

Amendment No. ____ (for drafter's use only)

	<u>Senate</u>	CHAMBER ACTION	<u>House</u>
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ORIGINAL STAMP BELOW

11 Representative(s) Argenziano offered the following:

Amendment (with title amendment)

14 Remove from the bill: Everything after the enacting clause
15
16 and insert in lieu thereof:

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

19 394.455 Definitions.--As used in this part, unless the
20 context clearly requires otherwise, the term:

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

31 Section 2. Subsection (7) of section 394.492, Florida

Amendment No. ____ (for drafter's use only)

1 Statutes, is amended to read:

2 394.492 Definitions.--As used in ss. 394.490-394.497,
3 the term:

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

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

15 394.493 Target populations for child and adolescent
16 mental health services funded through the department.--

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

31 (3) Each child or adolescent who meets the target

Amendment No. ____ (for drafter's use only)

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

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

8 394.65 Short title.--This part may be cited ~~shall be~~
9 ~~known~~ as "The Community Substance ~~Alcohol, Drug~~ Abuse, and
10 Mental Health Services Act."

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

13 394.66 Legislative intent with respect to substance
14 ~~alcohol, drug~~ abuse, and mental health services.--It is the
15 intent of the Legislature to:

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

22 (2)(1) Promote and improve the mental health of the
23 citizens of the state by making substance abuse and mental
24 health treatment and support services available to those
25 persons who are most in need and least able to pay, through a
26 community-based system of care comprehensive, coordinated
27 ~~alcohol, drug abuse, and mental health services.~~

28 (3)(2) Involve local citizens in the planning of
29 substance ~~alcohol, drug~~ abuse, and mental health services in
30 their communities.

31 (4) Ensure that the department and the Agency for

Amendment No. ____ (for drafter's use only)

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

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

16 (6)(4) Provide access to crisis services to all
17 residents of the state with priority of attention being given
18 to individuals exhibiting symptoms of acute ~~or chronic~~ mental
19 illness, ~~alcohol abuse,~~ or substance drug abuse.

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

23 (8)(5) Ensure continuity of care, consistent with
24 minimum standards, for persons who are released from a state
25 treatment facility into the community.

26 (9)(6) Provide accountability for service provision
27 through statewide standards for treatment and support
28 services, and statewide standards for management, monitoring,
29 and reporting of information.

30 (10)(7) Include substance alcohol, drug abuse, and
31 mental health services as a component of the integrated

Amendment No. ____ (for drafter's use only)

1 service delivery system of the Department of Children and
2 Family Services.

3 (11)~~(8)~~ Ensure that the districts of the department
4 are the focal point of all substance ~~alcohol, drug~~ abuse, and
5 mental health planning activities, including budget
6 submissions, grant applications, contracts, and other
7 arrangements that can be effected at the district level.

8 (12)~~(9)~~ Organize and finance community substance
9 ~~alcohol, drug~~ abuse, and mental health services in local
10 communities throughout the state through locally administered
11 service delivery programs that are based on client outcomes,
12 are programmatically effective, and are financially efficient,
13 and that maximize the involvement of local citizens.

14 Section 6. Section 394.67, Florida Statutes, is
15 amended to read:

16 394.67 Definitions.--As used in this part, the term:

17 ~~(1) "Advisory council" means a district advisory~~
18 ~~council.~~

19 (1)~~(2)~~ "Agency" means the Agency for Health Care
20 Administration.

21 (2)~~(3)~~ "Applicant" means an individual applicant, or
22 any officer, director, agent, managing employee, or affiliated
23 person, or any partner or shareholder having an ownership
24 interest equal to a 5-percent or greater interest in the
25 corporation, partnership, or other business entity.

26 (3)~~(4)~~ "Client" means any individual receiving
27 services in any substance ~~alcohol, drug~~ abuse, or mental
28 health facility, program, or service, which facility, program,
29 or service is operated, funded, or regulated by the agency and
30 the department or regulated by the agency.

31 (4) "Crisis services" means short-term evaluation,

Amendment No. ____ (for drafter's use only)

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

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

17 (6) "Department" means the Department of Children and
18 Family Services.

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

26 (8) "District administrator" means the person
27 appointed by the Secretary of Children and Family Services for
28 the purpose of administering a department service district as
29 set forth in s. 20.19.

30 (9) "District plan" or "plan" means the combined
31 district substance alcohol, drug abuse, and mental health plan

Amendment No. ____ (for drafter's use only)

1 approved by the district administrator and governing bodies in
2 accordance with this part.

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

8 (11) "Governing body" means the chief legislative body
9 of a county, a board of county commissioners, or boards of
10 county commissioners in counties acting jointly, or their
11 counterparts in a charter government.

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

18 ~~(13)(12)~~ "Licensed facility" means a facility licensed
19 in accordance with this chapter.

