress or
18 mental illness.

19 (b) Rehabilitative services, which are intended to
20 reduce or eliminate the disability that is associated with
21 mental illness. Rehabilitative services may include assessment
22 of personal goals and strengths, readiness preparation,
23 specific skill training, and assistance in designing
24 environments that enable individuals to maximize their
25 functioning and community participation.

26 (c) Support services, which include services that
27 assist individuals in living successfully in environments of
28 their choice. Such services may include income supports,
29 social supports, housing supports, vocational supports, or
30 accommodations related to the symptoms or disabilities
31 associated with mental illness.

1 (d) Case management services, which are intended to
2 assist individuals in obtaining the formal and informal
3 resources that they need to successfully cope with the
4 consequences of their illness. Resources may include treatment
5 or rehabilitative or supportive interventions by both formal
6 and informal providers. Case management may include an
7 assessment of client needs; intervention planning with the
8 client, his or her family, and service providers; linking the
9 client to needed services; monitoring service delivery;
10 evaluating the effect of services and supports; and advocating
11 on behalf of the client.

12
13 Mental health services may be delivered in a variety of
14 settings, such as inpatient, residential, partial hospital,
15 day treatment, outpatient, club house, or a drop-in or
16 self-help center, as well as in other community settings, such
17 as the client's residence or workplace. The types and
18 intensity of services provided shall be based on the client's
19 clinical status and goals, community resources, and
20 preferences. Services such as assertive community treatment
21 involve all four types of services which are delivered by a
22 multidisciplinary treatment team that is responsible for
23 identified individuals who have a serious mental illness.

24 (17)(15) "Patient fees" means compensation received by
25 a community substance alcohol, drug abuse, or mental health
26 facility for services rendered to a specific client clients
27 from any source of funds, including city, county, state,
28 federal, and private sources.

29 (18) "Person who is experiencing an acute mental or
30 emotional crisis" means a child, adolescent, or adult who is
31 experiencing a psychotic episode or a high level of mental or

1 emotional distress which may be precipitated by a traumatic
2 event or a perceived life problem for which the individual's
3 typical coping strategies are inadequate. The term includes an
4 individual who meets the criteria for involuntary examination
5 specified in s. 394.463(1).

6 (19) "Person who is experiencing an acute substance
7 abuse crisis" means a child, adolescent, or adult who is
8 experiencing a medical or emotional crisis because of the use
9 of alcoholic beverages or any psychoactive or mood-altering
10 substance. The term includes an individual who meets the
11 criteria for involuntary admission specified in s. 397.675.

12 (20)~~(16)~~ "Premises" means those buildings, beds, and
13 facilities located at the main address of the licensee and all
14 other buildings, beds, and facilities for the provision of
15 acute or residential care which are located in such reasonable
16 proximity to the main address of the licensee as to appear to
17 the public to be under the dominion and control of the
18 licensee.

19 (21)~~(17)~~ "Program office" means the Alcohol, Drug
20 Abuse, and Mental Health Program Office of the Department of
21 Children and Family Services.

22 (22) "Sliding fee scale" means a schedule of fees for
23 identified services delivered by a service provider which are
24 based on a uniform schedule of discounts deducted from the
25 service provider's usual and customary charges. These charges
26 must be consistent with the prevailing market rates in the
27 community for comparable services.

28 (23) "Substance abuse services" means services
29 designed to prevent or remediate the consequences of substance
30 abuse, improve an individual's quality of life and
31

1 self-sufficiency, and support long-term recovery. The term
2 includes the following service categories:
3 (a) Prevention services, which include information
4 dissemination; education regarding the consequences of
5 substance abuse; alternative drug-free activities; problem
6 identification; referral of persons to appropriate prevention
7 programs; community-based programs that involve members of
8 local communities in prevention activities; and environmental
9 strategies to review, change, and enforce laws that control
10 the availability of controlled and illegal substances.
11 (b) Assessment services, which includes the evaluation
12 of individuals and families in order to identify their
13 strengths and determine their required level of care,
14 motivation, and need for treatment and ancillary services.
15 (c) Intervention services, which include early
16 identification, short-term counseling and referral, and
17 outreach.
18 (d) Rehabilitation services, which include
19 residential, outpatient, day or night, case management,
20 in-home, psychiatric, and medical treatment, and methadone or
21 medication management.
22 (e) Ancillary services, which include self-help and
23 other support groups and activities; aftercare provided in a
24 structured, therapeutic environment; supported housing;
25 supported employment; vocational services; and educational
26 services.
27 (24)(18) "Residential treatment facility" means a
28 facility providing residential care and treatment to
29 individuals exhibiting symptoms of mental illness who are in
30 need of a 24-hour-per-day, 7-day-a-week structured living
31 environment, respite care, or long-term community placement.

