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Proposed Committee Substitute by the Committee on Health and Human Services Appropriations

A bill to be entitled

An act relating to funding for social services; amending s. 394.457, F.S.; deleting provisions authorizing a reimbursement rate of 100 percent by the Department of Children and Family Services for certain services provided under the Baker Act; amending s. 394.908, F.S.; revising the methodology for distributing funds for certain substance abuse and mental health services; repealing s. 402.33(10), F.S., relating to provisions authorizing the use of certain excess funds for nonrecurring expenditures incurred in providing direct client services and for certain administrative costs; amending s. 409.1671, F.S.; revising provisions requiring that a statewide risk pool be established for community-based providers, their subcontractors, and providers of other social services who contract with the Department of Children and Family Services; requiring that the department develop a plan, in consultation with the Florida Coalition for Children, Inc., regarding the long-term use and structure of the risk pool; deleting certain restrictions governing payments for insolvency; authorizing the department to issue an interest-free loan to the Florida Coalition for Children, Inc.; 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. Subsection (3) of section 394.457, Florida Statutes, is amended to read:

394.457 Operation and administration.--

(3) POWER TO CONTRACT. -- The department may contract to provide, and be provided with, services and facilities in order to carry out its responsibilities under this part with the following agencies: public and private hospitals; receiving and treatment facilities; clinics; laboratories; departments, divisions, and other units of state government; the state colleges and universities; the community colleges; private colleges and universities; counties, municipalities, and any other governmental unit, including facilities of the United States Government; and any other public or private entity which provides or needs facilities or services. Baker Act funds for community inpatient, crisis stabilization, short-term residential treatment, and screening services must be allocated to each county pursuant to the department's funding allocation methodology. Notwithstanding the provisions of s. 287.057(5)(f), contracts for community-based Baker Act services for inpatient, crisis stabilization, short-term residential treatment, and screening provided under this part, other than those with other units of government, to be provided for the department must be awarded using competitive sealed bids when the county commission of the county receiving the services makes a request to the department's district office by January 15 of the contracting year. The district shall not enter into a competitively bid contract under this provision if such action will result in increases of state or local expenditures for Baker Act services within the district. Contracts for these Baker Act services using competitive 31 sealed bids will be effective for 3 years. Services contracted Bill No. SB 398

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for by the department may be reimbursed by the state at a rate up to 100 percent. The department shall adopt rules establishing minimum standards for such contracted services and facilities and shall make periodic audits and inspections to assure that the contracted services are provided and meet the standards of the department.

Section 2. Section 394.908, Florida Statutes, is amended to read:

394.908 Substance 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 substance abuse and mental health services for the districts and region, and in order to rectify this inequity and provide for equitable funding in the future throughout the state, the following funding process shall be used adhered to:

- (1) Funding thresholds for substance 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 of substance abuse and 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) Seventy-five percent of Any additional funding beyond the 2005-2006 1996-1997 fiscal year base appropriation for alcohol, drug abuse, and mental health services shall be allocated to districts for substance abuse and mental health services based on:
- (a) Epidemiological estimates of disabilities that 31 which apply to the respective target populations.

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(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 substance abuse and mental health services per district without regard to current funding levels.

(4) (4) 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.

(5) (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.

(8) For fiscal year 2004-2005 only, and notwithstanding the provisions of this section, all new funds received in excess of fiscal year 2003-2004 recurring appropriations shall be allocated in accordance with the provisions of the General Appropriations Act; however, no district shall receive an allocation of recurring funds less than its initial approved operating budget, plus any distributions of lump sum appropriations or reductions in 31 unfunded budget, for fiscal year 2003-2004. This subsection

