

1 A bill to be entitled
2 An act relating to substance abuse and mental health
3 services; amending s. 212.055, F.S.; conforming a cross-
4 reference; amending s. 394.67, F.S.; redefining the term
5 "residential treatment center for children and
6 adolescents"; amending s. 394.674, F.S.; establishing
7 priority populations of persons who are eligible for
8 services funded by the Department of Children and Family
9 Services; amending s. 394.9085, F.S.; conforming a cross-
10 reference; amending s. 397.301, F.S.; deleting an obsolete
11 provision; amending s. 397.305, F.S.; revising the
12 legislative findings, intent, and purpose; amending s.
13 397.311, F.S.; providing, deleting, and revising
14 definitions; amending s. 397.321, F.S.; revising the
15 duties of the Department of Children and Family Services;
16 deleting a provision that authorizes the department to
17 establish a pilot project to serve certain persons who
18 qualify to receive substance abuse or mental health
19 services in a specified district; amending s. 397.331,
20 F.S.; revising the term "substance abuse programs and
21 services" or "drug control"; amending s. 397.401, F.S.;
22 providing that it is unlawful for an unlicensed agency to
23 act as a substance abuse service provider; amending s.
24 397.403, F.S.; revising requirements for a license
25 application; amending s. 397.405, F.S.; providing that a
26 crisis stabilization unit is exempt from licensure;
27 conforming a cross-reference; providing that ch. 397,
28 F.S., does not limit the practice of an advanced

29 registered nurse practitioner who provides substance abuse
30 treatment under certain circumstances; amending s.
31 397.406, F.S.; providing that substance abuse programs
32 operated directly or under contract by the Department of
33 Juvenile Justice are subject to licensure and regulation;
34 amending s. 397.407, F.S.; conforming a cross-reference;
35 revising the licensure process; authorizing the Department
36 of Children and Family Services to issue probationary,
37 regular, and interim licenses; providing requirements for
38 probationary, regular, and interim licenses; repealing s.
39 397.409, F.S., relating to probationary, regular, and
40 interim licenses; amending s. 397.411, F.S.; requiring the
41 department to notify certain applicable agencies of any
42 licensure inspections of service providers; amending s.
43 397.415, F.S.; requiring that fines collected as
44 administrative penalties be deposited in the Operations
45 and Maintenance Trust Fund of the department rather than
46 the Substance Abuse Impairment Provider Licensing Trust
47 Fund; revising requirements for suspending or revoking a
48 license; amending s. 397.416, F.S.; conforming a cross-
49 reference; amending s. 397.419, F.S.; renaming quality
50 assurance programs to "quality improvement programs";
51 conforming provisions to changes made by the act; revising
52 minimum guidelines for a service provider's quality
53 improvement program; providing additional requirements for
54 a quality improvement program; deleting a provision that
55 requires a quality assurance program to incorporate a peer
56 review process; amending s. 397.427, F.S.; specifying that

57 medication treatment service providers are providers of
58 medication-assisted treatment services for opiate
59 addiction; conforming provisions to changes made by the
60 act; requiring the department to determine the need for
61 establishing medication-assisted treatment services for
62 other substance-use disorders; requiring service providers
63 that provide medication-assisted treatment for other
64 substance-use disorders to provide counseling services;
65 requiring the department to adopt rules to administer
66 medication-assisted treatment services; authorizing a
67 registered nurse, an advanced registered nurse
68 practitioner, and a licensed practical nurse to deliver
69 medication, other than methadone, for the purpose of
70 medication-assisted treatment for opiate addiction under
71 certain conditions; requiring a licensed service provider
72 that provides medication-assisted treatment to adopt
73 written protocols; providing requirements for the
74 protocols; requiring a licensed service provider that
75 provides medication-assisted treatment to maintain and
76 have ready for inspection medical records and protocols;
77 amending s. 397.431, F.S.; conforming provisions to
78 changes made by the act; amending s. 397.451, F.S.;
79 providing that inmate substance abuse programs are exempt
80 from level 2 background screenings; clarifying that
81 certain personnel employed in an inmate substance abuse
82 program are exempt from fingerprinting and background
83 check requirements; amending ss. 397.471, 397.501,
84 397.581, 397.601, 397.6751, 397.6752, 397.6758, 397.6773,

85 | 397.6797, 397.6799, 397.6819, 397.6821, 397.6822, 397.697,
 86 | 397.6971, 397.6975, 397.6977, 397.702, 397.706, 397.801,
 87 | 397.821, 397.94, 397.95, 397.97, and 397.99, F.S.;
 88 | conforming provisions to changes made by the act; amending
 89 | s. 440.102, F.S.; conforming a cross-reference; amending
 90 | s. 766.101, F.S.; redefining the term "medical review
 91 | committee" to include a committee to review mental health
 92 | and substance abuse treatment services provided by the
 93 | department; repealing s. 394.9081, F.S., relating to
 94 | target groups for substance abuse and mental health
 95 | services; providing an effective date.

96 |

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

98 |

99 | Section 1. Paragraph (e) of subsection (5) of section
 100 | 212.055, Florida Statutes, is amended to read:

101 | 212.055 Discretionary sales surtaxes; legislative intent;
 102 | authorization and use of proceeds.--It is the legislative intent
 103 | that any authorization for imposition of a discretionary sales
 104 | surtax shall be published in the Florida Statutes as a
 105 | subsection of this section, irrespective of the duration of the
 106 | levy. Each enactment shall specify the types of counties
 107 | authorized to levy; the rate or rates which may be imposed; the
 108 | maximum length of time the surtax may be imposed, if any; the
 109 | procedure which must be followed to secure voter approval, if
 110 | required; the purpose for which the proceeds may be expended;
 111 | and such other requirements as the Legislature may provide.
 112 | Taxable transactions and administrative procedures shall be as

113 provided in s. 212.054.

114 (5) COUNTY PUBLIC HOSPITAL SURTAX.--Any county as defined
 115 in s. 125.011(1) may levy the surtax authorized in this
 116 subsection pursuant to an ordinance either approved by
 117 extraordinary vote of the county commission or conditioned to
 118 take effect only upon approval by a majority vote of the
 119 electors of the county voting in a referendum. In a county as
 120 defined in s. 125.011(1), for the purposes of this subsection,
 121 "county public general hospital" means a general hospital as
 122 defined in s. 395.002 which is owned, operated, maintained, or
 123 governed by the county or its agency, authority, or public
 124 health trust.

125 (e) A governing board, agency, or authority shall be
 126 chartered by the county commission upon this act becoming law.
 127 The governing board, agency, or authority shall adopt and
 128 implement a health care plan for indigent health care services.
 129 The governing board, agency, or authority shall consist of no
 130 more than seven and no fewer than five members appointed by the
 131 county commission. The members of the governing board, agency,
 132 or authority shall be at least 18 years of age and residents of
 133 the county. No member may be employed by or affiliated with a
 134 health care provider or the public health trust, agency, or
 135 authority responsible for the county public general hospital.
 136 The following community organizations shall each appoint a
 137 representative to a nominating committee: the South Florida
 138 Hospital and Healthcare Association, the Miami-Dade County
 139 Public Health Trust, the Dade County Medical Association, the
 140 Miami-Dade County Homeless Trust, and the Mayor of Miami-Dade

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141 County. This committee shall nominate between 10 and 14 county
142 citizens for the governing board, agency, or authority. The
143 slate shall be presented to the county commission and the county
144 commission shall confirm the top five to seven nominees,
145 depending on the size of the governing board. Until such time as
146 the governing board, agency, or authority is created, the funds
147 provided for in subparagraph (d)2. shall be placed in a
148 restricted account set aside from other county funds and not
149 disbursed by the county for any other purpose.

150 1. The plan shall divide the county into a minimum of four
151 and maximum of six service areas, with no more than one
152 participant hospital per service area. The county public general
153 hospital shall be designated as the provider for one of the
154 service areas. Services shall be provided through participants'
155 primary acute care facilities.

156 2. The plan and subsequent amendments to it shall fund a
157 defined range of health care services for both indigent persons
158 and the medically poor, including primary care, preventive care,
159 hospital emergency room care, and hospital care necessary to
160 stabilize the patient. For the purposes of this section,
161 "stabilization" means stabilization as defined in s. 397.311(33)
162 ~~s. 397.311(30)~~. Where consistent with these objectives, the plan
163 may include services rendered by physicians, clinics, community
164 hospitals, and alternative delivery sites, as well as at least
165 one regional referral hospital per service area. The plan shall
166 provide that agreements negotiated between the governing board,
167 agency, or authority and providers shall recognize hospitals
168 that render a disproportionate share of indigent care, provide

169 other incentives to promote the delivery of charity care to draw
170 down federal funds where appropriate, and require cost
171 containment, including, but not limited to, case management.
172 From the funds specified in subparagraphs (d)1. and 2. for
173 indigent health care services, service providers shall receive
174 reimbursement at a Medicaid rate to be determined by the
175 governing board, agency, or authority created pursuant to this
176 paragraph for the initial emergency room visit, and a per-member
177 per-month fee or capitation for those members enrolled in their
178 service area, as compensation for the services rendered
179 following the initial emergency visit. Except for provisions of
180 emergency services, upon determination of eligibility,
181 enrollment shall be deemed to have occurred at the time services
182 were rendered. The provisions for specific reimbursement of
183 emergency services shall be repealed on July 1, 2001, unless
184 otherwise reenacted by the Legislature. The capitation amount or
185 rate shall be determined prior to program implementation by an
186 independent actuarial consultant. In no event shall such
187 reimbursement rates exceed the Medicaid rate. The plan must also
188 provide that any hospitals owned and operated by government
189 entities on or after the effective date of this act must, as a
190 condition of receiving funds under this subsection, afford
191 public access equal to that provided under s. 286.011 as to any
192 meeting of the governing board, agency, or authority the subject
193 of which is budgeting resources for the retention of charity
194 care, as that term is defined in the rules of the Agency for
195 Health Care Administration. The plan shall also include
196 innovative health care programs that provide cost-effective

197 alternatives to traditional methods of service and delivery
 198 funding.

199 3. The plan's benefits shall be made available to all
 200 county residents currently eligible to receive health care
 201 services as indigents or medically poor as defined in paragraph
 202 (4) (d).

203 4. Eligible residents who participate in the health care
 204 plan shall receive coverage for a period of 12 months or the
 205 period extending from the time of enrollment to the end of the
 206 current fiscal year, per enrollment period, whichever is less.

207 5. At the end of each fiscal year, the governing board,
 208 agency, or authority shall prepare an audit that reviews the
 209 budget of the plan, delivery of services, and quality of
 210 services, and makes recommendations to increase the plan's
 211 efficiency. The audit shall take into account participant
 212 hospital satisfaction with the plan and assess the amount of
 213 poststabilization patient transfers requested, and accepted or
 214 denied, by the county public general hospital.

215 Section 2. Subsection (21) of section 394.67, Florida
 216 Statutes, is amended to read:

217 394.67 Definitions.--As used in this part, the term:

218 (21) "Residential treatment center for children and
 219 adolescents" means a 24-hour residential program, including a
 220 therapeutic group home, which provides mental health services to
 221 emotionally disturbed children or adolescents as defined in s.
 222 394.492 (5) or (6) and which is a private for-profit or not-for-
 223 profit corporation licensed by the agency ~~under contract with~~
 224 ~~the department~~ which offers a variety of treatment modalities in

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225 a more restrictive setting.

226 Section 3. Section 394.674, Florida Statutes, is amended
227 to read:

228 394.674 Client ~~Clinical~~ eligibility for publicly funded
229 substance abuse and mental health services; fee collection
230 requirements.--

231 (1) To be eligible to receive substance abuse and mental
232 health services funded by the department, a person must be a
233 member of at least one of the department's priority populations
234 ~~target groups~~ approved by the Legislature, ~~pursuant to s.~~
235 ~~216.0166.~~ The priority populations include:

236 (a) For adult mental health services:

237 1. Adults who have severe and persistent mental illness,
238 as designated by the department using criteria that include
239 severity of diagnosis, duration of the mental illness, ability
240 to independently perform activities of daily living, and receipt
241 of disability income for a psychiatric condition. Included
242 within this group are:

243 a. Older adults in crisis.

244 b. Older adults who are at risk of being placed in a more
245 restrictive environment because of their mental illness.

246 c. Persons deemed incompetent to proceed or not guilty by
247 reason of insanity under chapter 916.

248 d. Other persons involved in the criminal justice system.

249 e. Persons diagnosed as having co-occurring mental illness
250 and substance abuse disorders.

251 2. Persons who are experiencing an acute mental or
252 emotional crisis as defined in s. 394.67(17).

