By the Committee on Children and Families

300-306A-00

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A bill to be entitled An act relating to substance abuse and mental health services; amending s. 394.455, F.S.; redefining the term "mental illness" for purposes of part I of ch. 394, F.S.; amending s. 394.492, F.S.; redefining the term "child or adolescent who is experiencing an acute mental or emotional crisis" for purposes of part III of ch. 394, F.S.; amending s. 394.493, F.S.; revising the income standard that is the basis for a sliding fee scale adopted by the Department of Children and Family Services for mental health services provided to children and adolescents; amending s. 394.65, F.S.; redesignating part IV of ch. 394, F.S., as "The Community Substance Abuse and Mental Health Services Act"; amending s. 394.66, F.S.; providing legislative intent with respect to substance abuse and mental health services; amending s. 394.67, F.S.; providing additional definitions; creating s. 394.674, F.S.; providing criteria for clinical and financial eligibility for substance abuse and mental health services funded by the Department of Children and Family Services; providing requirements for the department in the provision of crisis services, substance abuse services, and mental health services; specifying requirements for counties in spending certain funds for local substance abuse and mental health services; authorizing

1 the use of funds for activities to prevent 2 substance abuse; requiring that the Department 3 of Children and Family Services adopt rules; requiring the department to establish a sliding 4 5 fee scale for clients who receive substance 6 abuse and mental health services; amending s. 7 394.675, F.S.; revising the types of services 8 provided by the department under the substance 9 abuse and mental health service system; amending s. 394.74, F.S., relating to contracts 10 11 for substance abuse and mental health programs; conforming provisions to changes made by the 12 act; amending s. 394.75, F.S.; requiring 13 district health and human services boards 14 rather than planning councils to prepare 15 substance abuse and mental health plans; 16 17 providing requirements for the plans; revising the population groups to be addressed in the 18 19 plans to conform to changes made by the act; 20 amending ss. 394.76, 394.77, 394.78, 394.79, 394.908, F.S., relating to the financing of 21 district programs and services, uniform 22 information and reporting systems, procedures 23 24 for audits and dispute resolution, and 25 distribution of appropriations; conforming provisions to changes made by the act; 26 27 requiring the Department of Children and Family 28 Services to submit a master plan to the 29 Legislature for implementing a publicly funded, 30 community-based system of care for mental health and substance abuse services; providing 31

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1 requirements for the master plan; requiring the 2 department to submit a report to the 3 Legislature which describes the compliance of 4 providers with performance outcome standards; 5 providing an effective date. 6 7 Be It Enacted by the Legislature of the State of Florida: 8 9 Section 1. Subsection (18) of section 394.455, Florida 10 Statutes, is amended to read: 11 394.455 Definitions.--As used in this part, unless the context clearly requires otherwise, the term: 12 13 (18) "Mental illness" means an impairment of the mental or emotional processes that exercise conscious control 14 15 of one's actions or of the ability to perceive or understand reality, which impairment substantially interferes with a 16 17 person's ability to meet the ordinary demands of living, 18 regardless of etiology. For the purposes of this part, the 19 term does not include retardation or developmental disability as defined in chapter 393, intoxication, or conditions 20 manifested only by antisocial behavior or substance abuse 21 22 impairment. Section 2. Subsection (7) of section 394.492, Florida 23 24 Statutes, is amended to read: 25 394.492 Definitions.--As used in ss. 394.490-394.497, the term: 26 27 "Child or adolescent who is experiencing an acute 28 mental or emotional crisis" means a child or adolescent who

experiences <u>a psychotic episode or a high level of mental or</u> emotional distress which may be precipitated by a traumatic

typical coping strategies are inadequate. The term an acute 2 mental or emotional problem and includes a child or adolescent 3 who meets the criteria for involuntary examination specified 4 in s. 394.463(1). 5 Section 3. Subsection (2) of section 394.493, Florida 6 Statutes, is amended to read: 7 394.493 Target populations for child and adolescent 8 mental health services funded through the department .--9 (2) Each mental health provider under contract with 10 the department to provide mental health services to the target 11 population shall collect fees from the parent or legal guardian of the child or adolescent receiving services. The 12 13 fees shall be based on a sliding fee scale for families whose net family income is at or above 150 between 100 percent and 14 15 200 percent of the Federal Poverty Income Guidelines. The 16 department shall adopt, by rule, a sliding fee scale for 17 statewide implementation. A family whose net family income is 200 percent or more above the Federal Poverty Income 18 19 Guidelines is responsible for paying the cost of services. Fees collected from families shall be retained in the service 20 district and used for expanding child and adolescent mental 21 health treatment services. 22 Section 4. Section 394.65, Florida Statutes, is 23 24 amended to read: 25 394.65 Short title.--This part may be cited shall be 26 known as "The Community Substance Alcohol, Drug Abuse, and Mental Health Services Act." 27 28 Section 5. Section 394.66, Florida Statutes, is 29 amended to read: 30

- 1 2 alcohol, drug abuse, and mental health services. -- It is the 3 intent of the Legislature to:
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citizens of the state by making substance abuse and mental health treatment and support services available to those persons who are most in need and least able to pay through a

