

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. Subsection (7) of section 409.8132, Florida
37 Statutes, is amended to read:

38 409.8132 Medikids program component.--

39 (7) ENROLLMENT.--Enrollment in the Medikids program
40 component may occur at any time throughout the year. A child may
41 not receive services under the Medikids program until the child
42 is enrolled in a managed care plan or MediPass. Once determined
43 eligible, an applicant may receive choice counseling and select
44 a managed care plan or MediPass. The agency may initiate

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45 mandatory assignment for a Medikids applicant who has not chosen
46 a managed care plan or MediPass provider after the applicant's
47 voluntary choice period ends; however, the agency shall ensure
48 that family members are assigned to the same managed care plan
49 or the same MediPass provider to the greatest extent possible,
50 including situations in which some family members are enrolled
51 in Medicaid and other family members are enrolled in a Title
52 XXI-funded component of the Florida Kidcare program. An
53 applicant may select MediPass under the Medikids program
54 component only in counties that have fewer than two managed care
55 plans available to serve Medicaid recipients and only if the
56 federal Health Care Financing Administration determines that
57 MediPass constitutes "health insurance coverage" as defined in
58 Title XXI of the Social Security Act.

59 Section 5. Subsection (2) of section 409.8134, Florida
60 Statutes, is amended, and subsection (5) is added to that
61 section, to read:

62 409.8134 Program expenditure ceiling.--

63 (2) Open enrollment periods shall consist of:

64 (a) Enrollment for premium assistance.--The Florida
65 Kidcare program may conduct enrollment at any time throughout
66 the year for the purpose of enrolling children eligible for all
67 program components listed in s. 409.813 except Medicaid. The
68 four Florida Kidcare administrators shall work together to
69 ensure that the year-round enrollment period is announced
70 statewide. Eligible children for premium assistance shall be
71 enrolled on a first-come, first-served basis using the date the
72 enrollment application is received. Enrollment shall immediately

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73 cease when the expenditure ceiling is reached. Year-round
74 enrollment for premium assistance shall only be held if the
75 Social Services Estimating Conference determines that sufficient
76 federal and state funds will be available to finance the
77 increased enrollment ~~through federal fiscal year 2007~~. Any
78 individual who is not enrolled must reapply by submitting a new
79 application. The application for the Florida Kidcare program
80 shall be valid for a period of 120 days after the date it was
81 received. At the end of the 120-day period, if the applicant has
82 not been enrolled in the program, the application shall be
83 invalid and the applicant shall be notified of the action. The
84 applicant may reactivate ~~resubmit~~ the application after
85 notification of the action taken by the program. Except for the
86 Medicaid program, whenever the Social Services Estimating
87 Conference determines that there are presently, or will be by
88 the end of the current fiscal year, insufficient funds to
89 finance the current or projected enrollment in the Florida
90 Kidcare program, all additional enrollment must cease and
91 additional enrollment may not resume until sufficient funds are
92 available to finance such enrollment.

93 (b) Open enrollment without premium assistance, effective
94 July 1, 2009.--

95 1. Effective July 1, 2009, an open enrollment period for
96 the Florida Healthy Kids program for those enrollees not
97 eligible for premium assistance may be held once each fiscal
98 year and may not exceed 30 consecutive calendar days in length.
99 The timing and length of any open enrollment period shall be
100 determined by the Florida Healthy Kids Corporation. Applicants

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101 shall be enrolled on a first come, first served basis, based
102 upon the date the application was received. During the 2009-2010
103 fiscal year, the effective date for new enrollees without
104 premium assistance shall be October 1, 2009. However, for a
105 child who has had his or her coverage in an employer-sponsored
106 or private health benefit plan voluntarily canceled in the last
107 90 days and who is otherwise eligible to participate without
108 premium assistance the effective date of coverage shall be the
109 end of the 90-day period or October 1, 2009, whichever is later.

110 2. The following individuals are not subject to the open
111 enrollment period:

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

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

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

121 3. Any individual who is not enrolled under this
122 subsection must reapply by submitting a new application during
123 the next open enrollment period. The application for the Florida
124 Kidcare program without premium assistance shall be valid for
125 the period of the open enrollment.

126 (5) Effective October 1, 2009, upon determination by the
127 Social Service Estimating Conference, in consultation with the
128 agency and the Florida Healthy Kids Corporation, that enrollment

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129 of children whose family income exceeds 200 percent of the
130 federal poverty level is projected to raise overall premiums per
131 enrollee by greater than 5 percent of current average premiums
132 in the Florida Healthy Kids plans, the board of directors of the
133 Florida Healthy Kids Corporation may, with the concurrence of
134 the agency, take appropriate actions to reduce the projected
135 cost below the projected 5 percent increase. Actions the board
136 may take may include, but are not limited to:

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

139 (b) Eliminating habilitative and or behavior analysis
140 services as a benefit in Healthy Kids plans for enrollees and
141 providing enrollees the opportunity to purchase these benefits
142 separately.

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

145 (d) Reducing benefit packages to all nonpremium assistance
146 enrollees.

147 Section 6. Paragraphs (c) and (f) of subsection (4) and
148 subsections (5), (7), and (8) of section 409.814, Florida
149 Statutes, are amended to read:

150 409.814 Eligibility.--A child who has not reached 19 years
151 of age whose family income is equal to or below 200 percent of
152 the federal poverty level is eligible for the Florida Kidcare
153 program as provided in this section. For enrollment in the
154 Children's Medical Services Network, a complete application
155 includes the medical or behavioral health screening. If,
156 subsequently, an individual is determined to be ineligible for
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157 coverage, he or she must immediately be disenrolled from the
158 respective Florida Kidcare program component.

159 (4) The following children are not eligible to receive
160 premium assistance for health benefits coverage under the
161 Florida Kidcare program, except under Medicaid if the child
162 would have been eligible for Medicaid under s. 409.903 or s.
163 409.904 as of June 1, 1997:

164 (c) A child who is seeking premium assistance for the
165 Florida Kidcare program through employer-sponsored group
166 coverage, if the child has been covered by the same employer's
167 group coverage during the 90 days ~~6 months~~ prior to the family's
168 submitting an application for determination of eligibility under
169 the program.

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

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

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

181 3. The parent with health benefits coverage for the child
182 is deceased;

183 4. The employer of the parent canceled health benefits
184 coverage for children;

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

187 6. The child has exhausted coverage under a COBRA
188 continuation provision; or

189 7. A situation involving domestic violence led to the loss
190 of coverage.

191 (5) A child whose family income is above 200 percent of
192 the federal poverty level or a child who is excluded under the
193 provisions of subsection (4) may participate in the Medikids
194 program as provided in s. 409.8132 or, if the child is
195 ineligible for Medikids by reason of age, in the Florida Healthy
196 Kids program as provided in s. 624.91, subject to the following
197 provisions:

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

201 (b) Effective October 1, 2009, new applicants for
202 nonpremium assistance in the Medikids program shall enroll in
203 the Florida Healthy Kids program component of the Florida
204 Kidcare program. ~~The agency is authorized to place limits on~~
205 enrollment in Medikids by these children in order to avoid
206 adverse selection. ~~The number of children participating in~~
207 Medikids whose family income exceeds 200 percent of the federal
208 poverty level must not exceed 10 percent of total enrollees in
209 the Medikids program.

210 (c) ~~The board of directors of the Florida Healthy Kids~~
211 ~~Corporation is authorized to place limits on enrollment of these~~
212 ~~children in order to avoid adverse selection. In addition, the~~

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213 ~~board~~ is authorized to offer a reduced benefit package to these
214 children in order to limit program costs for such families. ~~The~~
215 ~~number of children participating in the Florida Healthy Kids~~
216 ~~program whose family income exceeds 200 percent of the federal~~
217 ~~poverty level must not exceed 10 percent of total enrollees in~~
218 ~~the Florida Healthy Kids program.~~

219 (7) When determining or reviewing a child's eligibility
220 under the Florida Kidcare program, the applicant shall be
221 provided with reasonable notice of changes in eligibility which
222 may affect enrollment in one or more of the program components.
223 When a transition from one program component to another is
224 authorized, there shall be cooperation between the program
225 components, and the affected family, the child's health
226 insurance plan, and the child's health care providers to promote
227 which promotes continuity of health care coverage. If a child is
228 determined ineligible for Medicaid or Medikids, the agency, in
229 coordination with the department, shall notify that child's
230 Medicaid managed care plan or MediPass provider of such
231 determination before the child's eligibility is scheduled to be
232 terminated so that the Medicaid managed care plan or MediPass
233 provider can assist the child's family in applying for Florida
234 Kidcare program coverage. Any authorized transfers must be
235 managed within the program's overall appropriated or authorized
236 levels of funding. Each component of the program shall establish
237 a reserve to ensure that transfers between components will be
238 accomplished within current year appropriations. These reserves
239 shall be reviewed by each convening of the Social Services

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240 Estimating Conference to determine the adequacy of such reserves
241 to meet actual experience.