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1	expires July 1, 2005.
2	Section 3. Subsection (10) of section 402.33, Florida
3	Statutes, is repealed.
4	Section 4. Subsection (7) of section 409.1671, Florida
5	Statutes, is amended to read:
6	409.1671 Foster care and related services;
7	outsourcing
8	(7) The Florida Coalition for Children, Inc., in
9	consultation with The department, shall develop a plan, in
10	consultation with the Florida Coalition for Children, Inc.,
11	based on an independent actuarial study regarding the
12	long-term use and structure of a statewide community-based
13	care risk pool for the protection of eligible lead
14	community-based providers, their subcontractors, and providers
15	of other social services who contract directly with the
13	of other social services who contract directly with the
16	department The plan must also outline strategies to maximize
16 17	department. The plan must also outline strategies to maximize
17	federal earnings as they relate to the community-based care
17 18	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of
17 18 19	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be
17 18 19 20	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the
17 18 19 20 21	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to
17 18 19 20 21 22	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General
17 18 19 20 21 22 23	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps
17 18 19 20 21 22 23 24	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps to ensure the financial integrity and industry-standard risk
17 18 19 20 21 22 23 24 25	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps to ensure the financial integrity and industry-standard risk management practices of the community-based care risk pool and
17 18 19 20 21 22 23 24 25 26	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps to ensure the financial integrity and industry-standard risk management practices of the community-based care risk pool and the continued availability of funding from federal, state, and
17 18 19 20 21 22 23 24 25 26 27	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps to ensure the financial integrity and industry-standard risk management practices of the community-based care risk pool and the continued availability of funding from federal, state, and local sources. The plan must also include recommendations that
17 18 19 20 21 22 23 24 25 26 27 28	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps to ensure the financial integrity and industry-standard risk management practices of the community-based care risk pool and the continued availability of funding from federal, state, and local sources. The plan must also include recommendations that permit the program to be available to entities of the
17 18 19 20 21 22 23 24 25 26 27 28 29	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps to ensure the financial integrity and industry-standard risk management practices of the community-based care risk pool and the continued availability of funding from federal, state, and local sources. The plan must also include recommendations that permit the program to be available to entities of the department providing child welfare services until full
17 18 19 20 21 22 23 24 25 26 27 28	federal earnings as they relate to the community-based care risk pool. At a minimum, the plan must allow for the use of federal earnings received from child welfare programs to be allocated to the community-based care risk pool by the department, which earnings are determined by the department to be in excess of the amount appropriated in the General Appropriations Act. The plan must specify the necessary steps to ensure the financial integrity and industry-standard risk management practices of the community-based care risk pool and the continued availability of funding from federal, state, and local sources. The plan must also include recommendations that permit the program to be available to entities of the

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28 29 Office of the Governor and the Legislative Budget Commission for formal adoption before January 1, 2005. Upon approval of the plan, the department may expend funds from the risk pool pursuant to the provisions of the plan. by all parties, the department shall issue an interest-free loan that is secured by the cumulative contractual revenue of the community-based care risk pool membership, and the amount of the loan shall equal the amount appropriated by the Legislature for this purpose. The plan shall provide for a governance structure that assures the department the ability to oversee the operation of the community-based care risk pool at least until this loan is repaid in full.

- (a) The purposes for which the community-based care risk pool shall be used include, but are not limited to:
- 1. Significant changes in the number or composition of clients eligible to receive services.
- 2. Significant changes in the services that are eligible for reimbursement.
- 3. Scheduled or unanticipated, but necessary, advances to providers or other cash-flow issues.
- 4. Proposals to participate in optional Medicaid services or other federal grant opportunities.
 - 5. Appropriate incentive structures.
- 6. Continuity of care in the event of failure, discontinuance of service, or financial misconduct by a lead agency.
- 7. Payment for time-limited technical assistance and consultation to lead agencies in the event of serious performance or management problems.
- 8. Payment for meeting all traditional andnontraditional insurance needs of eligible members.

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9. Significant changes in the mix of available funds.

(b) After approval of the plan in the 2004-2005 fiscal year and annually thereafter, the department may also request in its annual legislative budget request, and the Governor may recommend, that the funding necessary to carry out paragraph (a) be appropriated to the department. Subsequent funding of the community-based care risk pool shall be supported by premiums assessed to members of the community-based care risk pool on a recurring basis. The community-based care risk pool may invest and retain interest earned on these funds. In addition, the department may transfer funds to the community-based care risk pool as available in order to ensure an adequate funding level if the fund is declared to be insolvent and approval is granted by the Legislative Budget Commission. Such payments for insolvency shall be made only after a determination is made by the department or its actuary that all participants in the community-based care risk pool are current in their payments of premiums and that assessments have been made at an actuarially sound level. Such payments by participants in the community-based care risk pool may not exceed reasonable industry standards, as determined by the actuary. Money from this fund may be used to match available federal dollars. Dividends or other payments, with the exception of legitimate claims, may not be paid to members of the community-based care risk pool until the loan issued by the department is repaid in full. Dividends or other payments, with the exception of legitimate claims and other purposes contained in the approved plan, may not be paid to members of the community-based care risk pool unless, at the time of distribution, the community-based care risk pool is deemed 31 actuarially sound and solvent. Solvency shall be determined by

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an independent actuary contracted by the department. The plan shall be developed in consultation with the Office of Insurance Regulation.

- 1. Such funds shall constitute partial security for contract performance by lead agencies and shall be used to offset the need for a performance bond. Subject to the approval of the plan, the community-based care risk pool shall be managed by the Florida Coalition for Children, Inc., or the designated contractors of the Florida Coalition for Children, Inc. Nonmembers of the community-based care risk pool may continue to contract with the department but must provide a letter of credit equal to one-twelfth of the annual contract amount in lieu of membership in the community-based care risk pool.
- 2. The department may separately require a bond to mitigate the financial consequences of potential acts of malfeasance, misfeasance, or criminal violations by the provider.
- (c) The department may issue an interest-free loan to the Florida Coalition for Children, Inc., for the purpose of creating a self-insurance program. Such loan shall be secured by the cumulative contractual revenue of the community-based care lead agencies participating in the self-insurance program. The amount of the loan shall be in an amount equal to the amount appropriated by the Legislature for this purpose.

Section 5. This act shall take effect July 1, 2006.