- 253 (b) For children's mental health services:
- 254 1. Children who are at risk of emotional disturbance as
- 255 defined in s. 394.492(4).
- 256 2. Children who have an emotional disturbance as defined
- 257 in s. 394.492(5).
- 258 3. Children who have a serious emotional disturbance as
- 259 defined in s. 394.492(6).
- 260 4. Children diagnosed as having a co-occurring substance
- 261 abuse and emotional disturbance or serious emotional
- 262 disturbance.
- 263 (c) For substance abuse treatment services:
- 264 1. Adults who have substance abuse disorders and a history
- 265 of intravenous drug use.
- 266 2. Persons diagnosed as having co-occurring substance
- 267 abuse and mental health disorders.
- 268 3. Parents who put children at risk due to a substance
- 269 abuse disorder.
- 270 4. Persons who have a substance abuse disorder and have
- 271 been ordered by the court to receive treatment.
- 272 5. Children at risk for initiating drug use.
- 273 6. Children under state supervision.
- 274 7. Children who have a substance abuse disorder but who
- 275 are not under the supervision of a court or in the custody of a
- 276 state agency.
- 277 8. Persons identified as being part of a priority
- 278 population as a condition for receiving services funded through
- 279 the Mental Health and Substance Abuse Block Grant.
- 280 (2) Crisis services, as defined in s. 394.67, must, within

281 the limitations of available state and local matching resources,
 282 be available to each person who is eligible for services under
 283 subsection (1), regardless of the person's ability to pay for
 284 such services. A person who is experiencing a mental health
 285 crisis and who does not meet the criteria for involuntary
 286 examination under s. 394.463(1), or a person who is experiencing
 287 a substance abuse crisis and who does not meet the involuntary
 288 admission criteria in s. 397.675, must contribute to the cost of
 289 his or her care and treatment pursuant to the sliding fee scale
 290 developed under subsection (4), unless charging a fee is
 291 contraindicated because of the crisis situation.

292 (3) Mental health services, substance abuse services, and
 293 crisis services, as defined in s. 394.67, must, within the
 294 limitations of available state and local matching resources, be
 295 available to each person who is eligible for services under
 296 subsection (1). Such person must contribute to the cost of his
 297 or her care and treatment pursuant to the sliding fee scale
 298 developed under subsection (4).

299 (4) The department shall adopt rules to implement client
 300 ~~the clinical~~ eligibility, client enrollment, and fee collection
 301 requirements for publicly funded substance abuse and mental
 302 health services.

303 (a) The rules must require ~~that~~ each provider under
 304 contract with the department which enrolls eligible persons into
 305 treatment to develop a sliding fee scale for persons who have a
 306 net family income at or above 150 percent of the Federal Poverty
 307 Income Guidelines, unless otherwise required by state or federal
 308 law. The sliding fee scale must use the uniform schedule of

309 discounts by which a provider under contract with the department
310 discounts its established client charges for services supported
311 with state, federal, or local funds, using, at a minimum,
312 factors such as family income, financial assets, and family size
313 as declared by the person or the person's guardian. The rules
314 must include uniform criteria to be used by all service
315 providers in developing the schedule of discounts for the
316 sliding fee scale.

317 (b) The rules must address the most expensive types of
318 treatment, such as residential and inpatient treatment, in order
319 to make it possible for a client to responsibly contribute to
320 his or her mental health or substance abuse care without
321 jeopardizing the family's financial stability. A person who is
322 not eligible for Medicaid and whose net family income is less
323 than 150 percent of the Federal Poverty Income Guidelines must
324 pay a portion of his or her treatment costs which is comparable
325 to the copayment amount required by the Medicaid program for
326 Medicaid clients pursuant to s. 409.9081.

327 (c) The rules must require that persons who receive
328 financial assistance from the Federal Government because of a
329 disability and are in long-term residential treatment settings
330 contribute to their board and care costs and treatment costs and
331 must be consistent with the provisions in s. 409.212.

332 (5) A person who meets the eligibility criteria in
333 subsection (1) shall be served in accordance with the
334 appropriate district substance abuse and mental health services
335 plan specified in s. 394.75 and within available resources.

336 Section 4. Subsection (6) of section 394.9085, Florida

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337 Statutes, is amended to read:

338 394.9085 Behavioral provider liability.--

339 (6) For purposes of this section, the terms
 340 "detoxification program," "addictions receiving facility," and
 341 "receiving facility" have the same meanings as those provided in
 342 ss. 397.311(17) ~~397.311(18)(b), 397.311(18)(a)~~, and 394.455(26),
 343 respectively.

344 Section 5. Section 397.301, Florida Statutes, is amended
 345 to read:

346 397.301 Short title.--This act may be cited as the "Hal S.
 347 Marchman Alcohol and Other Drug Services Act ~~of 1993~~."

348 Section 6. Section 397.305, Florida Statutes, is amended
 349 to read:

350 397.305 Legislative findings, intent, and purpose.--

351 (1) Substance abuse is a major health problem that affects
 352 multiple service systems and leads to such profoundly disturbing
 353 consequences as serious impairment, chronic addiction, criminal
 354 behavior, vehicular casualties, spiraling health care costs,
 355 AIDS, and business losses, and significantly ~~profoundly~~ affects
 356 the culture, socialization, and learning ability of children
 357 within our schools and educational systems. Substance abuse
 358 impairment is a disease which affects the whole family and the
 359 whole society and requires a system of care that includes
 360 ~~specialized~~ prevention, intervention, clinical ~~and~~ treatment,
 361 and recovery support services that support and strengthen the
 362 family unit. Further, it is the intent of the Legislature to
 363 require the collaboration of state agencies, services, and
 364 program offices to achieve the goals of this chapter and address

365 the needs of the public; to establish a comprehensive system of
 366 care for substance abuse; and to reduce duplicative requirements
 367 across state agencies. This chapter is designed to provide for
 368 substance abuse services.

369 (2) It is the goal of the Legislature to discourage
 370 substance abuse by promoting healthy lifestyles, healthy
 371 families, and drug-free schools, workplaces, and communities.

372 (3)~~(2)~~ It is the purpose of this chapter to provide for a
 373 comprehensive continuum of accessible and quality substance
 374 abuse prevention, intervention, clinical and treatment, and
 375 recovery support services in the least restrictive environment
 376 which promotes long-term recovery while protecting and
 377 respecting ~~of optimum care that protects and respects~~ the rights
 378 of individuals ~~elients, especially for involuntary admissions,~~
 379 primarily through community-based private not-for-profit
 380 providers working with local governmental programs involving a
 381 wide range of agencies from both the public and private sectors.

382 (4)~~(3)~~ It is the intent of the Legislature to ensure
 383 within available resources a full system of care for ~~continuum~~
 384 ~~of~~ substance abuse services based on ~~projected~~ identified needs,
 385 delivered without discrimination and with adequate provision for
 386 specialized needs.

387 (5) It is the intent of the Legislature to establish
 388 services for individuals with co-occurring substance use and
 389 mental disorders.

390 ~~(4) It is the goal of the Legislature to discourage~~
 391 ~~substance abuse by promoting healthy lifestyles and drug-free~~
 392 ~~schools, workplaces, and communities.~~

393 ~~(5) It is the purpose of the Legislature to integrate~~
 394 ~~program evaluation efforts, adequate administrative support~~
 395 ~~services, and quality assurance strategies with direct service~~
 396 ~~provision requirements and to ensure funds for these purposes.~~

397 ~~(6) It is the intent of the Legislature to require the~~
 398 ~~cooperation of departmental programs, services, and program~~
 399 ~~offices in achieving the goals of this chapter and addressing~~
 400 ~~the needs of clients.~~

401 (6)~~(7)~~ It is the intent of the Legislature to provide, ~~for~~
 402 ~~substance abuse impaired adult and juvenile offenders,~~ an
 403 alternative to criminal imprisonment for substance abuse
 404 impaired adults and juvenile offenders by encouraging the
 405 referral of such offenders to service providers not generally
 406 available within the juvenile justice and correctional systems,
 407 ~~system~~ instead of or in addition to criminal penalties.

408 (7)~~(8)~~ It is the intent of the Legislature to provide,
 409 within the limits of appropriations and safe management of the
 410 juvenile justice and correctional systems ~~system,~~ substance
 411 abuse services to substance abuse impaired offenders who are
 412 placed by the Department of Juvenile Justice or who are
 413 incarcerated within the Department of Corrections, in order to
 414 better enable these offenders or inmates to adjust to the
 415 conditions of society presented to them when their terms of
 416 placement or incarceration end.

417 (8)~~(9)~~ It is the intent of the Legislature to provide for
 418 assisting substance abuse impaired persons primarily through
 419 health and other rehabilitative services in order to relieve the
 420 police, courts, correctional institutions, and other criminal

421 justice agencies of a burden that interferes with their ability
 422 to protect people, apprehend offenders, and maintain safe and
 423 orderly communities.

424 ~~(10) It is the purpose of the Legislature to establish a~~
 425 ~~clear framework for the comprehensive provision of substance~~
 426 ~~abuse services in the context of a coordinated and orderly~~
 427 ~~system.~~

428 ~~(11) It is the intent of the Legislature that the freedom~~
 429 ~~of religion of all citizens shall be inviolate. Nothing in this~~
 430 ~~act shall give any governmental entity jurisdiction to regulate~~
 431 ~~religious, spiritual, or ecclesiastical services.~~

432 Section 7. Section 397.311, Florida Statutes, is amended
 433 to read:

434 397.311 Definitions.--As used in this chapter, except part
 435 VIII, the term:

436 (1) "Ancillary services" are services that ~~which~~ include,
 437 but are not limited to, special diagnostic, prenatal and
 438 postnatal, other medical, mental health, legal, economic,
 439 vocational, employment, and educational services.

440 ~~(2) "Assessment" means the systematic evaluation of~~
 441 ~~information gathered to determine the nature and severity of the~~
 442 ~~client's substance abuse problem and the client's need and~~
 443 ~~motivation for services. Assessment entails the use of a~~
 444 ~~psychosocial history supplemented, as required by rule, by~~
 445 ~~medical examinations, laboratory testing, and psychometric~~
 446 ~~measures.~~

447 (2)~~(3)~~ "Authorized agent of the department" means a person
 448 designated by the department to conduct any audit, inspection,

449 monitoring, evaluation, or other duty imposed upon the
 450 department pursuant to this chapter. An authorized agent must be
 451 qualified by expertise and experience to perform these
 452 functions. ~~identified by the department as:~~

- 453 ~~(a) Qualified by the requisite expertise and experience;~~
- 454 ~~(b) Having a need to know the applicable information; and~~
- 455 ~~(c) Having the assigned responsibility to carry out the~~
 456 ~~applicable duty.~~

457 (3) ~~(4)~~ "Beyond the safe management capabilities of the
 458 service provider" refers to an individual ~~a client~~ who is in
 459 need of:

- 460 (a) Supervision;
- 461 (b) Medical care; or
- 462 (c) Services,

463
 464 beyond that which the service provider or service component can
 465 deliver.

466 (4) "Clinical assessment" means the collection of detailed
 467 information concerning an individual's substance use, emotional
 468 and physical health, social roles, and other areas that may
 469 reflect the severity of the individual's abuse of alcohol or
 470 drugs. The collection of information serves as a basis for
 471 identifying an appropriate treatment regimen.

472 ~~(5) "Client" means a recipient of alcohol or other drug~~
 473 ~~services delivered by a service provider but does not include an~~
 474 ~~inmate pursuant to part VIII unless expressly so provided.~~

475 ~~(6) "Client identifying information" means the name,~~
 476 ~~address, social security number, fingerprints, photograph, and~~

477 ~~similar information by which the identity of a client can be~~
478 ~~determined with reasonable accuracy and speed either directly or~~
479 ~~by reference to other publicly available information.~~

480 ~~(5)(7) "Court" means, with respect to all involuntary~~
481 ~~proceedings under this chapter, the circuit court of the county~~
482 ~~in which the judicial proceeding is pending or where the~~
483 ~~substance abuse impaired person resides or is located, and~~
484 ~~includes any general or special magistrate that may be appointed~~
485 ~~by the chief judge to preside over all or part of such~~
486 ~~proceeding. Otherwise, "court" refers to the court of legal~~
487 ~~jurisdiction in the context in which the term is used in this~~
488 ~~chapter.~~

489 ~~(6)(8) "Department" means the Department of Children and~~
490 ~~Family Services.~~

491 ~~(7)(9) "Director" means the chief administrative or~~
492 ~~executive officer of a service provider.~~

493 ~~(8)(10) "Disclose" or "disclosure" means a communication~~
494 ~~of ~~client~~ identifying information, the affirmative verification~~
495 ~~of another person's communication of ~~client~~ identifying~~
496 ~~information, or the communication of any information regarding~~
497 ~~an individual ~~of a client~~ who has received services ~~been~~~~
498 ~~identified. Any disclosure made pursuant to this chapter must be~~
499 ~~limited to that information which is necessary to carry out the~~
500 ~~purpose of the disclosure.~~

501 ~~(9)(11) "Fee system" means a method of establishing~~
502 ~~charges for services rendered, in accordance with an~~
503 ~~individual's ~~a client's~~ ability to pay, used by providers that~~
504 ~~receive state funds.~~

505 (10)~~(12)~~ "For profit" means registered as for profit by
 506 the Secretary of State and recognized by the Internal Revenue
 507 Service as a for-profit entity.

508 (11)~~(13)~~ "Habitual abuser" means a person who is brought
 509 to the attention of law enforcement for being substance
 510 impaired, who meets the criteria for involuntary admission in s.
 511 397.675, and who has been taken into custody for such impairment
 512 three or more times during the preceding 12 months.

513 (12)~~(14)~~ "Hospital" means a hospital or hospital-based
 514 component licensed under chapter 395.

515 (13) "Identifying information" means the name, address,
 516 social security number, fingerprints, photograph, and similar
 517 information by which the identity of an individual can be
 518 determined with reasonable accuracy directly or by reference to
 519 other publicly available information.

520 (14)~~(15)~~ "Impaired" or "substance abuse impaired" means a
 521 condition involving the use of alcoholic beverages or any
 522 psychoactive or mood-altering substance in such a manner as to
 523 induce mental, emotional, or physical problems and cause
 524 socially dysfunctional behavior.