242 (8) In determining the eligibility of a child for the
243 Florida Kidcare program, an assets test is not required. The
244 information required under this section from each applicant
245 shall be obtained electronically to the extent possible. If such
246 information cannot be obtained electronically, the ~~Each~~
247 applicant shall provide written documentation during the
248 application process and the redetermination process, including,
249 but not limited to, the following:

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

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

256 1. Their employer does not sponsor a health benefit plan
257 for employees; or

258 2. The potential enrollee is not covered by the employer-
259 sponsored health benefit plan because the potential enrollee is
260 not eligible for coverage, or, if the potential enrollee is
261 eligible but not covered, a statement of the cost to enroll the
262 potential enrollee in the employer-sponsored health benefit
263 plan.

264

265 An individual who applies for coverage under the Florida Kidcare
266 program and who pays the full cost of the premium is exempt from
267 the requirements of this subsection.

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268 Section 7. Paragraphs (r) through (v) of subsection (2) of
269 section 409.815, Florida Statutes, are redesignated as
270 paragraphs (s) through (w), respectively, present paragraphs
271 (o), (r), and (u) are amended, and a new paragraph (r) is added
272 to that subsection, to read:

273 409.815 Health benefits coverage; limitations.--

274 (2) BENCHMARK BENEFITS.--In order for health benefits
275 coverage to qualify for premium assistance payments for an
276 eligible child under ss. 409.810-409.820, the health benefits
277 coverage, except for coverage under Medicaid and Medikids, must
278 include the following minimum benefits, as medically necessary.

279 (o) Therapy services.--Covered services include
280 habilitative and rehabilitative services, including
281 occupational, physical, respiratory, and speech therapies, with
282 the following limitations:

283 1. Rehabilitative services are limited to:

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

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

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

292 a. Habilitation when improvements in and maintenance of
293 human behavior, skill acquisition, and communication will
294 result; and

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

297 (r) Behavior analysis services.--Effective October 1,
298 2009, behavior analysis and behavior assistant services shall be
299 covered for enrollees that are diagnosed with a developmental
300 disability as defined in s. 393.063 or autism spectrum disorder.

301 For purposes of this paragraph:

302 1. "Behavior analysis" means the design, implementation,
303 and evaluation of instructional and environmental modifications
304 to produce socially significant improvements in human behavior
305 through skill acquisition and the reduction of problematic
306 behavior. Behavior analysis shall be provided by an individual
307 certified pursuant to s. 393.17 or an individual licensed under
308 chapter 490 or chapter 491.

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

312 (s) ~~(r)~~ Lifetime maximum and limitations.--Health benefits
313 coverage obtained under ss. 409.810-409.820 shall pay an
314 enrollee's covered expenses at a lifetime maximum of \$1 million
315 per covered child. However, coverage for the combination of
316 behavior analysis services and habilitative therapy services for
317 recipients diagnosed with a developmental disability as defined
318 in s. 393.063 or autism spectrum disorder shall be limited to
319 \$36,000 annually and may not exceed \$108,000 in total lifetime
320 benefits. Without prior authorization by the Florida Healthy
321 Kids plan, not more than 12 percent of the annual maximum amount

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322 for combined habilitative therapy and behavior analysis services
323 may be used on a monthly basis.

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

325 1. This section sets the minimum benefits that must be
326 included in any health benefits coverage, other than Medicaid or
327 Medikids coverage, offered under ss. 409.810-409.820. Health
328 benefits coverage may include additional benefits not included
329 under this subsection, but may not include benefits excluded
330 under paragraph (t) ~~(s)~~.

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

333
334 Except for the Children's Medical Services Network, the agency
335 may not increase the premium assistance payment for either
336 additional benefits provided beyond the minimum benefits
337 described in this section or the imposition of less restrictive
338 service limitations.

339 Section 8. Paragraph (b) of subsection (1) of section
340 409.818, Florida Statutes, is amended to read:

341 409.818 Administration.--In order to implement ss.
342 409.810-409.820, the following agencies shall have the following
343 duties:

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

345 (b) Establish and maintain the eligibility determination
346 process under the program except as specified in subsection (5).
347 The department shall directly, or through the services of a
348 contracted third-party administrator, establish and maintain a
349 process for determining eligibility of children for coverage

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350 under the program. The eligibility determination process must be
351 used solely for determining eligibility of applicants for health
352 benefits coverage under the program. The eligibility
353 determination process must include an initial determination of
354 eligibility for any coverage offered under the program, as well
355 as a redetermination or reverification of eligibility each
356 subsequent 12 6 months. Effective January 1, 1999, a child who
357 has not attained the age of 5 and who has been determined
358 eligible for the Medicaid program is eligible for coverage for
359 12 months without a redetermination or reverification of
360 eligibility. In conducting an eligibility determination, the
361 department shall determine if the child has special health care
362 needs. The department, in consultation with the Agency for
363 Health Care Administration and the Florida Healthy Kids
364 Corporation, shall develop procedures for redetermining
365 eligibility which enable a family to easily update any change in
366 circumstances which could affect eligibility. The department may
367 accept changes in a family's status as reported to the
368 department by the Florida Healthy Kids Corporation without
369 requiring a new application from the family. Redetermination of
370 a child's eligibility for Medicaid may not be linked to a
371 child's eligibility determination for other programs.

372 Section 9. Subsection (26) is added to section 409.906,
373 Florida Statutes, to read:

374 409.906 Optional Medicaid services.--Subject to specific
375 appropriations, the agency may make payments for services which
376 are optional to the state under Title XIX of the Social Security
377 Act and are furnished by Medicaid providers to recipients who

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378 are determined to be eligible on the dates on which the services
379 were provided. Any optional service that is provided shall be
380 provided only when medically necessary and in accordance with
381 state and federal law. Optional services rendered by providers
382 in mobile units to Medicaid recipients may be restricted or
383 prohibited by the agency. Nothing in this section shall be
384 construed to prevent or limit the agency from adjusting fees,
385 reimbursement rates, lengths of stay, number of visits, or
386 number of services, or making any other adjustments necessary to
387 comply with the availability of moneys and any limitations or
388 directions provided for in the General Appropriations Act or
389 chapter 216. If necessary to safeguard the state's systems of
390 providing services to elderly and disabled persons and subject
391 to the notice and review provisions of s. 216.177, the Governor
392 may direct the Agency for Health Care Administration to amend
393 the Medicaid state plan to delete the optional Medicaid service
394 known as "Intermediate Care Facilities for the Developmentally
395 Disabled." Optional services may include:

396 (26) HOME AND COMMUNITY-BASED SERVICES FOR AUTISM SPECTRUM
397 DISORDER AND OTHER DEVELOPMENTAL DISABILITIES.--The agency is
398 authorized to seek federal approval through a Medicaid waiver or
399 a state plan amendment for the provision of occupational
400 therapy, speech therapy, physical therapy, behavior analysis,
401 and behavior assistant services to individuals who are 5 years
402 of age and under and have a diagnosed developmental disability
403 as defined in s. 393.063 or autism spectrum disorder. Coverage
404 for such services shall be limited to \$36,000 annually and may
405 not exceed \$108,000 in total lifetime benefits. The agency shall

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406 submit an annual report beginning on January 1, 2009, to the
407 President of the Senate, the Speaker of the House of
408 Representatives, and the relevant committees of the Senate and
409 the House of Representatives regarding progress on obtaining
410 federal approval and recommendations for the implementation of
411 these home and community-based services. The agency may not
412 implement this subsection without prior legislative approval.

413 Section 10. Section 456.0291, Florida Statutes, is created
414 to read:

415 456.0291 Requirement for instruction on developmental
416 disabilities.--

417 (1)(a) The appropriate board shall require each person
418 licensed or certified under part I of chapter 464, chapter 490,
419 or chapter 491 to complete a 2-hour continuing education course,
420 approved by the board, on developmental disabilities, as defined
421 in s. 393.063, with the addition of autism spectrum disorder, as
422 part of every third biennial relicensure or recertification. The
423 course shall consist of information on the diagnosis and
424 treatment of developmental disabilities and information on
425 counseling and education of a parent whose child is diagnosed
426 with a developmental disability, with an emphasis on autism
427 spectrum disorder.

428 (b) The Board of Medicine and the Board of Osteopathic
429 Medicine shall require each physician with a primary care
430 specialty of pediatrics to complete a 2-hour continuing
431 education course, approved by the appropriate board, on
432 developmental disabilities, as defined in s. 393.063, with the
433 addition of autism spectrum disorder, as part of every third

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434 biennial relicensure. The course shall consist of information on
435 the diagnosis and treatment of developmental disabilities and
436 information on counseling and education of a parent whose child
437 is diagnosed with a developmental disability, with an emphasis
438 on autism spectrum disorder.

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

443 (d) The board may approve additional equivalent courses
444 that may be used to satisfy the requirements of paragraph (a).
445 Each licensing board that requires a licensee to complete an
446 educational course pursuant to this subsection may include the
447 hours required for completion of the course in the total hours
448 of continuing education required by law for such profession
449 unless the continuing education requirements for such profession
450 consist of fewer than 30 hours biennially.

451 (e) Any person holding two or more licenses subject to the
452 provisions of this subsection shall be permitted to show proof
453 of having taken one board-approved course on developmental
454 disabilities for purposes of relicensure or recertification for
455 additional licenses.