1 ~~(19) "Service district" means a community service~~
2 ~~district as established by the department under s. 20.19 for~~
3 ~~the purpose of providing community alcohol, drug abuse, and~~
4 ~~mental health services.~~

5 ~~(20) "Service provider" means any agency in which all~~
6 ~~or any portion of the programs or services set forth in s.~~
7 ~~394.675 are carried out.~~

8 Section 7. Section 394.674, Florida Statutes, is
9 created to read:

10 394.674 Clinical eligibility for publicly funded
11 substance abuse and mental health services; fee collection
12 requirements.--

13 (1) To be eligible to receive substance abuse and
14 mental health services funded by the department, a person must
15 be a member of one of the department's target groups approved
16 by the Legislature, pursuant to s. 216.0166.

17 (2) Crisis services, as defined in s. 394.67, must,
18 within the limitations of available state and local matching
19 resources, be available to each person who is eligible for
20 services under subsection (1), regardless of the person's
21 ability to pay for such services. A person who is experiencing
22 a mental health crisis and who does not meet the criteria for
23 involuntary examination under s. 394.463(1), or a person who
24 is experiencing a substance abuse crisis and who does not meet
25 the involuntary admission criteria in s. 397.675, must
26 contribute to the cost of his or her care and treatment
27 pursuant to the sliding fee scale developed under subsection
28 (4), unless charging a fee is contraindicated because of the
29 crisis situation.

30 (3) Mental health services, substance abuse services,
31 and crisis services, as defined in s. 394.67, must, within the

1 limitations of available state and local matching resources,
2 be available to each person who is eligible for services under
3 subsection (1). Such person must contribute to the cost of his
4 or her care and treatment pursuant to the sliding fee scale
5 developed under subsection (4).

6 (4) The department shall adopt rules to implement the
7 clinical eligibility and fee collection requirements for
8 publicly funded substance abuse and mental health services.
9 The rules must require that each provider under contract with
10 the department develop a sliding fee scale for persons who
11 have a net family income at or above 150 percent of the
12 Federal Poverty Income Guidelines, unless otherwise required
13 by state or federal law. The sliding fee scale must use the
14 uniform schedule of discounts by which a provider under
15 contract with the department discounts its established client
16 charges for services supported with state, federal, or local
17 funds, using, at a minimum, factors such as family income,
18 financial assets, and family size as declared by the person or
19 the person's guardian. The rules must include uniform criteria
20 to be used by all service providers in developing the schedule
21 of discounts for the sliding fee scale. The rules must address
22 the most expensive types of treatment, such as residential and
23 inpatient treatment, in order to make it possible for a client
24 to responsibly contribute to his or her mental health or
25 substance abuse care without jeopardizing the family's
26 financial stability. A person who is not eligible for Medicaid
27 and whose net family income is less than 150 percent of the
28 Federal Poverty Income Guidelines must pay a portion of his or
29 her treatment costs which is comparable to the copayment
30 amount required by the Medicaid program for Medicaid clients
31 pursuant to s. 409.9081. The rules must require that persons

1 who receive financial assistance from the Federal Government
2 because of a disability and are in long-term residential
3 treatment settings contribute to their board and care costs
4 and treatment costs and must be consistent with the provisions
5 in s. 409.212.

6 (5) A person who meets the eligibility criteria in
7 subsection (1) shall be served in accordance with the
8 appropriate district substance abuse and mental health
9 services plan specified in s. 394.75 and within available
10 resources.

11 Section 8. Section 394.675, Florida Statutes, is
12 amended to read:

13 394.675 Substance ~~Alcohol, drug~~ abuse, and mental
14 health service system.--

15 (1) A community-based system of comprehensive
16 substance ~~alcohol, drug~~ abuse, and mental health services
17 shall be established and shall include as follows:

18 (a) Crisis services.

19 (b) Substance abuse services.

20 (c) Mental health services.

21 ~~(a) "Primary care services" are those services which,~~
22 ~~at a minimum, must be made available in each service district~~
23 ~~to persons who have acute or chronic mental illnesses, who are~~
24 ~~acute or chronic drug dependents, and who are acute or chronic~~
25 ~~alcohol abusers to provide them with immediate care and~~
26 ~~treatment in crisis situations and to prevent further~~
27 ~~deterioration or exacerbation of their conditions. These~~
28 ~~services include, but are not limited to,~~
29 ~~emergency stabilization services, detoxification services,~~
30 ~~inpatient services, residential services, and case management~~
31 ~~services.~~

1 ~~(b) "Rehabilitative services" are those services which~~
2 ~~are made available to the general population at risk of~~
3 ~~serious mental health problems or substance abuse problems or~~
4 ~~which are provided as part of a rehabilitative program. These~~
5 ~~services are designed to prepare or train persons to function~~
6 ~~within the limits of their disabilities, to restore previous~~
7 ~~levels of functioning, or to improve current levels of~~
8 ~~inadequate functioning. Rehabilitative services include, but~~
9 ~~are not limited to, outpatient services, day treatment~~
10 ~~services, and partial hospitalization services.~~