20 ~~(14)(13)~~ "Local matching funds" means funds received
21 from governing bodies of local government, including city
22 commissions, county commissions, district school boards,
23 special tax districts, private hospital funds, private gifts,
24 both individual and corporate, and bequests and funds received
25 from community drives or any other sources.

26 ~~(15)(14)~~ "Managing employee" means the administrator
27 or other similarly titled individual who is responsible for
28 the daily operation of the facility.

29 (16) "Mental health services" means those therapeutic
30 interventions and activities that help to eliminate, reduce,
31 or manage symptoms or distress for persons who have severe

Amendment No. ____ (for drafter's use only)

1 emotional distress or a mental illness and to effectively
2 manage the disability that often accompanies a mental illness
3 so that the person can recover from the mental illness, become
4 appropriately self-sufficient for his or her age, and live in
5 a stable family or in the community. The term also includes
6 those preventive interventions and activities that reduce the
7 risk for or delay the onset of mental disorders. The term
8 includes the following types of services:

9 (a) Treatment services, such as psychiatric
10 medications and supportive psychotherapies, which are intended
11 to reduce or ameliorate the symptoms of severe distress or
12 mental illness.

13 (b) Rehabilitative services, which are intended to
14 reduce or eliminate the disability that is associated with
15 mental illness. Rehabilitative services may include assessment
16 of personal goals and strengths, readiness preparation,
17 specific skill training, and assistance in designing
18 environments that enable individuals to maximize their
19 functioning and community participation.

20 (c) Support services, which include services that
21 assist individuals in living successfully in environments of
22 their choice. Such services may include income supports,
23 social supports, housing supports, vocational supports, or
24 accommodations related to the symptoms or disabilities
25 associated with mental illness.

26 (d) Case management services, which are intended to
27 assist individuals in obtaining the formal and informal
28 resources that they need to successfully cope with the
29 consequences of their illness. Resources may include treatment
30 or rehabilitative or supportive interventions by both formal
31 and informal providers. Case management may include an

Amendment No. ____ (for drafter's use only)

1 assessment of client needs; intervention planning with the
2 client, his or her family, and service providers; linking the
3 client to needed services; monitoring service delivery;
4 evaluating the effect of services and supports; and advocating
5 on behalf of the client.

6
7 Mental health services may be delivered in a variety of
8 settings, such as inpatient, residential, partial hospital,
9 day treatment, outpatient, club house, or a drop-in or
10 self-help center, as well as in other community settings, such
11 as the client's residence or workplace. The types and
12 intensity of services provided shall be based on the client's
13 clinical status and goals, community resources, and
14 preferences. Services such as assertive community treatment
15 involve all four types of services which are delivered by a
16 multidisciplinary treatment team that is responsible for
17 identified individuals who have a serious mental illness.

18 (17)(15) "Patient fees" means compensation received by
19 a community ~~substance alcohol, drug~~ abuse, or mental health
20 facility for services rendered to a specific client ~~clients~~
21 from any source of funds, including city, county, state,
22 federal, and private sources.

23 (18) "Person who is experiencing an acute mental or
24 emotional crisis" means a child, adolescent, or adult who is
25 experiencing a psychotic episode or a high level of mental or
26 emotional distress which may be precipitated by a traumatic
27 event or a perceived life problem for which the individual's
28 typical coping strategies are inadequate. The term includes an
29 individual who meets the criteria for involuntary examination
30 specified in s. 394.463(1).

31 (19) "Person who is experiencing an acute substance

Amendment No. ____ (for drafter's use only)

1 abuse crisis" means a child, adolescent, or adult who is
2 experiencing a medical or emotional crisis because of the use
3 of alcoholic beverages or any psychoactive or mood-altering
4 substance. The term includes an individual who meets the
5 criteria for involuntary admission specified in s. 397.675.

6 (20)(16) "Premises" means those buildings, beds, and
7 facilities located at the main address of the licensee and all
8 other buildings, beds, and facilities for the provision of
9 acute or residential care which are located in such reasonable
10 proximity to the main address of the licensee as to appear to
11 the public to be under the dominion and control of the
12 licensee.

13 (21)(17) "Program office" means the Alcohol, Drug
14 Abuse, and Mental Health Program Office of the Department of
15 Children and Family Services.

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

22 (23) "Substance abuse services" means services
23 designed to prevent or remediate the consequences of substance
24 abuse, improve an individual's quality of life and
25 self-sufficiency, and support long-term recovery. The term
26 includes the following service categories:

27 (a) Prevention services, which include information
28 dissemination; education regarding the consequences of
29 substance abuse; alternative drug-free activities; problem
30 identification; referral of persons to appropriate prevention
31 programs; community-based programs that involve members of

Amendment No. ____ (for drafter's use only)

1 local communities in prevention activities; and environmental
2 strategies to review, change, and enforce laws that control
3 the availability of controlled and illegal substances.