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

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

463 (3) The department shall implement a plan to promote
464 awareness of developmental disabilities, with a focus on autism
465 spectrum disorder, to physicians licensed under chapter 458 or
466 chapter 459 and parents. The department shall develop the plan
467 in consultation with organizations representing allopathic and
468 osteopathic physicians, the Board of Medicine, the Board of
469 Osteopathic Medicine, and nationally recognized organizations
470 that promote awareness of developmental disabilities. The
471 department's plan shall include the distribution of educational
472 materials for parents, including a developmental assessment
473 tool.

474 Section 11. Paragraph (b) of subsection (2) and paragraph
475 (b) of subsection (5) of section 624.91, Florida Statutes, are
476 amended to read:

477 624.91 The Florida Healthy Kids Corporation Act.--

478 (2) LEGISLATIVE INTENT.--

479 (b) It is the intent of the Legislature that the Florida
480 Healthy Kids Corporation serve as one of several providers of
481 services to children eligible for medical assistance under Title
482 XXI of the Social Security Act. Although the corporation may
483 serve other children, the Legislature intends the primary
484 recipients of services provided through the corporation be
485 ~~school-age~~ children with a family income below 200 percent of
486 the federal poverty level, who do not qualify for Medicaid. It
487 is also the intent of the Legislature that state and local
488 government Florida Healthy Kids funds be used to continue

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489 coverage, subject to specific appropriations in the General
490 Appropriations Act, to children not eligible for federal
491 matching funds under Title XXI.

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

493 (b) The Florida Healthy Kids Corporation shall:

494 1. Arrange for the collection of any family, local
495 contributions, or employer payment or premium, in an amount to
496 be determined by the board of directors, to provide for payment
497 of premiums for comprehensive insurance coverage and for the
498 actual or estimated administrative expenses.

499 2. Arrange for the collection of any voluntary
500 contributions to provide for payment of premiums for children
501 who are not eligible for medical assistance under Title XXI of
502 the Social Security Act.

503 3. Subject to the provisions of s. 409.8134, accept
504 voluntary supplemental local match contributions that comply
505 with the requirements of Title XXI of the Social Security Act
506 for the purpose of providing additional coverage in contributing
507 counties under Title XXI.

508 4. Establish the administrative and accounting procedures
509 for the operation of the corporation.

510 5. Establish, with consultation from appropriate
511 professional organizations, standards for preventive health
512 services and providers and comprehensive insurance benefits
513 appropriate to children, provided that such standards for rural
514 areas shall not limit primary care providers to board-certified
515 pediatricians.

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516 6. Determine eligibility for children seeking to
517 participate in the Title XXI-funded components of the Florida
518 Kidcare program consistent with the requirements specified in s.
519 409.814, as well as the non-Title-XXI-eligible children as
520 provided in subsection (3).

521 7. Establish procedures under which providers of local
522 match to, applicants to and participants in the program may have
523 grievances reviewed by an impartial body and reported to the
524 board of directors of the corporation.

525 8. Establish participation criteria and, if appropriate,
526 contract with an authorized insurer, health maintenance
527 organization, or third-party administrator to provide
528 administrative services to the corporation.

529 9. Establish enrollment criteria which shall include
530 penalties or waiting periods of not fewer than 60 days for
531 reinstatement of coverage upon voluntary cancellation for
532 nonpayment of family premiums.

533 10. Contract with authorized insurers or any provider of
534 health care services, meeting standards established by the
535 corporation, for the provision of comprehensive insurance
536 coverage to participants. Such standards shall include criteria
537 under which the corporation may contract with more than one
538 provider of health care services in program sites. Health plans
539 shall be selected through a competitive bid process. The Florida
540 Healthy Kids Corporation shall purchase goods and services in
541 the most cost-effective manner consistent with the delivery of
542 quality medical care. The maximum administrative cost for a
543 Florida Healthy Kids Corporation contract shall be 15 percent.

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544 For health care contracts, the minimum medical loss ratio for a
545 Florida Healthy Kids Corporation contract shall be 85 percent.
546 For dental contracts, the remaining compensation to be paid to
547 the authorized insurer or provider under a Florida Healthy Kids
548 Corporation contract shall be no less than an amount which is 85
549 percent of premium; to the extent any contract provision does
550 not provide for this minimum compensation, this section shall
551 prevail. The health plan selection criteria and scoring system,
552 and the scoring results, shall be available upon request for
553 inspection after the bids have been awarded.

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

556 12. Develop and implement a plan to publicize the Florida
557 Kidcare program Healthy Kids Corporation, the eligibility
558 requirements of the program, and the procedures for enrollment
559 in the program and to maintain public awareness of the
560 corporation and the program. Health care and dental health plans
561 participating in the program may develop and distribute
562 marketing and other promotional materials and participate in
563 activities, such as health fairs and public events, as approved
564 by the corporation. Health care and dental health plans may also
565 contact their current and former enrollees to encourage
566 continued participation in the program and assist the enrollee
567 in transferring from a Title XIX-funded plan to a Title XXI-
568 funded plan.

569 13. Establish an assignment process for Florida Healthy
570 Kids program enrollees to ensure that family members are
571 assigned to the same managed care plan to the greatest extent

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572 possible, including situations in which some family members are
573 enrolled in a Medicaid managed care plan and other family
574 members are enrolled in a Florida Healthy Kids plan. The Agency
575 for Health Care Administration shall consult with the
576 corporation to implement this subparagraph.

577 ~~14.13.~~ Secure staff necessary to properly administer the
578 corporation. Staff costs shall be funded from state and local
579 matching funds and such other private or public funds as become
580 available. The board of directors shall determine the number of
581 staff members necessary to administer the corporation.

582 ~~15.14.~~ Provide a report annually to the Governor, Chief
583 Financial Officer, Commissioner of Education, Senate President,
584 Speaker of the House of Representatives, and Minority Leaders of
585 the Senate and the House of Representatives.

586 16. Provide a report by October 31, 2008, to the Governor,
587 the Senate, and the House of Representatives, which includes an
588 actuarial analysis of the projected impact on premiums from the
589 addition of habilitative and behavior analysis services in
590 accordance with s. 409.815.

591 17. Provide information on a quarterly basis to the
592 Governor, the Senate, and the House of Representatives that
593 assesses the cost and utilization of services for the Florida
594 Healthy Kids health benefits plans provided through the Florida
595 Healthy Kids Corporation. The information must be specific to
596 each eligibility component of the plan and, at a minimum,
597 include:

- 598 a. The monthly enrollment and expenditures for enrollees.
599 b. The cost and utilization of specific services.

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

602 d. An analysis of trends regarding transfer of enrollees
603 from the Florida Healthy Kids plans to the Children's Medical
604 Services Network plan.

605 e. Any recommendations resulting from the analysis
606 conducted under this subparagraph.

607 ~~18.15.~~ Establish benefit packages which conform to the
608 provisions of the Florida Kidcare program, as created in ss.
609 409.810-409.820.

610 Section 12. Section 624.916, Florida Statutes, is created
611 to read:

612 624.916 Developmental disabilities compact.--

613 (1) The Office of Insurance Regulation shall convene a
614 workgroup by August 31, 2008, for the purpose of negotiating a
615 compact that includes a binding agreement among the participants
616 relating to insurance and access to services for persons with
617 developmental disabilities as defined in s. 393.063, with the
618 addition of autism spectrum disorder. The workgroup shall
619 consist of the following:

620 (a) Representatives of all health insurers licensed under
621 this chapter.

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

624 (c) Representatives of employers with self-insured health
625 benefit plans.

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

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

629 (f) A designee of the Speaker of the House of
630 Representatives.

631 (2) The Office of Insurance Regulation shall convene a
632 consumer advisory workgroup for the purpose of providing a forum
633 for comment on the compact negotiated in subsection (1). The
634 office shall convene the workgroup prior to finalization of the
635 compact.

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

637 (a) A requirement that each signatory to the agreement
638 increase coverage for behavior analysis and behavior assistant
639 services as defined in s. 409.815(2)(r) and speech therapy,
640 physical therapy, and occupational therapy when necessary due to
641 the presence of a developmental disability as defined in s.
642 393.063 or autism spectrum disorder.

643 (b) Procedures for clear and specific notice to
644 policyholders identifying the amount, scope, and conditions
645 under which coverage is provided for behavior analysis and
646 behavior assistant services as defined in s. 409.815(2)(r) and
647 speech therapy, physical therapy, and occupational therapy when
648 necessary due to the presence of a developmental disability as
649 defined in s. 393.063 or autism spectrum disorder.

650 (c) Penalties for documented cases of denial of claims for
651 medically necessary services due to the presence of a
652 developmental disability as defined in s. 393.063 or autism
653 spectrum disorder.

654 (d) Proposals for new product lines that may be offered in
655 conjunction with traditional health insurance and provide a more

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656 appropriate means of spreading risk, financing costs, and
657 accessing favorable prices.

658 (4) Upon completion of the negotiations for the compact,
659 the office shall report the results to the Governor, the
660 President of the Senate, and the Speaker of the House of
661 Representatives.

662 (5) Beginning February 15, 2009, and continuing annually
663 thereafter, the Office of Insurance Regulation shall provide a
664 report to the Governor, the President of the Senate, and the
665 Speaker of the House of Representatives regarding the
666 implementation of the agreement negotiated under this section.
667 The report shall include:

668 (a) The signatories to the agreement.