11 ~~(c) "Preventive services" are those services which are~~
12 ~~made available to the general population for the purpose of~~
13 ~~preventing or ameliorating the effects of alcohol abuse, drug~~
14 ~~abuse, or mental illness. These services emphasize the~~
15 ~~reduction of the occurrence of emotional disorders, mental~~
16 ~~disorders, and substance abuse through public education, early~~
17 ~~detection, and timely intervention. Preventive services~~
18 ~~include consultation, public education, and prevention~~
19 ~~services which have been determined through the district~~
20 ~~planning process to be necessary to complete a continuum of~~
21 ~~services as required by this part and which are included in~~
22 ~~the district plan.~~

23 (2) Notwithstanding the provisions of this part, funds
24 that ~~which~~ are provided through state and federal sources for
25 specific services or for specific populations shall be used
26 for those purposes.

27 Section 9. Section 394.676, Florida Statutes, is
28 created to read:

29 394.676 Indigent psychiatric medication program.--

30 (1) Within legislative appropriations, the department
31 may establish the indigent psychiatric medication program to

1 purchase psychiatric medications for persons as defined in s.
2 394.492(5) or (6) or pursuant to s. 394.674(1), who do not
3 reside in a state mental health treatment facility or an
4 inpatient unit.

5 (2) The department must adopt rules to administer the
6 indigent psychiatric medication program. The rules must
7 prescribe the clinical and financial eligibility of clients
8 who may receive services under the indigent psychiatric
9 medication program, the requirements that community-based
10 mental health providers must meet to participate in the
11 program, and the sanctions to be applied for failure to meet
12 those requirements.

13 (3) To the extent possible within existing
14 appropriations, the department must ensure that
15 non-Medicaid-eligible indigent individuals discharged from
16 mental health treatment facilities continue to receive the
17 medications which effectively stabilized their mental illness
18 in the treatment facility, or newer medications, without
19 substitution by a service provider unless such substitution is
20 clinically indicated as determined by the licensed physician
21 responsible for such individual's psychiatric care.

22 Section 10. Section 394.74, Florida Statutes, is
23 amended to read:

24 394.74 Contracts for provision of local substance
25 ~~alcohol, drug~~ abuse, and mental health programs.--

26 (1) The department, when funds are available for such
27 purposes, is authorized to contract for the establishment and
28 operation of local substance ~~alcohol, drug~~ abuse, and mental
29 health programs with any hospital, clinic, laboratory,
30 institution, or other appropriate service provider.

31

1 (2)(a) Contracts for service shall be consistent with
2 the approved district plan ~~and the service priorities~~
3 ~~established in s. 394.75(4).~~

4 (b) Notwithstanding s. 394.76(3)(a) and (c), the
5 department may use unit cost methods of payment in contracts
6 for purchasing mental health and substance abuse services. The
7 unit cost contracting system must account for those patient
8 fees that are paid on behalf of a specific client and those
9 that are earned and used by the provider for those services
10 funded in whole or in part by the department.

11 (c) The department may reimburse actual expenditures
12 for startup contracts and fixed capital outlay contracts in
13 accordance with contract specifications.

14 (3) Contracts shall include, but are not limited to:

15 (a) A provision that, within the limits of available
16 resources, substance ~~primary care alcohol, drug~~ abuse, and
17 mental health crisis services, as defined in s. 394.67(4),
18 shall be available to any individual residing or employed
19 within the service area, regardless of ability to pay for such
20 services, current or past health condition, or any other
21 factor;

22 (b) A provision that such services be available with
23 priority of attention being given to individuals who exhibit
24 symptoms of chronic or acute substance ~~alcoholism, drug~~ abuse,
25 or mental illness and who are unable to pay the cost of
26 receiving such services;

27 (c) A provision that every reasonable effort to
28 collect appropriate reimbursement for the cost of providing
29 substance ~~alcohol, drug~~ abuse, and mental health services to
30 persons able to pay for services, including first-party
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1 payments and third-party payments, shall be made by facilities
2 providing services pursuant to this act;

3 (d) A program description and line-item operating
4 budget by program service component for substance ~~alcohol,~~
5 ~~drug~~ abuse, and mental health services, provided the entire
6 proposed operating budget for the service provider will be
7 displayed; and

8 (e) A requirement that the contractor must conform to
9 department rules and the priorities established thereunder.

10 (4) The department shall develop standard contract
11 forms for use between the district administrator and community
12 substance ~~alcohol, drug~~ abuse, and mental health service
13 providers.

14 (5) ~~Nothing in~~ This part does not prevent ~~prevents~~ any
15 municipality ~~city~~ or county, or combination of municipalities
16 ~~cities~~ and counties, from owning, financing, and operating a
17 substance ~~an alcohol, drug~~ abuse, or mental health program by
18 entering into an arrangement with the district to provide, and
19 be reimbursed for, services provided as part of the district
20 plan.

