

Amendment No.

CHAMBER ACTION

Senate

House

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1 Representative Gardiner offered the following:

3 **Amendment (with title amendment)**

4 Remove everything after the enacting clause and insert:

5 Section 1. This act may be cited as the "Window of
6 Opportunity Act."

7 Section 2. Subsection (18) is renumbered as subsection
8 (19) of section 391.026, Florida Statutes, and a new subsection
9 (18) is added to that section to read:

10 391.026 Powers and duties of the department.--The
11 department shall have the following powers, duties, and
12 responsibilities:

13 (18) To provide services under contract to the Florida
14 Healthy Kids Corporation for Florida Healthy Kids benefit plans.
15 Children served under this contract are not enrollees of the
16 Children's Medical Services program component of the Florida

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17 Kidcare program funded under Title XIX or Title XXI of the
18 Social Security Act.

19 Section 3. Subsections (13) through (40) of section
20 393.063, Florida Statutes, are renumbered as subsections (14)
21 through (41), respectively, subsection (9) is amended, and a new
22 subsection (13) is added to that section, to read:

23 393.063 Definitions.--For the purposes of this chapter,
24 the term:

25 (9) "Developmental disability" means a disorder or
26 syndrome that is attributable to retardation, cerebral palsy,
27 autism, spina bifida, Down syndrome, or Prader-Willi syndrome;
28 that manifests before the age of 18; and that constitutes a
29 substantial handicap that can reasonably be expected to continue
30 indefinitely.

31 (13) "Down syndrome" means a genetic disorder caused by
32 the presence of extra chromosomal material on chromosome 21.
33 Causes of the syndrome may include Trisomy 21, Mosaicism,
34 Robertsonian Translocation, and other duplications of a portion
35 of chromosome 21.

36 Section 4. Subsections (6), (7), (8), (9), (10), (11),
37 (12), (13), (14), (15), (16), (17), (18), (19), (20), (21),
38 (22), (23), (24), (25), and (26) of section 409.811, Florida
39 Statutes, are renumbered as subsections (7), (8), (9), (10),
40 (11), (12), (13), (14), (15), (16), (17), (18), (19), (20),
41 (21), (22), (23), (24), (25), (26), and (27), respectively, and
42 a subsection (6) is added to that section, to read:

43 409.811 Definitions relating to Florida Kidcare Act.--As
44 used in ss. 409.810-409.820, the term:

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45 (6) "Autism spectrum disorder" means any of the following
46 disorders as defined with most recent edition of the Diagnostic
47 and Statistical Manual of Mental Disorders of the American
48 Psychiatric Association:

- 49 1. Autistic disorder;
50 2. Asperger syndrome; or
51 3. Pervasive developmental disorder not otherwise
52 specified.

53 Section 5. Subsection (7) of section 409.8132, Florida
54 Statutes, is amended to read:

55 409.8132 Medikids program component.--

56 (7) ENROLLMENT.--Enrollment in the Medikids program
57 component may occur at any time throughout the year. A child may
58 not receive services under the Medikids program until the child
59 is enrolled in a managed care plan or MediPass. Once determined
60 eligible, an applicant may receive choice counseling and select
61 a managed care plan or MediPass. The agency may initiate
62 mandatory assignment for a Medikids applicant who has not chosen
63 a managed care plan or MediPass provider after the applicant's
64 voluntary choice period ends; however, the agency shall ensure
65 that family members are assigned to the same managed care plan
66 or the same MediPass provider to the greatest extent possible,
67 including situations in which some family members are enrolled
68 in Medicaid and other family members are enrolled in a Title
69 XXI-funded component of the Florida Kidcare program. An
70 applicant may select MediPass under the Medikids program
71 component only in counties that have fewer than two managed care
72 plans available to serve Medicaid recipients and only if the

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73 federal Health Care Financing Administration determines that
74 MediPass constitutes "health insurance coverage" as defined in
75 Title XXI of the Social Security Act.

76 Section 6. Subsection (2) of section 409.8134, Florida
77 Statutes, is amended, and subsection (5) is added to that
78 section, to read:

79 409.8134 Program expenditure ceiling.--

80 (2) Open enrollment periods shall consist of:

81 (a) Enrollment for premium assistance.--The Florida
82 Kidcare program may conduct enrollment at any time throughout
83 the year for the purpose of enrolling children eligible for all
84 program components listed in s. 409.813 except Medicaid. The
85 four Florida Kidcare administrators shall work together to
86 ensure that the year-round enrollment period is announced
87 statewide. Eligible children for premium assistance shall be
88 enrolled on a first-come, first-served basis using the date the
89 enrollment application is received. Enrollment shall immediately
90 cease when the expenditure ceiling is reached. Year-round
91 enrollment for premium assistance shall only be held if the
92 Social Services Estimating Conference determines that sufficient
93 federal and state funds will be available to finance the
94 increased enrollment ~~through federal fiscal year 2007~~. Any
95 individual who is not enrolled must reapply by submitting a new
96 application. The application for the Florida Kidcare program
97 shall be valid for a period of 120 days after the date it was
98 received. At the end of the 120-day period, if the applicant has
99 not been enrolled in the program, the application shall be
100 invalid and the applicant shall be notified of the action. The

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101 applicant may reactivate ~~resubmit~~ the application after
102 notification of the action taken by the program. Except for the
103 Medicaid program, whenever the Social Services Estimating
104 Conference determines that there are presently, or will be by
105 the end of the current fiscal year, insufficient funds to
106 finance the current or projected enrollment in the Florida
107 Kidcare program, all additional enrollment must cease and
108 additional enrollment may not resume until sufficient funds are
109 available to finance such enrollment.

110 (b) Open enrollment without premium assistance, effective
111 July 1, 2009.--

112 1. Effective July 1, 2009, an open enrollment period for
113 the Florida Healthy Kids program for those enrollees not
114 eligible for premium assistance may be held once each fiscal
115 year and may not exceed 30 consecutive calendar days in length.
116 The timing and length of any open enrollment period shall be
117 determined by the Florida Healthy Kids Corporation. Applicants
118 shall be enrolled on a first come, first served basis, based
119 upon the date the application was received. During the 2009-2010
120 fiscal year, the effective date for new enrollees without
121 premium assistance shall be October 1, 2009. However, for a
122 child who has had his or her coverage in an employer-sponsored
123 or private health benefit plan voluntarily canceled in the last
124 90 days and who is otherwise eligible to participate without
125 premium assistance the effective date of coverage shall be the
126 end of the 90-day period or October 1, 2009, whichever is later.

127 2. The following individuals are not subject to the open
128 enrollment period:

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129 a. Enrollees in any Florida Kidcare program component that
130 are determined to be no longer eligible under that component due
131 to changes in income or age. These enrollees may transfer to the
132 Healthy Kids program if such transfer is initiated within 30
133 days after the loss of such eligibility.

134 b. Applicants that have adopted a child in the state.

135 c. Applicants who have had employer-sponsored or private
136 health insurance involuntarily canceled within 30 days prior to
137 submission of the application.

138 3. Any individual who is not enrolled under this
139 subsection must reapply by submitting a new application during
140 the next open enrollment period. The application for the Florida
141 Kidcare program without premium assistance shall be valid for
142 the period of the open enrollment.

143 (5) Effective October 1, 2009, upon determination by the
144 Social Service Estimating Conference, in consultation with the
145 agency and the Florida Healthy Kids Corporation, that enrollment
146 of children whose family income exceeds 200 percent of the
147 federal poverty level is projected to raise overall premiums per
148 enrollee by greater than 5 percent of current average premiums
149 in the Florida Healthy Kids plans, the board of directors of the
150 Florida Healthy Kids Corporation may, with the concurrence of
151 the agency, take appropriate actions to reduce the projected
152 cost below the projected 5 percent increase. Actions the board
153 may take may include, but are not limited to:

154 (a) Reducing habilitative and behavior analysis benefits
155 to enrollees who are receiving these services.

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156 (b) Eliminating habilitative and or behavior analysis
157 services as a benefit in Healthy Kids plans for enrollees and
158 providing enrollees the opportunity to purchase these benefits
159 separately.

160 (c) Increasing copayments for habilitative and behavior
161 analysis services provided to nonpremium assistance enrollees.

162 (d) Reducing benefit packages to all nonpremium assistance
163 enrollees.

164 Section 7. Paragraphs (c) and (f) of subsection (4) and
165 subsections (5), (7), and (8) of section 409.814, Florida
166 Statutes, are amended to read:

167 409.814 Eligibility.--A child who has not reached 19 years
168 of age whose family income is equal to or below 200 percent of
169 the federal poverty level is eligible for the Florida Kidcare
170 program as provided in this section. For enrollment in the
171 Children's Medical Services Network, a complete application
172 includes the medical or behavioral health screening. If,
173 subsequently, an individual is determined to be ineligible for
174 coverage, he or she must immediately be disenrolled from the
175 respective Florida Kidcare program component.

176 (4) The following children are not eligible to receive
177 premium assistance for health benefits coverage under the
178 Florida Kidcare program, except under Medicaid if the child
179 would have been eligible for Medicaid under s. 409.903 or s.
180 409.904 as of June 1, 1997:

181 (c) A child who is seeking premium assistance for the
182 Florida Kidcare program through employer-sponsored group
183 coverage, if the child has been covered by the same employer's

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184 group coverage during the 90 days ~~6 months~~ prior to the family's
185 submitting an application for determination of eligibility under
186 the program.

187 (f) A child who has had his or her coverage in an
188 employer-sponsored or private health benefit plan voluntarily
189 canceled in the last 90 days ~~6 months~~, except those children who
190 were on the waiting list prior to March 12, 2004, or whose
191 coverage was voluntarily canceled for good cause, including, but
192 not limited to, the following circumstances:

193 1. The cost of participation in an employer-sponsored or
194 private health benefit plan is greater than 5 percent of the
195 family's income;

196 2. The parent lost a job that provided an employer-
197 sponsored health benefit plan for children;

198 3. The parent with health benefits coverage for the child
199 is deceased;

200 4. The employer of the parent canceled health benefits
201 coverage for children;

202 5. The child's health benefits coverage ended because the
203 child reached the maximum lifetime coverage amount;

204 6. The child has exhausted coverage under a COBRA
205 continuation provision; or

206 7. A situation involving domestic violence led to the loss
207 of coverage.

208 (5) A child whose family income is above 200 percent of
209 the federal poverty level or a child who is excluded under the
210 provisions of subsection (4) may participate in the Medikids
211 program as provided in s. 409.8132 or, if the child is

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212 ineligible for Medikids by reason of age, in the Florida Healthy
213 Kids program as provided in s. 624.91, subject to the following
214 provisions:

215 (a) The family is not eligible for premium assistance
216 payments and must pay the full cost of the premium, including
217 any administrative costs.

