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An act relating to mental health and vocational rehabilitation services; creating pt. VI of ch. 394, F.S., relating to self-directed and family-directed mental health and vocational rehabilitation services; providing a popular name; providing legislative findings and intent; providing definitions; providing a program for selfdirected mental health and vocational rehabilitation services for adults; providing eligibility and other program requirements; providing for statewide and local steering councils; providing authority to request certain federal waivers and to request and use certain grants; providing for transfer of certain funds; providing for ongoing review and annual reports; providing rulemaking authority; providing for a pilot program for familydirected mental health services for children based on the self-directed care program for adults; providing eligibility and other pilot program requirements; providing background screening requirements; providing rulemaking authority; providing for annual reports; providing for future repeal of the pilot program; repealing s. 394.9084, F.S., relating to the pilot project for client-directed and choice-based adult mental health services; providing an effective date.

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

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Section 1 Part VI of chapter 394 Florida Statutes

Section 1. Part VI of chapter 394, Florida Statutes, consisting of sections 394.9501 and 394.9503, Florida Statutes, is created to read:

PART VI

SELF-DIRECTED AND FAMILY-DIRECTED MENTAL HEALTH AND VOCATIONAL REHABILITATION SERVICES

394.9501 Self-directed mental health and vocational rehabilitation services.--

- (1) POPULAR NAME. -- This section may be cited by the popular name the "Florida Self-Directed Care (FloridaSDC) Act."
 - (2) LEGISLATIVE FINDINGS AND INTENT. --

- (a) The Legislature finds that alternatives to traditional assignment of adults with mental health needs to community mental health centers based on geographic location should be encouraged as a function of self-determination. The Legislature finds that alternatives to traditional assignment of adults with mental health needs who are also in need of vocational rehabilitation based on sole-source contracts should be encouraged as a function of self-determination. The Legislature finds that giving adults in need of mental health and vocational rehabilitation services the opportunity to select the services they need and the providers they want enhances their sense of dignity and autonomy. The Legislature also finds that providing adults choice and control, as tested in current research and demonstration projects, has been beneficial and should be developed further and implemented statewide.
- (b) It is the intent of the Legislature to nurture the autonomy of those adult citizens of the state who have psychiatric disabilities by providing access to mental health

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care and vocational rehabilitation services they need in the least restrictive, most integrated setting. It is the intent of the Legislature to give such individuals more choices in and greater control over the purchased mental health care and vocational rehabilitation services they receive.

- (3) DEFINITIONS.--As used in this section, the term:
- (a) "Agency" means the Agency for Health Care Administration.

- (b) "Budget allowance" means the amount of money made available to a participant to purchase needed mental health care and vocational rehabilitation services, based on the results of a needs assessment.
- (c) "Department" means the Department of Children and Family Services.
- (d) "Division" means the Division of Vocational Rehabilitation of the Department of Education.
- (e) "Fiscal intermediary" means an entity approved by the department that helps the participant manage his or her budget allowances.
- (f) "Participant" means a person 18 years of age or older who has chosen to participate in the program, who has met the enrollment requirements, and who has received approved budget allowances.
- (g) "Provider" means a person licensed or otherwise
 permitted to render services eligible for reimbursement under
 this program for whom the participant is not the employer of
 record.

(h) "Recovery coach" means an individual who provides technical assistance to participants in meeting their responsibilities under this section.

- (i) "Self-determination" refers to a mechanism to fiscally allow the money to follow the individual to allow the opportunity for freedom of choice in what is necessary to purchase to recover from a mental illness, emotional disturbance, or behavioral problem and to seek vocational rehabilitation services that best fit the individual's needs.
 - (4) SELF-DIRECTED CARE.--

- (a) Program established.—The department shall establish the self-directed care (FloridaSDC) program for adults, which shall be based on the principles of participant choice and control. The department shall establish interagency cooperative agreements with and shall work with the agency, the division, and the Social Security Administration to implement and administer the program. The program shall allow enrolled persons the opportunity to choose the providers of services and to direct the delivery of services to best meet their mental health care and vocational rehabilitation needs. The department shall operate the program within the funds appropriated by the Legislature and funds obtained through agency, division, and department waivers.
 - (b) Eligibility and enrollment. --
- 1. The target populations for the program are adults with a severe and persistent mental illness. An adult with a severe and persistent mental illness means a person who is age 18 or older, has a diagnosis or diagnostic impression of Axis I or Axis II mental disorder, and:

a. Receives supplemental security income (SSI) due to psychiatric disability;