21 Section 11. Section 394.75, Florida Statutes, is
22 amended to read:

23 394.75 State and district substance ~~alcohol, drug~~
24 abuse, and mental health plans.--

25 (1)(a) Every 3 years, beginning in 2001, the
26 department, in consultation with the Medicaid program in the
27 Agency for Health Care Administration, shall prepare a state
28 master plan for the delivery and financing of a system of
29 publicly funded, community-based substance abuse and mental
30 health services throughout the state.

31

1 (b) The initial plan must include an assessment of the
2 clinical practice guidelines and standards for community-based
3 mental health and substance abuse services delivered by
4 persons or agencies under contract with the Department of
5 Children and Family Services. The assessment must include an
6 inventory of current clinical guidelines and standards used by
7 persons and agencies under contract with the department, and
8 by nationally recognized accreditation organizations, to
9 address the quality of care and must specify additional
10 clinical practice standards and guidelines for new or existing
11 services and programs.

12 (c) The plan must propose changes in department policy
13 or statutory revisions to strengthen the quality of mental
14 health and substance abuse treatment and support services.

15 (d) The plan must identify strategies for meeting the
16 treatment and support needs of children, adolescents, adults,
17 and older adults who have, or are at risk of having, mental,
18 emotional, or substance abuse problems as defined in chapter
19 394 or chapter 397.

20 (e) The plan must include input from persons who
21 represent local communities; local government entities that
22 contribute funds to the local substance abuse and mental
23 health treatment systems; consumers of publicly funded
24 substance abuse and mental health services, and their
25 families; and stakeholders interested in mental health and
26 substance abuse services. The plan must describe the means by
27 which this local input occurred. The plan shall be updated
28 annually.

29 (f) The plan must include statewide policies and
30 planning parameters that will be used by the health and human
31

1 services boards in preparing the district substance abuse and
2 mental health plans.

3 (g) The district plans shall be one component of the
4 state master plan.

5 (2) The state master plan shall also include:

6 (a) A proposal for the development of a data system
7 that will evaluate the effectiveness of programs and services
8 provided to clients of the substance abuse and mental health
9 service system.

10 (b) A proposal to resolve the funding discrepancies
11 between districts.

12 (c) A methodology for the allocation of resources
13 available from federal, state, and local sources and a
14 description of the current level of funding available from
15 each source.

16 (d) A description of the statewide priorities for
17 clients and services, and each district's priorities for
18 clients and services.

19 (e) Recommendations for methods of enhancing local
20 participation in the planning, organization, and financing of
21 substance abuse and mental health services.

22 (f) A description of the current methods of
23 contracting for services, an assessment of the efficiency of
24 these methods in providing accountability for contracted
25 funds, and recommendations for improvements to the system of
26 contracting.

27 (g) Recommendations for improving access to services
28 by clients and their families.

29 (h) Guidelines and formats for the development of
30 district plans.

31

1 (i) Recommendations for future directions for the
2 substance abuse and mental health service delivery system.

3
4 A schedule, format, and procedure for development and review
5 of the state master plan shall be adopted by the department by
6 June of each year. The plan and annual updates must be
7 submitted to the President of the Senate and the Speaker of
8 the House of Representatives by January 1 of each year,
9 beginning January 1, 2001.

10 (3) The district health and human services board shall
11 prepare an integrated district substance abuse and mental
12 health plan. The plan shall be prepared and updated on a
13 schedule established by the Alcohol, Drug Abuse, and Mental
14 Health Program Office. The plan shall reflect the needs and
15 program priorities established by the department and the needs
16 of the district established under ss. 394.674 and 394.675. The
17 plan must list in order of priority the mental health and the
18 substance abuse treatment needs of the district and must rank
19 each program separately. The plan shall include:

20 (a) A record of the total amount of money available in
21 the district for mental health and substance abuse services.

22 (b) A description of each service that will be
23 purchased with state funds.

24 (c) A record of the amount of money allocated for each
25 service identified in the plan as being purchased with state
26 funds.

27 (d) A record of the total funds allocated to each
28 provider.

29 (e) A record of the total funds allocated to each
30 provider by type of service to be purchased with state funds.

31

1 (f) Input from community-based persons, organizations,
2 and agencies interested in substance abuse and mental health
3 treatment services; local government entities that contribute
4 funds to the public substance abuse and mental health
5 treatment systems; and consumers of publicly funded substance
6 abuse and mental health services, and their family members.
7 The plan must describe the means by which this local input
8 occurred.