669 (b) An analysis of the coverage provided under the
670 agreement in comparison to the coverage required under ss.
671 627.6686 and 641.31098.

672 (c) An analysis of the compliance with the agreement by
673 the signatories, including documented cases of claims denied in
674 violation of the agreement.

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

678 Section 13. Section 627.6686, Florida Statutes, is created
679 to read:

680 627.6686 Coverage for individuals with developmental
681 disabilities required; exception.--

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

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683 (a) "Developmental disability" has the same meaning as
684 provided in s. 393.063, with the addition of autism spectrum
685 disorder.

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

690 (c) "Health insurance plan" means a group health insurance
691 policy or group health benefit plan offered by an insurer which
692 includes the state group insurance program provided under s.
693 110.123. The term does not include any health insurance plan
694 offered in the individual market, any health insurance plan that
695 is individually underwritten, or any health insurance plan
696 provided to a small employer.

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

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

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

705 (b) Treatment of a developmental disability through speech
706 therapy, occupational therapy, physical therapy, and behavior
707 analysis services. Behavior analysis services shall be provided
708 by an individual certified pursuant to s. 393.17 or an
709 individual licensed under chapter 490 or chapter 491.

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

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

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

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

720 (d) Coverage may be subject to other general exclusions
721 and limitations of the insurer's policy or plan, including, but
722 not limited to, coordination of benefits, participating provider
723 requirements, restrictions on services provided by family or
724 household members, and utilization review of health care
725 services, including the review of medical necessity, case
726 management, and other managed care provisions.

727 (4) The coverage required pursuant to subsection (2) may
728 not be subject to dollar limits, deductibles, or coinsurance
729 provisions that are less favorable to an insured than the dollar
730 limits, deductibles, or coinsurance provisions that apply to
731 physical illnesses that are generally covered under the health
732 insurance plan, except as otherwise provided in subsection (3).

733 (5) An insurer may not deny or refuse to issue coverage
734 for medically necessary services, refuse to contract with, or
735 refuse to renew or reissue or otherwise terminate or restrict
736 coverage for an individual because the individual is diagnosed
737 as having a developmental disability.

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738 (6) The treatment plan required pursuant to subsection (3)
739 shall include all elements necessary for the health insurance
740 plan to appropriately pay claims. These elements include, but
741 are not limited to, a diagnosis, the proposed treatment by type,
742 the frequency and duration of treatment, the anticipated
743 outcomes stated as goals, the frequency with which the treatment
744 plan will be updated, and the signature of the treating
745 physician.

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

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

755 (9) The Office of Insurance Regulation may not enforce
756 this section against an insurer that is a signatory no later
757 than July 1, 2009, to the developmental disabilities compact
758 established under s. 624.916. The Office of Insurance Regulation
759 shall enforce this section against an insurer that is a
760 signatory to the compact established under s. 624.916 if the
761 insurer has not complied with the terms of the compact for all
762 health insurance plans by July 1, 2010.

763 Section 14. Section 641.31098, Florida Statutes, is
764 created to read:

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Amendment No.

765 641.31098 Coverage for individuals with developmental
766 disabilities.--

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

768 (a) "Developmental disability" has the same meaning as
769 provided in s. 393.063, with the addition of autism spectrum
770 disorder.

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

775 (c) "Health maintenance contract" means a group health
776 maintenance contract offered by a health maintenance
777 organization. This term does not include a health maintenance
778 contract offered in the individual market, a health maintenance
779 contract that is individually underwritten, or a health
780 maintenance contract provided to a small employer.

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

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

786 (b) Treatment of a developmental disability through speech
787 therapy, occupational therapy, physical therapy, and behavior
788 analysis services. Behavior analysis services shall be provided
789 by an individual certified pursuant to s. 393.17 or an
790 individual licensed under chapter 490 or chapter 491.

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

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

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

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

801 (d) Coverage may be subject to general exclusions and
802 limitations of the subscriber's contract, including, but not
803 limited to, coordination of benefits, participating provider
804 requirements, and utilization review of health care services,
805 including the review of medical necessity, case management, and
806 other managed care provisions.

807 (4) The coverage required pursuant to subsection (2) may
808 not be subject to dollar limits, deductibles, or coinsurance
809 provisions that are less favorable to a subscriber than the
810 dollar limits, deductibles, or coinsurance provisions that apply
811 to physical illnesses that are generally covered under the
812 subscriber's contract, except as otherwise provided in
813 subsection (3).

814 (5) A health maintenance organization may not deny or
815 refuse to issue coverage for medically necessary services,
816 refuse to contract with, or refuse to renew or reissue or
817 otherwise terminate or restrict coverage for an individual
818 solely because the individual is diagnosed as having a
819 developmental disability.

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820 (6) The treatment plan required pursuant to subsection (3)
821 shall include, but is not limited to, a diagnosis, the proposed
822 treatment by type, the frequency and duration of treatment, the
823 anticipated outcomes stated as goals, the frequency with which
824 the treatment plan will be updated, and the signature of the
825 treating physician.

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

832 (8) The Office of Insurance Regulation may not enforce
833 this section against a health maintenance organization that is a
834 signatory no later than July 1, 2009, to the developmental
835 disabilities compact established under s. 624.916. The Office of
836 Insurance Regulation shall enforce this section against a health
837 maintenance organization that is a signatory to the compact
838 established under s. 624.916 if the health maintenance
839 organization has not complied with the terms of the compact for
840 all health maintenance contracts by July 1, 2010.

841 Section 15. Subsections (1), (2), and (3), paragraph (a)
842 of subsection (4), paragraph (d) of subsection (8), and
843 paragraphs (a), (c), and (d) of subsection (10) of section
844 1002.39, Florida Statutes, are amended, subsections (11), (12),
845 and (13) are renumbered as subsections (13), (14), and (15),
846 respectively, and new subsections (11) and (12) are added to
847 that section, to read:

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

848 1002.39 The John M. McKay Scholarships for Students with
849 Disabilities Program.--There is established a program that is
850 separate and distinct from the Opportunity Scholarship Program
851 and is named the John M. McKay Scholarships for Students with
852 Disabilities Program.

853 (1) THE JOHN M. MCKAY SCHOLARSHIPS FOR STUDENTS WITH
854 DISABILITIES PROGRAM.--The John M. McKay Scholarships for
855 Students with Disabilities Program is established to provide the
856 option to attend a public school other than the one to which
857 assigned, or to provide a scholarship to a private school of
858 choice, for students with disabilities for whom an individual
859 educational ~~education~~ plan has been written in accordance with
860 rules of the State Board of Education. Students with
861 disabilities include K-12 students who are documented as having
862 an intellectual disability ~~a mental handicap, including~~
863 ~~trainable, profound, or educable;~~ a speech impairment; ~~a~~ ~~or~~
864 language impairment; a hearing impairment, including deafness; a
865 visual impairment, including blindness; a dual sensory
866 impairment; an orthopedic ~~a physical~~ impairment or other health
867 impairment; ~~a serious emotional disturbance, including~~ an
868 emotional or behavioral disability ~~handicap;~~ a specific learning
869 disability, including, but not limited to, dyslexia,
870 dyscalculia, or developmental aphasia; a traumatic brain injury;
871 a developmental delay; or autism spectrum disorder.

872 (2) JOHN M. MCKAY SCHOLARSHIP ELIGIBILITY.--The parent of
873 a ~~public school~~ student with a disability ~~who is dissatisfied~~
874 ~~with the student's progress~~ may request and receive from the

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875 state a John M. McKay Scholarship for the child to enroll in and
876 attend a private school in accordance with this section if:

877 (a) The student has either:

878 1. Received early intervention services under the
879 Voluntary Prekindergarten Education Program pursuant to s.
880 1002.66 during the previous school year; or

881 2. Spent the prior school year in attendance at a Florida
882 public school or the Florida School for the Deaf and the Blind.
883 For purposes of this subparagraph, prior school year in
884 attendance means that the student was+

885 ~~1-~~ enrolled and reported by:

886 a. A school district for funding during the preceding
887 October and February Florida Education Finance Program surveys
888 in kindergarten through grade 12, which shall include time spent
889 in a Department of Juvenile Justice commitment program if funded
890 under the Florida Education Finance Program;

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

894 ~~c.3-~~ ~~Enrolled and reported by~~ A school district for
895 funding during the preceding October and February Florida
896 Education Finance Program surveys, was at least 4 years old when
897 so enrolled and reported, and was eligible for services under s.
898 1003.21(1)(e).

899

900 However, a dependent child of a member of the United States
901 Armed Forces who transfers to a school in this state from out of
902 state or from a foreign country pursuant to a parent's permanent

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903 change of station orders is exempt from this paragraph but must
904 meet all other eligibility requirements to participate in the
905 program.

906 (b) The parent has obtained acceptance for admission of
907 the student to a private school that is eligible for the program
908 under subsection (8) and has requested from the department a
909 scholarship at least 60 days prior to the date of the first
910 scholarship payment. The request must be through a communication
911 directly to the department in a manner that creates a written or
912 electronic record of the request and the date of receipt of the
913 request. The Department of Education must notify the district of
914 the parent's intent upon receipt of the parent's request.