218 (b) Effective October 1, 2009, new applicants for
219 nonpremium assistance in the Medikids program shall enroll in
220 the Florida Healthy Kids program component of the Florida
221 Kidcare program. The agency is authorized to place limits on
222 enrollment in Medikids by these children in order to avoid
223 adverse selection. The number of children participating in
224 Medikids whose family income exceeds 200 percent of the federal
225 poverty level must not exceed 10 percent of total enrollees in
226 the Medikids program.

227 (c) The board of directors of the Florida Healthy Kids
228 Corporation ~~is authorized to place limits on enrollment of these~~
229 ~~children in order to avoid adverse selection. In addition, the~~
230 ~~board~~ is authorized to offer a reduced benefit package to these
231 children in order to limit program costs for such families. ~~The~~
232 ~~number of children participating in the Florida Healthy Kids~~
233 ~~program whose family income exceeds 200 percent of the federal~~
234 ~~poverty level must not exceed 10 percent of total enrollees in~~
235 ~~the Florida Healthy Kids program.~~

236 (7) When determining or reviewing a child's eligibility
237 under the Florida Kidcare program, the applicant shall be
238 provided with reasonable notice of changes in eligibility which
239 may affect enrollment in one or more of the program components.

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240 When a transition from one program component to another is
241 authorized, there shall be cooperation between the program
242 components, ~~and~~ the affected family, the child's health
243 insurance plan, and the child's health care providers to promote
244 ~~which promotes~~ continuity of health care coverage. If a child is
245 determined ineligible for Medicaid or Medikids, the agency, in
246 coordination with the department, shall notify that child's
247 Medicaid managed care plan or MediPass provider of such
248 determination before the child's eligibility is scheduled to be
249 terminated so that the Medicaid managed care plan or MediPass
250 provider can assist the child's family in applying for Florida
251 Kidcare program coverage. Any authorized transfers must be
252 managed within the program's overall appropriated or authorized
253 levels of funding. Each component of the program shall establish
254 a reserve to ensure that transfers between components will be
255 accomplished within current year appropriations. These reserves
256 shall be reviewed by each convening of the Social Services
257 Estimating Conference to determine the adequacy of such reserves
258 to meet actual experience.

259 (8) In determining the eligibility of a child for the
260 Florida Kidcare program, an assets test is not required. The
261 information required under this section from each applicant
262 shall be obtained electronically to the extent possible. If such
263 information cannot be obtained electronically, the ~~Each~~
264 applicant shall provide written documentation during the
265 application process and the redetermination process, including,
266 but not limited to, the following:

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267 (a) Proof of family income, which must include a copy of
268 the applicant's most recent federal income tax return. In the
269 absence of a federal income tax return, an applicant may submit
270 wages and earnings statements (pay stubs), W-2 forms, or other
271 appropriate documents.

272 (b) A statement from all family members that:

273 1. Their employer does not sponsor a health benefit plan
274 for employees; or

275 2. The potential enrollee is not covered by the employer-
276 sponsored health benefit plan because the potential enrollee is
277 not eligible for coverage, or, if the potential enrollee is
278 eligible but not covered, a statement of the cost to enroll the
279 potential enrollee in the employer-sponsored health benefit
280 plan.

281
282 An individual who applies for coverage under the Florida Kidcare
283 program and who pays the full cost of the premium is exempt from
284 the requirements of this subsection.

285 Section 8. Paragraphs (r) through (v) of subsection (2) of
286 section 409.815, Florida Statutes, are redesignated as
287 paragraphs (s) through (w), respectively, present paragraphs
288 (o), (r), and (u) are amended, and a new paragraph (r) is added
289 to that subsection, to read:

290 409.815 Health benefits coverage; limitations.--

291 (2) BENCHMARK BENEFITS.--In order for health benefits
292 coverage to qualify for premium assistance payments for an
293 eligible child under ss. 409.810-409.820, the health benefits

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294 coverage, except for coverage under Medicaid and Medikids, must
295 include the following minimum benefits, as medically necessary.

296 (o) Therapy services.--Covered services include
297 habilitative and rehabilitative services, including
298 occupational, physical, respiratory, and speech therapies, with
299 the following limitations:

300 1. Rehabilitative services are limited to:

301 a.1. ~~Services must be for~~ Short-term rehabilitation when
302 where significant improvement in the enrollee's condition will
303 result; and

304 b.2. ~~Services shall be limited to~~ Not more than 24
305 treatment sessions within a 60-day period per episode or injury,
306 with the 60-day period beginning with the first treatment.

307 2. Effective October 1, 2009, habilitative services shall
308 be offered and are limited to:

309 a. Habilitation when improvements in and maintenance of
310 human behavior, skill acquisition, and communication will
311 result; and

312 b. Enrollees that are diagnosed with a developmental
313 disability as defined in s. 393.063 or autism spectrum disorder.

314 (r) Behavior analysis services.--Effective October 1,
315 2009, behavior analysis and behavior assistant services shall be
316 covered for enrollees that are diagnosed with a developmental
317 disability as defined in s. 393.063 or autism spectrum disorder.

318 For purposes of this paragraph:

319 1. "Behavior analysis" means the design, implementation,
320 and evaluation of instructional and environmental modifications
321 to produce socially significant improvements in human behavior

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322 through skill acquisition and the reduction of problematic
323 behavior. Applied behavior analysis shall be provided by an
324 individual certified pursuant to s. 393.17 or an individual
325 licensed under chapter 490 or chapter 491.

326 2. "Behavior assistant services" means services provided
327 by an individual with specific training to assist in carrying
328 out plans designed by a behavior analyst.

329 (s) ~~(r)~~ Lifetime maximum and limitations.--Health benefits
330 coverage obtained under ss. 409.810-409.820 shall pay an
331 enrollee's covered expenses at a lifetime maximum of \$1 million
332 per covered child. However, coverage for the combination of
333 behavior analysis services and habilitative therapy services for
334 recipients diagnosed with a developmental disability as defined
335 in s. 393.063 or autism spectrum disorder shall be limited to
336 \$36,000 annually and may not exceed \$108,000 in total lifetime
337 benefits. Without prior authorization by the Florida Healthy
338 Kids plan, not more than 12 percent of the annual maximum amount
339 for combined habilitative therapy and behavior analysis services
340 may be used on a monthly basis.

341 (v) ~~(u)~~ Enhancements to minimum requirements.--

342 1. This section sets the minimum benefits that must be
343 included in any health benefits coverage, other than Medicaid or
344 Medikids coverage, offered under ss. 409.810-409.820. Health
345 benefits coverage may include additional benefits not included
346 under this subsection, but may not include benefits excluded
347 under paragraph (t) ~~(s)~~.

348 2. Health benefits coverage may extend any limitations
349 beyond the minimum benefits described in this section.

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Except for the Children's Medical Services Network, the agency may not increase the premium assistance payment for either additional benefits provided beyond the minimum benefits described in this section or the imposition of less restrictive service limitations.

Section 9. Paragraph (b) of subsection (1) of section 409.818, Florida Statutes, is amended to read:

409.818 Administration.--In order to implement ss. 409.810-409.820, the following agencies shall have the following duties:

(1) The Department of Children and Family Services shall:

(b) Establish and maintain the eligibility determination process under the program except as specified in subsection (5). The department shall directly, or through the services of a contracted third-party administrator, establish and maintain a process for determining eligibility of children for coverage under the program. The eligibility determination process must be used solely for determining eligibility of applicants for health benefits coverage under the program. The eligibility determination process must include an initial determination of eligibility for any coverage offered under the program, as well as a redetermination or reverification of eligibility each subsequent 12 ~~6~~ months. Effective January 1, 1999, a child who has not attained the age of 5 and who has been determined eligible for the Medicaid program is eligible for coverage for 12 months without a redetermination or reverification of eligibility. In conducting an eligibility determination, the

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378 department shall determine if the child has special health care
379 needs. The department, in consultation with the Agency for
380 Health Care Administration and the Florida Healthy Kids
381 Corporation, shall develop procedures for redetermining
382 eligibility which enable a family to easily update any change in
383 circumstances which could affect eligibility. The department may
384 accept changes in a family's status as reported to the
385 department by the Florida Healthy Kids Corporation without
386 requiring a new application from the family. Redetermination of
387 a child's eligibility for Medicaid may not be linked to a
388 child's eligibility determination for other programs.

389 Section 10. Subsection (26) is added to section 409.906,
390 Florida Statutes, to read:

391 409.906 Optional Medicaid services.--Subject to specific
392 appropriations, the agency may make payments for services which
393 are optional to the state under Title XIX of the Social Security
394 Act and are furnished by Medicaid providers to recipients who
395 are determined to be eligible on the dates on which the services
396 were provided. Any optional service that is provided shall be
397 provided only when medically necessary and in accordance with
398 state and federal law. Optional services rendered by providers
399 in mobile units to Medicaid recipients may be restricted or
400 prohibited by the agency. Nothing in this section shall be
401 construed to prevent or limit the agency from adjusting fees,
402 reimbursement rates, lengths of stay, number of visits, or
403 number of services, or making any other adjustments necessary to
404 comply with the availability of moneys and any limitations or
405 directions provided for in the General Appropriations Act or

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406 chapter 216. If necessary to safeguard the state's systems of
407 providing services to elderly and disabled persons and subject
408 to the notice and review provisions of s. 216.177, the Governor
409 may direct the Agency for Health Care Administration to amend
410 the Medicaid state plan to delete the optional Medicaid service
411 known as "Intermediate Care Facilities for the Developmentally
412 Disabled." Optional services may include:

413 (26) HOME AND COMMUNITY-BASED SERVICES FOR AUTISM SPECTRUM
414 DISORDER AND OTHER DEVELOPMENTAL DISABILITIES.--The agency is
415 authorized to seek federal approval through a Medicaid waiver or
416 a state plan amendment for the provision of occupational
417 therapy, speech therapy, physical therapy, behavior analysis,
418 and behavior assistant services to individuals who are 5 years
419 of age and under and have a diagnosed developmental disability
420 as defined in s. 393.063 or autism spectrum disorder as defined
421 in s. 409.811. Coverage for such services shall be limited to
422 \$36,000 annually and may not exceed \$108,000 in total lifetime
423 benefits. The agency shall submit an annual report beginning on
424 January 1, 2009, to the President of the Senate, the Speaker of
425 the House of Representatives, and the relevant committees of the
426 Senate and the House of Representatives regarding progress on
427 obtaining federal approval and recommendations for the
428 implementation of these home and community-based services. The
429 agency may not implement this subsection without prior
430 legislative approval.