(1) Promote and improve the mental health of the

394.66 Legislative intent with respect to substance

- community-based system of care comprehensive, coordinated alcohol, drug abuse, and mental health services.
- (2) Involve local citizens in the planning of substance alcohol, drug abuse, and mental health services in their communities.
- (3) Ensure that all activities of the Department of Children and Family Services, the Agency for Health Care Administration, and their respective contract providers involved in the delivery of substance its contractors are directed toward the coordination of planning efforts in alcohol, drug abuse, and mental health treatment and prevention services are coordinated and integrated with other local systems and groups, public and private, such as juvenile justice, criminal justice, child protection, and public health organizations; school districts; and local groups or organizations that focus on services to persons who are elderly.
- (4) Provide access to crisis services to all residents of the state with priority of attention being given to individuals exhibiting symptoms of acute or chronic mental illness, alcohol abuse, or substance drug abuse.
- (5) Ensure continuity of care, consistent with minimum standards, for persons who are released from a state treatment 31 facility into the community.

through statewide standards for treatment and support services and statewide standards for management, monitoring, and reporting of information.

(6) Provide accountability for service provision

- (7) Include <u>substance</u> alcohol, drug abuse, and mental health services as a component of the integrated service delivery system of the Department of Children and Family Services.
- (8) Ensure that the districts of the department are the focal point of all <u>substance</u> alcohol, drug abuse, and mental health planning activities, including budget submissions, grant applications, contracts, and other arrangements that can be effected at the district level.
- (9) Organize and finance community <u>substance</u> alcohol, drug abuse, and mental health services in local communities throughout the state through locally administered service delivery programs that <u>are based on client outcomes</u>, are programmatically effective, and are financially efficient, and that maximize the involvement of local citizens.

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

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

(1) "Adult at risk of mental illness" means a person

18 years of age or older who has an increased likelihood of

mental illness due to factors such as having a family history

of mental illness or substance abuse; abusing substances;

being or having been a victim of abuse, neglect, abandonment,

exploitation, or domestic violence; having problems associated

with aging; being homeless; experiencing the death of a family

member; being chronically unemployed; being the victim of a

crime; or being infected with human immunodeficiency virus 2 (HIV). 3 (2) "Adult at risk of substance abuse impairment" means a person 18 years of age or older who has an increased 4 5 likelihood of substance abuse impairment due to factors such 6 as having a family history of substance abuse; experiencing persistent substance abuse problems; experiencing persistent 7 8 mental-health problems; misusing medications; being or having been a victim of abuse, neglect, abandonment, exploitation, or 9 10 domestic violence; having problems associated with aging; 11 being homeless; experiencing the death of a family member; being the victim of a crime; experiencing negative 12 socioeconomic conditions such as unemployment; or being 13 infected with human immunodeficiency virus (HIV). 14 "Adult who has a serious mental illness" means a 15 person 18 years of age or older who meets one of the 16 17 diagnostic categories in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the 18 19 American Psychiatric Association, with the exception of substance abuse disorders and developmental disorders, and who 20 exhibits behaviors that substantially interfere with or limit 21 functioning in one or more major life activities, including 22 basic daily living skills, such as eating, bathing, or 23 dressing; instrumental living skills, such as maintaining a 24 25 household or managing money; getting around the community; taking prescribed medication; or functioning in social, 26 27 family, vocational, or educational contexts. The term includes 28 an adult who meets the criteria for involuntary placement 29 under s. 394.467(1). 30 (4) "Adult who has a substance abuse impairment" means

a person 18 years of age or older who meets the diagnostic

requirements for substance abuse or substance dependence under Substance-Related Disorders in the most recent edition of the Diagnostic and Statistical Manual of Mental Disorders of the American Psychiatric Association.

- (1) "Advisory council" means a district advisory council.
- (5) "Agency" means the Agency for Health Care Administration.
- (6)(3) "Applicant" means an individual applicant, or any officer, director, agent, managing employee, or affiliated person, or any partner or shareholder having an ownership interest equal to a 5-percent or greater interest in the corporation, partnership, or other business entity.
- (7)(4) "Client" means any individual receiving services in any <u>substance</u> alcohol, drug abuse, or mental health facility, program, or service, which facility, program, or service is operated, funded, or regulated by the agency and the department or regulated by the agency.
- (8) "Crisis services" means short-term evaluation, stabilization, and brief intervention services provided to a person who is experiencing an acute mental or emotional crisis, as defined in subsection (22), or an acute substance abuse crisis, as defined in subsection (23), to prevent further deterioration of the person's mental health. Crisis services are provided in settings such as a crisis-stabilization unit, an inpatient unit, a short-term residential treatment program, a detoxification facility, or an addictions receiving facility; at the site of the crisis by a mobile crisis-response team; or at a hospital on an outpatient basis.

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

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

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

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

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

(14)(10) "Federal funds" means funds from federal sources for <u>substance</u> alcohol, drug abuse, or mental health facilities and programs, exclusive of federal funds that are deemed eligible by the Federal Government, and are eligible through state regulation, for matching purposes.