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

917 (a) Enrolled in a school operating for the purpose of
918 providing educational services to youth in Department of
919 Juvenile Justice commitment programs;

920 (b) Receiving a corporate income tax credit scholarship
921 under s. 220.187;

922 (c) Receiving an educational scholarship pursuant to this
923 chapter;

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

926 (e) Participating in a private tutoring program pursuant
927 to s. 1002.43;

928 (f) Participating in a virtual school, correspondence
929 school, or distance learning program that receives state funding

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930 pursuant to the student's participation unless the participation
931 is limited to no more than two courses per school year;

932 (g) Enrolled in the Florida School for the Deaf and the
933 Blind; or

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

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

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

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

946 (d) Maintain in this state a physical location where a
947 scholarship student regularly attends classes or where it
948 provides case management services under subsection (11).

949

950 The inability of a private school to meet the requirements of
951 this subsection shall constitute a basis for the ineligibility
952 of the private school to participate in the scholarship program
953 as determined by the department.

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

955 (a)1. The maximum scholarship granted for an eligible
956 student with disabilities shall be a calculated amount
957 equivalent to the base student allocation in the Florida

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958 Education Finance Program multiplied by the appropriate cost
959 factor for the educational program that would have been provided
960 for the student in the district school to which he or she was
961 assigned, multiplied by the district cost differential.

962 2. In addition, a share of the guaranteed allocation for
963 exceptional students shall be determined and added to the
964 calculated amount. The calculation shall be based on the
965 methodology and the data used to calculate the guaranteed
966 allocation for exceptional students for each district in chapter
967 2000-166, Laws of Florida. Except as provided in subparagraphs
968 3. and 4., the calculation shall be based on the student's
969 grade, matrix level of services, and the difference between the
970 2000-2001 basic program and the appropriate level of services
971 cost factor, multiplied by the 2000-2001 base student allocation
972 and the 2000-2001 district cost differential for the sending
973 district. Also, the calculated amount shall include the per-
974 student share of supplemental academic instruction funds,
975 instructional materials funds, technology funds, and other
976 categorical funds as provided for such purposes in the General
977 Appropriations Act.

978 3. The calculated scholarship amount for a student who is
979 eligible under sub-subparagraph (2) (a) 2.b. ~~subparagraph (2) (a) 2.~~
980 shall be calculated as provided in subparagraphs 1. and 2.
981 However, the calculation shall be based on the school district
982 in which the parent resides at the time of the scholarship
983 request.

984 4. Until the school district completes the matrix required
985 by paragraph (5) (b), the calculation shall be based on the

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986 matrix that assigns the student to support level I of service as
987 it existed prior to the 2000-2001 school year. When the school
988 district completes the matrix, the amount of the payment shall
989 be adjusted as needed.

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

995 2. For program participants who are eligible under sub-
996 subparagraph (2) (a)2.b. subparagraph (2) (a)2., the school
997 district that is used as the basis for the calculation of the
998 scholarship amount as provided in subparagraph (a)3. shall:

999 a. Report to the department all such students who are
1000 attending a private school under this program.

1001 b. Be held harmless for such students from the weighted
1002 enrollment ceiling for group 2 programs in s. 1011.62(1)(d)3.a.
1003 during the first school year in which the students are reported.

1004 (d) Following notification on July 1, September 1,
1005 December 1, or February 1 of the number of program participants,
1006 the department shall transfer, from General Revenue funds only,
1007 the amount calculated under paragraph (b) from the school
1008 district's total funding entitlement under the Florida Education
1009 Finance Program and from authorized categorical accounts to a
1010 separate account for the scholarship program for quarterly
1011 disbursement to the parents of participating students. Funds may
1012 not be transferred from any funding provided to the Florida
1013 School for the Deaf and the Blind for program participants who

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1014 are eligible under sub-subparagraph (2)(a)2.b. subparagraph
1015 ~~(2)(a)2.~~ For a student exiting a Department of Juvenile Justice
1016 commitment program who chooses to participate in the scholarship
1017 program, the amount of the John M. McKay Scholarship calculated
1018 pursuant to paragraph (b) shall be transferred from the school
1019 district in which the student last attended a public school
1020 prior to commitment to the Department of Juvenile Justice. When
1021 a student enters the scholarship program, the department must
1022 receive all documentation required for the student's
1023 participation, including the private school's and student's fee
1024 schedules, at least 30 days before the first quarterly
1025 scholarship payment is made for the student.

1026 (11) ALTERNATIVE SITES FOR INSTRUCTION AND SERVICES.--A
1027 student eligible for a scholarship under this section may
1028 receive regular and direct instruction and services from a
1029 private school at a site other than the school's physical
1030 location if the following criteria are met:

1031 (a) The student's parent provides a notarized statement
1032 from the medical doctor or psychologist treating the student's
1033 disability which certifies that the student's welfare or the
1034 welfare of other students in the classroom will be jeopardized
1035 if the student is required to regularly attend class at the
1036 school's physical location. Such notarized statement must be:

1037 1. Annually provided to the department at least 60 days
1038 prior to the date of the first scholarship payment for each
1039 school year.

1040 2. Based on an annual review of the student's disability
1041 by the student's medical doctor or psychologist.

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1042 (b) The private school serving the student:

1043 1. Employs or contracts with a case manager who
1044 coordinates and monitors the student's instruction and services,
1045 reviews and maintains the documentation submitted under
1046 subparagraph 2., and provides the student's parent and private
1047 school with monthly reports on the student's progress.

1048 2. Requires private school employees or contracted
1049 personnel who provide regular and direct instruction or services
1050 to a student at a site other than the private school's physical
1051 location to submit to the case manager documentation of the
1052 instruction, services, and progress of the student.

1053 3. Notifies the department of each student subject to this
1054 subsection.

1055 (12) RETROACTIVE SCHOLARSHIP ELIGIBILITY.--A student who
1056 received a scholarship under this section in the 2005-2006
1057 school year, but who was unable to receive a scholarship in the
1058 2006-2007 school year due to the regular and direct contact
1059 requirement in paragraph (3)(h), is eligible for a scholarship
1060 in the 2008-2009 school year if the student:

1061 (a) Demonstrates that he or she would have met the
1062 criteria of paragraph (11)(a) at the time of his or her 2006-
1063 2007 scholarship.

1064 (b) Satisfies the requirements for a scholarship under
1065 this section other than the prior school year attendance
1066 requirement in paragraph (2)(a).

1067 Section 16. Subsections (2) through (5) of section
1068 1002.51, Florida Statutes, are renumbered as subsections (3)

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1069 through (6), respectively, and a new subsection (2) is added to
1070 that section to read:

1071 1002.51 Definitions.--As used in this part, the term:

1072 (2) "Early intervention service provider" means a provider
1073 delivering early intervention services under s. 1002.66.

1074 Section 17. Subsections (1) and (3) of section 1002.53,
1075 Florida Statutes, are amended to read:

1076 1002.53 Voluntary Prekindergarten Education Program;
1077 eligibility and enrollment.--

1078 (1) There is created the Voluntary Prekindergarten
1079 Education Program, which. ~~The program shall take effect in each~~
1080 ~~county at the beginning of the 2005-2006 school year and shall~~
1081 be organized, designed, and delivered in accordance with s. 1(b)
1082 and (c), Art. IX of the State Constitution.

1083 (3) The parent of each child eligible under subsection (2)
1084 may enroll the child in one of the following programs:

1085 (a) A school-year prekindergarten program delivered by a
1086 private prekindergarten provider under s. 1002.55;

1087 (b) A summer prekindergarten program delivered by a public
1088 school or private prekindergarten provider under s. 1002.61; ~~or~~

1089 (c) A school-year prekindergarten program delivered by a
1090 public school, if offered by a school district that is eligible
1091 under s. 1002.63; or

1092 (d) Beginning with the 2010-2011 school year, a
1093 prekindergarten program of early intervention services, if the
1094 child is eligible for the program under s. 1002.66.
1095

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1096 Except as provided in s. 1002.71(4), a child may not enroll in
1097 more than one of these programs.

1098 Section 18. Section 1002.66, Florida Statutes, is created
1099 to read:

1100 1002.66 Prekindergarten program of early intervention
1101 services.--

1102 (1) Beginning with the 2010-2011 school year, a child who
1103 enrolls with the early learning coalition under s. 1002.53(3)(d)
1104 is eligible for a prekindergarten program of early intervention
1105 services if:

1106 (a) The child is eligible for the Voluntary
1107 Prekindergarten Education Program under s. 1002.53(2); and

1108 (b) A current individual educational plan has been
1109 developed for the child in accordance with State Board of
1110 Education rule and the plan indicates the child's need for
1111 multiple and intensive services, delivered weekly or daily, to
1112 address the child's development of the following skills:

1113 1. Social skills, including replacement of problematic
1114 behaviors with more conventional and appropriate behaviors;

1115 2. Communication skills, including the development of a
1116 functional communication system;

1117 3. Fine and gross motor skills;

1118 4. Cognitive skills, including basic concepts and
1119 developmentally appropriate pre-academic skills; and

1120 5. Independent organizational skills and other behaviors
1121 necessary for future success in the typical educational
1122 environment.

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1124 If a child's individual educational plan indicates that the
1125 child meets the eligibility requirements for a prekindergarten
1126 program of early intervention services under this paragraph, the
1127 school district shall record the child's eligibility on a form,
1128 or otherwise in the format, developed by the Department of
1129 Education in consultation with the Agency for Workforce
1130 Innovation.