525 (15) "Individual" means a person who receives alcohol or
 526 other drug abuse treatment services delivered by a service
 527 provider. The term does not include an inmate pursuant to part
 528 VIII of this chapter unless expressly so provided.

529 ~~(16) "Individualized treatment or service plan" means an~~
 530 ~~immediate and a long-range plan for substance abuse or ancillary~~
 531 ~~services developed on the basis of a client's assessed needs.~~

532 (16)~~(17)~~ "Law enforcement officer" means a law enforcement

533 officer as defined in s. 943.10(1).

534 ~~(17)-(18)~~ "Licensed service provider" means a public agency
535 under this chapter, a private for-profit or not-for-profit
536 agency under this chapter, a physician or any other private
537 practitioner licensed under this chapter, or a hospital that
538 offers substance abuse ~~impairment~~ services through one or more
539 ~~of the following~~ licensable service components. Licensable
540 service components include a comprehensive continuum of
541 accessible and quality substance abuse prevention, intervention,
542 and clinical treatment services, including the following
543 services:

544 (a) "Clinical treatment" means a professionally directed,
545 deliberate, and planned regimen of services and interventions
546 that are designed to reduce or eliminate the misuse of drugs and
547 alcohol and promote a healthy, drug-free lifestyle. As defined
548 by rule, "clinical treatment services" includes, but is not
549 limited to, the following licensable service components:

550 1. "Addictions receiving facility" is a secure, acute-care
551 facility operated 24 hours per day, 7 days per week, designated
552 by the department to serve individuals found to be substance use
553 impaired as described in s. 397.675 and who meet the placement
554 criteria for this component.

555 2. "Day or night treatment" is a service provided in a
556 nonresidential environment with a structured schedule of
557 treatment and rehabilitative services.

558 3. "Day or night treatment with community housing" means a
559 program intended for individuals who can benefit from living
560 independently in peer community housing while participating in

561 treatment services for a minimum of 5 hours per day for a
562 minimum of 25 hours per week.

563 4. "Detoxification" is a service involving subacute care
564 that is provided on an inpatient or outpatient basis to assist
565 individuals to withdraw from the physiological and psychological
566 effects of substance use disorders and who meet the placement
567 criteria for this component.

568 5. "Intensive inpatient treatment" includes a planned
569 regimen of evaluation, observation, medical monitoring, and
570 clinical protocols delivered through an interdisciplinary team
571 approach provided 24 hours per day, 7 days per week, in a highly
572 structured, live-in environment.

573 6. "Intensive outpatient treatment" is a service that
574 provides individual or group counseling in a more structured
575 environment, is of higher intensity and duration than outpatient
576 treatment, and is provided to individuals who meet the placement
577 criteria for this component.

578 7. "Medication-assisted treatment for opiate addiction" is
579 a service that uses methadone or other medication as authorized
580 by state and federal law, in combination with medical,
581 rehabilitative, and counseling services, in the treatment of
582 individuals who are dependent on opioid drugs.

583 8. "Outpatient treatment" is a service that provides
584 individual, group, or family counseling by appointment during
585 scheduled operating hours for individuals who meet the placement
586 criteria for this component.

587 9. "Residential treatment" is a service provided in a
588 structured live-in environment within a nonhospital setting on a

589 24 hour-per-day, 7 day-per-week basis, and is intended for
590 individuals who meet the placement criteria for this component.

591 (b) "Intervention" means structured services targeted
592 toward individuals or groups at risk of substance abuse and
593 focused on reducing or impeding those factors associated with
594 the onset or the early stages of substance use and related
595 problems.

596 (c) "Prevention" means a process involving strategies
597 aimed at the individual, family, community, or substance that
598 precludes, forestalls, or impedes the development of substance
599 use problems and promotes responsible lifestyles.

600 ~~(a) Addictions receiving facility, which is a community-~~
601 ~~based facility designated by the department to receive, screen,~~
602 ~~and assess clients found to be substance abuse impaired, in need~~
603 ~~of emergency treatment for substance abuse impairment, or~~
604 ~~impaired by substance abuse to such an extent as to meet the~~
605 ~~criteria for involuntary admission in s. 397.675, and to provide~~
606 ~~detoxification and stabilization. An addictions receiving~~
607 ~~facility must be state-owned, state-operated, or state-~~
608 ~~contracted, and licensed pursuant to rules adopted by the~~
609 ~~department's Substance Abuse Program Office which include~~
610 ~~specific authorization for the provision of levels of care and a~~
611 ~~requirement of separate accommodations for adults and minors.~~
612 ~~Addictions receiving facilities are designated as secure~~
613 ~~facilities to provide an intensive level of care and must have~~
614 ~~sufficient staff and the authority to provide environmental~~
615 ~~security to handle aggressive and difficult-to-manage behavior~~
616 ~~and deter elopement.~~

617 ~~(b) Detoxification, which uses medical and psychological~~
618 ~~procedures and a supportive counseling regimen to assist clients~~
619 ~~in managing toxicity and withdrawing and stabilizing from the~~
620 ~~physiological and psychological effects of substance abuse~~
621 ~~impairment.~~

622 ~~(c) Intensive inpatient treatment, which includes a~~
623 ~~planned regimen of professionally directed evaluation,~~
624 ~~observation, medical monitoring, and clinical protocols provided~~
625 ~~24 hours per day, 7 days per week, in a highly structured, live-~~
626 ~~in environment.~~

627 ~~(d) Residential treatment, which provides a structured,~~
628 ~~live-in environment within a nonhospital setting on a 24-hours-~~
629 ~~a-day, 7-days-a-week basis, and which includes:~~

630 ~~1. Facilities that provide room and board and treatment~~
631 ~~and rehabilitation within the primary residential facility; and~~
632 ~~2. Facilities that are used for room and board only and in~~
633 ~~which treatment and rehabilitation activities are provided on a~~
634 ~~mandatory basis at locations other than the primary residential~~
635 ~~facility. In this case, facilities used for room and board and~~
636 ~~for treatment and rehabilitation are operated under the auspices~~
637 ~~of the same provider, and licensing and regulatory requirements~~
638 ~~would apply to both the residential facility and all other~~
639 ~~facilities in which treatment and rehabilitation activities~~
640 ~~occur.~~

641 ~~(e) Day and night treatment, which provides a~~
642 ~~nonresidential environment with a structured schedule of~~
643 ~~treatment and rehabilitation services.~~

644 ~~(f) Outpatient treatment, which provides individual,~~

645 ~~group, or family counseling for clients by appointment during~~
 646 ~~scheduled operating hours, with an emphasis on assessment and~~
 647 ~~treatment.~~

648 ~~(g) Medication and methadone maintenance treatment that~~
 649 ~~uses methadone or other medication as authorized by state and~~
 650 ~~federal law, in conjunction with medical, rehabilitative, and~~
 651 ~~counseling services in the treatment of clients who are~~
 652 ~~dependent upon opioid drugs.~~

653 ~~(h) Prevention, which is a process involving strategies~~
 654 ~~aimed at the individual, the environment, or the substance,~~
 655 ~~which strategies preclude, forestall, or impede the development~~
 656 ~~of substance abuse problems and promote responsible personal and~~
 657 ~~social growth of individuals and families toward full human~~
 658 ~~potential.~~

659 ~~(i) Intervention, which consists of structured services~~
 660 ~~targeted toward individuals or groups at risk and focused on~~
 661 ~~reducing those factors associated with the onset or the early~~
 662 ~~stages of substance abuse, and related problems.~~

663 ~~(18)-(19)~~ "Medical monitoring" means oversight and
 664 treatment, 24 hours per day by medical personnel who are
 665 licensed under chapter 458, chapter 459, or chapter 464, of
 666 individuals ~~clients~~ whose subacute biomedical, emotional,
 667 ~~psychosocial, behavioral, or cognitive~~ problems are so severe
 668 that the individuals ~~clients~~ require intensive inpatient
 669 treatment by an interdisciplinary team.

670 (19) "Medication-assisted treatment (MAT)" is the use of
 671 medications approved by the United States Food and Drug
 672 Administration, in combination with counseling and behavioral

673 therapies, to provide a holistic approach to the treatment of
 674 substance use disorders.

675 (20) "Not for profit" means registered as not for profit
 676 by the Secretary of State and recognized by the Internal Revenue
 677 Service as a not-for-profit entity.

678 (21) "Physician" means a person licensed under chapter 458
 679 to practice medicine or licensed under chapter 459 to practice
 680 osteopathic medicine, and may include, if the context so
 681 indicates, an intern or resident enrolled in an intern or
 682 resident training program affiliated with an approved medical
 683 school, hospital, or other facility through which training
 684 programs are normally conducted.

685 ~~(22) "Preliminary screening" means the gathering of~~
 686 ~~initial information to be used in determining a person's need~~
 687 ~~for assessment or for referral.~~

688 ~~(22)~~(23) "Private practitioner" means a physician licensed
 689 under chapter 458 or chapter 459, a psychologist licensed under
 690 chapter 490, or a clinical social worker, marriage and family
 691 therapist, or mental health counselor licensed under chapter
 692 491.

693 ~~(23)~~(24) "Program evaluation" or "evaluation" means a
 694 systematic measurement of a service provider's achievement of
 695 desired individual client or service outcomes.

696 ~~(24)~~(25) "Qualified professional" means a physician
 697 licensed under chapter 458 or chapter 459; a professional
 698 licensed under chapter 490 or chapter 491; an advanced
 699 registered nurse practitioner licensed under part I of chapter
 700 464; or a person who is certified through a department-

701 recognized certification process for substance abuse treatment
 702 services and who holds, at a minimum, a bachelor's degree. A
 703 person who is certified in substance abuse treatment services by
 704 a state-recognized certification process in another state at the
 705 time of employment with a licensed substance abuse provider in
 706 this state may perform the functions of a qualified professional
 707 as defined in this chapter but must meet certification
 708 requirements contained in this subsection no later than 1 year
 709 after his or her date of employment.

710 (25) "Quality improvement" means a systematic and
 711 organized approach to monitor and continuously improve the
 712 quality of services in order to maintain, restore, or improve
 713 outcomes for individuals and populations throughout a system of
 714 care.

715 (26) "Recovery" means a process of personal change through
 716 which individuals abstain from alcohol or drug use and improve
 717 health, wellness, and quality of life.

718 (27) "Recovery support" means services designed to
 719 strengthen or assist individuals to regain skills, develop the
 720 environmental supports necessary to help the individual thrive
 721 in the community, and meet life goals that promote recovery from
 722 alcohol and drug use. These services include, but are not
 723 limited to, economic, vocational, employment, educational,
 724 housing, and other ancillary services.

725 (28) "Screening" means the gathering of initial
 726 information to be used in determining a person's need for
 727 assessment, services, or referral.

728 ~~(26) "Quality assurance" means the objective and internal~~

729 ~~systematic monitoring of the appropriateness and quality of~~
730 ~~client care rendered by a service provider.~~

731 (29)~~(27)~~ "Secure facility," except where the context
732 indicates a correctional system facility, means a provider that
733 has the authority to deter the premature departure of
734 involuntary individuals ~~clients~~ whose leaving constitutes a
735 violation of a court order or community-based supervision as
736 provided by law. The term "secure facility" includes addictions
737 receiving facilities and facilities authorized by local
738 ordinance for the treatment of habitual abusers.

739 (30) "Service component" or "component" means a discrete
740 operational entity within a service provider that is subject to
741 licensing as defined by rule. Service components include
742 prevention, intervention, and clinical treatment described in
743 subsection (17).

744 (31)~~(28)~~ "Service provider" or "provider" means a public
745 agency, a private for-profit or not-for-profit agency, a person
746 who is a private practitioner, or a hospital licensed under this
747 chapter or exempt from licensure under this chapter.

748 (32)~~(29)~~ "Service provider personnel" or "personnel"
749 includes all owners, directors, chief financial officers, staff,
750 and volunteers, including foster parents, of a service provider.

751 (33)~~(30)~~ "Stabilization" means:

752 (a) Alleviation of a crisis condition; or

753 (b) Prevention of further deterioration,

754

755 and connotes short-term emergency treatment.

756 (34) "Substate entity" means a departmental office

757 designated to serve a geographical area specified by the
 758 department.

759 (35) "System of care" means a coordinated continuum of
 760 community-based services and supports that are organized to meet
 761 the challenges and needs of individuals who are at risk of
 762 developing substance abuse problems or individuals who have
 763 substance abuse problems.

764 (36) "Treatment plan" means an immediate and a long-range
 765 plan based upon an individual's assessed needs and used to
 766 address and monitor an individual's recovery from substance
 767 abuse.

768 Section 8. Subsections (18) and (19) of section 397.321,
 769 Florida Statutes, are renumbered as subsections (19) and (20),
 770 respectively, subsections (2) and (14) and present subsection
 771 (20) are amended, subsection (17) is renumbered as subsection
 772 (18) and amended, and a new subsection (17) is added to that
 773 section, to read:

774 397.321 Duties of the department.--The department shall:

775 (2) Ensure that a plan for substance abuse services is
 776 developed at the local substate entity ~~district~~ level in
 777 accordance with the provisions of part IV of chapter 394.

778 (7) Ensure that each licensed service provider develops a
 779 system and procedures for:

- 780 (a) Clinical ~~Client~~ assessment.
- 781 (b) ~~Individualized Treatment or services~~ planning.
- 782 (c) ~~Client~~ Referral.
- 783 (d) ~~Client~~ Progress reviews.
- 784 (e) ~~Client~~ Followup.