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

1 (16) "Health and human services board" or "board"
2 means the board within a district or subdistrict of the
3 department which is established in accordance with s. 20.19
4 and designated in this part for the purpose of assessing the
5 substance abuse and mental health needs of the community and
6 developing a plan to address those needs.
7 (17)(12) "Licensed facility" means a facility licensed

 $\underline{(17)}$ "Licensed facility" means a facility licensed in accordance with this chapter.

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

(19) "Managing employee" means the administrator or other similarly titled individual who is responsible for the daily operation of the facility.

- (20) "Mental health services" means those therapeutic interventions and activities that help to eliminate, reduce, or manage symptoms or distress for persons who have severe emotional distress or a mental illness and to effectively manage the disability that often accompanies a mental illness so that the person can recover from the mental illness, become appropriately self-sufficient for his or her age, and live in a stable family or in the community. The term includes the following types of services:
- (a) Treatment services, such as psychiatric medications and supportive psychotherapies, which are intended to reduce or ameliorate the symptoms of severe distress or mental illness.

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

 (c) Support services, which include services that assist individuals in living successfully in environments of
- (c) Support services, which include services that assist individuals in living successfully in environments of their choice. Such services may include income supports, social supports, housing supports, vocational supports, or accommodations related to the symptoms or disabilities associated with mental illness.
- assist individuals in obtaining the formal and informal resources that they need to successfully cope with the consequences of their illness. Resources may include treatment or rehabilitative or supportive interventions by both formal and informal providers. Case management may include an assessment of client needs; intervention planning with the client, his or her family, and service providers; linking the client to needed services; monitoring service delivery; evaluating the effect of services and supports; and advocating on behalf of the client.

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Mental health services may be delivered in a variety of settings, such as inpatient, residential, partial hospital, day treatment, outpatient, club house, or a drop-in or self-help center, as well as in other community settings, such as the client's residence or workplace. The types and intensity of services provided shall be based on the client's

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clinical status and goals, community resources, and preferences. Services such as assertive community treatment involve all four types of services which are delivered by a multidisciplinary treatment team that is responsible for identified individuals who have a serious mental illness.

- (21)(15) "Patient fees" means compensation received by a community substance alcohol, drug abuse, or mental health facility for services rendered to clients from any source of funds, including city, county, state, federal, and private sources.
- (22) "Person who is experiencing an acute mental or emotional crisis" means a child, adolescent, or adult who is experiencing a psychotic episode or a high level of mental or emotional distress which may be precipitated by a traumatic event or a perceived life problem for which the individual's typical coping strategies are inadequate. The term includes an individual who meets the criteria for involuntary examination specified in s. 394.463(1).
- (23) "Person who is experiencing an acute substance abuse crisis" means a child, adolescent, or adult who is experiencing a medical or emotional crisis because of the use of alcoholic beverages or any psychoactive or mood-altering substance. The term includes an individual who meets the criteria for involuntary admission specified in s. 397.675.

(24)(16) "Premises" means those buildings, beds, and facilities located at the main address of the licensee and all other buildings, beds, and facilities for the provision of acute or residential care which are located in such reasonable proximity to the main address of the licensee as to appear to the public to be under the dominion and control of the 31 licensee.

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

- designed to prevent or remediate the consequences of substance abuse, improve an individual's quality of life and self-sufficiency, and support long-term recovery. The term includes the following service categories:
- (a) Prevention services, which include information dissemination; education regarding the consequences of substance abuse; alternative drug-free activities; problem identification; referral of persons to appropriate prevention programs; community-based programs that involve members of local communities in prevention activities; and environmental strategies to review, change, and enforce laws that control the availability of controlled and illegal substances.
- (b) Assessment services, which include the diagnoses, assessment, and evaluation of individuals and families in order to identify their strengths and determine their required level of care, motivation, and need for treatment and ancillary services.
- (c) Intervention services, which include early identification, short-term counseling and referral, and outreach.
- (d) Rehabilitation services, which include residential, outpatient, day or night, case-management, in-home, psychiatric, and medical treatment, and methadone or medication management.
- (e) Ancillary services, which include self-help and other support groups and activities; aftercare provided in a structured, therapeutic environment; supported housing;

supported employment; vocational services; and educational 2 services. 3 (27)(18) "Residential treatment facility" means a 4 facility providing residential care and treatment to 5 individuals exhibiting symptoms of mental illness who are in need of a 24-hour-per-day, 7-day-a-week structured living 6 environment, respite care, or long-term community placement. 7 8 (28)(19) "Service district" means a community service 9 district as established by the department under s. 20.19 for 10 the purpose of providing community substance alcohol, drug 11 abuse, and mental health services. (29)(20) "Service provider" means any agency in which 12 13 all or any portion of the programs or services set forth in s. 394.675 are carried out. 14 Section 7. Section 394.674, Florida Statutes, is 15 created to read: 16 17 394.674 Clinical and financial eligibility for publicly funded substance abuse and mental health services .--18 19 To be eligible to receive substance abuse and mental health services financed by the department, a person 20 21 must: 22 (a) Be assessed by a mental health professional, as defined in s. 394.455(2), s. 394.455(4), s. 394.455(21), s. 23 24 394.455(23), or s. 394.455(24), as a person who is 25 experiencing an acute mental or emotional crisis, as defined in s. 394.67, or be assessed by a substance abuse professional 26 27 under chapter 397 as a person who is experiencing an acute substance abuse crisis, as defined in s. 394.67; 28 29 Be assessed by a mental health professional, as 30 defined in s. 394.455(2), s. 394.455(4), s. 394.455(21), s. 31 394.455(23), or s. 394.455(24), as:

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           1. An adult who has a serious mental illness, as
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    defined in s. 394.67; or
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           2. A child or adolescent who has an emotional
    disturbance, as defined in s. 394.492(5), or who has a serious
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    emotional disturbance or mental illness, as defined in s.
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    394.492(6);
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          (c) Be assessed by a qualified professional, as
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    defined in s. 397.311 or s. 397.416, as:
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           1. An adult who has a substance abuse impairment, as
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    defined in s. 394.67; or
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           2. A child or adolescent who has substance abuse
    problems, as defined in s. 397.93(2); or
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          (d) Be included in a priority client group identified
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    in the Substance Abuse Prevention and Treatment Block Grant,
    Pub. L. No. 102-321.
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              Crisis services, as defined in s. 394.67, must,
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    within the limitations of available state and local matching
    resources, be available to each person who is eligible for
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    services under paragraph (1)(a), regardless of the person's
    ability to pay for such services. A person who is experiencing
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    a mental health crisis and who does not meet the criteria for
    involuntary examination under s. 394.463(1), or a person who
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    is experiencing a substance abuse crisis and who does not meet
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    the involuntary admission criteria in s. 397.675, must
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    contribute to the cost of his or her care and treatment
    pursuant to the sliding fee scale developed under subsection
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    6), unless charging a fee is contraindicated because of the
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    crisis situation.
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              Mental health services, substance abuse services,
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    and crisis services as defined in s. 394.67, must, within the
    limitations of available state and local matching resources,
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be available to each person who is eligible for services under paragraph (1)(b), paragraph (1)(c), or paragraph (1)(d). Such 2 3 person must contribute to the cost of his or her care and treatment pursuant to the sliding fee scale developed under 4 5 subsection (6). 6 (4) If a county matches the appropriate state funds 7 with local funds as required in s. 394.76(3)(b) during any 8 fiscal year, the department must allow that county to spend up to 10 percent of its general revenue funds, federal block 9 10 grant funds, and local matching funds for the next fiscal year 11 on special local needs for substance abuse and mental health services. With these funds, the county may serve children, 12 adolescents, and adults whose mental illness, emotional 13 disturbance, or substance abuse problems do not meet the 14 clinical criteria specified in subsection (1), or persons who 15 are at risk of mental illness, emotional disturbances, or 16 substance abuse problems, as defined in this chapter or 17 chapter 397. The department must provide a description in the 18 19 district substance abuse and mental health plan under s. 394.75 of all client groups that are to receive treatment and 20 21 support services under this subsection, as well as a description of those services. 22 (5) Subsection (4) does not prohibit the department 23 24 from using a portion of federal or state funds allocated for substance abuse treatment for substance-abuse-prevention 25 26 activities. Federal mandates related to 27 substance-abuse-prevention programs must be funded and implemented in accordance with federal requirements. The 28 29 department must describe in the district substance abuse and 30 mental health plan pursuant to s. 394.75 the children,

adolescents, and adults who are at risk of substance abuse

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impairment and the appropriate substance-abuse-prevention services for each population group.

(6) The department shall adopt rules to implement the requirements for clinical and financial eligibility for publicly funded substance abuse and mental health services provided within the department's service districts. The rules must include a sliding fee scale for persons who have a net family income at or above 150 percent of the Federal Poverty Income Guidelines. The sliding fee scale must account for geographic differentials and must use the uniform schedule of discounts by which a provider under contract with the department discounts its established client charges for services supported by state, federal, or local funds, using factors such as family income and family size. The rules must address the most expensive types of treatment, such as residential and inpatient treatment, making it possible for a family to responsibly contribute to a family member's mental health or substance abuse care without jeopardizing the family's financial stability. The rules must specify that the monthly fees assessed to a client who is receiving mental health and substance abuse services financed by state, federal, and local funds may not exceed 10 percent of the family's monthly gross income. A person whose net family income is less than 150 percent of the Federal Poverty Income Guidelines must not be required to pay a portion of his or her treatment costs.

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

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

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

- (1) A community-based system of comprehensive substance alcohol, drug abuse, and mental health services shall be established and shall include as follows:
 - (a) Crisis services.
 - (b) Substance abuse services.
 - (c) Mental health services.
- (a) "Primary care services" are those services which, at a minimum, must be made available in each service district to persons who have acute or chronic mental illnesses, who are acute or chronic drug dependents, and who are acute or chronic alcohol abusers to provide them with immediate care and treatment in crisis situations and to prevent further deterioration or exacerbation of their conditions. services include, but are not limited to, emergency-stabilization services, detoxification services, inpatient services, residential services, and case management services.
- (b) "Rehabilitative services" are those services which are made available to the general population at risk of serious mental health problems or substance abuse problems or which are provided as part of a rehabilitative program. These services are designed to prepare or train persons to function within the limits of their disabilities, to restore previous levels of functioning, or to improve current levels of inadequate functioning. Rehabilitative services include, but are not limited to, outpatient services, day treatment 31 services, and partial hospitalization services.