9 ~~(1)(a) The district planning council shall prepare a~~
10 ~~combined district alcohol, drug abuse, and mental health plan.~~
11 ~~The plan shall be prepared on a biennial basis and shall be~~
12 ~~reviewed annually and shall reflect both the program~~
13 ~~priorities established by the department and the needs of the~~
14 ~~district. The plan shall include a program description and~~
15 ~~line-item budget by program service component for alcohol,~~
16 ~~drug abuse, and mental health service providers that will~~
17 ~~receive state funds. The entire proposed operating budget for~~
18 ~~each service provider shall be displayed. A schedule, format,~~
19 ~~and procedure for development and review of the plan shall be~~
20 ~~promulgated by the department.~~

21
22 ~~(b) The plan shall be submitted by the district board~~
23 ~~planning council to the district administrator and to the~~
24 ~~governing bodies for review, comment, and approval, as~~
25 ~~provided in subsection (9).~~

26 (4)(2) The district plan shall:

27 (a) Describe the publicly funded, community-based
28 substance abuse and mental health system of care, and identify
29 statutorily defined populations, their service needs, and the
30 resources available and required to meet their needs.

31

1 (b) Provide the means for meeting the needs of the
2 district's eligible clients, specified in ss. 394.674 and
3 394.675, for substance abuse and mental health services.

4 (c) Provide a process for coordinating the delivery of
5 services within a community-based system of care to eligible
6 clients. Such process must involve service providers, clients,
7 and other stakeholders. The process must also provide a means
8 by which providers will coordinate and cooperate to strengthen
9 linkages, achieve maximum integration of services, foster
10 efficiencies in service delivery and administration, and
11 designate responsibility for outcomes for eligible clients.

12 (d)~~(a)~~ Provide a projection of district program and
13 fiscal needs for the next fiscal year ~~biennium~~, provide for
14 the orderly and economical development of needed services, and
15 indicate priorities and resources for each population served,
16 performance outcomes, and anticipated expenditures and
17 revenues.

18 (e)~~(b)~~ Include a summary budget request for the total
19 district substance ~~alcohol, drug~~ abuse, and mental health
20 program, which must ~~shall~~ include the funding priorities
21 established by the district planning process.

22 (f)~~(c)~~ Provide a basis for the district legislative
23 budget request.

24 (g)~~(d)~~ Include a policy and procedure for allocation
25 of funds.

26 (h)~~(e)~~ Include a procedure for securing local matching
27 funds. Such a procedure shall be developed in consultation
28 with governing bodies and service providers.

29 (i)~~(f)~~ Provide for the integration of substance
30 ~~alcohol, drug~~ abuse, and mental health services with the other
31 departmental programs and with the criminal justice, juvenile

1 justice, child protection, school, and health care systems
2 ~~system~~ within the district.

3 (j)~~(g)~~ Provide a plan for the coordination of services
4 in such manner as to ensure effectiveness and avoid
5 duplication, fragmentation of services, and unnecessary
6 expenditures.

7 (k)~~(h)~~ Provide for continuity of client care between
8 state treatment facilities and community programs to assure
9 that discharge planning results in the rapid application for
10 all benefits for which a client is eligible, including
11 Medicaid coverage for persons leaving state treatment
12 facilities and returning to community-based programs.

13 (l)~~(i)~~ Provide for the most appropriate and economical
14 use of all existing public and private agencies and personnel.

15 (m)~~(j)~~ Provide for the fullest possible and most
16 appropriate participation by existing programs; state
17 hospitals and other hospitals; city, county, and state health
18 and family service agencies; drug abuse and alcoholism
19 programs; probation departments; physicians; psychologists;
20 social workers; marriage and family therapists; mental health
21 counselors; clinical social workers; public health nurses;
22 school systems; and all other public and private agencies and
23 personnel that ~~which~~ are required to, or may agree to,
24 participate in the plan.

25 (n)~~(k)~~ Include an inventory of all public and private
26 substance alcohol, drug ~~abuse,~~ and mental health resources
27 within the district, including consumer advocacy groups and
28 self-help groups known to ~~registered with~~ the department.

29 (5)~~(3)~~ The district plan shall address how substance
30 abuse and mental health ~~primary care~~ services will be provided
31 and how a system of care for target populations ~~continuum of~~

1 ~~services~~ will be provided given the resources available in the
2 service district. The plan must include provisions for
3 maximizing client access to the most recently developed
4 psychiatric medications approved by the United States Food and
5 Drug Administration, for developing independent housing units
6 through participation in the Section 811 program operated by
7 the United States Department of Housing and Urban Development,
8 for developing supported employment services through the
9 Division of Vocational Rehabilitation of the Department of
10 Labor and Employment Security, for providing treatment
11 services to persons with co-occurring mental illness and
12 substance abuse problems which are integrated across treatment
13 systems, and for providing services to adults who have a
14 serious mental illness, as defined in s. 394.67, and who
15 reside in assisted-living facilities.