4 (b) Assessment services, which includes the evaluation
5 of individuals and families in order to identify their
6 strengths and determine their required level of care,
7 motivation, and need for treatment and ancillary services.

8 (c) Intervention services, which include early
9 identification, short-term counseling and referral, and
10 outreach.

11 (d) Rehabilitation services, which include
12 residential, outpatient, day or night, case management,
13 in-home, psychiatric, and medical treatment, and methadone or
14 medication management.

15 (e) Ancillary services, which include self-help and
16 other support groups and activities; aftercare provided in a
17 structured, therapeutic environment; supported housing;
18 supported employment; vocational services; and educational
19 services.

20 ~~(24)(18)~~ "Residential treatment facility" means a
21 facility providing residential care and treatment to
22 individuals exhibiting symptoms of mental illness who are in
23 need of a 24-hour-per-day, 7-day-a-week structured living
24 environment, respite care, or long-term community placement.

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

29 ~~(20)~~ "Service provider" means any agency in which all
30 or any portion of the programs or services set forth in s.
31 394.675 are carried out.

Amendment No. ____ (for drafter's use only)

1 Section 7. Section 394.674, Florida Statutes, is
2 created to read:

3 394.674 Clinical eligibility for publicly funded
4 substance abuse and mental health services; fee collection
5 requirements.--

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

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

23 (3) Mental health services, substance abuse services,
24 and crisis services, as defined in s. 394.67, must, within the
25 limitations of available state and local matching resources,
26 be available to each person who is eligible for services under
27 subsection (1). Such person must contribute to the cost of his
28 or her care and treatment pursuant to the sliding fee scale
29 developed under subsection (4).

30 (4) The department shall adopt rules to implement the
31 clinical eligibility and fee collection requirements for

Amendment No. ____ (for drafter's use only)

1 publicly funded substance abuse and mental health services.
2 The rules must require that each provider under contract with
3 the department develop a sliding fee scale for persons who
4 have a net family income at or above 150 percent of the
5 Federal Poverty Income Guidelines, unless otherwise required
6 by state or federal law. The sliding fee scale must use the
7 uniform schedule of discounts by which a provider under
8 contract with the department discounts its established client
9 charges for services supported with state, federal, or local
10 funds, using, at a minimum, factors such as family income,
11 financial assets, and family size as declared by the person or
12 the person's guardian. The rules must include uniform criteria
13 to be used by all service providers in developing the schedule
14 of discounts for the sliding fee scale. The rules must address
15 the most expensive types of treatment, such as residential and
16 inpatient treatment, in order to make it possible for a client
17 to responsibly contribute to his or her mental health or
18 substance abuse care without jeopardizing the family's
19 financial stability. A person who is not eligible for Medicaid
20 and whose net family income is less than 150 percent of the
21 Federal Poverty Income Guidelines must pay a portion of his or
22 her treatment costs which is comparable to the copayment
23 amount required by the Medicaid program for Medicaid clients
24 pursuant to s. 409.9081. The rules must require that persons
25 who receive financial assistance from the Federal Government
26 because of a disability and are in long-term residential
27 treatment settings contribute to their board and care costs
28 and treatment costs and must be consistent with the provisions
29 in s. 409.212.

30 (5) A person who meets the eligibility criteria in
31 subsection (1) shall be served in accordance with the

Amendment No. ____ (for drafter's use only)

1 appropriate district substance abuse and mental health
2 services plan specified in s. 394.75 and within available
3 resources.

4 Section 8. Section 394.675, Florida Statutes, is
5 amended to read:

6 394.675 Substance Abuse, ~~drug~~ abuse, and mental
7 health service system.--

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

11 (a) Crisis services.

12 (b) Substance abuse services.

13 (c) Mental health services.

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

25 ~~(b) "Rehabilitative services" are those services which~~
26 ~~are made available to the general population at risk of~~
27 ~~serious mental health problems or substance abuse problems or~~
28 ~~which are provided as part of a rehabilitative program. These~~
29 ~~services are designed to prepare or train persons to function~~
30 ~~within the limits of their disabilities, to restore previous~~
31 ~~levels of functioning, or to improve current levels of~~

Amendment No. ____ (for drafter's use only)

1 ~~inadequate functioning. Rehabilitative services include, but~~
2 ~~are not limited to, outpatient services, day treatment~~
3 ~~services, and partial hospitalization services.~~

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

16 (2) Notwithstanding the provisions of this part, funds
17 that which are provided through state and federal sources for
18 specific services or for specific populations shall be used
19 for those purposes.

20 Section 9. Section 394.676, Florida Statutes, is
21 created to read:

22 394.676 Indigent psychiatric medication program.--

23 (1) Within legislative appropriations, the department
24 may establish the indigent psychiatric medication program to
25 purchase psychiatric medications for persons as defined in s.
26 394.492(5) or (6) or pursuant to s. 394.674(1), who do not
27 reside in a state mental health treatment facility or an
28 inpatient unit.