- b. Receives social security disability income (SSDI) due to psychiatric disability;
- c. Receives disabled veterans income due to psychiatric disability;
- d. Receives any other type of disability income due to psychiatric disability;
- <u>e. Receives social security income for reasons other than</u>
 psychiatric disability and does not need, is unable to apply, or
 refuses to apply for disability income;
- f. Does not receive disability income due to psychiatric disability, but has an application in process or has received such income within the last 5 years; or
 - g. Is legally competent to direct his or her own affairs.
- 2. Participants must be permanent residents of the district or subdistrict in which the program they participate in is located.
- (c) Budget allowances.--Participants enrolled in the program shall be given quarterly budget allowances based on the average cost to serve a similar individual in the district or subdistrict of service for the previous fiscal year. These allowances shall be paid on an annual prepaid case rate to the fiscal intermediary for management purposes. Budget allowances shall be managed on behalf of participants by a fiscal intermediary approved by the department. The department shall develop purchasing guidelines, subject to approval of the agency and the division, to assist participants in using the budget allowances to purchase needed, cost-effective services. Funding

for budget allowances shall come through department funding,
agency funds obtained through any waiver of s. 1115 of the

Social Security Act, 42 U.S.C. s. 1315, or division funds
obtained through any special vocational rehabilitation waiver.

- (d) Services.--Participants shall use budget allowances only to pay for community-based services that meet the participant's mental health care and vocational rehabilitation needs and are a cost-efficient use of funds. The department, the agency, and the division, in collaboration with the statewide steering councils, shall develop purchasing guidelines that may be adjusted with approval to meet the needs of each district and subdistrict.
- (e) Participant roles and responsibilities.--Participants shall be allowed to choose the providers of services, as well as when and how the services are provided. The roles and responsibilities of a participant include, but are not limited to, the following:
- 1. Communicating needs, preferences, and expectations about services being purchased.
 - 2. Ending the services of an unsatisfactory provider.
- 3. Providing the fiscal agent with all information necessary for provider payments.
- (f) Department roles and responsibilities.--The roles and responsibilities of the department set forth in this section include, but are not limited to, the following:
- 1. Adhering to the original intent of the pilot project created pursuant to chapter 2001-152, Laws of Florida, and maintaining fidelity to the original model that was developed and implemented as a result of that chapter law.

2. Assessing each participant's mental health care and vocational rehabilitation needs, helping with the service plan, and providing ongoing support with the service plan.

- 3. Approving the fiscal intermediary. The fiscal intermediary may not be a provider of behavioral health care services.
- 4. Establishing the minimum qualifications for all providers and being the final arbiter of the fitness of any individual to be a provider.
- 5. Establishing, at the beginning of each fiscal year, the number of available slots in the program for each district.

 Based on the number of slots for each district, the department shall contract with the fiscal intermediary on an annual prepaid case rate that is based on the previous year's average cost to provide department-funded mental health services, agency-funded mental health services, and division-funded vocational rehabilitation services. The number of slots available each fiscal year shall be evaluated and adjusted based on consumer demand. Participants may enroll and disenroll at any time during the course of the fiscal year; however, the number of available slots in the program within each district may not be changed until the beginning of each fiscal year.
- (g) Fiscal intermediary roles and responsibilities.--The roles and responsibilities of the fiscal intermediary include, but are not limited to, the following:
 - 1. Providing recordkeeping and fiscal processing services.
- 2. Retaining the participant-directed care funds, processing provider enrollment information, if any, reviewing

HB 0727 2004 records to ensure correctness, writing checks to providers, and

200 maintaining district-level service staff.

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3. Employing recovery coaches who shall provide training, technical assistance, and support to the participant. The fiscal intermediary may not provide direct services to participants beyond those provided by the recovery coaches.

(5) STEERING COUNCILS. -- A statewide steering council shall quide the program. Local steering councils shall quide the program in each district and subdistrict. The statewide steering council and each local steering council shall be composed of at least 11 program participants and 9 family members. Only program participants and family members are eliqible to serve on a statewide or local steering council. Providers of behavioral health care services are not eligible to serve on any steering council. Each local steering council shall adopt and be governed by bylaws and shall have a single seat on the statewide steering council. The department, the agency, the division, and the fiscal intermediary shall, after consultation with local advocacy groups in each district or subdistrict, establish requirements regarding the number of programs to be offered within a district or subdistrict. Although the statewide and local steering councils will not have financial management responsibility for the program, each council shall function as a stakeholder in each program in which it is involved. The department, agency, and division must consider and respond to all requests and recommendations from the local steering council in each district's or subdistrict's programs. The department has final authority on and responsibility for operation of the program.