785 (14) In cooperation with service providers, foster and
 786 actively seek additional funding to enhance resources for
 787 prevention, intervention, clinical ~~and~~ treatment, and recovery
 788 support services, including, but not limited to, the development
 789 of partnerships with:

790 (a) Private industry.

791 (b) Intradepartmental and interdepartmental program
 792 offices, including, but not limited to, child care services;
 793 family safety; delinquency services; health services; economic
 794 services; and children's medical services.

795 (c) State agencies, including, but not limited to, the
 796 Department ~~Departments~~ of Corrections, the Department of
 797 Education, the Department of Juvenile Justice, the Department of
 798 Community Affairs, the Department of Elderly Affairs, the
 799 Department of Health, the Department of Financial Services, and
 800 the Agency for Health Care Administration ~~Insurance~~.

801 (17) Develop a certification process by rule for community
 802 substance abuse prevention coalitions.

803 (18) ~~(17)~~ Provide sufficient and qualified staff to oversee
 804 all contracting, licensing, and planning functions within each
 805 of its substate ~~district~~ offices, as permitted by legislative
 806 appropriation.

807 (19) ~~(18)~~ Ensure that the department develops and ensures
 808 the implementation of procedures between its Substance Abuse
 809 Program Office and other departmental programs regarding the
 810 referral of substance abuse impaired persons to service
 811 providers, information on service providers, information on
 812 methods of identifying substance abuse impaired juveniles, and

813 | procedures for referring such juveniles to appropriate service
 814 | providers.

815 | ~~(20)~~ (19) Designate addictions receiving facilities for the
 816 | purpose of ensuring that only qualified service providers render
 817 | services within the context of a secure facility setting.

818 | ~~(20)~~ ~~The department may establish in District 9, in~~
 819 | ~~cooperation with the Palm Beach County Board of County~~
 820 | ~~Commissioners, a pilot project to serve in a managed care~~
 821 | ~~arrangement non-Medicaid eligible persons who qualify to receive~~
 822 | ~~substance abuse or mental health services from the department.~~
 823 | ~~The department may contract with a not-for-profit entity to~~
 824 | ~~conduct the pilot project. The results of the pilot project~~
 825 | ~~shall be reported to the district administrator, and the~~
 826 | ~~secretary 18 months after the initiation. The department shall~~
 827 | ~~incur no additional administrative costs for the pilot project.~~

828 | Section 9. Paragraph (b) of subsection (1) of section
 829 | 397.331, Florida Statutes, is amended to read:

830 | 397.331 Definitions; legislative intent.--

831 | (1) As used in this act, the term:

832 | (b) "Substance abuse programs and services" or "drug
 833 | control" applies generally to the broad continuum of prevention,
 834 | intervention, clinical and treatment, recovery support
 835 | initiatives, ~~and~~ efforts to limit substance abuse, ~~and also~~
 836 | ~~includes~~ initiatives and efforts by law enforcement agencies to
 837 | limit substance abuse.

838 | Section 10. Subsections (1), (3), and (4) of section
 839 | 397.401, Florida Statutes, are amended to read:

840 | 397.401 License required; penalty; injunction; rules

841 waivers.--

842 (1) It is unlawful for any person or agency to act as a
843 substance abuse service provider unless it is licensed or exempt
844 from licensure under this chapter.

845 (3) The department may maintain an action in circuit court
846 to enjoin the unlawful operation of a substance abuse service
847 provider if the department first gives the violator 14 days'
848 notice of its intent to maintain such action and the violator
849 fails to apply for licensure within that 14-day period. If the
850 department determines that the health, safety, and welfare of
851 individuals are ~~clients is~~ jeopardized, the department may move
852 to enjoin the operation at any time during the 14-day period. If
853 the service provider has already applied for licensure under
854 this chapter and has been denied licensure, the department may
855 move immediately to obtain an injunction.

856 (4) In accordance with this subsection, the department may
857 waive rules adopted pursuant to this chapter in order to allow
858 service providers to demonstrate and evaluate innovative or
859 cost-effective substance abuse services alternatives. Rules
860 waivers may be granted only in instances where there is
861 reasonable assurance that the health, safety, or welfare of
862 individuals ~~clients~~ will not be endangered. To apply for a rules
863 waiver, the applicant must be a service provider licensed under
864 this chapter and must submit to the department a written
865 description of the concept to be demonstrated, including:

866 (a) Objectives and anticipated benefits.

867 (b) The number and types of individuals ~~clients~~ who will
868 be affected.

869 (c) A description of how the demonstration will be
870 evaluated.

871 (d) Any other information requested by the department.
872

873 A service provider granted a rules waiver under this subsection
874 must submit a detailed report of the results of its findings to
875 the department within 12 months after receiving the rules
876 waiver. Upon receiving and evaluating the detailed report, the
877 department may renew or revoke the rules waiver or seek any
878 regulatory or statutory changes necessary to allow other service
879 providers to implement the same alternative service.

880 Section 11. Paragraph (e) of subsection (1) and subsection
881 (3) of section 397.403, Florida Statutes, are amended to read:

882 397.403 License application.--

883 (1) Applicants for a license under this chapter must apply
884 to the department on forms provided by the department and in
885 accordance with rules adopted by the department. Applications
886 must include at a minimum:

887 (e) Sufficient information to conduct background screening
888 as provided in s. 397.451.

889 1. If the results of the background screening indicate
890 that any owner, director, or chief financial officer has been
891 found guilty of, regardless of adjudication, or has entered a
892 plea of nolo contendere or guilty to any offense prohibited
893 under the screening standard, a license may not be issued to the
894 applicant service provider unless an exemption from
895 disqualification has been granted by the department as set forth
896 in chapter 435. The owner, director, or chief financial officer

897 ~~manager~~ has 90 days within which to obtain the required
 898 exemption, during which time the applicant's license remains in
 899 effect.

900 2. If any owner, director, or chief financial officer is
 901 arrested or found guilty of, regardless of adjudication, or has
 902 entered a plea of nolo contendere or guilty to any offense
 903 prohibited under the screening standard while acting in that
 904 capacity, the provider shall immediately remove the person from
 905 that position and shall notify the department within 2 days
 906 after such removal, excluding weekends and holidays. Failure to
 907 remove the owner, director, or chief financial officer ~~manager~~
 908 will result in revocation of the provider's license.

909 (3) The department shall accept proof of accreditation by
 910 the Commission on Accreditation of Rehabilitation Facilities
 911 (CARF) ~~CARF—the Rehabilitation Accreditation Commission~~ or the
 912 Joint Commission on Accreditation of Health Care Organizations
 913 (JCAHCO), or through any other nationally recognized
 914 certification process that is acceptable to the department and
 915 meets the minimum licensure requirements under this chapter, in
 916 lieu of requiring the applicant to submit the information
 917 required by paragraphs (1) (a)-(c).

918 Section 12. Section 397.405, Florida Statutes, is amended
 919 to read:

920 397.405 Exemptions from licensure.--The following are
 921 exempt from the licensing provisions of this chapter:

922 (1) A hospital or hospital-based component licensed under
 923 chapter 395.

924 (2) A nursing home facility as defined in s. 400.021.

925 (3) A substance abuse education program established
 926 pursuant to s. 1003.42.

927 (4) A facility or institution operated by the Federal
 928 Government.

929 (5) A physician licensed under chapter 458 or chapter 459.

930 (6) A psychologist licensed under chapter 490.

931 (7) A social worker, marriage and family therapist, or
 932 mental health counselor licensed under chapter 491.

933 (8) A ~~An established and~~ legally cognizable church or
 934 nonprofit religious organization or denomination providing
 935 substance abuse services, including prevention services, which
 936 are solely ~~exclusively~~ religious, spiritual, or ecclesiastical
 937 in nature. A church or nonprofit religious organization or
 938 denomination providing any of the licensable service components
 939 itemized under s. 397.311(17) ~~s. 397.311(18)~~ is not exempt from
 940 substance abuse licensure for purposes of its provision of such
 941 ~~licensable service components~~ but retains its exemption with
 942 respect to all services which are solely ~~exclusively~~ religious,
 943 spiritual, or ecclesiastical in nature.

944 (9) Facilities licensed under chapter 393 which, in
 945 addition to providing services to persons with developmental
 946 disabilities, also provide services to persons developmentally
 947 at risk as a consequence of exposure to alcohol or other legal
 948 or illegal drugs while in utero.

949 (10) DUI education and screening services provided
 950 pursuant to ss. 316.192, 316.193, 322.095, 322.271, and 322.291.
 951 Persons or entities providing treatment services must be
 952 licensed under this chapter unless exempted from licensing as

953 provided in this section.

954 (11) A facility licensed under s. 394.875 as a crisis
 955 stabilization unit.

956
 957 The exemptions from licensure in this section do not apply to
 958 any service provider that receives an appropriation, grant, or
 959 contract from the state to operate as a service provider as
 960 defined in this chapter or to any substance abuse program
 961 regulated pursuant to s. 397.406. Furthermore, this chapter may
 962 not be construed to limit the practice of a physician licensed
 963 under chapter 458 or chapter 459, a psychologist licensed under
 964 chapter 490, ~~or~~ a psychotherapist licensed under chapter 491, or
 965 an advanced registered nurse practitioner licensed under part I
 966 of chapter 464, who provides substance abuse treatment, so long
 967 as the physician, psychologist, ~~or~~ psychotherapist, or advanced
 968 registered nurse practitioner does not represent to the public
 969 that he or she is a licensed service provider and does not
 970 provide services to individuals ~~clients~~ pursuant to part V of
 971 this chapter. Failure to comply with any requirement necessary
 972 to maintain an exempt status under this section is a misdemeanor
 973 of the first degree, punishable as provided in s. 775.082 or s.
 974 775.083.

975 Section 13. Section 397.406, Florida Statutes, is amended
 976 to read:

977 397.406 Licensure and regulation of government-operated
 978 substance abuse programs.--Substance abuse programs operated
 979 directly or under contract by the department, the Department of
 980 Corrections, the Department of Juvenile Justice, any other state

981 agency, or any local correctional agency or authority, which
 982 programs constitute any service provider licensable components
 983 as defined in this chapter, are subject to licensure and
 984 regulation in accordance with rules jointly developed by the
 985 department and the state or local agency operating the program.
 986 The department has authority to promulgate rules exempting such
 987 government-operated programs from specific licensure provisions
 988 of this part, including, but not limited to, licensure fees and
 989 personnel background checks, and to enforce the regulatory
 990 requirements governing such programs.

991 Section 14. Section 397.407, Florida Statutes, is amended
 992 to read:

993 397.407 Licensure process; fees.--

994 (1) The department shall establish by rule the licensure
 995 process to include fees and categories of licenses ~~fees by rule.~~

996 The rule must prescribe a fee range that is based, at least in
 997 part, on the number and complexity of programs listed in s.
 998 397.311(17) ~~s. 397.311(18)~~ which are operated by a licensee. ~~The~~
 999 ~~fee range must be implemented over a 5-year period. The fee~~
 1000 ~~schedule for licensure of service components must be increased~~
 1001 ~~annually in substantially equal increments so that, by July 1,~~
 1002 ~~1998,~~ The fees from the licensure of service components must be
 1003 ~~are~~ sufficient to cover at least 50 percent of the costs of
 1004 regulating the service components. The department shall specify
 1005 by rule a fee range for publicly and privately funded ~~and phase-~~
 1006 ~~in plan for privately funded licensed service providers and a~~
 1007 ~~fee range and phase-in plan for publicly funded licensed service~~
 1008 providers. Fees for privately funded licensed service providers

1009 must exceed the fees for publicly funded licensed service
 1010 providers. In developing the rule governing the licensure
 1011 process and fees, the department shall carefully consider the
 1012 potential adverse impact on small not-for-profit service
 1013 providers. ~~The first year phase-in licensure fees must be at~~
 1014 ~~least \$150 per initial license. The rule must provide for a~~
 1015 ~~reduction in licensure fees for licensed service providers who~~
 1016 ~~hold more than one license.~~

1017 (2) The department shall assess a fee of \$100 per licensed
 1018 service component ~~license~~ for the late filing of an application
 1019 for renewal of a license.

1020 (3) Licensure and renewal fees must be deposited in the
 1021 Operations and Maintenance Trust Fund to be used for the actual
 1022 cost of monitoring, inspecting, and overseeing licensed service
 1023 providers.

1024 (4) Each application for licensure or renewal must be
 1025 accompanied by the required fee, except that a service provider
 1026 that has an all-volunteer staff is exempt from the licensure and
 1027 renewal fees.

1028 (5) The department may issue probationary, regular, and
 1029 interim licenses. Upon adoption of the rule governing the
 1030 licensure process and fees, the department shall issue one
 1031 license for each service component that is operated by a service
 1032 provider and defined in rule pursuant to s. 397.311(17). The
 1033 license is valid only for the specific service components listed
 1034 for each specific location identified on the license. The
 1035 licensed service provider shall apply for a new license at least
 1036 60 days before the addition of any service components or 30 days

1037 before the relocation of any of its service sites. Provision of
 1038 service components or delivery of services at a location not
 1039 identified on the license may be considered an unlicensed
 1040 operation that authorizes the department to seek an injunction
 1041 against operation as provided in s. 397.401, in addition to
 1042 other sanctions authorized by s. 397.415. Probationary and
 1043 regular licenses may be issued only after all required
 1044 information has been submitted. A license may not be
 1045 transferred. As used in this subsection, the term "transfer"
 1046 includes, but is not limited to, the transfer of a majority of
 1047 the ownership interest in the licensed entity or transfer of
 1048 responsibilities under the license to another entity by
 1049 contractual arrangement.