29 (2) The department must adopt rules to administer the
30 indigent psychiatric medication program. The rules must
31 prescribe the clinical and financial eligibility of clients

Amendment No. ____ (for drafter's use only)

1 who may receive services under the indigent psychiatric
2 medication program, the requirements that community-based
3 mental health providers must meet to participate in the
4 program, and the sanctions to be applied for failure to meet
5 those requirements.

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

15 Section 10. Section 394.74, Florida Statutes, is
16 amended to read:

17 394.74 Contracts for provision of local substance
18 ~~alcohol, drug~~ abuse, and mental health programs.--

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

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

27 (b) Notwithstanding s. 394.76(3)(a) and (c), the
28 department may use unit cost methods of payment in contracts
29 for purchasing mental health and substance abuse services. The
30 unit cost contracting system must account for those patient
31 fees that are paid on behalf of a specific client and those

Amendment No. ____ (for drafter's use only)

1 that are earned and used by the provider for those services
2 funded in whole or in part by the department.

3 (c) The department may reimburse actual expenditures
4 for startup contracts and fixed capital outlay contracts in
5 accordance with contract specifications.

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

7 (a) A provision that, within the limits of available
8 resources, substance ~~primary care alcohol, drug~~ abuse, and
9 mental health crisis services, as defined in s. 394.67(4),
10 shall be available to any individual residing or employed
11 within the service area, regardless of ability to pay for such
12 services, current or past health condition, or any other
13 factor;

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

19 (c) A provision that every reasonable effort to
20 collect appropriate reimbursement for the cost of providing
21 substance ~~alcohol, drug~~ abuse, and mental health services to
22 persons able to pay for services, including first-party
23 payments and third-party payments, shall be made by facilities
24 providing services pursuant to this act;

25 (d) A program description and line-item operating
26 budget by program service component for substance ~~alcohol,~~
27 ~~drug~~ abuse, and mental health services, provided the entire
28 proposed operating budget for the service provider will be
29 displayed; and

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

Amendment No. ____ (for drafter's use only)

1 (4) The department shall develop standard contract
2 forms for use between the district administrator and community
3 substance alcohol, drug abuse, and mental health service
4 providers.

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

12 Section 11. Section 394.75, Florida Statutes, is
13 amended to read:

14 394.75 State and district substance alcohol, drug
15 abuse, and mental health plans.--

16 (1)(a) Every 3 years, beginning in 2001, the
17 department, in consultation with the Medicaid program in the
18 Agency for Health Care Administration, shall prepare a state
19 master plan for the delivery and financing of a system of
20 publicly funded, community-based substance abuse and mental
21 health services throughout the state.

22 (b) The initial plan must include an assessment of the
23 clinical practice guidelines and standards for community-based
24 mental health and substance abuse services delivered by
25 persons or agencies under contract with the Department of
26 Children and Family Services. The assessment must include an
27 inventory of current clinical guidelines and standards used by
28 persons and agencies under contract with the department, and
29 by nationally recognized accreditation organizations, to
30 address the quality of care and must specify additional
31 clinical practice standards and guidelines for new or existing

Amendment No. ____ (for drafter's use only)

1 services and programs.

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

5 (d) The plan must identify strategies for meeting the
6 treatment and support needs of children, adolescents, adults,
7 and older adults who have, or are at risk of having, mental,
8 emotional, or substance abuse problems as defined in chapter
9 394 or chapter 397.

10 (e) The plan must include input from persons who
11 represent local communities; local government entities that
12 contribute funds to the local substance abuse and mental
13 health treatment systems; consumers of publicly funded
14 substance abuse and mental health services, and their
15 families; and stakeholders interested in mental health and
16 substance abuse services. The plan must describe the means by
17 which this local input occurred. The plan shall be updated
18 annually.

19 (f) The plan must include statewide policies and
20 planning parameters that will be used by the health and human
21 services boards in preparing the district substance abuse and
22 mental health plans.

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

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

26 (a) A proposal for the development of a data system
27 that will evaluate the effectiveness of programs and services
28 provided to clients of the substance abuse and mental health
29 service system.

30 (b) A proposal to resolve the funding discrepancies
31 between districts.

Amendment No. ____ (for drafter's use only)

1 (c) A methodology for the allocation of resources
2 available from federal, state, and local sources and a
3 description of the current level of funding available from
4 each source.

5 (d) A description of the statewide priorities for
6 clients and services, and each district's priorities for
7 clients and services.

8 (e) Recommendations for methods of enhancing local
9 participation in the planning, organization, and financing of
10 substance abuse and mental health services.

11 (f) A description of the current methods of
12 contracting for services, an assessment of the efficiency of
13 these methods in providing accountability for contracted
14 funds, and recommendations for improvements to the system of
15 contracting.

16 (g) Recommendations for improving access to services
17 by clients and their families.

