${\bf By}$ the Committees on Health Regulation; and Children, Families, and Elder Affairs

588-2372-07

1	A bill to be entitled
2	An act relating to mental health and substance
3	abuse services; creating s. 394.4996, F.S.;
4	authorizing the Department of Children and
5	Family Services to establish facilities that
6	provide services as an integrated adult mental
7	health crisis stabilization unit and addictions
8	receiving facility; requiring licensure;
9	providing eligibility criteria for treatment
10	services; requiring the department to adopt
11	rules; amending s. 409.906, F.S.; eliminating
12	the requirement that providers of mental health
13	or substance abuse services must be under
14	contract with the department; providing an
15	effective date.
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17	Be It Enacted by the Legislature of the State of Florida:
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19	Section 1. Section 394.4996, Florida Statutes, is
20	created to read:
21	394.4996 Integrated adult mental health crisis
22	stabilization and addictions receiving facilities
23	(1) Beginning July 1, 2007, the Department of Children
24	and Family Services, in consultation with the Agency for
25	Health Care Administration, is authorized to establish
26	facilities that integrate services provided in an adult mental
27	health crisis stabilization unit with services provided in an
28	addictions receiving facility. The facilities providing such
29	integrated services shall be licensed as an adult crisis
30	stabilization unit as provided under part IV, and shall meet
31	all licensure requirements for such units.

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

1	(2) An integrated mental health crisis stabilization
2	unit and addictions receiving facility may provide services
3	under this section to adults, 18 years of age or older, who
4	fall into one or more of the following categories:
5	(a) An adult meeting the requirements for voluntary
6	admission for mental health treatment under s. 394.4625.
7	(b) An adult meeting the criteria for involuntary
8	examination for mental illness under s. 394.463.
9	(c) An adult qualifying for voluntary admission for
10	substance abuse treatment under s. 397.601.
11	(d) An adult meeting the criteria for involuntary
12	admission for substance abuse impairment under s. 397.675.
13	(3) The department, in consultation with the agency,
14	shall adopt by rule standards that address eligibility
15	criteria; clinical procedures; staffing requirements;
16	operational, administrative, and financing requirements; and
17	the investigation of complaints. Standards that are
18	implemented specific to substance abuse treatment services
19	shall meet or exceed existing standards for addiction
20	receiving facilities.
21	Section 2. Paragraph (a) of subsection (8) of section
22	409.906, Florida Statutes, is amended to read:
23	409.906 Optional Medicaid servicesSubject to
24	specific appropriations, the agency may make payments for
25	services which are optional to the state under Title XIX of
26	the Social Security Act and are furnished by Medicaid
27	providers to recipients who are determined to be eligible on
28	the dates on which the services were provided. Any optional
29	service that is provided shall be provided only when medically
30	necessary and in accordance with state and federal law.
31	Optional services rendered by providers in mobile units to

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Medicaid recipients may be restricted or prohibited by the agency. Nothing in this section shall be construed to prevent or limit the agency from adjusting fees, reimbursement rates, lengths of stay, number of visits, or number of services, or making any other adjustments necessary to comply with the availability of moneys and any limitations or directions provided for in the General Appropriations Act or chapter 216. If necessary to safeguard the state's systems of providing services to elderly and disabled persons and subject to the notice and review provisions of s. 216.177, the Governor may direct the Agency for Health Care Administration to amend the Medicaid state plan to delete the optional Medicaid service known as "Intermediate Care Facilities for the Developmentally Disabled." Optional services may include:

- (8) COMMUNITY MENTAL HEALTH SERVICES. --
- (a) The agency may pay for rehabilitative services provided to a recipient by a mental health or substance abuse provider under contract with the agency or the Department of Children and Family Services to provide such services. services which are psychiatric in nature shall be rendered or recommended by a psychiatrist, and those services which are medical in nature shall be rendered or recommended by a physician or psychiatrist. The agency must develop a provider enrollment process for community mental health providers which bases provider enrollment on an assessment of service need. The provider enrollment process shall be designed to control costs, prevent fraud and abuse, consider provider expertise and capacity, and assess provider success in managing utilization of care and measuring treatment outcomes. Providers will be selected through a competitive procurement or selective contracting process. In addition to other

1	community mental health providers, the agency shall consider
2	for enrollment of mental health programs licensed under
	
3	chapter 395 and group practices licensed under chapter 458,
4	chapter 459, chapter 490, or chapter 491. The agency is also
5	authorized to continue operation of its behavioral health
6	utilization management program and may develop new services if
7	these actions are necessary to ensure savings from the
8	implementation of the utilization management system. The
9	agency shall coordinate the implementation of this enrollment
10	process with the Department of Children and Family Services
11	and the Department of Juvenile Justice. The substance abuse
12	and mental health program of the Department of Children and
13	Family Services shall participate with the agency in the
14	assessment of service needs and program development. The
15	agency is authorized to utilize diagnostic criteria in setting
16	reimbursement rates, to preauthorize certain high-cost or
17	highly utilized services, to limit or eliminate coverage for
18	certain services, or to make any other adjustments necessary
19	to comply with any limitations or directions provided for in
20	the General Appropriations Act.
21	Section 3. This act shall take effect upon becoming a
22	law.
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24	STATEMENT OF SUBSTANTIAL CHANGES CONTAINED IN
25	COMMITTEE SUBSTITUTE FOR <u>Senate Bill 2868</u>
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27	The committee substitute removes the section of the bill that
28	would have made changes to the medical review committee statutes (s. 766.101, F.S.)
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