431 Section 11. Paragraph (e) of subsection (5) of section
432 411.01, Florida Statutes, is amended to read:

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433 411.01 School readiness programs; early learning
434 coalitions.--

435 (5) CREATION OF EARLY LEARNING COALITIONS.--

436 (e) Requests for proposals; payment schedule.--

437 1. Each early learning coalition must comply with s.
438 287.057 for the procurement of commodities or contractual
439 services from the funds described in paragraph (9) (d). The
440 period of a contract for purchase of these commodities or
441 contractual services, together with any renewal of the original
442 contract, may not exceed 3 years.

443 2. Each early learning coalition shall adopt a payment
444 schedule that encompasses all programs funded by the coalition
445 under this section. The payment schedule must take into
446 consideration the relevant market rate, must include the
447 projected number of children to be served, may include quality
448 related payments authorized by the Federal Government, and must
449 be submitted for approval by the Agency for Workforce
450 Innovation. Informal child care arrangements shall be reimbursed
451 at not more than 50 percent of the rate developed for a family
452 day care home.

453 Section 12. Section 456.0291, Florida Statutes, is created
454 to read:

455 456.0291 Requirement for instruction on developmental
456 disabilities.--

457 (1) (a) The appropriate board shall require each person
458 licensed or certified under part I of chapter 464, chapter 490,
459 or chapter 491 to complete a 2-hour continuing education course,
460 approved by the board, on developmental disabilities, as defined

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461 in s. 393.063, with the addition of autism spectrum disorder, as
462 defined in s. 409.811, as part of every third biennial
463 relicensure or recertification. The course shall consist of
464 information on the diagnosis and treatment of developmental
465 disabilities and information on counseling and education of a
466 parent whose child is diagnosed with a developmental disability,
467 with an emphasis on autism spectrum disorder, as defined in s.
468 409.811.

469 (b) The Board of Medicine and the Board of Osteopathic
470 Medicine shall require each physician with a primary care
471 specialty of pediatrics to complete a 2-hour continuing
472 education course, approved by the appropriate board, on
473 developmental disabilities, as defined in s. 393.063, with the
474 addition of autism spectrum disorder, as defined in s. 409.811,
475 as part of every third biennial relicensure. The course shall
476 consist of information on the diagnosis and treatment of
477 developmental disabilities and information on counseling and
478 education of a parent whose child is diagnosed with a
479 developmental disability, with an emphasis on autism spectrum
480 disorder, as defined in s. 409.811.

481 (c) Each such licensee or certificateholder shall submit
482 confirmation of having completed the course, on a form provided
483 by the board, when submitting fees for every third biennial
484 renewal.

485 (d) The board may approve additional equivalent courses
486 that may be used to satisfy the requirements of paragraph (a).
487 Each licensing board that requires a licensee to complete an
488 educational course pursuant to this subsection may include the

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489 hours required for completion of the course in the total hours
490 of continuing education required by law for such profession
491 unless the continuing education requirements for such profession
492 consist of fewer than 30 hours biennially.

493 (e) Any person holding two or more licenses subject to the
494 provisions of this subsection shall be permitted to show proof
495 of having taken one board-approved course on developmental
496 disabilities for purposes of relicensure or recertification for
497 additional licenses.

498 (f) Failure to comply with the requirements of this
499 subsection shall constitute grounds for disciplinary action
500 under each respective practice act and under s. 456.072(1)(k).
501 In addition to discipline by the board, the licensee shall be
502 required to complete such course.

503 (2) Each board may adopt rules pursuant to ss. 120.536(1)
504 and 120.54 to carry out the provisions of this section.

505 (3) The department shall implement a plan to promote
506 awareness of developmental disabilities, with a focus on autism
507 spectrum disorder, as defined in s. 409.811, to physicians
508 licensed under chapter 458 or chapter 459 and parents. The
509 department shall develop the plan in consultation with
510 organizations representing allopathic and osteopathic
511 physicians, the Board of Medicine, the Board of Osteopathic
512 Medicine, and nationally recognized organizations that promote
513 awareness of developmental disabilities. The department's plan
514 shall include the distribution of educational materials for
515 parents, including a developmental assessment tool.

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516 Section 13. Paragraph (b) of subsection (2) and paragraph
517 (b) of subsection (5) of section 624.91, Florida Statutes, are
518 amended to read:

519 624.91 The Florida Healthy Kids Corporation Act.--

520 (2) LEGISLATIVE INTENT.--

521 (b) It is the intent of the Legislature that the Florida
522 Healthy Kids Corporation serve as one of several providers of
523 services to children eligible for medical assistance under Title
524 XXI of the Social Security Act. Although the corporation may
525 serve other children, the Legislature intends the primary
526 recipients of services provided through the corporation be
527 ~~school-age~~ children with a family income below 200 percent of
528 the federal poverty level, who do not qualify for Medicaid. It
529 is also the intent of the Legislature that state and local
530 government Florida Healthy Kids funds be used to continue
531 coverage, subject to specific appropriations in the General
532 Appropriations Act, to children not eligible for federal
533 matching funds under Title XXI.

534 (5) CORPORATION AUTHORIZATION, DUTIES, POWERS.--

535 (b) The Florida Healthy Kids Corporation shall:

536 1. Arrange for the collection of any family, local
537 contributions, or employer payment or premium, in an amount to
538 be determined by the board of directors, to provide for payment
539 of premiums for comprehensive insurance coverage and for the
540 actual or estimated administrative expenses.

541 2. Arrange for the collection of any voluntary
542 contributions to provide for payment of premiums for children

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543 who are not eligible for medical assistance under Title XXI of
544 the Social Security Act.

545 3. Subject to the provisions of s. 409.8134, accept
546 voluntary supplemental local match contributions that comply
547 with the requirements of Title XXI of the Social Security Act
548 for the purpose of providing additional coverage in contributing
549 counties under Title XXI.

550 4. Establish the administrative and accounting procedures
551 for the operation of the corporation.

552 5. Establish, with consultation from appropriate
553 professional organizations, standards for preventive health
554 services and providers and comprehensive insurance benefits
555 appropriate to children, provided that such standards for rural
556 areas shall not limit primary care providers to board-certified
557 pediatricians.

558 6. Determine eligibility for children seeking to
559 participate in the Title XXI-funded components of the Florida
560 Kidcare program consistent with the requirements specified in s.
561 409.814, as well as the non-Title-XXI-eligible children as
562 provided in subsection (3).

563 7. Establish procedures under which providers of local
564 match to, applicants to and participants in the program may have
565 grievances reviewed by an impartial body and reported to the
566 board of directors of the corporation.

567 8. Establish participation criteria and, if appropriate,
568 contract with an authorized insurer, health maintenance
569 organization, or third-party administrator to provide
570 administrative services to the corporation.

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571 9. Establish enrollment criteria which shall include
572 penalties or waiting periods of not fewer than 60 days for
573 reinstatement of coverage upon voluntary cancellation for
574 nonpayment of family premiums.

575 10. Contract with authorized insurers or any provider of
576 health care services, meeting standards established by the
577 corporation, for the provision of comprehensive insurance
578 coverage to participants. Such standards shall include criteria
579 under which the corporation may contract with more than one
580 provider of health care services in program sites. Health plans
581 shall be selected through a competitive bid process. The Florida
582 Healthy Kids Corporation shall purchase goods and services in
583 the most cost-effective manner consistent with the delivery of
584 quality medical care. The maximum administrative cost for a
585 Florida Healthy Kids Corporation contract shall be 15 percent.
586 For health care contracts, the minimum medical loss ratio for a
587 Florida Healthy Kids Corporation contract shall be 85 percent.
588 For dental contracts, the remaining compensation to be paid to
589 the authorized insurer or provider under a Florida Healthy Kids
590 Corporation contract shall be no less than an amount which is 85
591 percent of premium; to the extent any contract provision does
592 not provide for this minimum compensation, this section shall
593 prevail. The health plan selection criteria and scoring system,
594 and the scoring results, shall be available upon request for
595 inspection after the bids have been awarded.

596 11. Establish disenrollment criteria in the event local
597 matching funds are insufficient to cover enrollments.

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598 12. Develop and implement a plan to publicize the Florida
599 Kidcare program Healthy Kids Corporation, the eligibility
600 requirements of the program, and the procedures for enrollment
601 in the program and to maintain public awareness of the
602 corporation and the program. Health care and dental health plans
603 participating in the program may develop and distribute
604 marketing and other promotional materials and participate in
605 activities, such as health fairs and public events, as approved
606 by the corporation. Health care and dental health plans may also
607 contact their current and former enrollees to encourage
608 continued participation in the program and assist the enrollee
609 in transferring from a Title XIX-funded plan to a Title XXI-
610 funded plan.

611 13. Establish an assignment process for Florida Healthy
612 Kids program enrollees to ensure that family members are
613 assigned to the same managed care plan to the greatest extent
614 possible, including situations in which some family members are
615 enrolled in a Medicaid managed care plan and other family
616 members are enrolled in a Florida Healthy Kids plan. The Agency
617 for Health Care Administration shall consult with the
618 corporation to implement this subparagraph.

619 ~~14.13.~~ Secure staff necessary to properly administer the
620 corporation. Staff costs shall be funded from state and local
621 matching funds and such other private or public funds as become
622 available. The board of directors shall determine the number of
623 staff members necessary to administer the corporation.

624 ~~15.14.~~ Provide a report annually to the Governor, Chief
625 Financial Officer, Commissioner of Education, Senate President,

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626 Speaker of the House of Representatives, and Minority Leaders of
627 the Senate and the House of Representatives.

628 16. Provide a report by October 31, 2008, to the Governor,
629 the Senate, and the House of Representatives, which includes an
630 actuarial analysis of the projected impact on premiums from the
631 addition of habilitative and behavior analysis services in
632 accordance with s. 409.815.

633 17. Provide information on a quarterly basis to the
634 Governor, the Senate, and the House of Representatives that
635 assesses the cost and utilization of services for the Florida
636 Healthy Kids health benefits plans provided through the Florida
637 Healthy Kids Corporation. The information must be specific to
638 each eligibility component of the plan and, at a minimum,
639 include:

640 a. The monthly enrollment and expenditures for enrollees.

641 b. The cost and utilization of specific services.

642 c. An analysis of the impact on premiums prior to and
643 following implementation of the Window of Opportunity Act.

644 d. An analysis of trends regarding transfer of enrollees
645 from the Florida Healthy Kids plans to the Children's Medical
646 Services Network plan.

647 e. Any recommendations resulting from the analysis
648 conducted under this subparagraph.

649 ~~18.15-~~ Establish benefit packages which conform to the
650 provisions of the Florida Kidcare program, as created in ss.
651 409.810-409.820.