1131 (2) The parent of a child who is eligible for a
1132 prekindergarten program under this section may select one or
1133 more early intervention services that the child's individual
1134 educational plan indicates is appropriate for the child. These
1135 early intervention services may include, but are not limited to:

1136 (a) Applied behavior analysis.

1137 (b) Speech-language pathology.

1138 (c) Occupational therapy.

1139 (d) Physical therapy.

1140 (3) The early intervention services provided for a child
1141 under this section must be delivered according to professionally
1142 accepted standards and must, in accordance with the performance
1143 standards adopted by the department under s. 1002.67, address
1144 the age-appropriate progress of the child in the development of
1145 the capabilities, capacities, and skills required under s. 1(b),
1146 Art. IX of the State Constitution.

1147 (4) Each Center for Autism and Related Disabilities
1148 established under s. 1004.55 shall, within the center's region,
1149 approve early intervention service providers whose services meet
1150 the standards in subsection (3), maintain a list of approved
1151 providers, and notify each school district and early learning

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1152 coalition in the center's region of the approved provider list.
1153 Upon the request of a child's parent, a Center for Autism and
1154 Related Disabilities may approve an early intervention service
1155 provider that is not on the approved list if the provider's
1156 services meet the standards in subsection (3) and the child's
1157 individual educational plan indicates that the services are
1158 appropriate for the child.

1159 (5) From the funds allocated to the early learning
1160 coalition for the Voluntary Prekindergarten Education Program,
1161 the coalition shall reimburse an approved early intervention
1162 service provider for authorized services provided for an
1163 eligible child, except that the cumulative total of services
1164 reimbursed for a child may not exceed the amount of the base
1165 student allocation provided for the Voluntary Prekindergarten
1166 Education Program in the General Appropriations Act.

1167 Section 19. Paragraph (a) of subsection (4) of section
1168 1002.71, Florida Statutes, is amended to read:

1169 1002.71 Funding; financial and attendance reporting.--

1170 (4) Notwithstanding s. 1002.53(3) and subsection (2):

1171 (a) A child who, for any of the prekindergarten programs
1172 listed in s. 1002.53(3), has not completed more than 10 percent
1173 of the hours authorized to be reported for funding under
1174 subsection (2), or has not expended more than 10 percent of the
1175 funds authorized for the child under s. 1002.66, may withdraw
1176 from the program for good cause, reenroll in one of the
1177 programs, and be reported for funding purposes as a full-time
1178 equivalent student in the program for which the child is
1179 reenrolled.

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1180
1181 A child may reenroll only once in a prekindergarten program
1182 under this section. A child who reenrolls in a prekindergarten
1183 program under this subsection may not subsequently withdraw from
1184 the program and reenroll. The Agency for Workforce Innovation
1185 shall establish criteria specifying whether a good cause exists
1186 for a child to withdraw from a program under paragraph (a),
1187 whether a child has substantially completed a program under
1188 paragraph (b), and whether an extreme hardship exists which is
1189 beyond the child's or parent's control under paragraph (b).

1190 Section 20. Paragraph (d) of subsection (2) of section
1191 1002.73, Florida Statutes, is redesignated as paragraph (e) and
1192 a new paragraph (d) is added to that subsection to read:

1193 1002.73 Department of Education; powers and duties;
1194 accountability requirements.--

1195 (2) The department shall adopt procedures for the
1196 department's:

1197 (d) Development, in consultation with the Agency for
1198 Workforce Innovation, of the form or format for recording a
1199 child's eligibility for early intervention services under s.
1200 1002.66(1)(b).

1201 Section 21. Paragraphs (a) and (f) of subsection (2) of
1202 section 1002.75, Florida Statutes, are amended to read:

1203 1002.75 Agency for Workforce Innovation; powers and
1204 duties; operational requirements.--

1205 (2) The Agency for Workforce Innovation shall adopt
1206 procedures governing the administration of the Voluntary

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1207 Prekindergarten Education Program by the early learning
1208 coalitions and school districts for:

1209 (a) Enrolling children in and determining the eligibility
1210 of children for the Voluntary Prekindergarten Education Program
1211 under ss. 1002.53 and 1002.66 ~~s. 1002.53~~.

1212 (f) Paying private prekindergarten providers, ~~and~~ public
1213 schools, and early intervention service providers under ss.
1214 1002.66 and 1002.71 ~~s. 1002.71~~.

1215 Section 22. Effective upon this act becoming a law,
1216 section 1004.55, Florida Statutes, is amended to read:

1217 1004.55 ~~Regional autism~~ Centers for Autism and Related
1218 Disabilities.--

1219 (1) Seven ~~regional autism~~ Centers for Autism and Related
1220 Disabilities are established to provide nonresidential resource
1221 and training services for:

1222 (a) Children younger than 5 years of age who have:

1223 1. An autism spectrum disorder; a genetic or metabolic
1224 disorder; a neurological disorder; a severe attachment disorder;
1225 a hearing impairment, including deafness; a visual impairment,
1226 including blindness; or dual sensory impairment; or

1227 2. A developmental delay in cognition; physical or motor
1228 development, including hearing or vision; communication; social
1229 or emotional development; or adaptive development.

1230 (b) Persons 5 years of age or older who have an autism
1231 spectrum disorder or a severe communication disorder ~~persons of~~
1232 ~~all ages and of all levels of intellectual functioning who have~~
1233 ~~autism, as defined in s. 393.063; who have a pervasive~~
1234 ~~developmental disorder that is not otherwise specified; who have~~

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1235 ~~an autistic like disability, who have a dual sensory impairment,~~
1236 ~~or who have a sensory impairment with other handicapping~~
1237 ~~conditions.~~

1238 (2) Each center shall be operationally and fiscally
1239 independent and shall provide services within its geographical
1240 region of the state. Service delivery shall be consistent for
1241 all centers. Each center shall coordinate services within and
1242 between state and local agencies and school districts but may
1243 not duplicate services provided by those agencies or school
1244 districts. The respective locations and service areas of the
1245 centers are:

1246 (a) The Department of Communication Disorders at Florida
1247 State University, which serves Bay, Calhoun, Escambia, Franklin,
1248 Gadsden, Gulf, Holmes, Jackson, Jefferson, Leon, Liberty,
1249 Madison, Okaloosa, Santa Rosa, Taylor, Wakulla, Walton, and
1250 Washington Counties.

1251 (b) The College of Medicine at the University of Florida,
1252 which serves Alachua, Bradford, Citrus, Columbia, Dixie,
1253 Gilchrist, Hamilton, Hernando, Lafayette, Levy, Marion, Putnam,
1254 Suwannee, and Union Counties.

1255 (c) The University of Florida Health Science Center at
1256 Jacksonville, which serves Baker, Clay, Duval, Flagler, Nassau,
1257 and St. Johns Counties.

1258 (d) The Louis de la Parte Florida Mental Health Institute
1259 at the University of South Florida, which serves Charlotte,
1260 Collier, DeSoto, Glades, Hardee, Hendry, Highlands,
1261 Hillsborough, Lee, Manatee, Pasco, Pinellas, Polk, and Sarasota
1262 Counties.

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1263 (e) The Mailman Center for Child Development and the
1264 Department of Psychology at the University of Miami, which
1265 serves Broward, Dade, and Monroe Counties.

1266 (f) The College of Health and Public Affairs at the
1267 University of Central Florida, which serves Brevard, Lake,
1268 Orange, Osceola, Seminole, Sumter, and Volusia Counties.

1269 (g) The Department of Exceptional Student Education at
1270 Florida Atlantic University, which serves Palm Beach, Martin,
1271 St. Lucie, Okeechobee, and Indian River Counties.

1272 ~~(3)-(2)~~ There is established for each center a constituency
1273 board, which shall work collaboratively with the center. Each
1274 board shall consist of no fewer than six members, each of whom
1275 is either an individual who has an autism spectrum disorder or
1276 another a disability ~~that is~~ described in subsection (1) or is a
1277 member of a family that includes a person who has such a
1278 disability, who are selected by each university president from a
1279 list that has been developed by the Autism Society of Florida
1280 and other relevant constituency groups that represent persons
1281 who have an autism spectrum disorder or another disability
1282 ~~sensory impairments as~~ described in subsection (1). As
1283 representatives of the center's constituencies, these boards
1284 shall meet quarterly with the staff of each of the centers to
1285 provide advice on policies, priorities, and activities. Each
1286 board shall submit to the university president and to the
1287 Department of Education an annual report that evaluates the
1288 activities and accomplishments of its center during the year.
1289 The board for each center should raise funds equivalent to 2

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1290 percent of the total funds allocated to that center in each
1291 fiscal year.

1292 ~~(4)(3)~~ To promote statewide planning and coordination, a
1293 conference must be held annually for staff from each of the
1294 seven centers and representatives from each center's
1295 constituency board. The purpose of the conference is to
1296 facilitate coordination, networking, cross-training, and
1297 feedback among the staffs and constituency boards of the
1298 centers.

1299 ~~(5)(4)~~(a) Each center shall provide:

1300 1. A staff that has expertise in autism spectrum disorder
1301 and the other disabilities described in subsection (1) autistic-
1302 like behaviors and in sensory impairments.