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1 (c) "Preventive services" are those services which are 2 made available to the general population for the purpose of 3 preventing or ameliorating the effects of alcohol abuse, drug abuse, or mental illness. These services emphasize the 4 5 reduction of the occurrence of emotional disorders, mental 6 disorders, and substance abuse through public education, early 7 detection, and timely intervention. Preventive services 8 include consultation, public education, and prevention 9 services which have been determined through the district planning process to be necessary to complete a continuum of 10 11 services as required by this part and which are included in the district plan. 12 13

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

Section 9. Section 394.74, Florida Statutes, is amended to read:

- 394.74 Contracts for provision of local <u>substance</u> alcohol, drug abuse, and mental health programs.--
- (1) The department, when funds are available for such purposes, is authorized to contract for the establishment and operation of local <u>substance</u> <u>alcohol</u>, <u>drug</u> abuse, and mental health programs with any hospital, clinic, laboratory, institution, or other appropriate service provider.
- (2)(a) Contracts for service shall be consistent with the approved district plan and the service priorities established in s. 394.75(4).
- (b) Notwithstanding s. 394.76(3)(a) and (c), the department may use unit cost methods of payment in contracts for purchasing mental health and substance abuse services. The

unit cost contracting system must account for those patient fees that are paid on behalf of a specific client and those that are earned and used by the provider for those services funded in whole or in part by the department.

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

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

(a) A provision that, within the limits of available resources, <u>substance</u> primary care alcohol, drug abuse, and mental health <u>crisis</u> services, <u>as defined in s. 394.67(8)</u>, shall be available to any individual residing or employed within the service area, regardless of ability to pay for such services, current or past health condition, or any other

factor;

(b) A provision that such services be available with priority of attention being given to individuals who exhibit symptoms of chronic or acute <u>substance</u> alcoholism, drug abuse, or mental illness and who are unable to pay the cost of receiving such services;

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

(d) A program description and line-item operating budget by program service component for <u>substance</u> alcohol, drug abuse, and mental health services, provided the entire proposed operating budget for the service provider will be displayed; and

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- (e) A requirement that the contractor must conform to department rules and the priorities established thereunder.
- The department shall develop standard contract forms for use between the district administrator and community substance alcohol, drug abuse, and mental health service providers.
- (5) Nothing in This part does not prevent prevents any municipality city or county, or combination of municipalities cities and counties, from owning, financing, and operating a substance an alcohol, drug abuse, or mental health program by entering into an arrangement with the district to provide, and be reimbursed for, services provided as part of the district plan.

Section 10. Section 394.75, Florida Statutes, is amended to read:

394.75 District substance alcohol, drug abuse, and mental health plans. --

(1)(a) The district health and human services board planning council shall prepare a combined district substance alcohol, drug abuse, and mental health plan. The plan shall be prepared annually on a biennial basis and shall be reviewed annually and shall reflect both the program priorities established by the department and the needs of the district established under ss. 394.674 and 394.675. The plan shall include a program description and line-item budget by program service component for substance alcohol, drug abuse, and mental health service providers that will receive state funds. The entire proposed operating budget for each service provider shall be displayed. A schedule, format, and procedure for development and review of the plan shall be adopted 31 promulgated by the department.

provided in subsection (9).

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(2) The plan shall: (a) Describe the publicly funded, community-based substance abuse and mental health system of care and identify statutorily defined populations, their service needs, and the

planning council to the district administrator and to the

governing bodies for review, comment, and approval, as

(b) The plan shall be submitted by the district board

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

resources available and required to meet their needs.

- (c) Provide a process for coordinating the delivery of services within a community-based system of care to eligible clients. Such process must involve service providers, clients, and other stakeholders. The process must also provide a means by which providers will coordinate and cooperate to strengthen linkages, achieve maximum integration of services, foster efficiencies in service delivery and administration, and designate responsibility for outcomes for eligible clients.
- (d) (a) Provide a projection of district program and fiscal needs for the next fiscal year biennium, provide for the orderly and economical development of needed services, and indicate priorities, performance outcomes, and anticipated expenditures and revenues.
- (e) (b) Include a summary budget request for the total district substance alcohol, drug abuse, and mental health program, which must shall include the funding priorities established by the district planning process.
- (f)(c) Provide a basis for the district legislative 31 | budget request.

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1 (g)(d) Include a policy and procedure for allocation of funds. 2 3 (h) (e) Include a procedure for securing local matching 4 funds. Such a procedure shall be developed in consultation 5 with governing bodies and service providers. 6 (i) (f) Provide for the integration of substance 7 alcohol, drug abuse, and mental health services with the other 8 departmental programs and with the criminal justice, juvenile justice, child protection, school, and health care systems 9 10 system within the district. 11 (j)(g) Provide a plan for the coordination of services in such manner as to ensure effectiveness and avoid 12 duplication, fragmentation of services, and unnecessary 13 expenditures. 14 (k) (h) Provide for continuity of client care between 15 state treatment facilities and community programs. 16 17 (1)(i) Provide for the most appropriate and economical 18 use of all existing public and private agencies and personnel. 19 (m) $\frac{(j)}{(j)}$ Provide for the fullest possible and most 20 appropriate participation by existing programs; state 21 hospitals and other hospitals; city, county, and state health and family service agencies; drug abuse and alcoholism 22 programs; probation departments; physicians; psychologists; 23 24 social workers; public health nurses; school systems; and all 25 other public and private agencies and personnel that which are required to, or may agree to, participate in the plan. 26 $(n)\frac{(k)}{(k)}$ Include an inventory of all public and private 27 28 substance alcohol, drug abuse, and mental health resources

within the district, including consumer advocacy groups

registered with the department.