1050 (6) A probationary license may be issued to a service
 1051 provider applicant in the initial stages of developing services
 1052 that are not yet fully operational upon completion of all
 1053 application requirements itemized in s. 397.403(1) and upon
 1054 demonstration of the applicant's ability to comply with all
 1055 applicable statutory and regulatory requirements. A probationary
 1056 license expires 90 days after issuance and may be reissued once
 1057 for an additional 90-day period if the applicant has
 1058 substantially complied with all requirements for regular
 1059 licensure or has initiated action to satisfy all requirements.
 1060 During the probationary period the department shall monitor the
 1061 delivery of services. Notwithstanding s. 120.60(5), the
 1062 department may order a probationary licensee to cease and desist
 1063 operations at any time it is found to be substantially out of
 1064 compliance with licensure standards. This cease-and-desist order

1065 is exempt from the requirements of s. 120.60(6).

1066 (7) A regular license may be issued to:

1067 (a) A new applicant at the end of the probationary period.

1068 (b) A licensed applicant that holds a regular license and
 1069 is seeking renewal.

1070 (c) An applicant for a service component operating under
 1071 an interim license upon successful satisfaction of the
 1072 requirements for a regular license.

1073
 1074 In order to be issued a regular license, the applicant must be
 1075 in compliance with statutory and regulatory requirements.
 1076 Standards and timeframes for the issuance of a regular license
 1077 must be established by rule. An application for renewal of a
 1078 regular license must be submitted to the department at least 60
 1079 days before the license expires.

1080 (8) The department may issue an interim license to a
 1081 service provider for a period established by the department
 1082 which does not exceed 90 days if the department finds that:

1083 (a) A service component of the provider is in substantial
 1084 noncompliance with licensure standards;

1085 (b) The service provider has failed to provide
 1086 satisfactory proof of conformance to fire, safety, or health
 1087 requirements; or

1088 (c) The service provider is involved in license suspension
 1089 or revocation proceedings.

1090
 1091 An interim license applies only to the licensable service
 1092 component of the provider's services which is in substantial

1093 noncompliance with statutory or regulatory requirements. An
 1094 interim license expires 90 days after it is issued; however, it
 1095 may be reissued once for an additional 90-day period in a case
 1096 of extreme hardship in which the noncompliance is not
 1097 attributable to the licensed service provider. If the service
 1098 provider is appealing the final disposition of license
 1099 suspension or revocation proceedings, the court before which the
 1100 appeal is taken may order the extension of the interim license
 1101 for a period specified in the order.

1102 (9) A separate license is required for each service
 1103 component maintained by the service provider.

1104 (10) The license must be displayed in a conspicuous place
 1105 inside the facility providing the licensed service component.

1106 Section 15. Section 397.409, Florida Statutes, is
 1107 repealed.

1108 Section 16. Subsection (3) of section 397.411, Florida
 1109 Statutes, is amended, present subsection (5) of that section is
 1110 redesignated as subsection (6), and a new subsection (5) is
 1111 added to that section, to read:

1112 397.411 Inspection; right of entry; records.--

1113 (3) Notwithstanding the confidentiality provisions of this
 1114 chapter, a designated and authorized agent of the department may
 1115 access the records of the individuals served by ~~clients of~~
 1116 licensed service providers, but only for purposes of licensing,
 1117 monitoring, and investigation. The department may interview
 1118 individuals ~~clients~~, as specified by rule.

1119 (5) In an effort to coordinate inspections among agencies,
 1120 the department shall notify applicable state agencies of any

1121 scheduled licensure inspections of service providers jointly
 1122 served by the agencies.

1123 Section 17. Subsections (1), (2), and (4) of section
 1124 397.415, Florida Statutes, are amended to read:

1125 397.415 Denial, suspension, and revocation; other
 1126 remedies.--

1127 (1) If the department determines that an applicant or
 1128 licensed service provider or licensed service component thereof
 1129 is not in compliance with all statutory and regulatory
 1130 requirements, the department may deny, suspend, revoke, or
 1131 impose reasonable restrictions or penalties on the license or
 1132 any portion of the license. In such case, the department:

1133 (a) May impose a moratorium on admissions to any service
 1134 component of a licensed service provider if the department
 1135 determines that conditions ~~within such component~~ are a threat to
 1136 the public health or safety.

1137 (b) May impose an administrative penalty of up to \$500 per
 1138 day against a licensed service provider operating in violation
 1139 of any fire-related, safety-related, or health-related statutory
 1140 or regulatory requirement. Fines collected under this paragraph
 1141 must be deposited in the Operations and Maintenance Substance
 1142 ~~Abuse Impairment Provider Licensing~~ Trust Fund.

1143 (c) May suspend or revoke the license of a service
 1144 provider or may suspend or revoke the license as to the
 1145 operation of any service component or location identified on the
 1146 license if, after notice, the department ~~it~~ determines that a
 1147 service provider has failed to correct the substantial or
 1148 chronic violation of any statutory or regulatory requirement

1149 that ~~such as~~ impacts the quality of ~~elient~~ care.

1150 (2) If a provider's license is revoked ~~of a facility or~~
 1151 ~~any service component of a facility is revoked~~, the service
 1152 provider is barred from submitting any application for licensure
 1153 of the affected facility or service component to the department
 1154 for a period of 1 year after the revocation. If the provider's
 1155 license is revoked as to any service component or location
 1156 identified on the license, the provider is barred from applying
 1157 for licensure of the affected service component or location for
 1158 1 year after the revocation.

1159 (4) The department may maintain an action in court to
 1160 enjoin the operation of any licensed or unlicensed provider,
 1161 service component, or location ~~facility~~ in violation of this
 1162 chapter or the rules adopted under this chapter.

1163 Section 18. Section 397.416, Florida Statutes, is amended
 1164 to read:

1165 397.416 Substance abuse treatment services; qualified
 1166 professional.--Notwithstanding any other provision of law, a
 1167 person who was certified through a certification process
 1168 recognized by the former Department of Health and Rehabilitative
 1169 Services before January 1, 1995, may perform the duties of a
 1170 qualified professional with respect to substance abuse treatment
 1171 services as defined in this chapter, and need not meet the
 1172 certification requirements contained in s. 397.311(24) ~~s.~~
 1173 ~~397.311(25).~~

1174 Section 19. Section 397.419, Florida Statutes, is amended
 1175 to read:

1176 397.419 Quality improvement ~~assurance~~ programs.--

1177 (1) Each service provider must maintain a ~~an ongoing~~
 1178 quality improvement ~~assurance~~ program to objectively and
 1179 systematically monitor and evaluate the appropriateness and
 1180 quality of ~~client~~ care, to ensure that services are rendered
 1181 consistent with prevailing professional standards, and to
 1182 identify and resolve problems.

1183 (2) For each service provider, a written plan must be
 1184 developed with a copy made available upon request ~~submitted~~ to
 1185 the department which addresses the minimum guidelines for the
 1186 provider's quality improvement ~~assurance~~ program, including, but
 1187 not limited to:

- 1188 (a) Individual ~~Client~~ care and services standards.
- 1189 (b) Individual ~~Client~~ records maintenance procedures.
- 1190 (c) Staff development policies and procedures.
- 1191 (d) Service-environment ~~Facility~~ safety and maintenance
 1192 standards.

1193 (e) Peer review and utilization management review
 1194 procedures.

1195 (f) Incident reporting policies and procedures that
 1196 include, ~~including~~ verification of corrective action, and
 1197 provision for reporting to the department within a time period
 1198 prescribed by rule, documentation that incident reporting is the
 1199 affirmative duty of all staff, and a provision that specifies
 1200 that a person who files an incident report may not be subjected
 1201 to any civil action by virtue of that incident report.

1202 (3) The quality improvement ~~assurance~~ program is the
 1203 responsibility of the director and is subject to review and
 1204 approval by the governing board of the service provider.

1205 (4) Each director shall designate a person who is an
 1206 employee of or under contract with the service provider as the
 1207 provider's quality improvement ~~assurance~~ manager.

1208 ~~(5) Incident reporting is the affirmative duty of all~~
 1209 ~~staff.~~

1210 ~~(6) A person who files an incident report may not be~~
 1211 ~~subjected to any civil action by virtue of that incident report.~~

1212 (5)~~(7)~~ The department may access all service provider
 1213 records necessary to determine compliance with this section.
 1214 Records relating solely to actions taken in carrying out this
 1215 section and records obtained by the department to determine a
 1216 provider's compliance with this section are confidential and
 1217 exempt from ~~the provisions of~~ s. 119.07(1) and s. 24(a), Art. I
 1218 of the State Constitution. Such records are not admissible in
 1219 any civil or administrative action except in disciplinary
 1220 proceedings by the Department of Business and Professional
 1221 Regulation or the appropriate regulatory board, and are not part
 1222 of the record of investigation and prosecution in disciplinary
 1223 proceedings made available to the public by the Department of
 1224 Business and Professional Regulation or the appropriate
 1225 regulatory board. Meetings or portions of meetings of quality
 1226 improvement ~~assurance~~ program committees that relate solely to
 1227 actions taken pursuant to this section are exempt from s.
 1228 286.011.

1229 (6)~~(8)~~ The quality improvement ~~assurance~~ program must also
 1230 ~~shall be implemented as part of the department's contract~~
 1231 ~~management process. The quality assurance program shall:~~

1232 ~~(a) Track performance measures and standards established~~

1233 ~~by the Legislature as part of the performance-based program~~
 1234 ~~budgeting process;~~

1235 (a)~~(b)~~ Provide a framework for evaluating outcomes ~~which~~
 1236 ~~is separate from the performance-based program budgeting~~
 1237 ~~process, including:~~

1238 1. Output measures, such as capacities, technologies, and
 1239 infrastructure, that make up the system of care.

1240 2. Process measures, such as administrative and clinical
 1241 components of treatment.

1242 3. Outcome measures pertaining to the outcomes of
 1243 services;

1244 (b)~~(e)~~ Provide for a system of analyzing those factors
 1245 which have an effect on performance at the local level;

1246 (c)~~(d)~~ Provide for a system of reporting the results of
 1247 quality improvement ~~assurance~~ reviews; and

1248 (d)~~(e)~~ Incorporate best practice models for use in
 1249 improving performance in those areas which are deficient.

1250 ~~(9) The quality assurance program shall incorporate a peer~~
 1251 ~~review process into its protocol, to include:~~

1252 ~~(a) Reviews of providers by departmental district staff~~
 1253 ~~and other providers.~~

1254 ~~(b) Reviews of individual districts by other districts.~~

1255 (7)~~(10)~~ Contingent upon specific appropriation, a quality
 1256 improvement ~~assurance~~ coordinator position shall be established
 1257 within each substate entity service district to oversee the
 1258 implementation and operation of the quality improvement
 1259 ~~assurance~~ program.

1260 Section 20. Section 397.427, Florida Statutes, is amended

1261 to read:

1262 397.427 Medication-assisted ~~Medication~~ treatment service
 1263 providers; rehabilitation program; needs assessment and
 1264 provision of services; persons authorized to issue takeout
 1265 medication ~~methadone~~; unlawful operation; penalty.--

1266 (1) ~~Medication treatment service~~ Providers of medication-
 1267 assisted treatment services for opiate addiction may not be
 1268 licensed unless they provide supportive rehabilitation programs.
 1269 Supportive rehabilitation programs include, but are not limited
 1270 to, counseling, therapy, and vocational rehabilitation.

1271 (2) The department shall determine the need for
 1272 establishing ~~medication treatment service~~ providers of
 1273 medication-assisted treatment services for opiate addiction.

1274 (a) ~~Medication treatment service~~ Providers of medication-
 1275 assisted treatment services for opiate addiction may be
 1276 established only in response to the department's determination
 1277 and publication of need for additional medication treatment
 1278 services.

1279 (b) The department shall prescribe by rule the types of
 1280 medication-assisted ~~medication~~ treatment services for opiate
 1281 addiction for which it is necessary to conduct annual
 1282 assessments of need. If needs assessment is required, the
 1283 department shall annually conduct the assessment and publish a
 1284 statement of findings which identifies each substate entity's
 1285 ~~district's~~ need.

1286 (c) Notwithstanding paragraphs (a) and (b), the license
 1287 for medication-assisted ~~medication~~ treatment programs for opiate
 1288 addiction licensed before October 1, 1990, may not be revoked

1289 solely because of the department's determination concerning the
 1290 need for medication-assisted ~~medication~~ treatment services for
 1291 opiate addiction.

1292 (3) The department shall adopt rules necessary to
 1293 administer this section, including, but not limited to, rules
 1294 prescribing criteria and procedures for:

1295 (a) Determining the need for additional medication-
 1296 assisted ~~medication~~ treatment services for opiate addiction.

1297 (b) Selecting ~~medication treatment service~~ providers for
 1298 medication-assisted treatment services for opiate addiction when
 1299 the number of responses to a publication of need exceeds the
 1300 determined need.

1301 (c) Administering any federally required rules,
 1302 regulations, or procedures.

1303 (4) A service provider operating in violation of this
 1304 section is subject to proceedings in accordance with this
 1305 chapter to enjoin that unlawful operation.