652 Section 14. Section 624.916, Florida Statutes, is created
653 to read:

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654 624.916 Developmental disabilities compact.--

655 (1) The Office of Insurance Regulation shall convene a
656 workgroup by August 31, 2008, for the purpose of negotiating a
657 compact that includes a binding agreement among the participants
658 relating to insurance and access to services for persons with
659 developmental disabilities as defined in s. 393.063, with the
660 addition of autism spectrum disorder, as defined in s. 409.811.
661 The workgroup shall consist of the following:

662 (a) Representatives of all health insurers licensed under
663 this chapter.

664 (b) Representatives of all health maintenance
665 organizations licensed under part I of chapter 641.

666 (c) Representatives of employers with self-insured health
667 benefit plans.

668 (d) Two designees of the Governor, one of whom must be a
669 consumer advocate.

670 (e) A designee of the President of the Senate.

671 (f) A designee of the Speaker of the House of
672 Representatives.

673 (2) The Office of Insurance Regulation shall convene a
674 consumer advisory workgroup for the purpose of providing a forum
675 for comment on the compact negotiated in subsection (1). The
676 office shall convene the workgroup prior to finalization of the
677 compact.

678 (3) The agreement shall include the following components:

679 (a) A requirement that each signatory to the agreement
680 increase coverage for behavior analysis and behavior assistant
681 services as defined in s. 409.815(2)(r) and speech therapy,

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682 physical therapy, and occupational therapy when medically
683 necessary due to the presence of a developmental disability as
684 defined in s. 393.063 or autism spectrum disorder, as defined in
685 s. 409.811.

686 (b) Procedures for clear and specific notice to
687 policyholders identifying the amount, scope, and conditions
688 under which coverage is provided for behavior analysis and
689 behavior assistant services as defined in s. 409.815(2)(r) and
690 speech therapy, physical therapy, and occupational therapy when
691 medically necessary due to the presence of a developmental
692 disability as defined in s. 393.063 or autism spectrum disorder,
693 as defined in s. 409.811.

694 (c) Penalties for documented cases of denial of claims for
695 medically necessary services due to the presence of a
696 developmental disability as defined in s. 393.063 or autism
697 spectrum disorder, as defined in s. 409.811.

698 (d) Proposals for new product lines that may be offered in
699 conjunction with traditional health insurance and provide a more
700 appropriate means of spreading risk, financing costs, and
701 accessing favorable prices.

702 (4) Upon completion of the negotiations for the compact,
703 the office shall report the results to the Governor, the
704 President of the Senate, and the Speaker of the House of
705 Representatives.

706 (5) Beginning February 15, 2009, and continuing annually
707 thereafter, the Office of Insurance Regulation shall provide a
708 report to the Governor, the President of the Senate, and the
709 Speaker of the House of Representatives regarding the

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710 implementation of the agreement negotiated under this section.

711 The report shall include:

712 (a) The signatories to the agreement.

713 (b) An analysis of the coverage provided under the
714 agreement in comparison to the coverage required under ss.
715 627.6686 and 641.31098.

716 (c) An analysis of the compliance with the agreement by
717 the signatories, including documented cases of claims denied in
718 violation of the agreement.

719 (6) The Office of Insurance Regulation shall continue to
720 monitor participation, compliance, and effectiveness of the
721 agreement and report its findings at least annually.

722 Section 15. Section 627.6686, Florida Statutes, is created
723 to read:

724 627.6686 Coverage for individuals with developmental
725 disabilities required; exception.--

726 (1) As used in this section, the term:

727 (a) "Developmental disability" has the same meaning as
728 provided in s. 393.063, with the addition of autism spectrum
729 disorder, as defined in s. 409.811.

730 (b) "Eligible individual" means an individual under 18
731 years of age or an individual 18 years of age or older who is in
732 high school who has been diagnosed as having a developmental
733 disability at 8 years of age or younger.

734 (c) "Health insurance plan" means a group health insurance
735 policy or group health benefit plan offered by an insurer which
736 includes the state group insurance program provided under s.
737 110.123. The term does not include any health insurance plan

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738 offered in the individual market, any health insurance plan that
739 is individually underwritten, or any health insurance plan
740 provided to a small employer.

741 (d) "Insurer" means an insurer providing health insurance
742 coverage, which is licensed to engage in the business of
743 insurance in this state and is subject to insurance regulation.

744 (2) A health insurance plan issued or renewed on or after
745 July 1, 2009, shall provide coverage to an eligible individual
746 for:

747 (a) Well-baby and well-child screening for diagnosing the
748 presence of a developmental disability.

749 (b) Treatment of a developmental disability through speech
750 therapy, occupational therapy, physical therapy, and behavior
751 analysis services. Behavior analysis services shall be provided
752 by an individual certified pursuant to s. 393.17 or an
753 individual licensed under chapter 490 or chapter 491.

754 (3) The coverage required pursuant to subsection (2) is
755 subject to the following requirements:

756 (a) Coverage shall be limited to treatment that is
757 prescribed by the insured's treating physician in accordance
758 with a treatment plan.

759 (b) Coverage for the services described in subsection (2)
760 shall be limited to \$36,000 annually and may not exceed \$108,000
761 in total lifetime benefits.

762 (c) Coverage may not be denied on the basis that provided
763 services are habilitative in nature.

764 (d) Coverage may be subject to other general exclusions
765 and limitations of the insurer's policy or plan, including, but

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766 not limited to, coordination of benefits, participating provider
767 requirements, restrictions on services provided by family or
768 household members, and utilization review of health care
769 services, including the review of medical necessity, case
770 management, and other managed care provisions.

771 (4) The coverage required pursuant to subsection (2) may
772 not be subject to dollar limits, deductibles, or coinsurance
773 provisions that are less favorable to an insured than the dollar
774 limits, deductibles, or coinsurance provisions that apply to
775 physical illnesses that are generally covered under the health
776 insurance plan, except as otherwise provided in subsection (3).

777 (5) An insurer may not deny or refuse to issue coverage
778 for medically necessary services, refuse to contract with, or
779 refuse to renew or reissue or otherwise terminate or restrict
780 coverage for an individual because the individual is diagnosed
781 as having a developmental disability.

782 (6) The treatment plan required pursuant to subsection (3)
783 shall include all elements necessary for the health insurance
784 plan to appropriately pay claims. These elements include, but
785 are not limited to, a diagnosis, the proposed treatment by type,
786 the frequency and duration of treatment, the anticipated
787 outcomes stated as goals, the frequency with which the treatment
788 plan will be updated, and the signature of the treating
789 physician.

790 (7) Beginning January 1, 2011, the maximum benefit under
791 paragraph (3)(b) shall be adjusted annually on January 1 of each
792 calendar year to reflect any change from the previous year in
793 the medical component of the then current Consumer Price Index

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794 for all urban consumers, published by the Bureau of Labor
795 Statistics of the United States Department of Labor.

796 (8) This section may not be construed as limiting benefits
797 and coverage otherwise available to an insured under a health
798 insurance plan.

799 (9) The Office of Insurance Regulation may not enforce
800 this section against an insurer that is a signatory no later
801 than July 1, 2009, to the developmental disabilities compact
802 established under s. 624.916. The Office of Insurance Regulation
803 shall enforce this section against an insurer that is a
804 signatory to the compact established under s. 624.916 if the
805 insurer has not complied with the terms of the compact for all
806 health insurance plans by July 1, 2010.

807 Section 16. Section 641.31098, Florida Statutes, is
808 created to read:

809 641.31098 Coverage for individuals with developmental
810 disabilities.--

811 (1) As used in this section, the term:

812 (a) "Developmental disability" has the same meaning as
813 provided in s. 393.063, with the addition of autism spectrum
814 disorder, as defined in s. 409.811.

815 (b) "Eligible individual" means an individual under 18
816 years of age or an individual 18 years of age or older who is in
817 high school who has been diagnosed as having a developmental
818 disability at 8 years of age or younger.

819 (c) "Health maintenance contract" means a group health
820 maintenance contract offered by a health maintenance
821 organization. This term does not include a health maintenance

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822 contract offered in the individual market, a health maintenance
823 contract that is individually underwritten, or a health
824 maintenance contract provided to a small employer.

825 (2) A health maintenance contract issued or renewed on or
826 after July 1, 2009, shall provide coverage to an eligible
827 individual for:

828 (a) Well-baby and well-child screening for diagnosing the
829 presence of a developmental disability.

830 (b) Treatment of a developmental disability through speech
831 therapy, occupational therapy, physical therapy, and behavior
832 analysis services. Behavior analysis services shall be provided
833 by an individual certified pursuant to s. 393.17 or an
834 individual licensed under chapter 490 or chapter 491.

835 (3) The coverage required pursuant to subsection (2) is
836 subject to the following requirements:

837 (a) Coverage shall be limited to treatment that is
838 prescribed by the subscriber's treating physician in accordance
839 with a treatment plan.

840 (b) Coverage for the services described in subsection (2)
841 shall be limited to \$36,000 annually and may not exceed \$108,000
842 in total benefits.

843 (c) Coverage may not be denied on the basis that provided
844 services are habilitative in nature.

845 (d) Coverage may be subject to general exclusions and
846 limitations of the subscriber's contract, including, but not
847 limited to, coordination of benefits, participating provider
848 requirements, and utilization review of health care services,

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849 including the review of medical necessity, case management, and
850 other managed care provisions.

851 (4) The coverage required pursuant to subsection (2) may
852 not be subject to dollar limits, deductibles, or coinsurance
853 provisions that are less favorable to a subscriber than the
854 dollar limits, deductibles, or coinsurance provisions that apply
855 to physical illnesses that are generally covered under the
856 subscriber's contract, except as otherwise provided in
857 subsection (3).

858 (5) A health maintenance organization may not deny or
859 refuse to issue coverage for medically necessary services,
860 refuse to contract with, or refuse to renew or reissue or
861 otherwise terminate or restrict coverage for an individual
862 solely because the individual is diagnosed as having a
863 developmental disability.

864 (6) The treatment plan required pursuant to subsection (3)
865 shall include, but is not limited to, a diagnosis, the proposed
866 treatment by type, the frequency and duration of treatment, the
867 anticipated outcomes stated as goals, the frequency with which
868 the treatment plan will be updated, and the signature of the
869 treating physician.

870 (7) Beginning January 1, 2011, the maximum benefit under
871 paragraph (3) (b) shall be adjusted annually on January 1 of each
872 calendar year to reflect any change from the previous year in
873 the medical component of the then current Consumer Price Index
874 for all urban consumers, published by the Bureau of Labor
875 Statistics of the United States Department of Labor.