18 (h) Guidelines and formats for the development of
19 district plans.

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

22
23 A schedule, format, and procedure for development and review
24 of the state master plan shall be adopted by the department by
25 June of each year. The plan and annual updates must be
26 submitted to the President of the Senate and the Speaker of
27 the House of Representatives by January 1 of each year,
28 beginning January 1, 2001.

29 (3) The district health and human services board shall
30 prepare an integrated district substance abuse and mental
31 health plan. The plan shall be prepared and updated on a

Amendment No. ____ (for drafter's use only)

1 schedule established by the Alcohol, Drug Abuse, and Mental
2 Health Program Office. The plan shall reflect the needs and
3 program priorities established by the department and the needs
4 of the district established under ss. 394.674 and 394.675. The
5 plan must list in order of priority the mental health and the
6 substance abuse treatment needs of the district and must rank
7 each program separately. The plan shall include:

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

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

12 (c) A record of the amount of money allocated for each
13 service identified in the plan as being purchased with state
14 funds.

15 (d) A record of the total funds allocated to each
16 provider.

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

19 (f) Input from community-based persons, organizations,
20 and agencies interested in substance abuse and mental health
21 treatment services; local government entities that contribute
22 funds to the public substance abuse and mental health
23 treatment systems; and consumers of publicly funded substance
24 abuse and mental health services, and their family members.
25 The plan must describe the means by which this local input
26 occurred.

27 ~~(1)(a) The district planning council shall prepare a~~
28 ~~combined district alcohol, drug abuse, and mental health plan.~~
29 ~~The plan shall be prepared on a biennial basis and shall be~~
30 ~~reviewed annually and shall reflect both the program~~
31 ~~priorities established by the department and the needs of the~~

Amendment No. ____ (for drafter's use only)

1 ~~district. The plan shall include a program description and~~
2 ~~line-item budget by program service component for alcohol,~~
3 ~~drug abuse, and mental health service providers that will~~
4 ~~receive state funds. The entire proposed operating budget for~~
5 ~~each service provider shall be displayed. A schedule, format,~~
6 ~~and procedure for development and review of the plan shall be~~
7 ~~promulgated by the department.~~

8
9 ~~(b)~~ The plan shall be submitted by the district board
10 ~~planning council~~ to the district administrator and to the
11 governing bodies for review, comment, and approval, ~~as~~
12 ~~provided in subsection (9).~~

13 ~~(4)(2)~~ The district plan shall:

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

18 (b) Provide the means for meeting the needs of the
19 district's eligible clients, specified in ss. 394.674 and
20 394.675, for substance abuse and mental health services.

21 (c) Provide a process for coordinating the delivery of
22 services within a community-based system of care to eligible
23 clients. Such process must involve service providers, clients,
24 and other stakeholders. The process must also provide a means
25 by which providers will coordinate and cooperate to strengthen
26 linkages, achieve maximum integration of services, foster
27 efficiencies in service delivery and administration, and
28 designate responsibility for outcomes for eligible clients.

29 ~~(d)(a)~~ Provide a projection of district program and
30 fiscal needs for the next fiscal year ~~biennium~~, provide for
31 the orderly and economical development of needed services, and

Amendment No. ____ (for drafter's use only)

1 indicate priorities and resources for each population served,
2 performance outcomes, and anticipated expenditures and
3 revenues.

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

8 (f)~~(c)~~ Provide a basis for the district legislative
9 budget request.

10 (g)~~(d)~~ Include a policy and procedure for allocation
11 of funds.

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

15 (i)~~(f)~~ Provide for the integration of substance
16 ~~alcohol, drug~~ abuse, and mental health services with the other
17 departmental programs and with the criminal justice, juvenile
18 justice, child protection, school, and health care systems
19 ~~system~~ within the district.

20 (j)~~(g)~~ Provide a plan for the coordination of services
21 in such manner as to ensure effectiveness and avoid
22 duplication, fragmentation of services, and unnecessary
23 expenditures.

24 (k)~~(h)~~ Provide for continuity of client care between
25 state treatment facilities and community programs to assure
26 that discharge planning results in the rapid application for
27 all benefits for which a client is eligible, including
28 Medicaid coverage for persons leaving state treatment
29 facilities and returning to community-based programs.

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

Amendment No. ____ (for drafter's use only)

1 (m)(j) Provide for the fullest possible and most
2 appropriate participation by existing programs; state
3 hospitals and other hospitals; city, county, and state health
4 and family service agencies; drug abuse and alcoholism
5 programs; probation departments; physicians; psychologists;
6 social workers; marriage and family therapists; mental health
7 counselors; clinical social workers; public health nurses;
8 school systems; and all other public and private agencies and
9 personnel that ~~which~~ are required to, or may agree to,
10 participate in the plan.