1306 (5) Notwithstanding ~~the provisions of~~ s. 465.019(2), a
 1307 registered nurse, an advanced registered nurse practitioner, or
 1308 a licensed practical nurse working for a licensed service
 1309 provider is authorized to deliver takeout medication for opiate
 1310 treatment ~~methadone~~ to persons enrolled in a ~~methadone~~
 1311 maintenance treatment program for medication-assisted treatment
 1312 for opiate addiction if ~~provided that~~:

1313 (a) The medication-assisted ~~methadone maintenance~~
 1314 treatment program for opiate addiction has an appropriate valid
 1315 permit issued pursuant to rules adopted ~~promulgated~~ by the Board
 1316 of Pharmacy;

1317 (b) The medication for treatment of opiate addiction has
 1318 been delivered pursuant to a valid prescription written by the
 1319 program's physician licensed pursuant to chapter 458 or chapter
 1320 459;

1321 (c) The medication for treatment of opiate addiction which
 1322 is ordered appears on a formulary and is prepackaged and
 1323 prelabeled with dosage instructions and distributed from a
 1324 source authorized under chapter 499;

1325 (d) Each licensed provider adopts written protocols which
 1326 provide for supervision of the registered nurse, advanced
 1327 registered nurse practitioner, or licensed practical nurse by a
 1328 physician licensed pursuant to chapter 458 or chapter 459 and
 1329 for the procedures by which patients' medications may be
 1330 delivered by the registered nurse, advanced registered nurse
 1331 practitioner, or licensed practical nurse. Such protocols shall
 1332 be signed by the supervising physician and either the
 1333 administering registered nurse, the advanced registered nurse
 1334 practitioner, or the licensed practical nurse.

1335 (e) Each licensed service provider maintains and has
 1336 available for inspection by representatives of the Board of
 1337 Pharmacy all medical records and patient care protocols,
 1338 including records of medications delivered to patients, in
 1339 accordance with the board.

1340 (6) The department shall also determine the need for
 1341 establishing medication-assisted treatment for substance abuse
 1342 disorders other than opiate dependence. Service providers within
 1343 the publicly funded system shall be funded for provision of
 1344 these services based on the availability of funds.

1345 (7) Service providers that provide medication-assisted
 1346 treatment for substance abuse disorders other than opiate
 1347 dependence shall provide counseling services in conjunction with
 1348 medication-assisted treatment.

1349 (8) The department shall adopt rules necessary to
 1350 administer medication-assisted treatment services, including,
 1351 but not limited to, rules prescribing criteria and procedures
 1352 for:

1353 (a) Determining the need for medication-assisted treatment
 1354 services within the publicly funded system.

1355 (b) Selecting medication-assisted service providers within
 1356 the publicly funded system.

1357 (c) Administering any federally required rules,
 1358 regulations, or procedures related to the provision of
 1359 medication-assisted treatment.

1360 (9) A registered nurse, an advanced registered nurse
 1361 practitioner, or a licensed practical nurse working for a
 1362 licensed service provider may deliver medication as prescribed
 1363 by rule if:

1364 (a) The service provider authorized to provide medication-
 1365 assisted treatment has an appropriate valid permit issued
 1366 pursuant to rules adopted by the Board of Pharmacy;

1367 (b) The medication has been delivered pursuant to a valid
 1368 prescription written by the program's physician who is licensed
 1369 under chapter 458 or chapter 459; and

1370 (c) The medication ordered appears on a formulary or meets
 1371 federal requirements for medication-assisted treatment.

1372 (10) Each licensed service provider that provides

1373 medication-assisted treatment must adopt written protocols as
 1374 specified by the department and in accordance with federally
 1375 required rules, regulations, or procedures. The protocol shall
 1376 provide for the supervision of the registered nurse, advanced
 1377 registered nurse practitioner, or licensed practical nurse
 1378 working under the supervision of a physician who is licensed
 1379 under chapter 458 or chapter 459. The protocol must specify how
 1380 the medication will be used in conjunction with counseling or
 1381 psychosocial treatment and that the services provided will be
 1382 included on the treatment plan. The protocol must specify the
 1383 procedures by which medication-assisted treatment may be
 1384 delivered by the registered nurse, advanced registered nurse
 1385 practitioner, or licensed practical nurse. These protocols shall
 1386 be signed by the supervising physician and the administering
 1387 registered nurse, advanced registered nurse practitioner, or
 1388 licensed practical nurse.

1389 (11) Each licensed service provider shall maintain and
 1390 have available for inspection by representatives of the Board of
 1391 Pharmacy all medical records and protocols, including records of
 1392 medications delivered to individuals in accordance with rules of
 1393 the board.

1394 Section 21. Section 397.431, Florida Statutes, is amended
 1395 to read:

1396 397.431 Individual ~~Client~~ responsibility for cost of
 1397 substance abuse impairment services.--

1398 (1) Before ~~Prior to~~ accepting an individual ~~a client~~ for
 1399 admission and in accordance with confidentiality guidelines,
 1400 both the full charge for services and the fee charged to the

1401 individual ~~client~~ for such services under the provider's fee
 1402 system or payment policy must be disclosed to each individual
 1403 ~~client~~ or his or her authorized personal representative, or
 1404 parent or legal guardian if the individual ~~client~~ is a minor who
 1405 did not seek treatment voluntarily and without parental consent.

1406 (2) An individual ~~A client~~ or his or her authorized
 1407 personal representative, or parent or legal guardian if the
 1408 individual ~~client~~ is a minor, is required to contribute toward
 1409 the cost of substance abuse services in accordance with his or
 1410 her ability to pay, unless otherwise provided by law.

1411 (3) The parent, legal guardian, or legal custodian of a
 1412 minor is not liable for payment for any substance abuse services
 1413 provided to the minor without parental consent pursuant to s.
 1414 397.601(4), unless the parent, legal guardian, or legal
 1415 custodian participates or is ordered to participate in the
 1416 services, and only for the substance abuse services rendered. If
 1417 the minor is receiving services as a juvenile offender, the
 1418 obligation to pay is governed by the law relating to juvenile
 1419 offenders.

1420 (4) Service providers that do not contract for state funds
 1421 to provide substance abuse services as defined in this chapter
 1422 may establish their own admission policies regarding provisions
 1423 for payment for services. Such policies must comply with other
 1424 statutory and regulatory requirements governing state or federal
 1425 reimbursements to a provider for services delivered to
 1426 individuals ~~individual clients~~. As used in this subsection, the
 1427 term "contract for state funds" does not include Medicaid funds.

1428 (5) Service providers that contract for state funds to

1429 provide substance abuse services as defined in this chapter must
 1430 establish a fee system based upon an individual's ~~a client's~~
 1431 ability to pay and, if space and sufficient state resources are
 1432 available, may not deny an individual ~~a client~~ access to
 1433 services solely on the basis of the individual's ~~client's~~
 1434 inability to pay.

1435 Section 22. Paragraphs (a) and (e) of subsection (1) of
 1436 section 397.451, Florida Statutes, are amended to read:

1437 397.451 Background checks of service provider personnel.--

1438 (1) PERSONNEL BACKGROUND CHECKS; REQUIREMENTS AND
 1439 EXCEPTIONS.--

1440 (a) Background checks shall apply as follows:

1441 1. All owners, directors, and chief financial officers of
 1442 service providers are subject to level 2 background screening as
 1443 provided under chapter 435. Inmate substance abuse programs
 1444 operated directly or under contract with the Department of
 1445 Corrections are exempt from this requirement.

1446 2. All service provider personnel who have direct contact
 1447 with children receiving services or with adults who are
 1448 developmentally disabled receiving services are subject to level
 1449 2 background screening as provided under chapter 435.

1450 (e) Personnel employed directly or under contract with ~~by~~
 1451 the Department of Corrections in an inmate substance abuse
 1452 program ~~a substance abuse service component~~ who have direct
 1453 contact with unmarried inmates under the age of 18 or with
 1454 inmates who are developmentally disabled are exempt from the
 1455 fingerprinting and background check requirements of this
 1456 section.

1457 Section 23. Paragraphs (a) and (b) of subsection (1) of
 1458 section 397.471, Florida Statutes, are amended to read:

1459 397.471 Service provider facility standards.--

1460 (1) Each service provider must ensure:

1461 (a) Sufficient numbers and types of qualified personnel on
 1462 duty and available to provide necessary and adequate ~~client~~
 1463 safety and care.

1464 (b) Adequate space for each individual served within
 1465 ~~client~~ of a residential facility.

1466 Section 24. Section 397.501, Florida Statutes, is amended
 1467 to read:

1468 397.501 Rights of individuals ~~clients~~.--Individuals
 1469 ~~Clients~~ receiving substance abuse services from any service
 1470 provider are guaranteed protection of the rights specified in
 1471 this section, unless otherwise expressly provided, and service
 1472 providers must ensure the protection of such rights.

1473 (1) RIGHT TO INDIVIDUAL DIGNITY.--The ~~individual~~ dignity
 1474 of the individual served ~~client~~ must be respected at all times
 1475 and upon all occasions, including any occasion when the
 1476 individual ~~client~~ is admitted, retained, or transported.

1477 Individuals served ~~Substance abuse clients~~ who are not accused
 1478 of a crime or delinquent act may not be detained or incarcerated
 1479 in jails, detention centers, or training schools of the state,
 1480 except for purposes of protective custody in strict accordance
 1481 with this chapter. An individual ~~A client~~ may not be deprived of
 1482 any constitutional right.

1483 (2) RIGHT TO NONDISCRIMINATORY SERVICES.--

1484 (a) Service providers may not deny an individual ~~a client~~

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1485 access to substance abuse services solely on the basis of race,
1486 gender, ethnicity, age, sexual preference, human
1487 immunodeficiency virus status, prior service departures against
1488 medical advice, disability, or number of relapse episodes.
1489 Service providers may not deny an individual ~~a client~~ who takes
1490 medication prescribed by a physician access to substance abuse
1491 services solely on that basis. Service providers who receive
1492 state funds to provide substance abuse services may not, if
1493 ~~provided~~ space and sufficient state resources are available,
1494 deny ~~a client~~ access to services based solely on inability to
1495 pay.

1496 (b) Each individual ~~client~~ in treatment must be afforded
1497 the opportunity to participate in the formulation and periodic
1498 review of his or her individualized treatment or service plan to
1499 the extent of his or her ability to so participate.

1500 (c) It is the policy of the state to use the least
1501 restrictive and most appropriate services available, based on
1502 the needs and the best interests of the individual ~~client~~ and
1503 consistent with optimum care of the individual ~~client~~.

1504 (d) Each individual ~~client~~ must be afforded the
1505 opportunity to participate in activities designed to enhance
1506 self-image.

1507 (3) RIGHT TO QUALITY SERVICES.--

1508 (a) Each individual ~~client~~ must be delivered services
1509 suited to his or her needs, administered skillfully, safely,
1510 humanely, with full respect for his or her dignity and personal
1511 integrity, and in accordance with all statutory and regulatory
1512 requirements.

1513 (b) These services must include the use of methods and
1514 techniques to control aggressive ~~client~~ behavior that poses an
1515 immediate threat to the individual ~~client~~ or to other persons.
1516 Such methods and techniques include the use of restraints, the
1517 use of seclusion, the use of time-out, and other behavior
1518 management techniques. When authorized, these methods and
1519 techniques may be applied only by persons who are employed by
1520 service providers and trained in the application and use of
1521 these methods and techniques. The department must specify by
1522 rule the methods that may be used and the techniques that may be
1523 applied by service providers to control aggressive ~~client~~
1524 behavior and must specify by rule the physical facility
1525 requirements for seclusion rooms, including dimensions, safety
1526 features, methods of observation, and contents.

1527 (4) RIGHT TO COMMUNICATION.--

1528 (a) Each individual ~~client~~ has the right to communicate
1529 freely and privately with other persons within the limitations
1530 imposed by service provider policy.

1531 (b) Because the delivery of services can only be effective
1532 in a substance abuse free environment, close supervision of each
1533 individual's ~~client's~~ communications and correspondence is
1534 necessary, particularly in the initial stages of treatment, and
1535 the service provider must therefore set reasonable rules for
1536 telephone, mail, and visitation rights, giving primary
1537 consideration to the well-being and safety of individuals
1538 ~~clients~~, staff, and the community. It is the duty of the service
1539 provider to inform the individual ~~client~~ and his or her family
1540 if the family is involved at the time of admission about the

1541 provider's rules relating to communications and correspondence.

1542 (5) RIGHT TO CARE AND CUSTODY OF PERSONAL EFFECTS OF
 1543 ~~CLIENTS.~~--An individual A-client has the right to possess
 1544 clothing and other personal effects. The service provider may
 1545 take temporary custody of the individual's client's personal
 1546 effects only when required for medical or safety reasons, with
 1547 the reason for taking custody and a list of the personal effects
 1548 recorded in the individual's client's clinical record.

1549 (6) RIGHT TO EDUCATION OF MINORS.--Each minor ~~client~~ in a
 1550 residential service component is guaranteed education and
 1551 training appropriate to his or her needs. The service provider
 1552 shall coordinate with local education agencies to ensure that
 1553 education and training is provided to each minor ~~client~~ in
 1554 accordance with other applicable laws and regulations and that
 1555 parental responsibilities related to such education and training
 1556 are established within the provisions of such applicable laws
 1557 and regulations. ~~Nothing in This chapter~~ does not may be
 1558 ~~construed to~~ relieve any local education authority of its
 1559 obligation under law to provide a free and appropriate education
 1560 to every child.