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876 (8) The Office of Insurance Regulation may not enforce
877 this section against a health maintenance organization that is a
878 signatory no later than July 1, 2009, to the developmental
879 disabilities compact established under s. 624.916. The Office of
880 Insurance Regulation shall enforce this section against a health
881 maintenance organization that is a signatory to the compact
882 established under s. 624.916 if the health maintenance
883 organization has not complied with the terms of the compact for
884 all health maintenance contracts by July 1, 2010.

885 Section 17. Subsections (1), (2), and (3), paragraph (a)
886 of subsection (4), paragraph (d) of subsection (8), and
887 paragraphs (a), (c), and (d) of subsection (10) of section
888 1002.39, Florida Statutes, are amended, subsections (11), (12),
889 and (13) are renumbered as subsections (13), (14), and (15),
890 respectively, and new subsections (11) and (12) are added to
891 that section, to read:

892 1002.39 The John M. McKay Scholarships for Students with
893 Disabilities Program.--There is established a program that is
894 separate and distinct from the Opportunity Scholarship Program
895 and is named the John M. McKay Scholarships for Students with
896 Disabilities Program.

897 (1) THE JOHN M. MCKAY SCHOLARSHIPS FOR STUDENTS WITH
898 DISABILITIES PROGRAM.--The John M. McKay Scholarships for
899 Students with Disabilities Program is established to provide the
900 option to attend a public school other than the one to which
901 assigned, or to provide a scholarship to a private school of
902 choice, for students with disabilities for whom an individual
903 educational ~~education~~ plan has been written in accordance with

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904 rules of the State Board of Education. Students with
 905 disabilities include K-12 students who are documented as having
 906 an intellectual disability ~~a mental handicap, including~~
 907 ~~trainable, profound, or educable;~~ a speech impairment; a ~~or~~
 908 language impairment; a hearing impairment, including deafness; a
 909 visual impairment, including blindness; a dual sensory
 910 impairment; an orthopedic ~~a physical~~ impairment or other health
 911 impairment; ~~a serious emotional disturbance, including an~~
 912 emotional or behavioral disability ~~handicap;~~ a specific learning
 913 disability, including, but not limited to, dyslexia,
 914 dyscalculia, or developmental aphasia; a traumatic brain injury;
 915 a developmental delay; or autism spectrum disorder.

916 (2) JOHN M. MCKAY SCHOLARSHIP ELIGIBILITY.--The parent of
 917 a ~~public school~~ student with a disability ~~who is dissatisfied~~
 918 ~~with the student's progress~~ may request and receive from the
 919 state a John M. McKay Scholarship for the child to enroll in and
 920 attend a private school in accordance with this section if:

921 (a) The student has either:

922 1. Received early intervention services under the
 923 Voluntary Prekindergarten Education Program pursuant to s.
 924 1002.66 during the previous school year; or

925 2. Spent the prior school year in attendance at a Florida
 926 public school or the Florida School for the Deaf and the Blind.
 927 For purposes of this subparagraph, prior school year in
 928 attendance means that the student was-

929 ~~1-~~ enrolled and reported by:

930 a. A school district for funding during the preceding
 931 October and February Florida Education Finance Program surveys
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932 in kindergarten through grade 12, which shall include time spent
933 in a Department of Juvenile Justice commitment program if funded
934 under the Florida Education Finance Program;

935 ~~b.2. Enrolled and reported by~~ The Florida School for the
936 Deaf and the Blind during the preceding October and February
937 student membership surveys in kindergarten through grade 12; or

938 ~~c.3. Enrolled and reported by~~ A school district for
939 funding during the preceding October and February Florida
940 Education Finance Program surveys, was at least 4 years old when
941 so enrolled and reported, and was eligible for services under s.
942 1003.21(1)(e).

943
944 However, a dependent child of a member of the United States
945 Armed Forces who transfers to a school in this state from out of
946 state or from a foreign country pursuant to a parent's permanent
947 change of station orders is exempt from this paragraph but must
948 meet all other eligibility requirements to participate in the
949 program.

950 (b) The parent has obtained acceptance for admission of
951 the student to a private school that is eligible for the program
952 under subsection (8) and has requested from the department a
953 scholarship at least 60 days prior to the date of the first
954 scholarship payment. The request must be through a communication
955 directly to the department in a manner that creates a written or
956 electronic record of the request and the date of receipt of the
957 request. The Department of Education must notify the district of
958 the parent's intent upon receipt of the parent's request.

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959 (3) JOHN M. MCKAY SCHOLARSHIP PROHIBITIONS.--A student is
960 not eligible for a John M. McKay Scholarship while he or she is:

961 (a) Enrolled in a school operating for the purpose of
962 providing educational services to youth in Department of
963 Juvenile Justice commitment programs;

964 (b) Receiving a corporate income tax credit scholarship
965 under s. 220.187;

966 (c) Receiving an educational scholarship pursuant to this
967 chapter;

968 (d) Participating in a home education program as defined
969 in s. 1002.01(1);

970 (e) Participating in a private tutoring program pursuant
971 to s. 1002.43;

972 (f) Participating in a virtual school, correspondence
973 school, or distance learning program that receives state funding
974 pursuant to the student's participation unless the participation
975 is limited to no more than two courses per school year;

976 (g) Enrolled in the Florida School for the Deaf and the
977 Blind; or

978 (h) Not having regular and direct contact with his or her
979 private school teachers at the school's physical location,
980 except as provided in subsection (11).

981 (4) TERM OF JOHN M. MCKAY SCHOLARSHIP.--

982 (a) For purposes of continuity of educational choice, a
983 John M. McKay Scholarship shall remain in force until the
984 student enrolls in ~~returns to~~ a public school, graduates from
985 high school, or reaches the age of 22, whichever occurs first.

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986 (8) PRIVATE SCHOOL ELIGIBILITY AND OBLIGATIONS.--To be
987 eligible to participate in the John M. McKay Scholarships for
988 Students with Disabilities Program, a private school may be
989 sectarian or nonsectarian and must:

990 (d) Maintain in this state a physical location where a
991 scholarship student regularly attends classes or where it
992 provides case management services under subsection (11).
993

994 The inability of a private school to meet the requirements of
995 this subsection shall constitute a basis for the ineligibility
996 of the private school to participate in the scholarship program
997 as determined by the department.

998 (10) JOHN M. MCKAY SCHOLARSHIP FUNDING AND PAYMENT.--

999 (a)1. The maximum scholarship granted for an eligible
1000 student with disabilities shall be a calculated amount
1001 equivalent to the base student allocation in the Florida
1002 Education Finance Program multiplied by the appropriate cost
1003 factor for the educational program that would have been provided
1004 for the student in the district school to which he or she was
1005 assigned, multiplied by the district cost differential.

1006 2. In addition, a share of the guaranteed allocation for
1007 exceptional students shall be determined and added to the
1008 calculated amount. The calculation shall be based on the
1009 methodology and the data used to calculate the guaranteed
1010 allocation for exceptional students for each district in chapter
1011 2000-166, Laws of Florida. Except as provided in subparagraphs
1012 3. and 4., the calculation shall be based on the student's
1013 grade, matrix level of services, and the difference between the

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1014 2000-2001 basic program and the appropriate level of services
1015 cost factor, multiplied by the 2000-2001 base student allocation
1016 and the 2000-2001 district cost differential for the sending
1017 district. Also, the calculated amount shall include the per-
1018 student share of supplemental academic instruction funds,
1019 instructional materials funds, technology funds, and other
1020 categorical funds as provided for such purposes in the General
1021 Appropriations Act.

1022 3. The calculated scholarship amount for a student who is
1023 eligible under sub-subparagraph (2)(a)2.b. ~~subparagraph (2)(a)2.~~
1024 shall be calculated as provided in subparagraphs 1. and 2.
1025 However, the calculation shall be based on the school district
1026 in which the parent resides at the time of the scholarship
1027 request.

1028 4. Until the school district completes the matrix required
1029 by paragraph (5)(b), the calculation shall be based on the
1030 matrix that assigns the student to support level I of service as
1031 it existed prior to the 2000-2001 school year. When the school
1032 district completes the matrix, the amount of the payment shall
1033 be adjusted as needed.

1034 (c)1. The school district shall report all students who
1035 are attending a private school under this program. The students
1036 with disabilities attending private schools on John M. McKay
1037 Scholarships shall be reported separately from other students
1038 reported for purposes of the Florida Education Finance Program.

1039 2. For program participants who are eligible under sub-
1040 subparagraph (2)(a)2.b. ~~subparagraph (2)(a)2.~~, the school

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1041 district that is used as the basis for the calculation of the
1042 scholarship amount as provided in subparagraph (a)3. shall:

1043 a. Report to the department all such students who are
1044 attending a private school under this program.

1045 b. Be held harmless for such students from the weighted
1046 enrollment ceiling for group 2 programs in s. 1011.62(1)(d)3.a.
1047 during the first school year in which the students are reported.

1048 (d) Following notification on July 1, September 1,
1049 December 1, or February 1 of the number of program participants,
1050 the department shall transfer, from General Revenue funds only,
1051 the amount calculated under paragraph (b) from the school
1052 district's total funding entitlement under the Florida Education
1053 Finance Program and from authorized categorical accounts to a
1054 separate account for the scholarship program for quarterly
1055 disbursement to the parents of participating students. Funds may
1056 not be transferred from any funding provided to the Florida
1057 School for the Deaf and the Blind for program participants who
1058 are eligible under sub-subparagraph (2)(a)2.b. ~~subparagraph~~
1059 ~~(2)(a)2.~~ For a student exiting a Department of Juvenile Justice
1060 commitment program who chooses to participate in the scholarship
1061 program, the amount of the John M. McKay Scholarship calculated
1062 pursuant to paragraph (b) shall be transferred from the school
1063 district in which the student last attended a public school
1064 prior to commitment to the Department of Juvenile Justice. When
1065 a student enters the scholarship program, the department must
1066 receive all documentation required for the student's
1067 participation, including the private school's and student's fee

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1068 schedules, at least 30 days before the first quarterly
1069 scholarship payment is made for the student.

1070 (11) ALTERNATIVE SITES FOR INSTRUCTION AND SERVICES.--A
1071 student eligible for a scholarship under this section may
1072 receive regular and direct instruction and services from a
1073 private school at a site other than the school's physical
1074 location if the following criteria are met:

1075 (a) The student's parent provides a notarized statement
1076 from the medical doctor or psychologist treating the student's
1077 disability which certifies that the student's welfare or the
1078 welfare of other students in the classroom will be jeopardized
1079 if the student is required to regularly attend class at the
1080 school's physical location. Such notarized statement must be:

1081 1. Annually provided to the department at least 60 days
1082 prior to the date of the first scholarship payment for each
1083 school year.

1084 2. Based on an annual review of the student's disability
1085 by the student's medical doctor or psychologist.