16 ~~(6)(4)~~ The district plan shall provide the means by
17 which the needs of the following population groups specified
18 pursuant to s. 394.674 ~~having priority~~ will be addressed in
19 the district.†

20 ~~(a) Chronic public inebriates†~~

21 ~~(b) Marginally functional alcoholics†~~

22 ~~(c) Chronic opiate abusers†~~

23 ~~(d) Poly-drug abusers†~~

24 ~~(e) Chronically mentally ill individuals†~~

25 ~~(f) Acutely mentally ill individuals†~~

26 ~~(g) Severely emotionally disturbed children and~~
27 ~~adolescents†~~

28 ~~(h) Elderly persons at high risk of~~
29 ~~institutionalization; and~~

30 ~~(i) Individuals returned to the community from a state~~
31 ~~mental health treatment facility.~~

1 ~~(7)~~(5) In developing the district plan, optimum use
2 shall be made of any federal, state, and local funds that may
3 be available for substance ~~alcohol, drug~~ abuse, and mental
4 health service planning. However, the department must provide
5 these services within legislative appropriations.

6 ~~(8)~~(6) The district health and human services board
7 ~~planning council~~ shall establish a subcommittee to prepare the
8 portion of the district plan relating to children and
9 adolescents. The subcommittee shall include representative
10 membership of any committee organized or established by the
11 district to review placement of children and adolescents in
12 residential treatment programs. The board shall establish a
13 subcommittee to prepare the portion of the district plan which
14 relates to adult mental health and substance abuse. The
15 subcommittee must include representatives from the community
16 who have an interest in mental health and substance abuse
17 treatment for adults.

18 ~~(9)~~(7) All departments of state government and all
19 local public agencies shall cooperate with officials to assist
20 them in service planning. Each district administrator shall,
21 upon request and the availability of staff, provide
22 consultative services to the local agency directors and
23 governing bodies.

24 ~~(10)~~(8) The district administrator shall ensure that
25 the district plan:

26 (a) Conforms to the priorities in the state plan, the
27 requirements of this part, and the standards adopted under
28 this part;

29 (b) Ensures that the most effective and economical use
30 will be made of available public and private substance

31

1 ~~alcohol, drug~~ abuse, and mental health resources in the
2 service district; and

3 (c) Has adequate provisions made for review and
4 evaluation of the services provided in the service district.

5 (11)~~(9)~~ The district administrator shall require such
6 modifications in the district plan as he or she deems
7 necessary to bring the plan into conformance with the
8 provisions of this part. If the district board planning
9 ~~council~~ and the district administrator cannot agree on the
10 plan, including the projected budget, the issues under dispute
11 shall be submitted directly to the secretary of the department
12 for immediate resolution.

13 (12)~~(10)~~ Each governing body that provides local funds
14 has the authority to require necessary modification to only
15 that portion of the district plan which affects substance
16 ~~alcohol, drug~~ abuse, and mental health programs and services
17 within the jurisdiction of that governing body.

18 (13)~~(11)~~ The district administrator shall report
19 annually to the district board planning ~~council~~ the status of
20 funding for priorities established in the district plan. Each
21 report must include:

22 (a) A description of the district plan priorities that
23 were included in the district legislative budget request. +

24 (b) A description of the district plan priorities that
25 were included in the departmental budget request prepared
26 under s. 20.19. +

27 (c) A description of the programs and services
28 included in the district plan priorities that were
29 appropriated funds by the Legislature in the legislative
30 session that preceded the report.

31

1 Section 12. Subsection (3) of section 394.4574,
2 Florida Statutes, is amended to read:

3 394.4574 Department responsibilities for a mental
4 health resident who resides in an assisted living facility
5 that holds a limited mental health license.--

6 (3) The Secretary of Children and Family Services, in
7 consultation with the Agency for Health Care Administration,
8 shall annually require each district administrator to develop,
9 with community input, detailed plans that demonstrate how the
10 district will ensure the provision of state-funded mental
11 health and substance abuse treatment services to residents of
12 assisted living facilities that hold a limited mental health
13 license. These plans must be consistent with the substance
14 ~~alcohol, drug~~ abuse, and mental health district plan developed
15 pursuant to s. 394.75 and must address case management
16 services; access to consumer-operated drop-in centers; access
17 to services during evenings, weekends, and holidays;
18 supervision of the clinical needs of the residents; and access
19 to emergency psychiatric care.

20 Section 13. Subsections (3), (4), (8), (9), (10), and
21 (11) of section 394.76, Florida Statutes, are amended to read:

22 394.76 Financing of district programs and
23 services.--If the local match funding level is not provided in
24 the General Appropriations Act or the substantive bill
25 implementing the General Appropriations Act, such funding
26 level shall be provided as follows:

27 (3) The state share of financial participation shall
28 be determined by the following formula:

29 (a) The state share of approved program costs shall be
30 a percentage of the net balance determined by deducting from
31 the total operating cost of services and programs, as

1 specified in s. 394.675(1), those expenditures which are
2 ineligible for state participation as provided in subsection
3 (7) and those ineligible expenditures established by rule of
4 the department pursuant to s. 394.78.