1561 (7) RIGHT TO CONFIDENTIALITY OF INDIVIDUAL CLIENT
 1562 RECORDS.--

1563 (a) The records of service providers which pertain to the
 1564 identity, diagnosis, and prognosis of and service provision to
 1565 any individual ~~client~~ are confidential in accordance with this
 1566 chapter and with applicable federal confidentiality regulations
 1567 and are exempt from ~~the provisions of~~ s. 119.07(1) and s. 24(a),
 1568 Art. I of the State Constitution. Such records may not be

1569 disclosed without the written consent of the individual ~~client~~
 1570 to whom they pertain except that appropriate disclosure may be
 1571 made without such consent:

- 1572 1. To medical personnel in a medical emergency.
- 1573 2. To service provider personnel if such personnel need to
 1574 know the information in order to carry out duties relating to
 1575 the provision of services to an individual ~~a client~~.
- 1576 3. To the secretary of the department or the secretary's
 1577 designee, for purposes of scientific research, in accordance
 1578 with federal confidentiality regulations, but only upon
 1579 agreement in writing that the individual's ~~client's~~ name and
 1580 other identifying information will not be disclosed.
- 1581 4. In the course of review of service-provider records ~~on~~
 1582 ~~service provider premises~~ by persons who are performing an audit
 1583 or evaluation on behalf of any federal, state, or local
 1584 government agency, or third-party payor providing financial
 1585 assistance or reimbursement to the service provider; however,
 1586 reports produced as a result of such audit or evaluation may not
 1587 disclose ~~client~~ names or other identifying information and must
 1588 be in accordance ~~accord~~ with federal confidentiality
 1589 regulations.
- 1590 5. Upon court order based on application showing good
 1591 cause for disclosure. In determining whether there is good cause
 1592 for disclosure, the court shall examine whether the public
 1593 interest and the need for disclosure outweigh the potential
 1594 injury to the individual ~~client~~, to the service provider and the
 1595 individual ~~provider-client relationship~~, and to the service
 1596 provider itself.

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1597 (b) The restrictions on disclosure and use in this section
1598 do not apply to communications from provider personnel to law
1599 enforcement officers which:

1600 1. Are directly related to an individual's ~~a client's~~
1601 commission of a crime on the premises of the provider or against
1602 provider personnel or to a threat to commit such a crime; and

1603 2. Are limited to the circumstances of the incident,
1604 including the ~~client~~ status of the individual committing or
1605 threatening to commit the crime, that individual's name and
1606 address, and that individual's last known whereabouts.

1607 (c) The restrictions on disclosure and use in this section
1608 do not apply to the reporting of incidents of suspected child
1609 abuse and neglect to the appropriate state or local authorities
1610 as required by law. However, such restrictions continue to apply
1611 to the original substance abuse ~~client~~ records maintained by the
1612 provider, including their disclosure and use for civil or
1613 criminal proceedings which may arise out of the report of
1614 suspected child abuse and neglect.

1615 (d) Any answer to a request for a disclosure of individual
1616 ~~client~~ records which is not permissible under this section or
1617 under the appropriate federal regulations must be made in a way
1618 that will not affirmatively reveal that an identified individual
1619 has been, or is being diagnosed or treated for substance abuse.
1620 The regulations do not restrict a disclosure that an identified
1621 individual is not and has never received services ~~has been a~~
1622 ~~client~~.

1623 (e)1. Since a minor acting alone has the legal capacity to
1624 voluntarily apply for and obtain substance abuse treatment, any

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1625 written consent for disclosure may be given only by the minor
1626 ~~client~~. This restriction includes, but is not limited to, any
1627 disclosure of ~~client~~ identifying information to the parent,
1628 legal guardian, or custodian of a minor ~~client~~ for the purpose
1629 of obtaining financial reimbursement.

1630 2. When the consent of a parent, legal guardian, or
1631 custodian is required under this chapter in order for a minor to
1632 obtain substance abuse treatment, any written consent for
1633 disclosure must be given by both the minor and the parent, legal
1634 guardian, or custodian.

1635 (f) An order of a court of competent jurisdiction
1636 authorizing disclosure and use of confidential information is a
1637 unique kind of court order. Its only purpose is to authorize a
1638 disclosure or use of ~~client~~ identifying information which would
1639 otherwise be prohibited by this section. Such an order does not
1640 compel disclosure. A subpoena or a similar legal mandate must be
1641 issued in order to compel disclosure. This mandate may be
1642 entered at the same time as, and accompany, an authorizing court
1643 order entered under this section.

1644 (g) An order authorizing the disclosure of an individual's
1645 ~~client~~ records may be applied for by any person having a legally
1646 recognized interest in the disclosure which is sought. The
1647 application may be filed separately or as part of a pending
1648 civil action in which it appears that the individual's ~~client~~
1649 records are needed to provide evidence. An application must use
1650 a fictitious name, such as John Doe or Jane Doe, to refer to any
1651 individual ~~client~~ and may not contain or otherwise disclose any
1652 ~~client~~ identifying information unless the individual ~~client~~ is

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1653 the applicant or has given a written consent to disclosure or
1654 the court has ordered the record of the proceeding sealed from
1655 public scrutiny.

1656 (h) The individual ~~client~~ and the person holding the
1657 records from whom disclosure is sought must be given adequate
1658 notice in a manner which will not disclose ~~client~~ identifying
1659 information to other persons, and an opportunity to file a
1660 written response to the application, or to appear in person, for
1661 the limited purpose of providing evidence on the statutory and
1662 regulatory criteria for the issuance of the court order.

1663 (i) Any oral argument, review of evidence, or hearing on
1664 the application must be held in the judge's chambers or in some
1665 manner which ensures that ~~client~~ identifying information is not
1666 disclosed to anyone other than a party to the proceeding, the
1667 individual ~~client~~, or the person holding the record, unless the
1668 individual ~~client~~ requests an open hearing. The proceeding may
1669 include an examination by the judge of the ~~client~~ records
1670 referred to in the application.

1671 (j) A court may authorize the disclosure and use of ~~client~~
1672 records for the purpose of conducting a criminal investigation
1673 or prosecution of an individual ~~a client~~ only if the court finds
1674 that all of the following criteria are met:

1675 1. The crime involved is extremely serious, such as one
1676 which causes or directly threatens loss of life or serious
1677 bodily injury, including but not limited to homicide, sexual
1678 assault, sexual battery, kidnapping, armed robbery, assault with
1679 a deadly weapon, and child abuse and neglect.

1680 2. There is reasonable likelihood that the records will

1681 disclose information of substantial value in the investigation
 1682 or prosecution.

1683 3. Other ways of obtaining the information are not
 1684 available or would not be effective.

1685 4. The potential injury to the individual ~~client~~, to the
 1686 physician-individual ~~physician-client~~ relationship and to the
 1687 ability of the program to provide services to other individuals
 1688 ~~clients~~ is outweighed by the public interest and the need for
 1689 the disclosure.

1690 (8) RIGHT TO COUNSEL.--Each individual ~~client~~ must be
 1691 informed that he or she has the right to be represented by
 1692 counsel in any involuntary proceeding for assessment,
 1693 stabilization, or treatment and that he or she, or if the
 1694 individual ~~client~~ is a minor his or her parent, legal guardian,
 1695 or legal custodian, may apply immediately to the court to have
 1696 an attorney appointed if he or she cannot afford one.

1697 (9) RIGHT TO HABEAS CORPUS.--At any time, and without
 1698 notice, an individual ~~a-client~~ involuntarily retained by a
 1699 provider, or the individual's ~~client's~~ parent, guardian,
 1700 custodian, or attorney on behalf of the individual ~~client~~, may
 1701 petition for a writ of habeas corpus to question the cause and
 1702 legality of such retention and request that the court issue a
 1703 writ for the individual's ~~client's~~ release.

1704 (10) LIABILITY AND IMMUNITY.--

1705 (a) Service provider personnel who violate or abuse any
 1706 right or privilege of an individual ~~a-client~~ under this chapter
 1707 are liable for damages as determined by law.

1708 (b) All persons acting in good faith, reasonably, and

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1709 without negligence in connection with the preparation or
 1710 execution of petitions, applications, certificates, or other
 1711 documents or the apprehension, detention, discharge,
 1712 examination, transportation, or treatment of a person under the
 1713 provisions of this chapter shall be free from all liability,
 1714 civil or criminal, by reason of such acts.

1715 Section 25. Section 397.581, Florida Statutes, is amended
 1716 to read:

1717 397.581 Unlawful activities relating to ~~elient~~ assessment
 1718 and treatment; penalties.--

1719 (1) Knowingly furnishing false information for the purpose
 1720 of obtaining emergency or other involuntary admission for any
 1721 person is a misdemeanor of the first degree, punishable as
 1722 provided in s. 775.082 and by a fine not exceeding \$5,000.

1723 (2) Causing or otherwise securing, or conspiring with or
 1724 assisting another to cause or secure, without reason for
 1725 believing a person to be impaired, any emergency or other
 1726 involuntary procedure for the person is a misdemeanor of the
 1727 first degree, punishable as provided in s. 775.082 and by a fine
 1728 not exceeding \$5,000.

1729 (3) Causing, or conspiring with or assisting another to
 1730 cause, the denial to any person of any right accorded pursuant
 1731 to this chapter is a misdemeanor of the first degree, punishable
 1732 as provided in s. 775.082 and by a fine not exceeding \$5,000.

1733 Section 26. Paragraph (a) of subsection (4) of section
 1734 397.601, Florida Statutes, is amended to read:

1735 397.601 Voluntary admissions.--

1736 (4) (a) The disability of minority for persons under 18

1737 | years of age is removed solely for the purpose of obtaining
 1738 | voluntary substance abuse impairment services from a licensed
 1739 | service provider, and consent to such services by a minor has
 1740 | the same force and effect as if executed by an individual ~~a~~
 1741 | ~~client~~ who has reached the age of majority. Such consent is not
 1742 | subject to later disaffirmance based on minority.

1743 | Section 27. Subsections (1) and (3) of section 397.6751,
 1744 | Florida Statutes, are amended to read:

1745 | 397.6751 Service provider responsibilities regarding
 1746 | involuntary admissions.--

1747 | (1) It is the responsibility of the service provider to:

1748 | (a) Ensure that a person who is admitted to a licensed
 1749 | service component meets the admission criteria specified in s.
 1750 | 397.675;

1751 | (b) Ascertain whether the medical and behavioral
 1752 | conditions of the person, as presented, are beyond the safe
 1753 | management capabilities of the service provider;

1754 | (c) Provide for the admission of the person to the service
 1755 | component that represents the least restrictive available
 1756 | setting that is responsive to the person's treatment needs;

1757 | (d) Verify that the admission of the person to the service
 1758 | component does not result in a census in excess of its licensed
 1759 | service capacity;

1760 | (e) Determine whether the cost of services is within the
 1761 | financial means of the person or those who are financially
 1762 | responsible for the person's care; and

1763 | (f) Take all necessary measures to ensure that each
 1764 | individual ~~client~~ in treatment is provided with a safe

1765 environment, and to ensure that each individual ~~client~~ whose
 1766 medical condition or behavioral problem becomes such that he or
 1767 she cannot be safely managed by the service component is
 1768 discharged and referred to a more appropriate setting for care.

1769 (3) When, in the judgment of the service provider, the
 1770 medical conditions or behavioral problems of an involuntary
 1771 individual ~~client~~ become such that they cannot be safely managed
 1772 by the service component, the service provider must discharge
 1773 the individual ~~client~~ and attempt to assist him or her in
 1774 securing more appropriate services in a setting more responsive
 1775 to his or her needs. Upon completing these efforts, the service
 1776 provider must, within 72 hours, report in writing to the
 1777 referral source, in compliance with federal confidentiality
 1778 regulations:

1779 (a) The basis for the individual's ~~client's~~ discharge;
 1780 and

1781 (b) Documentation of the service provider's efforts to
 1782 assist the person in gaining access to appropriate services.

1783 Section 28. Section 397.6752, Florida Statutes, is amended
 1784 to read:

1785 397.6752 Referral of involuntarily admitted individual
 1786 ~~client~~ for voluntary treatment.--Upon giving his or her written
 1787 informed consent, an involuntarily admitted individual ~~client~~
 1788 may be referred to a service provider for voluntary admission
 1789 when the service provider determines that the individual ~~client~~
 1790 no longer meets involuntary criteria.

1791 Section 29. Section 397.6758, Florida Statutes, is amended
 1792 to read:

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1793 397.6758 Release of individual ~~client~~ from protective
 1794 custody, emergency admission, involuntary assessment,
 1795 involuntary treatment, and alternative involuntary assessment of
 1796 a minor.--An individual ~~A-client~~ involuntarily admitted to a
 1797 licensed service provider may be released without further order
 1798 of the court only by a qualified professional in a hospital, a
 1799 detoxification facility, an addictions receiving facility, or
 1800 any less restrictive treatment component. Notice of the release
 1801 must be provided to the applicant in the case of an emergency
 1802 admission or an alternative involuntary assessment for a minor,
 1803 or to the petitioner and the court if the involuntary assessment
 1804 or treatment was court ordered. In the case of a minor ~~client~~,
 1805 the release must be:

1806 (1) To the individual's ~~client's~~ parent, legal guardian,
 1807 or legal custodian or the authorized designee thereof;

1808 (2) To the Department of Children and Family Services
 1809 pursuant to s. 39.401; or

1810 (3) To the Department of Juvenile Justice pursuant to s.
 1811 984.13.