(6) FEDERAL WAIVERS; GRANTS.--

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- (a) The department shall take all necessary action to ensure state compliance with federal regulations. The department, the agency, and the division shall apply for any federal waiver or waiver amendment necessary to implement the program. At minimum, the agency, in collaboration with the department, shall seek a waiver of s. 1115 of the Social Security Act, 42 U.S.C. s. 1315; the department shall seek a Supplemental Security Administration (SSA) waiver; and the division, in collaboration with the department, shall seek a vocational rehabilitation waiver based on the fiscal principles of self-determination.
- (b) The department may apply for and use any funds from private, state, and federal grants provided for self-directed care, voucher, and self-determination programs, including those providing substance abuse and mental health care. Such funds may only be used as specified in the grants.
- (c) The approval of all waivers is not required for implementation and operation of the program, but the program may not provide services for which a waiver is required without getting approval for that waiver.
- (7) FUNDS TRANSFER. -- The department may transfer funds allocated to substance abuse and mental health services to the fiscal intermediary based on the average cost of service in the previous fiscal year for each district for every participant enrolled in the program. The funds the department, agency, and division transfer each year shall be a prepaid case rate based on the previous year's annual average cost to serve in each district. The funds transferred shall also be based on the

HB 0727 2004 number of slots in the program allocated for each district each

258 <u>year.</u>

2.84

- (8) REVIEWS AND REPORTS.--The department, the agency, and the division shall each, on an ongoing basis, review and assess the implementation of the program. By January 31 of each year, the department shall submit a written report to the chairs of the appropriate substantive committees of the Legislature that includes review of the program by the department, the agency, and the division and contains recommendations for improvements to the program. The department shall administer all three waivers through the interagency agreements established pursuant to paragraph (4)(a).
- (9) RULES.--The department, the agency, and the division are authorized to adopt and enforce rules pursuant to ss.

 120.536(1) and 120.54 necessary to implement and administer this section. The statewide steering council must review and approve such rules prior to their being proposed for adoption.

394.9503 Family-directed care (FloridaFDC) pilot program.--

(1) The Department of Children and Family Services shall develop a family-directed care (FloridaFDC) pilot program in a district selected by the department. The pilot program shall provide mental health treatment and support services to children who are at risk of emotional disturbance or who have an emotional disturbance or a serious emotional disturbance. The program shall be organized and operated in the same manner as the self-directed care (FloridaSDC) program established under s. 394.9501. The department may use for the pilot program any funds of the FloridaSDC program secured from grants provided for

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286 substance abuse and mental health care that are restricted to
287 services for children.

- (2) The target populations for the FloridaFDC program shall be children who are at risk of emotional disturbance or who have an emotional disturbance or a serious emotional disturbance. The child must be living at home with his or her family in order to participate in the pilot program.
- (a) A child at risk of emotional disturbance is a person under 18 years of age who is currently referred for placement in a program for students with emotional handicaps in accordance with the Individuals with Disabilities Education Act.
- (b) A child with an emotional disturbance means a child who meets one of the following criteria:
- 1. Has a diagnosis listed in the Diagnostic and
 Statistical Manual of the American Psychiatric Association and a
 Children's Global Assessment Scale score of 51-60.
- 2. Is currently classified as a student with an emotional handicap by a local school district.
- (c) A child with a serious emotional disturbance is a person under 18 years of age who meets one of the following criteria:
- 1. Has a diagnosis of schizophrenia or other psychotic disorder, major depression, mood disorder, or personality disorder.
- 2. Has a diagnosis listed in the Diagnostic and
 Statistical Manual of the American Psychiatric Association and a
 Children's Global Assessment Scale score of 50 or below.
- 3. Is currently classified as a student with serious emotional disturbance by a local school district.

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4. Is currently receiving supplemental security income benefits for a psychiatric disability.

- (3) The following children are not eligible to participate in the pilot program:
- (a) Children who are in the custody of the Department of Children and Family Services.
- (b) Children with a primary diagnosis of developmental disability, pervasive developmental disorder, substance abuse, communication disorder, learning disorder, or autism.
- (4) All persons who render care to children under this section must comply with the requirements of s. 435.05. Persons shall be excluded from employment pursuant to s. 435.06. Persons excluded from employment may request an exemption from disqualification, as provided in s. 435.07. Persons not subject to certification or professional licensure may request an exemption from the Department of Children and Family Services. In considering a request for an exemption, the department shall comply with the provisions of s. 435.07. For purposes of this section, a person who has undergone screening, who is qualified for employment under this section and applicable rule, and who has not been unemployed for more than 180 days following such screening is not required to be rescreened. Such person must attest under penalty of perjury to not having been convicted of a disqualifying offense since completing such screening.
- (5) The Department of Children and Family Services may adopt rules pursuant to ss. 120.536(1) and 120.54 necessary to implement the provisions of this section.
- (6) The Department of Children and Family Services shall submit a report concerning the progress of the pilot program to

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344	the appropriate legislative committees by December 1 of each	
845	year of the pilot program.	
346	(7) This section is repealed July 1, 2008.	
347	Section 2. Section 394.9084, Florida Statutes, is	
848	repealed.	
349	Section 3. This act shall take effect July 1, 2004.	