5 (b) Residential and case management services which are
6 funded as part of a deinstitutionalization project shall not
7 require local matching funds and shall not be used as local
8 matching funds. The state and federal financial participation
9 portions of Medicaid earnings pursuant to Title XIX of the
10 Social Security Act, except for the amount of general revenue
11 equal to the amount appropriated in 1985-1986 plus all other
12 general revenue that is shifted from any other alcohol, drug
13 abuse, and mental health appropriation category after fiscal
14 year 1986-1987 or substance abuse and mental health
15 appropriation category after fiscal year 2000-2001, shall not
16 require local matching funds and shall not be used as local
17 matching funds. Local matching funds are not required for
18 general revenue transferred by the department into substance
19 ~~alcohol, drug~~ abuse, and mental health appropriations
20 categories during a fiscal year to match federal funds earned
21 from Medicaid services provided for mental health clients in
22 excess of the amounts initially appropriated. Funds for
23 children's services which were provided through the Children,
24 Youth, and Families Services budget which did not require
25 local match prior to being transferred to the Substance
26 ~~Alcohol, Drug~~ Abuse, and Mental Health Services budget shall
27 be exempt from local matching requirements. All other
28 contracted community alcohol and mental health services and
29 programs, except as identified in s. 394.457(3), shall require
30 local participation on a 75-to-25 state-to-local ratio.
31

1 (c) The expenditure of 100 percent of all third-party
2 payments and fees shall be considered as eligible for state
3 financial participation if such expenditures are in accordance
4 with subsection (7) and the approved district plan.

5 (d) Fees generated by residential and case management
6 services which are funded as part of a deinstitutionalization
7 program and do not require local matching funds shall be used
8 to support program costs approved in the district plan.

9 (e) Any earnings pursuant to Title XIX of the Social
10 Security Act in excess of the amount appropriated shall be
11 used to support program costs approved in the district plan.

12 (4) Notwithstanding the provisions of subsection (3),
13 the department is authorized to develop and demonstrate
14 alternative financing systems for substance ~~alcohol, drug~~
15 ~~abuse~~, and mental health services. Proposals for
16 demonstration projects conducted pursuant to this subsection
17 shall be reviewed by the substantive and appropriations
18 committees of the Senate and the House of Representatives
19 prior to implementation of the projects.

20 (8) Expenditures for capital improvements relating to
21 construction of, addition to, purchase of, or renovation of a
22 community substance ~~alcohol, drug~~ abuse, or mental health
23 facility may be made by the state, provided such expenditures
24 or capital improvements are part and parcel of an approved
25 district plan. Nothing shall prohibit the use of such
26 expenditures for the construction of, addition to, renovation
27 of, or purchase of facilities owned by a county, city, or
28 other governmental agency of the state or a nonprofit entity.
29 Such expenditures are subject to the provisions of subsection
30 (6).

31

1 (9)(a) State funds for community alcohol and mental
2 health services shall be matched by local matching funds as
3 provided in paragraph (3)(b). The governing bodies within a
4 district or subdistrict shall be required to participate in
5 the funding of alcohol and mental health services under the
6 jurisdiction of such governing bodies. The amount of the
7 participation shall be at least that amount which, when added
8 to other available local matching funds, is necessary to match
9 state funds.

10 (b) The provisions of paragraph (a) to the contrary
11 notwithstanding, no additional matching funds may be required
12 solely due to the addition in the General Appropriations Act
13 of Substance Alcohol, Drug Abuse, and Mental Health Block
14 Grant Funds for local community mental health centers and
15 alcohol project grants.

16 (10) A local governing body is authorized to
17 appropriate moneys, in lump sum or otherwise, from its public
18 funds for the purpose of carrying out the provisions of this
19 part. In addition to the payment of claims upon submission of
20 proper vouchers, such moneys may also, at the option of the
21 governing body, be disbursed in the form of a lump-sum or
22 advance payment for services for expenditure, in turn, by the
23 recipient of the disbursement without prior audit by the
24 auditor of the governing body. Such funds shall be expended
25 only for substance alcohol, drug abuse, or mental health
26 purposes as provided in the approved district plan. Each
27 governing body appropriating and disbursing moneys pursuant to
28 this subsection shall require the expenditure of such moneys
29 by the recipient of the disbursement to be audited annually
30 either in conjunction with an audit of other expenditures or
31 by a separate audit. Such annual audits shall be furnished to

1 the governing bodies of each participating county and
2 municipality for their examination.

3 (11) No additional local matching funds shall be
4 required solely due to the addition in the General
5 Appropriations Act of substance ~~alcohol, drug~~ abuse, and
6 mental health block grant funds for local community mental
7 health centers, drug abuse programs, and alcohol project
8 grants.

9 Section 14. Subsection (1) of section 394.77, Florida
10 Statutes, is amended to read:

11 394.77 Uniform management information, accounting, and
12 reporting systems for providers.--The department shall
13 establish, for the purposes of control of costs:

14 (1) A uniform management information system and fiscal
15 accounting system for use by providers of community substance
16 ~~alcohol, drug~~ abuse, and mental health services.