1303 2. Individual and direct family assistance in the home,
1304 community, and school. A center's assistance should not supplant
1305 other responsibilities of state and local agencies, and each
1306 school district is responsible for providing an appropriate
1307 education program for clients of a center who are school age.

1308 3. Technical assistance and consultation services,
1309 including specific intervention and assistance for a client of
1310 the center, the client's family, and the school district, and
1311 any other services that are appropriate.

1312 4. Professional training programs that include developing,
1313 providing, and evaluating preservice and inservice training in
1314 state-of-the-art practices for personnel who work with the
1315 populations served by the centers and their families.

1316 5. Public education programs to increase awareness of the
1317 public about autism spectrum disorder and the other disabilities

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1318 ~~described in subsection (1), autistic related disabilities of~~
1319 ~~communication and behavior, dual sensory impairments, and~~
1320 ~~sensory impairments with other handicapping conditions.~~

1321 6. Coordination of regional learning gateways established
1322 in accordance with s. 1006.80.

1323 7. Approval of early intervention service providers for
1324 prekindergarten programs for children with disabilities in
1325 accordance with s. 1002.66.

1326 (b) Effective October 1, 2008, a center that is not
1327 designated a medical model for the treatment of autism spectrum
1328 disorder under s. 1006.82 may not provide direct medical
1329 intervention or pharmaceutical intervention ~~is prohibited in any~~
1330 ~~center on or after July 1, 2008.~~

1331 ~~(6)(5)~~ The State Board of Education, in cooperation with
1332 the ~~regional autism~~ Centers for Autism and Related Disabilities,
1333 shall adopt the necessary rules to carry out the purposes of
1334 this section.

1335 Section 23. Effective upon this act becoming a law,
1336 subsection (1), paragraph (b) of subsection (2), and subsections
1337 (3) and (4) of section 1006.03, Florida Statutes, are amended to
1338 read:

1339 1006.03 Florida Diagnostic and Learning Resources System;
1340 regional resource centers.--

1341 (1) The department shall maintain the Florida Diagnostic
1342 and Learning Resources System, which shall be comprised of a
1343 network of regional diagnostic and learning resources resource
1344 centers for exceptional students. The regional centers shall, to
1345 assist in the provision of medical, physiological,

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1346 psychological, and educational testing and other services
1347 designed to evaluate and diagnose exceptionalities, ~~to~~ make
1348 referrals for necessary instruction and services, and ~~to~~
1349 facilitate the provision of instruction and services to
1350 exceptional students. The department shall cooperate with the
1351 Department of Children and Family Services and the Centers for
1352 Autism and Related Disabilities in identifying service needs and
1353 areas.

1354 (2) Within its identified service area, each regional
1355 center shall:

1356 (b) Assist in the provision of services for exceptional
1357 children, using to the maximum, but not supplanting, the
1358 existing facilities and services of each school district.

1359 (3) Regional diagnostic and learning resources ~~resource~~
1360 centers may provide testing and evaluation services to private
1361 school students and other children who are not enrolled in
1362 public schools.

1363 (4) Regional diagnostic and learning resources ~~resource~~
1364 centers may assist districts in providing testing and evaluation
1365 services for infants and preschool children with or at risk of
1366 developing disabilities, and may assist districts in providing
1367 interdisciplinary training and resources to parents of infants
1368 and preschool children with or at risk of developing
1369 disabilities and to early learning ~~school-readiness~~ programs.

1370 Section 24. Effective upon this act becoming a law, part
1371 III of chapter 1006, Florida Statutes, shall be entitled
1372 "Learning Gateway" and shall consist of sections 1006.80 and
1373 1006.82, Florida Statutes.

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1374 Section 25. Effective upon this act becoming a law,
1375 section 1006.80, Florida Statutes, is created to read:

1376 1006.80 Regional learning gateways.--The Centers for
1377 Autism and Related Disabilities established under s. 1004.55, in
1378 collaboration with the Department of Education and the Florida
1379 Diagnostic and Learning Resources System, shall establish a
1380 statewide system of learning gateways. The system must include
1381 the establishment of a learning gateway in the geographic region
1382 of each center. Each region's leaning gateway shall:

1383 (1) Establish a single point of access for referral to the
1384 appropriate agencies for the screening and assessment of
1385 children younger than 5 years of age for disabilities,
1386 conducting diagnostic evaluations for children with suspected
1387 disabilities, and referring children with disabilities for early
1388 intervention services and early learning programs.

1389 (2) Designate a central telephone number in the center's
1390 region, and an Internet website, for parents, practitioners, and
1391 providers to obtain information about services available through
1392 the learning gateway, screenings, assessments, diagnostic
1393 evaluations, early intervention services, and early learning
1394 programs for children with disabilities.

1395 (3) Provide followup contact for families whose children
1396 are determined ineligible for services under Part B or Part C of
1397 the federal Individuals with Disabilities Education Act.

1398 (4) Provide interagency coordination in the center's
1399 region among the regional offices of state agencies, including
1400 offices of the Division of Children's Medical Services Network
1401 of the Department of Health; regional diagnostic and learning

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1402 resources centers; diagnostic and learning resources centers at
1403 state universities; school districts; early learning coalitions;
1404 county and municipal agencies; community agencies and
1405 organizations; and public and private providers of early
1406 intervention services and early learning programs, in order to
1407 develop and implement strategies to reduce a child's waiting
1408 time for services, reduce interagency duplication, and reduce
1409 interagency differences in eligibility criteria for services and
1410 programs which cause cross-agency screenings, assessments, and
1411 diagnostic evaluations.

1412 (5) Facilitate the integration of services, linkages among
1413 providers, and the array of services required to address the
1414 needs of children and families.

1415 (6) Improve community awareness and education for parents
1416 and practitioners about the developmental milestones, and the
1417 warning signs or precursors of disabilities, exhibited by
1418 children younger than 5 years of age.

1419 (7) Provide training and technical assistance for parents,
1420 practitioners, and providers.

1421 Section 26. Effective upon this act becoming a law,
1422 section 1006.82, Florida Statutes, is created to read:

1423 1006.82 State Learning Gateway Council.--

1424 (1) There is created the State Learning Gateway Council,
1425 which is assigned to the Department of Education for
1426 administrative purposes. The council is composed of the
1427 following agency heads, and officers of the following
1428 organizations, or their permanent designees:

1429 (a) Secretary of Children and Family Services.

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- 1430 (b) Director of the Agency for Persons with Disabilities.
- 1431 (c) Director of Workforce Innovation.
- 1432 (d) State Surgeon General.
- 1433 (e) Secretary of Health Care Administration.
- 1434 (f) Commissioner of Education.
- 1435 (g) The director of a regional diagnostic and learning
- 1436 resources center appointed by the Commissioner of Education.
- 1437 (h) The director of a diagnostic and learning resources
- 1438 center at a state university, selected from among the directors
- 1439 of the university centers.
- 1440 (i) Chair of the Florida Early Learning Advisory Council.
- 1441 (j) President of the Autism Society of Florida.
- 1442 (k) President of the Florida Association for Behavioral
- 1443 Analysis.
- 1444 (l) President of the Florida Pediatric Society.
- 1445 (m) President of the Florida Psychological Association.
- 1446 (2) The council shall select a chair from among its
- 1447 members. An executive director of a Center for Autism and
- 1448 Related Disabilities, selected from among the executive
- 1449 directors of the centers, shall serve as the council's executive
- 1450 director.
- 1451 (3) (a) The council shall coordinate the statewide
- 1452 implementation of regional learning gateways and shall advise
- 1453 the Legislature, the Governor, and the agencies represented by
- 1454 the council's members on the system of regional learning
- 1455 gateways.
- 1456 (b) Each Center for Autism and Related Disabilities shall
- 1457 submit an implementation plan to the council for the region's

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1458 learning gateway by January 15, 2009. The plan must include the
1459 center's proposed expenditures for implementation of the
1460 regional learning gateway.

1461 (c) The council may designate a Center for Autism and
1462 Related Disabilities on the main campus, or at any branch campus
1463 or center, of the University of Florida, as a medical model for
1464 the treatment of autism spectrum disorder, if the center
1465 demonstrates a unique community need for such treatment in the
1466 center's region. A center designated as a medical model shall,
1467 by October 1 of each year, submit an annual report to the
1468 council. Each annual report must summarize the center's
1469 activities related to the treatment of autism spectrum disorder,
1470 including the center's expenditures for those services, for the
1471 prior state fiscal year.

1472 (4) (a) The agencies represented by the council's
1473 membership shall enter into an interagency agreement to provide
1474 staffing and administrative support for the council.

1475 (b) Members of the council shall serve without
1476 compensation but are entitled to per diem and travel expenses
1477 for required attendance at council meetings in accordance with
1478 the provisions of s. 112.061. Each council member is subject to
1479 the Code of Ethics for Public Officers and Employees under part
1480 III of chapter 112.

1481 (5) (a) The council may use any method of
1482 telecommunications to conduct meetings, including establishing a
1483 quorum through telecommunications, if the public is given proper
1484 notice of a telecommunications meeting and reasonable access to
1485 observe and, when appropriate, participate.

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1486 (b) The council appointments shall be made, and the
1487 council shall conduct its initial meeting, within 45 days after
1488 the effective date of this section.