1086 (b) The private school serving the student:

1087 1. Employs or contracts with a case manager who
1088 coordinates and monitors the student's instruction and services,
1089 reviews and maintains the documentation submitted under
1090 subparagraph 2., and provides the student's parent and private
1091 school with monthly reports on the student's progress.

1092 2. Requires private school employees or contracted
1093 personnel who provide regular and direct instruction or services
1094 to a student at a site other than the private school's physical

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1095 location to submit to the case manager documentation of the
1096 instruction, services, and progress of the student.

1097 3. Notifies the department of each student subject to this
1098 subsection.

1099 (12) RETROACTIVE SCHOLARSHIP ELIGIBILITY.--A student who
1100 received a scholarship under this section in the 2005-2006
1101 school year, but who was unable to receive a scholarship in the
1102 2006-2007 school year due to the regular and direct contact
1103 requirement in paragraph (3)(h), is eligible for a scholarship
1104 in the 2008-2009 school year if the student:

1105 (a) Demonstrates that he or she would have met the
1106 criteria of paragraph (11)(a) at the time of his or her 2006-
1107 2007 scholarship.

1108 (b) Satisfies the requirements for a scholarship under
1109 this section other than the prior school year attendance
1110 requirement in paragraph (2)(a).

1111 Section 18. Subsections (2) through (5) of section
1112 1002.51, Florida Statutes, are renumbered as subsections (3)
1113 through (6), respectively, and a new subsection (2) is added to
1114 that section to read:

1115 1002.51 Definitions.--As used in this part, the term:

1116 (2) "Early intervention service provider" means a provider
1117 delivering early intervention services under s. 1002.66.

1118 Section 19. Subsections (1) and (3) of section 1002.53,
1119 Florida Statutes, are amended to read:

1120 1002.53 Voluntary Prekindergarten Education Program;
1121 eligibility and enrollment.--

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1122 (1) There is created the Voluntary Prekindergarten
1123 Education Program, which. ~~The program shall take effect in each~~
1124 ~~county at the beginning of the 2005-2006 school year and shall~~
1125 be organized, designed, and delivered in accordance with s. 1(b)
1126 and (c), Art. IX of the State Constitution.

1127 (3) The parent of each child eligible under subsection (2)
1128 may enroll the child in one of the following programs:

1129 (a) A school-year prekindergarten program delivered by a
1130 private prekindergarten provider under s. 1002.55;

1131 (b) A summer prekindergarten program delivered by a public
1132 school or private prekindergarten provider under s. 1002.61; ~~or~~

1133 (c) A school-year prekindergarten program delivered by a
1134 public school, if offered by a school district that is eligible
1135 under s. 1002.63; or

1136 (d) Beginning with the 2010-2011 school year, a
1137 prekindergarten program of early intervention services, if the
1138 child is eligible for the program under s. 1002.66.

1139
1140 Except as provided in s. 1002.71(4), a child may not enroll in
1141 more than one of these programs.

1142 Section 20. Section 1002.66, Florida Statutes, is created
1143 to read:

1144 1002.66 Prekindergarten program of early intervention
1145 services.--

1146 (1) Beginning with the 2010-2011 school year, a child who
1147 enrolls with the early learning coalition under s. 1002.53(3)(d)
1148 is eligible for a prekindergarten program of early intervention
1149 services if:

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1150 (a) The child is eligible for the Voluntary
1151 Prekindergarten Education Program under s. 1002.53(2); and

1152 (b) A current individual educational plan has been
1153 developed for the child in accordance with State Board of
1154 Education rule and the plan indicates the child's need for
1155 multiple and intensive services, delivered weekly or daily, to
1156 address the child's development of the following skills:

1157 1. Social skills, including replacement of problematic
1158 behaviors with more conventional and appropriate behaviors;

1159 2. Communication skills, including the development of a
1160 functional communication system;

1161 3. Fine and gross motor skills;

1162 4. Cognitive skills, including basic concepts and
1163 developmentally appropriate pre-academic skills; and

1164 5. Independent organizational skills and other behaviors
1165 necessary for future success in the typical educational
1166 environment.

1167
1168 If a child's individual educational plan indicates that the
1169 child meets the eligibility requirements for a prekindergarten
1170 program of early intervention services under this paragraph, the
1171 school district shall record the child's eligibility on a form,
1172 or otherwise in the format, developed by the Department of
1173 Education in consultation with the Agency for Workforce
1174 Innovation.

1175 (2) The parent of a child who is eligible for a
1176 prekindergarten program under this section may select one or
1177 more early intervention services that the child's individual

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1178 educational plan indicates is appropriate for the child. These
1179 early intervention services may include, but are not limited to:

1180 (a) Applied behavior analysis.

1181 (b) Speech-language pathology.

1182 (c) Occupational therapy.

1183 (d) Physical therapy.

1184 (3) The early intervention services provided for a child
1185 under this section must be delivered according to professionally
1186 accepted standards and must, in accordance with the performance
1187 standards adopted by the department under s. 1002.67, address
1188 the age-appropriate progress of the child in the development of
1189 the capabilities, capacities, and skills required under s. 1(b),
1190 Art. IX of the State Constitution.

1191 (4) Each Center for Autism and Related Disabilities
1192 established under s. 1004.55 shall, within the center's region,
1193 approve early intervention service providers whose services meet
1194 the standards in subsection (3), maintain a list of approved
1195 providers, and notify each school district and early learning
1196 coalition in the center's region of the approved provider list.
1197 Upon the request of a child's parent, a Center for Autism and
1198 Related Disabilities may approve an early intervention service
1199 provider that is not on the approved list if the provider's
1200 services meet the standards in subsection (3) and the child's
1201 individual educational plan indicates that the services are
1202 appropriate for the child.

1203 (5) From the funds allocated to the early learning
1204 coalition for the Voluntary Prekindergarten Education Program,
1205 the coalition shall reimburse an approved early intervention

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1206 service provider for authorized services provided for an
1207 eligible child, except that the cumulative total of services
1208 reimbursed for a child may not exceed the amount of the base
1209 student allocation provided for the Voluntary Prekindergarten
1210 Education Program in the General Appropriations Act.

1211 Section 21. Paragraph (a) of subsection (4) of section
1212 1002.71, Florida Statutes, is amended to read:

1213 1002.71 Funding; financial and attendance reporting.--

1214 (4) Notwithstanding s. 1002.53(3) and subsection (2):

1215 (a) A child who, for any of the prekindergarten programs
1216 listed in s. 1002.53(3), has not completed more than 10 percent
1217 of the hours authorized to be reported for funding under
1218 subsection (2), or has not expended more than 10 percent of the
1219 funds authorized for the child under s. 1002.66, may withdraw
1220 from the program for good cause, reenroll in one of the
1221 programs, and be reported for funding purposes as a full-time
1222 equivalent student in the program for which the child is
1223 reenrolled.

1224
1225 A child may reenroll only once in a prekindergarten program
1226 under this section. A child who reenrolls in a prekindergarten
1227 program under this subsection may not subsequently withdraw from
1228 the program and reenroll. The Agency for Workforce Innovation
1229 shall establish criteria specifying whether a good cause exists
1230 for a child to withdraw from a program under paragraph (a),
1231 whether a child has substantially completed a program under
1232 paragraph (b), and whether an extreme hardship exists which is
1233 beyond the child's or parent's control under paragraph (b).

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1234 Section 22. Paragraph (d) of subsection (2) of section
1235 1002.73, Florida Statutes, is redesignated as paragraph (e) and
1236 a new paragraph (d) is added to that subsection to read:

1237 1002.73 Department of Education; powers and duties;
1238 accountability requirements.--

1239 (2) The department shall adopt procedures for the
1240 department's:

1241 (d) Development, in consultation with the Agency for
1242 Workforce Innovation, of the form or format for recording a
1243 child's eligibility for early intervention services under s.
1244 1002.66(1)(b).

1245 Section 23. Paragraphs (a) and (f) of subsection (2) of
1246 section 1002.75, Florida Statutes, are amended to read:

1247 1002.75 Agency for Workforce Innovation; powers and
1248 duties; operational requirements.--

1249 (2) The Agency for Workforce Innovation shall adopt
1250 procedures governing the administration of the Voluntary
1251 Prekindergarten Education Program by the early learning
1252 coalitions and school districts for:

1253 (a) Enrolling children in and determining the eligibility
1254 of children for the Voluntary Prekindergarten Education Program
1255 under ss. 1002.53 and 1002.66 ~~s. 1002.53~~.

1256 (f) Paying private prekindergarten providers, and public
1257 schools, and early intervention service providers under ss.
1258 1002.66 and 1002.71 ~~s. 1002.71~~.

1259 Section 24. Effective upon this act becoming a law,
1260 section 1004.55, Florida Statutes, is amended to read:

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1261 1004.55 ~~Regional autism~~ Centers for Autism and Related
1262 Disabilities.--

1263 (1) ~~Seven regional autism~~ Centers for Autism and Related
1264 Disabilities are established to provide nonresidential resource
1265 and training services for:

1266 (a) Children younger than 5 years of age who have:

1267 1. An autism spectrum disorder; a genetic or metabolic
1268 disorder; a neurological disorder; a severe attachment disorder;
1269 a hearing impairment, including deafness; a visual impairment,
1270 including blindness; or dual sensory impairment; or

1271 2. A developmental delay in cognition; physical or motor
1272 development, including hearing or vision; communication; social
1273 or emotional development; or adaptive development.

1274 (b) Persons 5 years of age or older who have an autism
1275 spectrum disorder or a severe communication disorder ~~persons of~~
1276 ~~all ages and of all levels of intellectual functioning who have~~
1277 ~~autism, as defined in s. 393.063; who have a pervasive~~
1278 ~~developmental disorder that is not otherwise specified; who have~~
1279 ~~an autistic like disability; who have a dual sensory impairment;~~
1280 ~~or who have a sensory impairment with other handicapping~~
1281 ~~conditions.~~

1282 (2) Each center shall be operationally and fiscally
1283 independent and shall provide services within its geographical
1284 region of the state. Service delivery shall be consistent for
1285 all centers. Each center shall coordinate services within and
1286 between state and local agencies and school districts but may
1287 not duplicate services provided by those agencies or school

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1288 districts. The respective locations and service areas of the
1289 centers are:

1290 (a) The Department of Communication Disorders at Florida
1291 State University, which serves Bay, Calhoun, Escambia, Franklin,
1292 Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty,
1293 Madison, Okaloosa, Santa Rosa, Taylor, Wakulla, Walton, and
1294 Washington Counties.