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

15 (5)(3) The district plan shall address how substance
16 abuse and mental health ~~primary care~~ services will be provided
17 and how a system of care for target populations ~~continuum of~~
18 ~~services~~ will be provided given the resources available in the
19 service district. The plan must include provisions for
20 maximizing client access to the most recently developed
21 psychiatric medications approved by the United States Food and
22 Drug Administration, for developing independent housing units
23 through participation in the Section 811 program operated by
24 the United States Department of Housing and Urban Development,
25 for developing supported employment services through the
26 Division of Vocational Rehabilitation of the Department of
27 Labor and Employment Security, for providing treatment
28 services to persons with co-occurring mental illness and
29 substance abuse problems which are integrated across treatment
30 systems, and for providing services to adults who have a
31 serious mental illness, as defined in s. 394.67, and who

Amendment No. ____ (for drafter's use only)

1 reside in assisted-living facilities.

2 ~~(6)(4)~~ The district plan shall provide the means by
3 which the needs of the ~~following~~ population groups specified
4 pursuant to s. 394.674 ~~having priority~~ will be addressed in
5 the district. ~~+~~

6 ~~(a) Chronic public inebriates;~~

7 ~~(b) Marginally functional alcoholics;~~

8 ~~(c) Chronic opiate abusers;~~

9 ~~(d) Poly-drug abusers;~~

10 ~~(e) Chronically mentally ill individuals;~~

11 ~~(f) Acutely mentally ill individuals;~~

12 ~~(g) Severely emotionally disturbed children and~~
13 ~~adolescents;~~

14 ~~(h) Elderly persons at high risk of~~
15 ~~institutionalization; and~~

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

18 ~~(7)(5)~~ In developing the district plan, optimum use
19 shall be made of any federal, state, and local funds that may
20 be available for substance alcohol, drug abuse, and mental
21 health service planning. However, the department must provide
22 these services within legislative appropriations.

23 ~~(8)(6)~~ The district health and human services board
24 ~~planning council~~ shall establish a subcommittee to prepare the
25 portion of the district plan relating to children and
26 adolescents. The subcommittee shall include representative
27 membership of any committee organized or established by the
28 district to review placement of children and adolescents in
29 residential treatment programs. The board shall establish a
30 subcommittee to prepare the portion of the district plan which
31 relates to adult mental health and substance abuse. The

Amendment No. ____ (for drafter's use only)

1 subcommittee must include representatives from the community
2 who have an interest in mental health and substance abuse
3 treatment for adults.

4 ~~(9)(7)~~ All departments of state government and all
5 local public agencies shall cooperate with officials to assist
6 them in service planning. Each district administrator shall,
7 upon request and the availability of staff, provide
8 consultative services to the local agency directors and
9 governing bodies.

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

12 (a) Conforms to the priorities in the state plan, the
13 requirements of this part, and the standards adopted under
14 this part;

15 (b) Ensures that the most effective and economical use
16 will be made of available public and private substance
17 ~~alcohol, drug~~ abuse, and mental health resources in the
18 service district; and

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

21 ~~(11)(9)~~ The district administrator shall require such
22 modifications in the district plan as he or she deems
23 necessary to bring the plan into conformance with the
24 provisions of this part. If the district board ~~planning~~
25 ~~council~~ and the district administrator cannot agree on the
26 plan, including the projected budget, the issues under dispute
27 shall be submitted directly to the secretary of the department
28 for immediate resolution.

29 ~~(12)(10)~~ Each governing body that provides local funds
30 has the authority to require necessary modification to only
31 that portion of the district plan which affects substance

Amendment No. ____ (for drafter's use only)

1 ~~alcohol, drug~~ abuse, and mental health programs and services
2 within the jurisdiction of that governing body.

3 (13)~~(11)~~ The district administrator shall report
4 annually to the district board ~~planning council~~ the status of
5 funding for priorities established in the district plan. Each
6 report must include:

7 (a) A description of the district plan priorities that
8 were included in the district legislative budget request.†

9 (b) A description of the district plan priorities that
10 were included in the departmental budget request prepared
11 under s. 20.19.†

12 (c) A description of the programs and services
13 included in the district plan priorities that were
14 appropriated funds by the Legislature in the legislative
15 session that preceded the report.

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

18 394.4574 Department responsibilities for a mental
19 health resident who resides in an assisted living facility
20 that holds a limited mental health license.--

21 (3) The Secretary of Children and Family Services, in
22 consultation with the Agency for Health Care Administration,
23 shall annually require each district administrator to develop,
24 with community input, detailed plans that demonstrate how the
25 district will ensure the provision of state-funded mental
26 health and substance abuse treatment services to residents of
27 assisted living facilities that hold a limited mental health
28 license. These plans must be consistent with the substance
29 ~~alcohol, drug~~ abuse, and mental health district plan developed
30 pursuant to s. 394.75 and must address case management
31 services; access to consumer-operated drop-in centers; access

Amendment No. ____ (for drafter's use only)

1 to services during evenings, weekends, and holidays;
2 supervision of the clinical needs of the residents; and access
3 to emergency psychiatric care.