17 Section 15. Subsections (2), (3), (4), and (5) of
18 section 394.78, Florida Statutes, are amended to read:

19 394.78 Operation and administration; personnel
20 standards; procedures for audit and monitoring of service
21 providers; resolution of disputes.--

22 (2) The department shall, by rule, establish standards
23 of education and experience for professional and technical
24 personnel employed in substance ~~alcohol, drug~~ abuse, and
25 mental health programs.

26 (3) The department shall establish, to the extent
27 possible, a standardized auditing procedure for substance
28 ~~alcohol, drug~~ abuse, and mental health service providers; and
29 audits of service providers shall be conducted pursuant to
30 such procedure and the applicable department rules. Such
31 procedure shall be supplied to all current and prospective

1 contractors and subcontractors prior to the signing of any
2 contracts.

3 (4) The department shall monitor service providers for
4 compliance with contracts and applicable state and federal
5 regulations. A representative of the district health and
6 human services board ~~planning council~~ shall be represented on
7 the monitoring team.

8 (5) In unresolved disputes regarding this part or
9 rules established pursuant to this part, providers and
10 district health and human services boards ~~planning councils~~
11 shall adhere to formal procedures specified under s.
12 20.19(8)(n) ~~as provided by the rules established by the~~
13 ~~department.~~

14 Section 16. Section 394.908, Florida Statutes, is
15 amended to read:

16 394.908 Substance ~~Alcohol, drug~~ abuse, and mental
17 health funding equity; distribution of appropriations.--In
18 recognition of the historical inequity among service districts
19 of the former Department of Health and Rehabilitative Services
20 in the funding of substance ~~alcohol, drug~~ abuse, and mental
21 health services, and in order to rectify this inequity and
22 provide for equitable funding in the future throughout the
23 state, the following funding process shall be adhered to,
24 ~~beginning with the 1997-1998 fiscal year:~~

25 (1) Funding thresholds for substance ~~alcohol, drug~~
26 ~~abuse,~~ and mental health services in each of the current
27 districts, statewide, shall be established based on the
28 current number of persons in need per district of substance
29 ~~for alcohol and drug~~ abuse, and ~~for~~ mental health services,
30 respectively.

31

1 (2) "Persons in need" means those persons who fit the
2 profile of the respective target populations and require
3 mental health or substance abuse services.

4 (3) Seventy-five ~~Beginning July 1, 1997,~~ 75 percent of
5 any additional funding beyond the 1996-1997 fiscal year base
6 appropriation for alcohol, drug abuse, and mental health
7 services shall be allocated to districts for substance abuse
8 and mental health services based on:

9 (a) Epidemiological estimates of disabilities which
10 apply to the respective target populations.

11 (b) A pro rata share distribution that ensures
12 districts below the statewide average funding level per person
13 in each target population of "persons in need" receive funding
14 necessary to achieve equity.

15 (4) The remaining 25 percent shall be allocated based
16 on the number of persons in need of substance ~~alcohol, drug~~
17 ~~abuse,~~ and mental health services per district without regard
18 to current funding levels.

19 (5) Target populations for persons in need shall be
20 displayed for each district and distributed concurrently with
21 the approved operating budget. The display by target
22 population shall show: The annual number of persons served
23 based on prior year actual numbers, the annual cost per person
24 served, the number of persons served by service cost center,
25 and the estimated number of the total target population for
26 persons in need.

27 (6) The annual cost per person served shall be defined
28 as the total actual funding for each target population divided
29 by the number of persons served in the target population for
30 that year.

31

1 (7) Commencing on July 1, 1998, all additional funding
2 pursuant to this section shall be performance-based.

3 Section 17. Subsection (2) of section 397.321, Florida
4 Statutes, is amended to read:

5 397.321 Duties of the department.--The department
6 shall:

7 (2) Ensure that a plan for substance abuse services is
8 developed at the district level in accordance with the
9 provisions of part IV of chapter 394, ~~and the state plan~~
10 ~~pursuant to s. 394.79.~~

11 Section 18. By November 1 of each year, the Department
12 of Children and Family Services shall submit a report to the
13 President of the Senate and the Speaker of the House of
14 Representatives which describes the compliance of providers
15 that provide substance abuse treatment programs and mental
16 health services under contract with the Department of Children
17 and Family Services. The report must describe the status of
18 compliance with the annual performance outcome standards
19 established by the Legislature and must address the providers
20 that meet or exceed performance standards, the providers that
21 did not achieve performance standards for which corrective
22 action measures were developed, and the providers whose
23 contracts were terminated due to failure to meet the
24 requirements of the corrective plan.

25 Section 19. The Commission on Mental Health and
26 Substance Abuse is directed to study and make recommendations
27 regarding who should receive publicly funded mental health and
28 substance abuse services. The commission shall submit its
29 recommendations to the President of the Senate, the Speaker of
30 the House of Representatives, and the majority and minority
31 leaders of each chamber no later than December 1, 2000.