1295 (b) The College of Medicine at the University of Florida,
1296 which serves Alachua, Bradford, Citrus, Columbia, Dixie,
1297 Gilchrist, Hamilton, Hernando, Lafayette, Levy, Marion, Putnam,
1298 Suwannee, and Union Counties.

1299 (c) The University of Florida Health Science Center at
1300 Jacksonville, which serves Baker, Clay, Duval, Flagler, Nassau,
1301 and St. Johns Counties.

1302 (d) The Louis de la Parte Florida Mental Health Institute
1303 at the University of South Florida, which serves Charlotte,
1304 Collier, DeSoto, Glades, Hardee, Hendry, Highlands,
1305 Hillsborough, Lee, Manatee, Pasco, Pinellas, Polk, and Sarasota
1306 Counties.

1307 (e) The Mailman Center for Child Development and the
1308 Department of Psychology at the University of Miami, which
1309 serves Broward, Dade, and Monroe Counties.

1310 (f) The College of Health and Public Affairs at the
1311 University of Central Florida, which serves Brevard, Lake,
1312 Orange, Osceola, Seminole, Sumter, and Volusia Counties.

1313 (g) The Department of Exceptional Student Education at
1314 Florida Atlantic University, which serves Palm Beach, Martin,
1315 St. Lucie, Okeechobee, and Indian River Counties.

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1316 (3)~~(2)~~ There is established for each center a constituency
1317 board, which shall work collaboratively with the center. Each
1318 board shall consist of no fewer than six members, each of whom
1319 is either an individual who has an autism spectrum disorder or
1320 another a disability that is described in subsection (1) or is a
1321 member of a family that includes a person who has such a
1322 disability, who are selected by each university president from a
1323 list that has been developed by the Autism Society of Florida
1324 and other relevant constituency groups that represent persons
1325 who have an autism spectrum disorder or another disability
1326 ~~sensory impairments as~~ described in subsection (1). As
1327 representatives of the center's constituencies, these boards
1328 shall meet quarterly with the staff of each of the centers to
1329 provide advice on policies, priorities, and activities. Each
1330 board shall submit to the university president and to the
1331 Department of Education an annual report that evaluates the
1332 activities and accomplishments of its center during the year.
1333 The board for each center should raise funds equivalent to 2
1334 percent of the total funds allocated to that center in each
1335 fiscal year.

1336 (4)~~(3)~~ To promote statewide planning and coordination, a
1337 conference must be held annually for staff from each of the
1338 seven centers and representatives from each center's
1339 constituency board. The purpose of the conference is to
1340 facilitate coordination, networking, cross-training, and
1341 feedback among the staffs and constituency boards of the
1342 centers.

1343 (5)~~(4)~~ (a) Each center shall provide:

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1344 1. A staff that has expertise in autism spectrum disorder
1345 and the other disabilities described in subsection (1) ~~autistic-~~
1346 ~~like behaviors and in sensory impairments.~~

1347 2. Individual and direct family assistance in the home,
1348 community, and school. A center's assistance should not supplant
1349 other responsibilities of state and local agencies, and each
1350 school district is responsible for providing an appropriate
1351 education program for clients of a center who are school age.

1352 3. Technical assistance and consultation services,
1353 including specific intervention and assistance for a client of
1354 the center, the client's family, and the school district, and
1355 any other services that are appropriate.

1356 4. Professional training programs that include developing,
1357 providing, and evaluating preservice and inservice training in
1358 state-of-the-art practices for personnel who work with the
1359 populations served by the centers and their families.

1360 5. Public education programs to increase awareness of the
1361 public about autism spectrum disorder and the other disabilities
1362 described in subsection (1), ~~autistic related disabilities of~~
1363 ~~communication and behavior, dual sensory impairments, and~~
1364 ~~sensory impairments with other handicapping conditions.~~

1365 6. Coordination of regional learning gateways established
1366 in accordance with s. 1006.80.

1367 7. Approval of early intervention service providers for
1368 prekindergarten programs for children with disabilities in
1369 accordance with s. 1002.66.

1370 (b) Effective October 1, 2008, a center that is not
1371 designated a medical model for the treatment of autism spectrum

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1372 disorder under s. 1006.82 may not provide direct medical
1373 intervention or pharmaceutical intervention ~~is prohibited in any~~
1374 ~~center on or after July 1, 2008.~~

1375 ~~(6)(5)~~ The State Board of Education, in cooperation with
1376 the ~~regional autism~~ Centers for Autism and Related Disabilities,
1377 shall adopt the necessary rules to carry out the purposes of
1378 this section.

1379 Section 25. Effective upon this act becoming a law,
1380 subsection (1), paragraph (b) of subsection (2), and subsections
1381 (3) and (4) of section 1006.03, Florida Statutes, are amended to
1382 read:

1383 1006.03 Florida Diagnostic and Learning Resources System;
1384 regional resource centers.--

1385 (1) The department shall maintain the Florida Diagnostic
1386 and Learning Resources System, which shall be comprised of a
1387 network of regional diagnostic and learning resources resource
1388 centers for exceptional students. The regional centers shall, to
1389 assist in the provision of medical, physiological,
1390 psychological, and educational testing and other services
1391 designed to evaluate and diagnose exceptionalities, ~~to~~ make
1392 referrals for necessary instruction and services, and ~~to~~
1393 facilitate the provision of instruction and services to
1394 exceptional students. The department shall cooperate with the
1395 Department of Children and Family Services and the Centers for
1396 Autism and Related Disabilities in identifying service needs and
1397 areas.

1398 (2) Within its identified service area, each regional
1399 center shall:

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1400 (b) Assist in the provision of services for exceptional
1401 children, using to the maximum, but not supplanting, the
1402 existing facilities and services of each school district.

1403 (3) Regional diagnostic and learning resources ~~resource~~
1404 centers may provide testing and evaluation services to private
1405 school students and other children who are not enrolled in
1406 public schools.

1407 (4) Regional diagnostic and learning resources ~~resource~~
1408 centers may assist districts in providing testing and evaluation
1409 services for infants and preschool children with or at risk of
1410 developing disabilities, and may assist districts in providing
1411 interdisciplinary training and resources to parents of infants
1412 and preschool children with or at risk of developing
1413 disabilities and to early learning ~~school readiness~~ programs.

1414 Section 26. Effective upon this act becoming a law, part
1415 III of chapter 1006, Florida Statutes, shall be entitled
1416 "Learning Gateway" and shall consist of sections 1006.80 and
1417 1006.82, Florida Statutes.

1418 Section 27. Effective upon this act becoming a law,
1419 section 1006.80, Florida Statutes, is created to read:

1420 1006.80 Regional learning gateways.--The Centers for
1421 Autism and Related Disabilities established under s. 1004.55, in
1422 collaboration with the Department of Education and the Florida
1423 Diagnostic and Learning Resources System, shall establish a
1424 statewide system of learning gateways. The system must include
1425 the establishment of a learning gateway in the geographic region
1426 of each center. Each region's learning gateway shall:

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1427 (1) Establish a single point of access for referral to the
1428 appropriate agencies for the screening and assessment of
1429 children younger than 5 years of age for disabilities,
1430 conducting diagnostic evaluations for children with suspected
1431 disabilities, and referring children with disabilities for early
1432 intervention services and early learning programs.

1433 (2) Designate a central telephone number in the center's
1434 region, and an Internet website, for parents, practitioners, and
1435 providers to obtain information about services available through
1436 the learning gateway, screenings, assessments, diagnostic
1437 evaluations, early intervention services, and early learning
1438 programs for children with disabilities.

1439 (3) Provide followup contact for families whose children
1440 are determined ineligible for services under Part B or Part C of
1441 the federal Individuals with Disabilities Education Act.

1442 (4) Provide interagency coordination in the center's
1443 region among the regional offices of state agencies, including
1444 offices of the Division of Children's Medical Services Network
1445 of the Department of Health; regional diagnostic and learning
1446 resources centers; diagnostic and learning resources centers at
1447 state universities; school districts; early learning coalitions;
1448 county and municipal agencies; community agencies and
1449 organizations; and public and private providers of early
1450 intervention services and early learning programs, in order to
1451 develop and implement strategies to reduce a child's waiting
1452 time for services, reduce interagency duplication, and reduce
1453 interagency differences in eligibility criteria for services and

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1454 programs which cause cross-agency screenings, assessments, and
1455 diagnostic evaluations.

1456 (5) Facilitate the integration of services, linkages among
1457 providers, and the array of services required to address the
1458 needs of children and families.

1459 (6) Improve community awareness and education for parents
1460 and practitioners about the developmental milestones, and the
1461 warning signs or precursors of disabilities, exhibited by
1462 children younger than 5 years of age.

1463 (7) Provide training and technical assistance for parents,
1464 practitioners, and providers.

1465 Section 28. Effective upon this act becoming a law,
1466 section 1006.82, Florida Statutes, is created to read:

1467 1006.82 State Learning Gateway Council.--

1468 (1) There is created the State Learning Gateway Council,
1469 which is assigned to the Department of Education for
1470 administrative purposes. The council is composed of the
1471 following agency heads, and officers of the following
1472 organizations, or their permanent designees:

1473 (a) Secretary of Children and Family Services.

1474 (b) Director of the Agency for Persons with Disabilities.

1475 (c) Director of Workforce Innovation.

1476 (d) State Surgeon General.

1477 (e) Secretary of Health Care Administration.

1478 (f) Commissioner of Education.

1479 (g) The director of a regional diagnostic and learning
1480 resources center appointed by the Commissioner of Education.

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1481 (h) The director of a diagnostic and learning resources
1482 center at a state university, selected from among the directors
1483 of the university centers.

1484 (i) Chair of the Florida Early Learning Advisory Council.

1485 (j) President of the Autism Society of Florida.

1486 (k) President of the Florida Association for Behavioral
1487 Analysis.

1488 (l) President of the Florida Pediatric Society.

1489 (m) President of the Florida Psychological Association.

1490 (2) The council shall select a chair from among its
1491 members. An executive director of a Center for Autism and
1492 Related Disabilities, selected from among the executive
1493 directors of the centers, shall serve as the council's executive
1494 director.

1495 (3) (a) The council shall coordinate the statewide
1496 implementation of regional learning gateways and shall advise
1497 the Legislature, the Governor, and the agencies represented by
1498 the council's members on the system of regional learning
1499 gateways.

1500 (b) Each Center for Autism and Related Disabilities shall
1501 submit an implementation plan to the council for the region's
1502 learning gateway by January 15, 2009. The plan must include the
1503 center's proposed expenditures for implementation of the
1504 regional learning gateway.