1	(3) The plan shall address how substance abuse and
2	mental health primary care services will be provided and how a
3	system of care for target populations continuum of services
4	will be provided given the resources available in the service
5	district. The plan must include provisions for providing
6	clients with access to the most recently developed psychiatric
7	medications approved by the United States Food and Drug
8	Administration, for developing independent housing units
9	through participation in the Section 811 program operated by
10	the United States Department of Housing and Urban Development,
11	for developing supported employment services through the
12	Division of Vocational Rehabilitation of the Department of
13	Labor and Employment Security, and for providing services to
14	adults who have a serious mental illness, as defined in s.
15	394.67, and who reside in assisted-living facilities.
16	(4) The plan shall provide the means by which the
17	needs of the following population groups specified in s.
18	394.674 having priority will be addressed in the district.+
19	(a) Chronic public inebriates;
20	(b) Marginally functional alcoholics;
21	(c) Chronic opiate abusers;
22	(d) Poly-drug abusers;
23	(e) Chronically mentally ill individuals;
24	(f) Acutely mentally ill individuals;
25	(g) Severely emotionally disturbed children and
26	adolescents;
27	(h) Elderly persons at high risk of
28	institutionalization; and
29	(i) Individuals returned to the community from a state
30	mental health treatment facility.
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- (5) In developing the plan, optimum use shall be made of any federal, state, and local funds that may be available for <u>substance</u> alcohol, drug abuse, and mental health service planning. However, the department must provide these services within legislative appropriations.
- subcommittee to prepare the portion of the district plan relating to children and adolescents. The subcommittee shall include representative membership of any committee organized or established by the district to review placement of children and adolescents in residential treatment programs. The board shall establish a subcommittee to prepare the portion of the district plan which relates to adult mental health and substance abuse. The subcommittee must include representatives from the community who have an interest in mental health and substance abuse treatment for adults.
- (7) All departments of state government and all local public agencies shall cooperate with officials to assist them in service planning. Each district administrator shall, upon request and the availability of staff, provide consultative services to the local agency directors and governing bodies.
- (8) The district administrator shall ensure that the district plan:
- (a) Conforms to the priorities in the state plan, the requirements of this part, and the standards adopted under this part;
- (b) Ensures that the most effective and economical use will be made of available public and private <u>substance</u> alcohol, drug abuse, and mental health resources in the service district; and

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- (c) Has adequate provisions made for review and evaluation of the services provided in the service district.
- (9) The district administrator shall require such modifications in the district plan as he or she deems necessary to bring the plan into conformance with the provisions of this part. If the district board planning council and the district administrator cannot agree on the plan, including the projected budget, the issues under dispute shall be submitted directly to the secretary of the department for immediate resolution.
- (10) Each governing body that provides local funds has the authority to require necessary modification to only that portion of the district plan which affects substance alcohol, drug abuse, and mental health programs and services within the jurisdiction of that governing body.
- (11) The district administrator shall report annually to the district <u>board</u> planning council the status of funding for priorities established in the district plan. Each report must include:
- (a) A description of the district plan priorities that were included in the district legislative budget request;
- (b) A description of the district plan priorities that were included in the departmental budget request prepared under s. 20.19; and
- (c) A description of the programs and services included in the district plan priorities that were appropriated funds by the Legislature in the legislative session that preceded the report.
- Section 11. Subsections (3), (4), (8), (9), (10), and (11) of section 394.76, Florida Statutes, are amended to read:

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

- 394.76 Financing of district programs and services .-- If the local match funding level is not provided in the General Appropriations Act or the substantive bill implementing the General Appropriations Act, such funding level shall be provided as follows:
- (3) The state share of financial participation shall be determined by the following formula:
- (a) The state share of approved program costs shall be a percentage of the net balance determined by deducting from the total operating cost of services and programs, as specified in s. 394.675(1), those expenditures which are ineligible for state participation as provided in subsection (7) and those ineligible expenditures established by rule of the department pursuant to s. 394.78.
- (b) Residential and case management services which are funded as part of a deinstitutionalization project shall not require local matching funds and shall not be used as local matching funds. The state and federal financial participation portions of Medicaid earnings pursuant to Title XIX of the Social Security Act, except for the amount of general revenue equal to the amount appropriated in 1985-1986 plus all other general revenue that is shifted from any other alcohol, drug abuse, and mental health appropriation category after fiscal year 1986-1987 or substance abuse and mental health appropriation category after fiscal year 2000-2001, shall not require local matching funds and shall not be used as local matching funds. Local matching funds are not required for general revenue transferred by the department into substance alcohol, drug abuse, and mental health appropriations categories during a fiscal year to match federal funds earned from Medicaid services provided for mental health clients in

excess of the amounts initially appropriated. Funds for children's services which were provided through the Children, Youth, and Families Services budget which did not require local match prior to being transferred to the <u>Substance Alcohol, Drug</u> Abuse, and Mental Health Services budget shall be exempt from local matching requirements. All other contracted community alcohol and mental health services and programs, except as identified in s. 394.457(3), shall require local participation on a 75-to-25 state-to-local ratio.