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

6 394.76 Financing of district programs and
7 services.--If the local match funding level is not provided in
8 the General Appropriations Act or the substantive bill
9 implementing the General Appropriations Act, such funding
10 level shall be provided as follows:

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

13 (a) The state share of approved program costs shall be
14 a percentage of the net balance determined by deducting from
15 the total operating cost of services and programs, as
16 specified in s. 394.675(1), those expenditures which are
17 ineligible for state participation as provided in subsection
18 (7) and those ineligible expenditures established by rule of
19 the department pursuant to s. 394.78.

20 (b) Residential and case management services which are
21 funded as part of a deinstitutionalization project shall not
22 require local matching funds and shall not be used as local
23 matching funds. The state and federal financial participation
24 portions of Medicaid earnings pursuant to Title XIX of the
25 Social Security Act, except for the amount of general revenue
26 equal to the amount appropriated in 1985-1986 plus all other
27 general revenue that is shifted from any other alcohol, drug
28 abuse, and mental health appropriation category after fiscal
29 year 1986-1987 or substance abuse and mental health
30 appropriation category after fiscal year 2000-2001, shall not
31 require local matching funds and shall not be used as local

Amendment No. ____ (for drafter's use only)

1 matching funds. Local matching funds are not required for
2 general revenue transferred by the department into substance
3 ~~alcohol, drug~~ abuse, and mental health appropriations
4 categories during a fiscal year to match federal funds earned
5 from Medicaid services provided for mental health clients in
6 excess of the amounts initially appropriated. Funds for
7 children's services which were provided through the Children,
8 Youth, and Families Services budget which did not require
9 local match prior to being transferred to the Substance
10 ~~Alcohol, Drug~~ Abuse, and Mental Health Services budget shall
11 be exempt from local matching requirements. All other
12 contracted community alcohol and mental health services and
13 programs, except as identified in s. 394.457(3), shall require
14 local participation on a 75-to-25 state-to-local ratio.

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

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

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

26 (4) Notwithstanding the provisions of subsection (3),
27 the department is authorized to develop and demonstrate
28 alternative financing systems for substance ~~alcohol, drug~~
29 ~~abuse,~~ and mental health services. Proposals for
30 demonstration projects conducted pursuant to this subsection
31 shall be reviewed by the substantive and appropriations

Amendment No. ____ (for drafter's use only)

1 committees of the Senate and the House of Representatives
2 prior to implementation of the projects.

3 (8) Expenditures for capital improvements relating to
4 construction of, addition to, purchase of, or renovation of a
5 community substance alcohol, drug abuse, or mental health
6 facility may be made by the state, provided such expenditures
7 or capital improvements are part and parcel of an approved
8 district plan. Nothing shall prohibit the use of such
9 expenditures for the construction of, addition to, renovation
10 of, or purchase of facilities owned by a county, city, or
11 other governmental agency of the state or a nonprofit entity.
12 Such expenditures are subject to the provisions of subsection
13 (6).

14 (9)(a) State funds for community alcohol and mental
15 health services shall be matched by local matching funds as
16 provided in paragraph (3)(b). The governing bodies within a
17 district or subdistrict shall be required to participate in
18 the funding of alcohol and mental health services under the
19 jurisdiction of such governing bodies. The amount of the
20 participation shall be at least that amount which, when added
21 to other available local matching funds, is necessary to match
22 state funds.

23 (b) The provisions of paragraph (a) to the contrary
24 notwithstanding, no additional matching funds may be required
25 solely due to the addition in the General Appropriations Act
26 of Substance Alcohol, Drug Abuse, and Mental Health Block
27 Grant Funds for local community mental health centers and
28 alcohol project grants.

29 (10) A local governing body is authorized to
30 appropriate moneys, in lump sum or otherwise, from its public
31 funds for the purpose of carrying out the provisions of this

Amendment No. ____ (for drafter's use only)

1 part. In addition to the payment of claims upon submission of
2 proper vouchers, such moneys may also, at the option of the
3 governing body, be disbursed in the form of a lump-sum or
4 advance payment for services for expenditure, in turn, by the
5 recipient of the disbursement without prior audit by the
6 auditor of the governing body. Such funds shall be expended
7 only for substance ~~alcohol, drug~~ abuse, or mental health
8 purposes as provided in the approved district plan. Each
9 governing body appropriating and disbursing moneys pursuant to
10 this subsection shall require the expenditure of such moneys
11 by the recipient of the disbursement to be audited annually
12 either in conjunction with an audit of other expenditures or
13 by a separate audit. Such annual audits shall be furnished to
14 the governing bodies of each participating county and
15 municipality for their examination.