1505 (c) The council may designate a Center for Autism and
1506 Related Disabilities on the main campus, or at any branch campus
1507 or center, of the University of Florida, as a medical model for
1508 the treatment of autism spectrum disorder, if the center

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1509 demonstrates a unique community need for such treatment in the
1510 center's region. A center designated as a medical model shall,
1511 by October 1 of each year, submit an annual report to the
1512 council. Each annual report must summarize the center's
1513 activities related to the treatment of autism spectrum disorder,
1514 including the center's expenditures for those services, for the
1515 prior state fiscal year.

1516 (4) (a) The agencies represented by the council's
1517 membership shall enter into an interagency agreement to provide
1518 staffing and administrative support for the council.

1519 (b) Members of the council shall serve without
1520 compensation but are entitled to per diem and travel expenses
1521 for required attendance at council meetings in accordance with
1522 the provisions of s. 112.061. Each council member is subject to
1523 the Code of Ethics for Public Officers and Employees under part
1524 III of chapter 112.

1525 (5) (a) The council may use any method of
1526 telecommunications to conduct meetings, including establishing a
1527 quorum through telecommunications, if the public is given proper
1528 notice of a telecommunications meeting and reasonable access to
1529 observe and, when appropriate, participate.

1530 (b) The council appointments shall be made, and the
1531 council shall conduct its initial meeting, within 45 days after
1532 the effective date of this section.

1533 Section 29. Effective upon this act becoming a law,
1534 sections 411.226, 411.227, and 411.228, Florida Statutes, are
1535 repealed.

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1536 Section 30. Except as otherwise expressly provided in
1537 this act, this act shall take effect July 1, 2008.
1538
1539
1540

1541 -----

1542 **T I T L E A M E N D M E N T**

1543 Remove the entire title and insert:

1544 A bill to be entitled

1545 An act relating to children with disabilities; creating
1546 the "Window of Opportunity Act"; amending s. 391.026,
1547 F.S.; requiring the Department of Health to provide
1548 certain services under contract to the Florida Healthy
1549 Kids Corporation; specifying that children served under
1550 such contract are not enrollees of Children's Medical
1551 Services; amending 393.063, F.S.; revising the definition
1552 of the term "developmental disability"; providing a
1553 definition of the term "Down syndrome"; amending s.
1554 409.811, F.S.; providing a definition of the term "autism
1555 spectrum disorder"; amending s. 409.8132, F.S.; revising
1556 provisions relating to enrollment in the Medikids program
1557 component of Florida Kidcare; providing for the Agency for
1558 Health Care Administration to assign family members to the
1559 same managed care plan or Medicaid provider, under certain
1560 circumstances; amending s. 409.8134, F.S.; providing
1561 eligibility criteria for enrollment for premium
1562 assistance; providing for enrollment without premium
1563 assistance in the Florida Kidcare program during open

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

1564 enrollment periods; providing limitations on year-round
1565 enrollment for premium assistance; specifying a time
1566 period for enrollees not eligible for premium assistance
1567 to enroll in the Florida Healthy Kids program; providing
1568 exceptions; providing for certain enrollees to transfer to
1569 the Healthy Kids program under certain circumstances;
1570 authorizing the board of directors of the Florida Healthy
1571 Kids Corporation to take certain actions to reduce
1572 projected costs of the program under certain
1573 circumstances; amending s. 409.814, F.S.; revising
1574 conditions for eligibility for premium assistance for the
1575 Florida Kidcare Program; providing limitations on
1576 enrollment in the Medikids program after January 1, 2009;
1577 providing for enrollment of new applicants in the Florida
1578 Healthy Kids program; revising duties of the board of
1579 directors of the Florida Healthy Kids Corporation
1580 regarding enrollment limitations; providing for
1581 notification to certain managed care plans or MediPass
1582 providers prior to termination of a child's eligibility
1583 for Florida Kidcare; providing for certain information
1584 relating to eligibility to be obtained electronically;
1585 providing an exemption from certain requirements for
1586 individuals who pay the full cost of the Florida Kidcare
1587 premium; amending s. 409.815, F.S.; revising provisions
1588 relating to health benefits coverage for specified
1589 services to include habilitative and behavior analysis
1590 services; providing definitions; limiting the lifetime
1591 maximum of health benefits coverage for certain services;

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

1592 amending s. 409.818, F.S.; revising timeframe for
1593 redetermination or reverification of eligibility for
1594 Florida Kidcare; amending s. 409.906, F.S.; authorizing
1595 the Agency for Health Care Administration to seek federal
1596 approval through a state plan amendment to provide home
1597 and community-based services for autism spectrum disorder
1598 and other development disabilities; specifying eligibility
1599 criteria; specifying limitations on provision of benefits;
1600 requiring reports to the Legislature; requiring
1601 legislative approval for implementation of certain
1602 provisions; amending s. 411.01, F.S.; providing for the
1603 payment schedules of early learning coalitions to include
1604 certain payments authorized by the Federal Government;
1605 creating s. 456.0291, F.S.; authorizing certain licensing
1606 boards to require special continuing education on
1607 developmental disabilities for certain licensees and
1608 certificateholders; providing penalties; providing
1609 rulemaking authority; requiring the Department of Health
1610 to develop and implement a plan to promote awareness of
1611 developmental disabilities, with a focus on autism
1612 spectrum disorder; amending s. 624.91, F.S.; revising
1613 legislative intent; requiring the Florida Healthy Kids
1614 Corporation to provide information relating to costs and
1615 utilization of full-pay and Title XXI subsidized
1616 populations enrolled in Florida Healthy Kids health
1617 benefits coverage plans; establishing an assignment
1618 process; requiring the corporation to provide a report by
1619 October 31, 2008, to the Governor and Legislature that

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Bill No. CS/CS/CS/SB 2654

Amendment No.

1620 includes an analysis of the projected impact on premiums
1621 resulting from the provision of additional services;
1622 requiring the corporation to provide a quarterly
1623 assessment of costs and utilization of services for
1624 Florida Healthy Kids benefit plans to the Governor and
1625 Legislature; creating s. 624.916, F.S.; directing the
1626 Office of Insurance Regulation to establish a workgroup to
1627 develop and execute a compact relating to coverage for
1628 insured persons with development disabilities; providing
1629 for membership of the workgroup; requiring the workgroup
1630 to convene within a specified period of time; directing
1631 the office to establish a consumer advisory workgroup and
1632 providing purpose thereof; requiring the compact to
1633 contain specified components; requiring reports to the
1634 Governor and the Legislature; creating s. 627.6686, F.S.;;
1635 providing health insurance coverage for individuals with
1636 developmental disabilities; providing definitions;
1637 providing coverage for certain screening to diagnose and
1638 treat developmental disabilities; providing limitations on
1639 coverage; providing for eligibility standards for benefits
1640 and coverage; prohibiting insurers from denying coverage
1641 under certain circumstances; specifying required elements
1642 of a treatment plan; providing, beginning January 1, 2011,
1643 that the maximum benefit shall be adjusted annually;
1644 clarifying that the section may not be construed as
1645 limiting benefits and coverage otherwise available to an
1646 insured under a health insurance plan; prohibiting the
1647 Office of Insurance Regulation from enforcing certain

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HOUSE AMENDMENT

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Amendment No.

1648 provisions against insurers that are signatories to the
1649 developmental disabilities compact by a specified date;
1650 creating s. 641.31098, F.S.; providing coverage under a
1651 health maintenance contract for individuals with
1652 developmental disabilities; providing definitions;
1653 providing coverage for certain screening to diagnose and
1654 treat developmental disabilities; providing limitations on
1655 coverage; providing for eligibility standards for benefits
1656 and coverage; prohibiting health maintenance organizations
1657 from denying coverage under certain circumstances;
1658 specifying required elements of a treatment plan;
1659 providing, beginning January 1, 2011, that the maximum
1660 benefit shall be adjusted annually; prohibiting the Office
1661 of Insurance Regulation from enforcing certain provisions
1662 against health maintenance organizations that are
1663 signatories to the developmental disabilities compact by a
1664 specified date; amending s. 1002.39, F.S., relating to the
1665 John M. McKay Scholarships for Students with Disabilities
1666 Program; revising the terminology used to identify
1667 students with certain disabilities; authorizing students
1668 who receive certain services under the Voluntary
1669 Prekindergarten Education Program to receive a John M.
1670 McKay Scholarship; conforming cross-references; permitting
1671 students to receive scholarship services at locations
1672 other than the private school's site under specified
1673 conditions; providing retroactive eligibility for
1674 scholarships under certain circumstances; amending s.
1675 1002.51, F.S.; revising definitions for the Voluntary

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1676 Prekindergarten Education Program; amending s. 1002.53 and
1677 creating s. 1002.66, F.S.; establishing a prekindergarten
1678 program option for early intervention services; providing
1679 eligibility criteria for early intervention services;
1680 requiring the Department of Education to develop forms;
1681 providing for the approval of early intervention service
1682 providers; authorizing the expenditure of funds for early
1683 intervention services; amending s. 1002.71, F.S.;
1684 authorizing a child participating in a prekindergarten
1685 program for children with disabilities to reenroll in
1686 another program option under certain conditions; amending
1687 ss. 1002.73 and 1002.75, F.S.; revising the powers and
1688 duties of the Department of Education and Agency for
1689 Workforce Innovation for prekindergarten programs;
1690 amending s. 1004.55, F.S.; redesignating regional autism
1691 centers as Centers for Autism and Related Disabilities;
1692 revising terminology and duties of the regional autism
1693 centers; revising date that regional autism centers are
1694 prohibited from providing direct medical intervention or
1695 pharmaceutical intervention and providing an exception for
1696 a center designated a medical model by the State Learning
1697 Gateway Council; amending s. 1006.03, F.S.; requiring the
1698 Department of Education to maintain the Florida Diagnostic
1699 and Learning Resources System; revising duties of regional
1700 diagnostic and learning resources centers; creating part
1701 III of chapter 1006, F.S., relating to the Learning
1702 Gateway; creating s. 1006.80, F.S.; requiring Centers for
1703 Autism and Related Disabilities to establish a statewide

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Amendment No.

1704 system of learning gateways; specifying functions of
1705 learning gateways; creating s. 1006.82, F.S.; establishing
1706 the State Learning Gateway Council; assigning the council
1707 to the Department of Education for administrative
1708 purposes; specifying the membership of the council;
1709 providing for selection of the council's chair and
1710 executive director; prescribing the council's duties;
1711 requiring the Centers for Autism and Related Disabilities
1712 to submit an implementation plan by a specified date;
1713 authorizing the council to designate a center at the
1714 University of Florida as a medical model under certain
1715 circumstances; requiring a center designated as a medical
1716 model to submit an annual report; repealing ss. 411.226,
1717 411.227, and 411.228, F.S., relating to the Learning
1718 Gateway, components of the Learning Gateway, and
1719 accountability; providing effective dates.

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