- (c) The expenditure of 100 percent of all third-party payments and fees shall be considered as eligible for state financial participation if such expenditures are in accordance with subsection (7) and the approved district plan.
- (d) Fees generated by residential and case management services which are funded as part of a deinstitutionalization program and do not require local matching funds shall be used to support program costs approved in the district plan.
- (e) Any earnings pursuant to Title XIX of the Social Security Act in excess of the amount appropriated shall be used to support program costs approved in the district plan.
- (4) Notwithstanding the provisions of subsection (3), the department is authorized to develop and demonstrate alternative financing systems for <u>substance</u> alcohol, drug abuse, and mental health services. Proposals for demonstration projects conducted pursuant to this subsection shall be reviewed by the substantive and appropriations committees of the Senate and the House of Representatives prior to implementation of the projects.
- (8) Expenditures for capital improvements relating to construction of, addition to, purchase of, or renovation of a community substance alcohol, drug abuse, or mental health

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facility may be made by the state, provided such expenditures or capital improvements are part and parcel of an approved district plan. Nothing shall prohibit the use of such expenditures for the construction of, addition to, renovation of, or purchase of facilities owned by a county, city, or other governmental agency of the state or a nonprofit entity. Such expenditures are subject to the provisions of subsection (6).

- (9)(a) State funds for community alcohol and mental health services shall be matched by local matching funds as provided in paragraph (3)(b). The governing bodies within a district or subdistrict shall be required to participate in the funding of alcohol and mental health services under the jurisdiction of such governing bodies. The amount of the participation shall be at least that amount which, when added to other available local matching funds, is necessary to match state funds.
- (b) The provisions of paragraph (a) to the contrary notwithstanding, no additional matching funds may be required solely due to the addition in the General Appropriations Act of Substance Alcohol, Drug Abuse, and Mental Health Block Grant Funds for local community mental health centers and alcohol project grants.
- (10) A local governing body is authorized to appropriate moneys, in lump sum or otherwise, from its public funds for the purpose of carrying out the provisions of this part. In addition to the payment of claims upon submission of proper vouchers, such moneys may also, at the option of the governing body, be disbursed in the form of a lump-sum or advance payment for services for expenditure, in turn, by the 31 recipient of the disbursement without prior audit by the

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auditor of the governing body. Such funds shall be expended only for substance alcohol, drug abuse, or mental health purposes as provided in the approved district plan. governing body appropriating and disbursing moneys pursuant to this subsection shall require the expenditure of such moneys by the recipient of the disbursement to be audited annually either in conjunction with an audit of other expenditures or by a separate audit. Such annual audits shall be furnished to the governing bodies of each participating county and municipality for their examination.

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

Section 12. Subsection (1) of section 394.77, Florida Statutes, is amended to read:

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

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

Section 13. Subsections (2), (3), (4), and (5) of section 394.78, Florida Statutes, are amended to read:

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

(2) The department shall, by rule, establish standards 31 of education and experience for professional and technical

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personnel employed in substance alcohol, drug abuse, and mental health programs.

- (3) The department shall establish, to the extent possible, a standardized auditing procedure for substance alcohol, drug abuse, and mental health service providers; and audits of service providers shall be conducted pursuant to such procedure and the applicable department rules. Such procedure shall be supplied to all current and prospective contractors and subcontractors prior to the signing of any contracts.
- (4) The department shall monitor service providers for compliance with contracts and applicable state and federal regulations. A representative of the district health and human services board planning council shall be represented on the monitoring team.
- In unresolved disputes regarding this part or rules established pursuant to this part, providers and district health and human services boards planning councils shall adhere to formal procedures specified under s. 20.19(8)(n)as provided by the rules established by the department.

Section 14. Section 394.79, Florida Statutes, is amended to read:

- 394.79 State substance alcohol, drug abuse, and mental health plan. --
- (1) The department shall prepare an annual a biennial plan for the delivery and financing of a system of substance alcohol, drug abuse, and mental health services. The plan shall include:
- (a) The current and projected need for substance 31 alcohol, drug abuse, and mental health services, displayed

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30 31 statewide and by district, and the extent to which the need is being addressed by existing services.

- (b) A proposal for the development of a data system that will evaluate the effectiveness of programs and services provided to clients of the <u>substance</u> alcohol, drug abuse, and mental health service system.
- (c) A proposal to resolve the funding discrepancies between districts.
- (d) A methodology for the allocation of resources available from federal, state, and local sources and a description of the current level of funding available from each source.
- (e) A description of the statewide priorities for clients and services and each district's priorities for clients and services.
- (f) Recommendations for methods of enhancing local participation in the planning, organization, and financing of substance alcohol, drug abuse, and mental health services.
- (g) A description of the current methods of contracting for services, an assessment of the efficiency of these methods in providing accountability for contracted funds, and recommendations for improvements to the system of contracting.
- (h) Recommendations for improving access to services by clients and their families.
- (i) Guidelines and formats for the development of district plans.
- (j) Recommendations for future directions for the substance alcohol, drug abuse, and mental health service delivery system.