1489 Section 27. Effective upon this act becoming a law,
1490 sections 411.226, 411.227, and 411.228, Florida Statutes, are
1491 repealed.

1492 Section 28. Except as otherwise expressly provided in
1493 this act, this act shall take effect July 1, 2008.

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

1499

Remove the entire title and insert:

1500

A bill to be entitled

1501

An act relating to children with disabilities; creating

1502

the "Window of Opportunity Act"; amending s. 391.026,

1503

F.S.; requiring the Department of Health to provide

1504

certain services under contract to the Florida Healthy

1505

Kids Corporation; specifying that children served under

1506

such contract are not enrollees of Children's Medical

1507

Services; amending 393.063, F.S.; revising the definition

1508

of the term "developmental disability"; providing a

1509

definition of the term "Down syndrome"; amending s.

1510

409.8132, F.S.; revising provisions relating to enrollment

1511

in the Medikids program component of Florida Kidcare;

1512

providing for the Agency for Health Care Administration to

1513

assign family members to the same managed care plan or

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

1514 Medicaid provider, under certain circumstances; amending
1515 s. 409.8134, F.S.; providing eligibility criteria for
1516 enrollment for premium assistance; providing for
1517 enrollment without premium assistance in the Florida
1518 Kidcare program during open enrollment periods; providing
1519 limitations on year-round enrollment for premium
1520 assistance; specifying a time period for enrollees not
1521 eligible for premium assistance to enroll in the Florida
1522 Healthy Kids program; providing exceptions; providing for
1523 certain enrollees to transfer to the Healthy Kids program
1524 under certain circumstances; authorizing the board of
1525 directors of the Florida Healthy Kids Corporation to take
1526 certain actions to reduce projected costs of the program
1527 under certain circumstances; amending s. 409.814, F.S.;
1528 revising conditions for eligibility for premium assistance
1529 for the Florida Kidcare Program; providing limitations on
1530 enrollment in the Medikids program after January 1, 2009;
1531 providing for enrollment of new applicants in the Florida
1532 Healthy Kids program; revising duties of the board of
1533 directors of the Florida Healthy Kids Corporation
1534 regarding enrollment limitations; providing for
1535 notification to certain managed care plans or MediPass
1536 providers prior to termination of a child's eligibility
1537 for Florida Kidcare; providing for certain information
1538 relating to eligibility to be obtained electronically;
1539 providing an exemption from certain requirements for
1540 individuals who pay the full cost of the Florida Kidcare
1541 premium; amending s. 409.815, F.S.; revising provisions

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

1542 relating to health benefits coverage for specified
1543 services to include habilitative and behavior analysis
1544 services; providing definitions; limiting the lifetime
1545 maximum of health benefits coverage for certain services;
1546 amending s. 409.818, F.S.; revising timeframe for
1547 redetermination or reverification of eligibility for
1548 Florida Kidcare; amending s. 409.906, F.S.; authorizing
1549 the Agency for Health Care Administration to seek federal
1550 approval through a state plan amendment to provide home
1551 and community-based services for autism spectrum disorder
1552 and other development disabilities; specifying eligibility
1553 criteria; specifying limitations on provision of benefits;
1554 requiring reports to the Legislature; requiring
1555 legislative approval for implementation of certain
1556 provisions; creating s. 456.0291, F.S.; authorizing
1557 certain licensing boards to require special continuing
1558 education on developmental disabilities for certain
1559 licensees and certificateholders; providing penalties;
1560 providing rulemaking authority; requiring the Department
1561 of Health to develop and implement a plan to promote
1562 awareness of developmental disabilities, with a focus on
1563 autism spectrum disorder; amending s. 624.91, F.S.;
1564 revising legislative intent; requiring the Florida Healthy
1565 Kids Corporation to provide information relating to costs
1566 and utilization of full-pay and Title XXI subsidized
1567 populations enrolled in Florida Healthy Kids health
1568 benefits coverage plans; establishing an assignment
1569 process; requiring the corporation to provide a report by

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

1570 October 31, 2008, to the Governor and Legislature that
1571 includes an analysis of the projected impact on premiums
1572 resulting from the provision of additional services;
1573 requiring the corporation to provide a quarterly
1574 assessment of costs and utilization of services for
1575 Florida Healthy Kids benefit plans to the Governor and
1576 Legislature; creating s. 624.916, F.S.; directing the
1577 Office of Insurance Regulation to establish a workgroup to
1578 develop and execute a compact relating to coverage for
1579 insured persons with development disabilities; providing
1580 for membership of the workgroup; requiring the workgroup
1581 to convene within a specified period of time; directing
1582 the office to establish a consumer advisory workgroup and
1583 providing purpose thereof; requiring the compact to
1584 contain specified components; requiring reports to the
1585 Governor and the Legislature; creating s. 627.6686, F.S.;
1586 providing health insurance coverage for individuals with
1587 developmental disabilities; providing definitions;
1588 providing coverage for certain screening to diagnose and
1589 treat developmental disabilities; providing limitations on
1590 coverage; providing for eligibility standards for benefits
1591 and coverage; prohibiting insurers from denying coverage
1592 under certain circumstances; specifying required elements
1593 of a treatment plan; providing, beginning January 1, 2011,
1594 that the maximum benefit shall be adjusted annually;
1595 clarifying that the section may not be construed as
1596 limiting benefits and coverage otherwise available to an
1597 insured under a health insurance plan; prohibiting the

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1598 Office of Insurance Regulation from enforcing certain
1599 provisions against insurers that are signatories to the
1600 developmental disabilities compact by a specified date;
1601 creating s. 641.31098, F.S.; providing coverage under a
1602 health maintenance contract for individuals with
1603 developmental disabilities; providing definitions;
1604 providing coverage for certain screening to diagnose and
1605 treat developmental disabilities; providing limitations on
1606 coverage; providing for eligibility standards for benefits
1607 and coverage; prohibiting health maintenance organizations
1608 from denying coverage under certain circumstances;
1609 specifying required elements of a treatment plan;
1610 providing, beginning January 1, 2011, that the maximum
1611 benefit shall be adjusted annually; prohibiting the Office
1612 of Insurance Regulation from enforcing certain provisions
1613 against health maintenance organizations that are
1614 signatories to the developmental disabilities compact by a
1615 specified date; amending s. 1002.39, F.S., relating to the
1616 John M. McKay Scholarships for Students with Disabilities
1617 Program; revising the terminology used to identify
1618 students with certain disabilities; authorizing students
1619 who receive certain services under the Voluntary
1620 Prekindergarten Education Program to receive a John M.
1621 McKay Scholarship; conforming cross-references; permitting
1622 students to receive scholarship services at locations
1623 other than the private school's site under specified
1624 conditions; providing retroactive eligibility for
1625 scholarships under certain circumstances; amending s.

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

1626 1002.51, F.S.; revising definitions for the Voluntary
1627 Prekindergarten Education Program; amending s. 1002.53 and
1628 creating s. 1002.66, F.S.; establishing a prekindergarten
1629 program option for early intervention services; providing
1630 eligibility criteria for early intervention services;
1631 requiring the Department of Education to develop forms;
1632 providing for the approval of early intervention service
1633 providers; authorizing the expenditure of funds for early
1634 intervention services; amending s. 1002.71, F.S.;
1635 authorizing a child participating in a prekindergarten
1636 program for children with disabilities to reenroll in
1637 another program option under certain conditions; amending
1638 ss. 1002.73 and 1002.75, F.S.; revising the powers and
1639 duties of the Department of Education and Agency for
1640 Workforce Innovation for prekindergarten programs;
1641 amending s. 1004.55, F.S.; redesignating regional autism
1642 centers as Centers for Autism and Related Disabilities;
1643 revising terminology and duties of the regional autism
1644 centers; revising date that regional autism centers are
1645 prohibited from providing direct medical intervention or
1646 pharmaceutical intervention and providing an exception for
1647 a center designated a medical model by the State Learning
1648 Gateway Council; amending s. 1006.03, F.S.; requiring the
1649 Department of Education to maintain the Florida Diagnostic
1650 and Learning Resources System; revising duties of regional
1651 diagnostic and learning resources centers; creating part
1652 III of chapter 1006, F.S., relating to the Learning
1653 Gateway; creating s. 1006.80, F.S.; requiring Centers for

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HOUSE AMENDMENT

Bill No. CS/CS/CS/SB 2654

Amendment No.

1654 Autism and Related Disabilities to establish a statewide
1655 system of learning gateways; specifying functions of
1656 learning gateways; creating s. 1006.82, F.S.; establishing
1657 the State Learning Gateway Council; assigning the council
1658 to the Department of Education for administrative
1659 purposes; specifying the membership of the council;
1660 providing for selection of the council's chair and
1661 executive director; prescribing the council's duties;
1662 requiring the Centers for Autism and Related Disabilities
1663 to submit an implementation plan by a specified date;
1664 authorizing the council to designate a center at the
1665 University of Florida as a medical model under certain
1666 circumstances; requiring a center designated as a medical
1667 model to submit an annual report; repealing ss. 411.226,
1668 411.227, and 411.228, F.S., relating to the Learning
1669 Gateway, components of the Learning Gateway, and
1670 accountability; providing effective dates.

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