16 (11) No additional local matching funds shall be
17 required solely due to the addition in the General
18 Appropriations Act of substance ~~alcohol, drug~~ abuse, and
19 mental health block grant funds for local community mental
20 health centers, drug abuse programs, and alcohol project
21 grants.

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

24 394.77 Uniform management information, accounting, and
25 reporting systems for providers.--The department shall
26 establish, for the purposes of control of costs:

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

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

Amendment No. ____ (for drafter's use only)

1 394.78 Operation and administration; personnel
2 standards; procedures for audit and monitoring of service
3 providers; resolution of disputes.--

4 (2) The department shall, by rule, establish standards
5 of education and experience for professional and technical
6 personnel employed in substance ~~alcohol, drug~~ abuse, and
7 mental health programs.

8 (3) The department shall establish, to the extent
9 possible, a standardized auditing procedure for substance
10 ~~alcohol, drug~~ abuse, and mental health service providers; and
11 audits of service providers shall be conducted pursuant to
12 such procedure and the applicable department rules. Such
13 procedure shall be supplied to all current and prospective
14 contractors and subcontractors prior to the signing of any
15 contracts.

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

21 (5) In unresolved disputes regarding this part or
22 rules established pursuant to this part, providers and
23 district health and human services boards ~~planning councils~~
24 shall adhere to formal procedures specified under s.
25 20.19(8)(n) ~~as provided by the rules established by the~~
26 ~~department.~~

27 Section 16. Section 394.908, Florida Statutes, is
28 amended to read:

29 394.908 Substance ~~Alcohol, drug~~ abuse, and mental
30 health funding equity; distribution of appropriations.--In
31 recognition of the historical inequity among service districts

Amendment No. ____ (for drafter's use only)

1 of the former Department of Health and Rehabilitative Services
2 in the funding of substance ~~alcohol, drug~~ abuse, and mental
3 health services, and in order to rectify this inequity and
4 provide for equitable funding in the future throughout the
5 state, the following funding process shall be adhered to,
6 ~~beginning with the 1997-1998 fiscal year:~~

7 (1) Funding thresholds for substance ~~alcohol, drug~~
8 abuse, and mental health services in each of the current
9 districts, statewide, shall be established based on the
10 current number of persons in need per district of substance
11 ~~for alcohol and drug~~ abuse, and ~~for~~ mental health services,
12 respectively.

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

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

21 (a) Epidemiological estimates of disabilities which
22 apply to the respective target populations.

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

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

31 (5) Target populations for persons in need shall be

Amendment No. ____ (for drafter's use only)

1 displayed for each district and distributed concurrently with
2 the approved operating budget. The display by target
3 population shall show: The annual number of persons served
4 based on prior year actual numbers, the annual cost per person
5 served, the number of persons served by service cost center,
6 and the estimated number of the total target population for
7 persons in need.

8 (6) The annual cost per person served shall be defined
9 as the total actual funding for each target population divided
10 by the number of persons served in the target population for
11 that year.

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

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

16 397.321 Duties of the department.--The department
17 shall:

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

22 Section 18. By November 1 of each year, the Department
23 of Children and Family Services shall submit a report to the
24 President of the Senate and the Speaker of the House of
25 Representatives which describes the compliance of providers
26 that provide substance abuse treatment programs and mental
27 health services under contract with the Department of Children
28 and Family Services. The report must describe the status of
29 compliance with the annual performance outcome standards
30 established by the Legislature and must address the providers
31 that meet or exceed performance standards, the providers that

Amendment No. ____ (for drafter's use only)

1 did not achieve performance standards for which corrective
2 action measures were developed, and the providers whose
3 contracts were terminated due to failure to meet the
4 requirements of the corrective plan.

5 Section 19. The Commission on Mental Health and
6 Substance Abuse is directed to study and make recommendations
7 regarding who should receive publicly funded mental health and
8 substance abuse services. The commission shall submit its
9 recommendations to the President of the Senate, the Speaker of
10 the House of Representatives, and the majority and minority
11 leaders of each chamber no later than December 1, 2000.

12 Section 20. Target groups.--The Department of Children
13 and Family Services shall revise its target groups for
14 substance abuse and mental health services approved pursuant
15 to s. 216.0166, Florida Statutes, to include "older adults in
16 crisis," "older adults who are at risk of being placed in a
17 more restrictive environment because of their mental illness
18 or substance abuse," "older adults with severe and persistent
19 mental illness," and "older adults in need of substance abuse
20 treatment." The department shall track and report specifically
21 on substance abuse and mental health services provided to
22 older adults.

23 Section 21. Section 394.79, Florida Statutes, is
24 repealed.

25 Section 22. This act shall take effect July 1, 2000.

26
27

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

29 And the title is amended as follows:

30 remove from the title of the bill: the entire title

31

Amendment No. ____ (for drafter's use only)

1 and insert in lieu thereof:

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

Amendment No. ____ (for drafter's use only)

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

Amendment No. ____ (for drafter's use only)

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

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