- consultation with district administrators, state treatment facility administrators, and district planning councils.

 (3) A copy of the state plan shall be submitted to the
- (3) A copy of the state plan shall be submitted to the Legislature and each district planning council. A summary budget request and a summary statement of priorities from each service district shall be attached to the plan.

(2) The department shall prepare the state plan in

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

394.908 <u>Substance</u> <u>Alcohol, drug</u> abuse, and mental health funding equity; distribution of appropriations.—In recognition of the historical inequity among service districts of the former Department of Health and Rehabilitative Services in the funding of <u>substance</u> <u>alcohol, drug</u> abuse, and mental health services, and in order to rectify this inequity and provide for equitable funding in the future throughout the state, the following funding process shall be adhered to, beginning with the 1997-1998 fiscal year:

- (1) Funding thresholds for <u>substance</u> alcohol, drug abuse, and mental health services in each of the current districts, statewide, shall be established based on the current number of persons in need per district <u>of substance</u> for alcohol and drug abuse, and for mental health services, respectively.
- (2) "Persons in need" means those persons who fit the profile of the respective target populations and require mental health or substance abuse services.
- (3) <u>Seventy-five</u> <u>Beginning July 1, 1997, 75</u> percent of any additional funding beyond the 1996-1997 fiscal year base appropriation for alcohol, drug abuse, and mental health

 services shall be allocated to districts $\underline{\text{for substance abuse}}$ and $\underline{\text{mental health services}}$ based on:

- (a) Epidemiological estimates of disabilities which apply to the respective target populations.
- (b) A pro rata share distribution that ensures districts below the statewide average funding level per person in each target population of "persons in need" receive funding necessary to achieve equity.
- (4) The remaining 25 percent shall be allocated based on the number of persons in need of <u>substance</u> alcohol, drug abuse, and mental health services per district without regard to current funding levels.
- (5) Target populations for persons in need shall be displayed for each district and distributed concurrently with the approved operating budget. The display by target population shall show: The annual number of persons served based on prior year actual numbers, the annual cost per person served, the number of persons served by service cost center, and the estimated number of the total target population for persons in need.
- (6) The annual cost per person served shall be defined as the total actual funding for each target population divided by the number of persons served in the target population for that year.
- (7) Commencing on July 1, 1998, all additional funding pursuant to this section shall be performance-based.
- Services shall prepare a master plan every 3 years for implementing a publicly funded, community-based integrated system of care for mental health and substance abuse services throughout the state. The plan must identify strategies for

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meeting the treatment and support needs of children, adolescents, and adults who have, or are at risk of having, mental, emotional, or substance abuse problems as defined in chapter 394 or chapter 397, Florida Statutes. The plan must be updated annually and must include input from persons who represent local communities and stakeholders interested in mental health and substance abuse services. The plan must include statewide policies and planning parameters that will be used by the health and human services boards in preparing the district substance abuse and mental health plans under section 394.75, Florida Statutes. The plan and annual updates must be submitted to the President of the Senate and the Speaker of the House of Representatives on January 1 of each year, beginning January 1, 2001. The initial master plan must include an assessment of the clinical practice guidelines and standards for community-based mental health and substance abuse services delivered by agencies under contract with the Department of Children and Family Services. The assessment must include an inventory of current clinical guidelines and standards used by agencies under contract with the department and by nationally recognized accreditation organizations to address quality of care and must specify additional clinical practice standards and guidelines for new or existing services and programs. The master plan must propose changes in departmental policy or statutory revisions to strengthen the quality of mental health and substance abuse treatment and support services. Section 17. By July 1 of each year, the Department of Children and Family Services shall submit a report to the

Legislature which describes the compliance of providers that

1 services under contract with the Department of Children and 2 Family Services. The report must describe the status of 3 compliance with the annual performance outcome standards 4 established in the General Appropriations Act and must address 5 the providers that meet or exceed performance standards, the 6 providers that did not achieve performance standards for which 7 corrective action measures were developed, and the providers 8 whose contracts were terminated due to failure to meet the 9 requirements of the corrective plan. 10 Section 18. This act shall take effect July 1, 2000. 11 *********** 12 13 SENATE SUMMARY Redesignates part IV of ch. 394, F.S., as "The Community Substance Abuse and Mental Health Services Act." Revises 14 criteria and requirements for the Department of Children 15 and Family Services in providing a community-based system of comprehensive substance abuse and mental health 16 services. Requires that the system include crisis services, substance abuse services, and mental health services. Provides rulemaking authority for the 17 Department of Children and Family Services. Requires that 18 the department establish a sliding fee scale for clients who receive services under the act. Requires that district health and human services boards rather than 19 planning councils prepare substance abuse and mental health plans. Revises the population groups to be addressed in the plans. Requires that the Department of Children and Family Services submit a master plan to the Legislature every 3 years. Requires the department to report to the Legislature annually on the compliance of providers with performance outcome standards. (See bill for details) 20 21 22 23 for details.) 24 25 26