1812 Section 30. Section 397.6773, Florida Statutes, is amended
 1813 to read:

1814 397.6773 Dispositional alternatives after protective
 1815 custody.--

1816 (1) An individual ~~A-client~~ who is in protective custody
 1817 must be released by a qualified professional when:

1818 (a) The individual ~~client~~ no longer meets the involuntary
 1819 admission criteria in s. 397.675(1);

1820 (b) The 72-hour period has elapsed; or

1821 (c) The individual ~~client~~ has consented to remain
 1822 voluntarily at the licensed service provider.

1823 (2) An individual ~~A client~~ may only be retained in
 1824 protective custody beyond the 72-hour period when a petition for
 1825 involuntary assessment or treatment has been initiated. The
 1826 timely filing of the petition authorizes the service provider to
 1827 retain physical custody of the individual ~~client~~ pending further
 1828 order of the court.

1829 Section 31. Section 397.6797, Florida Statutes, is amended
 1830 to read:

1831 397.6797 Dispositional alternatives after emergency
 1832 admission.--Within 72 hours after an emergency admission to a
 1833 hospital or a licensed detoxification or addictions receiving
 1834 facility, the individual ~~client~~ must be assessed by the
 1835 attending physician to determine the need for further services.
 1836 Within 5 days after an emergency admission to a nonresidential
 1837 component of a licensed service provider, the individual ~~client~~
 1838 must be assessed by a qualified professional to determine the
 1839 need for further services. Based upon that assessment, a
 1840 qualified professional of the hospital, detoxification facility,
 1841 or addictions receiving facility, or a qualified professional if
 1842 a less restrictive component was used, must either:

1843 (1) Release the individual ~~client~~ and, where appropriate,
 1844 refer the individual ~~client~~ to other needed services; or

1845 (2) Retain the individual ~~client~~ when:

1846 (a) The individual ~~client~~ has consented to remain
 1847 voluntarily at the licensed provider; or

1848 (b) A petition for involuntary assessment or treatment has

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1849 | been initiated, the timely filing of which authorizes the
1850 | service provider to retain physical custody of the individual
1851 | ~~client~~ pending further order of the court.

1852 | Section 32. Section 397.6799, Florida Statutes, is amended
1853 | to read:

1854 | 397.6799 Disposition of minor ~~client~~ upon completion of
1855 | alternative involuntary assessment.--A minor who has been
1856 | assessed pursuant to s. 397.6798 must, within the time
1857 | specified, be released or referred for further voluntary or
1858 | involuntary treatment, whichever is most appropriate to the
1859 | needs of the minor.

1860 | Section 33. Section 397.6819, Florida Statutes, is amended
1861 | to read:

1862 | 397.6819 Involuntary assessment and stabilization;
1863 | responsibility of licensed service provider.--A licensed service
1864 | provider may admit an individual ~~a client~~ for involuntary
1865 | assessment and stabilization for a period not to exceed 5 days.
1866 | The individual ~~client~~ must be assessed without unnecessary delay
1867 | by a qualified professional. If an assessment is performed by a
1868 | qualified professional who is not a physician, the assessment
1869 | must be reviewed by a physician before ~~prior to~~ the end of the
1870 | assessment period.

1871 | Section 34. Section 397.6821, Florida Statutes, is amended
1872 | to read:

1873 | 397.6821 Extension of time for completion of involuntary
1874 | assessment and stabilization.--If a licensed service provider is
1875 | unable to complete the involuntary assessment and, if necessary,
1876 | stabilization of an individual ~~a client~~ within 5 days after the

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1877 court's order, it may, within the original time period, file a
 1878 written request for an extension of time to complete its
 1879 assessment, and shall, in accordance with confidentiality
 1880 requirements, furnish a copy to all parties. With or without a
 1881 hearing, the court may grant additional time, not to exceed 7
 1882 days after the date of the renewal order, for the completion of
 1883 the involuntary assessment and stabilization of the individual
 1884 ~~client~~. The original court order authorizing the involuntary
 1885 assessment and stabilization, or a request for an extension of
 1886 time to complete the assessment and stabilization that is timely
 1887 filed pursuant to this section, constitutes legal authority to
 1888 involuntarily hold the individual ~~client~~ for a period not to
 1889 exceed 10 days in the absence of a court order to the contrary.

1890 Section 35. Section 397.6822, Florida Statutes, is amended
 1891 to read:

1892 397.6822 Disposition of individual ~~client~~ after
 1893 involuntary assessment.--Based upon the involuntary assessment,
 1894 a qualified professional of the hospital, detoxification
 1895 facility, or addictions receiving facility, or a qualified
 1896 professional when a less restrictive component has been used,
 1897 must:

1898 (1) Release the individual ~~client~~ and, where appropriate,
 1899 refer the individual ~~client~~ to another treatment facility or
 1900 service provider, or to community services;

1901 (2) Allow the individual ~~client~~, with consent ~~if the~~
 1902 ~~client has consented~~, to remain voluntarily at the licensed
 1903 provider; or

1904 (3) Retain the individual ~~client~~ when a petition for

1905 involuntary treatment has been initiated, the timely filing of
 1906 which authorizes the service provider to retain physical custody
 1907 of the individual ~~client~~ pending further order of the court.

1908
 1909 Adhering to federal confidentiality regulations, notice of
 1910 disposition must be provided to the petitioner and to the court.

1911 Section 36. Subsections (1) and (3) of section 397.697,
 1912 Florida Statutes, are amended to read:

1913 397.697 Court determination; effect of court order for
 1914 involuntary substance abuse treatment.--

1915 (1) When the court finds that the conditions for
 1916 involuntary substance abuse treatment have been proved by clear
 1917 and convincing evidence, it may order the respondent to undergo
 1918 involuntary treatment by a licensed service provider for a
 1919 period not to exceed 60 days. If the court finds it necessary,
 1920 it may direct the sheriff to take the respondent into custody
 1921 and deliver him or her to the licensed service provider
 1922 specified in the court order, or to the nearest appropriate
 1923 licensed service provider, for involuntary treatment. When the
 1924 conditions justifying involuntary treatment no longer exist, the
 1925 individual ~~client~~ must be released as provided in s. 397.6971.
 1926 When the conditions justifying involuntary treatment are
 1927 expected to exist after 60 days of treatment, a renewal of the
 1928 involuntary treatment order may be requested pursuant to s.
 1929 397.6975 prior to the end of the 60-day period.

1930 (3) An involuntary treatment order authorizes the licensed
 1931 service provider to require the individual ~~client~~ to undergo
 1932 such treatment as will benefit him or her, including treatment

1933 at any licensable service component of a licensed service
 1934 provider.

1935 Section 37. Section 397.6971, Florida Statutes, is amended
 1936 to read:

1937 397.6971 Early release from involuntary substance abuse
 1938 treatment.--

1939 (1) At any time prior to the end of the 60-day involuntary
 1940 treatment period, or prior to the end of any extension granted
 1941 pursuant to s. 397.6975, an individual ~~a client~~ admitted for
 1942 involuntary treatment may be determined eligible for discharge
 1943 to the most appropriate referral or disposition for the
 1944 individual ~~client~~ when:

1945 (a) The individual ~~client~~ no longer meets the criteria for
 1946 involuntary admission and has given his or her informed consent
 1947 to be transferred to voluntary treatment status;

1948 (b) If the individual ~~client~~ was admitted on the grounds
 1949 of likelihood of infliction of physical harm upon himself or
 1950 herself or others, such likelihood no longer exists; or

1951 (c) If the individual ~~client~~ was admitted on the grounds
 1952 of need for assessment and stabilization or treatment,
 1953 accompanied by inability to make a determination respecting such
 1954 need, either:

- 1955 1. Such inability no longer exists; or
- 1956 2. It is evident that further treatment will not bring
 1957 about further significant improvements in the individual's
 1958 ~~client's~~ condition;

1959 (d) The individual ~~client~~ is no longer in need of
 1960 services; or

1961 (e) The director of the service provider determines that
 1962 the individual ~~client~~ is beyond the safe management capabilities
 1963 of the provider.

1964 (2) Whenever a qualified professional determines that an
 1965 individual ~~a client~~ admitted for involuntary treatment is ready
 1966 for early release for any of the reasons listed in subsection
 1967 (1), the service provider shall immediately discharge the
 1968 individual ~~client~~, and must notify all persons specified by the
 1969 court in the original treatment order.

1970 Section 38. Section 397.6975, Florida Statutes, is amended
 1971 to read:

1972 397.6975 Extension of involuntary substance abuse
 1973 treatment period.--

1974 (1) Whenever a service provider believes that an
 1975 individual ~~a client~~ who is nearing the scheduled date of release
 1976 from involuntary treatment continues to meet the criteria for
 1977 involuntary treatment in s. 397.693, a petition for renewal of
 1978 the involuntary treatment order may be filed with the court at
 1979 least 10 days before ~~prior to~~ the expiration of the court-
 1980 ordered treatment period. The court shall immediately schedule a
 1981 hearing to be held not more than 15 days after filing of the
 1982 petition. The court shall provide the copy of the petition for
 1983 renewal and the notice of the hearing to all parties to the
 1984 proceeding. The hearing is conducted pursuant to s. 397.6957.

1985 (2) If the court finds that the petition for renewal of
 1986 the involuntary treatment order should be granted, it may order
 1987 the respondent to undergo involuntary treatment for a period not
 1988 to exceed an additional 90 days. When the conditions justifying

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1989 involuntary treatment no longer exist, the individual ~~elient~~
 1990 must be released as provided in s. 397.6971. When the conditions
 1991 justifying involuntary treatment continue to exist after 90 days
 1992 of additional treatment, a new petition requesting renewal of
 1993 the involuntary treatment order may be filed pursuant to this
 1994 section.

1995 Section 39. Section 397.6977, Florida Statutes, is amended
 1996 to read:

1997 397.6977 Disposition of individual ~~elient~~ upon completion
 1998 of involuntary substance abuse treatment.--At the conclusion of
 1999 the 60-day period of court-ordered involuntary treatment, the
 2000 individual ~~elient~~ is automatically discharged unless a motion
 2001 for renewal of the involuntary treatment order has been filed
 2002 with the court pursuant to s. 397.6975.

2003 Section 40. Paragraph (e) of subsection (2) of section
 2004 397.702, Florida Statutes, is amended to read:

2005 397.702 Authorization of local ordinances for treatment of
 2006 habitual abusers in licensed secure facilities.--

2007 (2) Ordinances for the treatment of habitual abusers must
 2008 provide:

2009 (e) That, if the individual ~~elient~~ still meets the
 2010 criteria for involuntary admission in s. 397.675 at or near the
 2011 expiration of the treatment period ordered by the court pursuant
 2012 to paragraph (d), the agent of the county or municipality may
 2013 file another habitual abuser petition pursuant to paragraph (b)
 2014 for a period not exceeding 180 days for each such petition.

2015 Section 41. Subsections (2) and (3) of section 397.706,
 2016 Florida Statutes, are amended to read:

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2017 397.706 Screening, assessment, and disposition of juvenile
 2018 offenders.--

2019 (2) The juvenile and circuit courts, in conjunction with
 2020 department substate entity ~~district~~ administration, shall
 2021 establish policies and procedures to ensure that juvenile
 2022 offenders are appropriately screened for substance abuse
 2023 problems and that diversionary and adjudicatory proceedings
 2024 include appropriate conditions and sanctions to address
 2025 substance abuse problems. Policies and procedures must address:

2026 (a) The designation of local service providers responsible
 2027 for screening and assessment services and dispositional
 2028 recommendations to the department and the court.

2029 (b) The means by which juvenile offenders are processed to
 2030 ensure participation in screening and assessment services.

2031 (c) The role of the court in securing assessments when
 2032 juvenile offenders or their families are noncompliant.

2033 (d) Safeguards to ensure that information derived through
 2034 screening and assessment is used solely to assist in
 2035 dispositional decisions and not for purposes of determining
 2036 innocence or guilt.

2037 (3) Because resources available to support screening and
 2038 assessment services are limited, the judicial circuits and
 2039 department substate entity ~~district~~ administration must develop
 2040 those capabilities to the extent possible within available
 2041 resources according to the following priorities:

2042 (a) Juvenile substance abuse offenders.

2043 (b) Juvenile offenders who are substance abuse impaired at
 2044 the time of the offense.

2045 (c) Second or subsequent juvenile offenders.

2046 (d) Minors taken into custody.

2047 Section 42. Subsection (2) of section 397.801, Florida
 2048 Statutes, is amended to read:

2049 397.801 Substance abuse impairment coordination.--

2050 (2) The department shall establish, within each of its
 2051 substate entities ~~service districts~~, the full-time position of
 2052 substance abuse impairment prevention coordinator, to be filled
 2053 by a person with expertise in the area of substance abuse
 2054 impairment. The primary responsibility of this person is to
 2055 develop and implement activities which foster the prevention of
 2056 substance abuse impairment.

2057 Section 43. Subsections (1) and (3) of section 397.821,
 2058 Florida Statutes, are amended to read:

2059 397.821 Juvenile substance abuse impairment prevention and
 2060 early intervention councils.--

2061 (1) Each judicial circuit as set forth in s. 26.021 may
 2062 establish a juvenile substance abuse impairment prevention and
 2063 early intervention council composed of at least 12 members,
 2064 including representatives from law enforcement, the department,
 2065 school districts, state attorney and public defender offices,
 2066 the circuit court, the religious community, substance abuse
 2067 impairment professionals, child advocates from the community,
 2068 business leaders, parents, and high school students. However,
 2069 those circuits which already have in operation a council of
 2070 similar composition may designate the existing body as the
 2071 juvenile substance abuse impairment prevention and early
 2072 intervention council for the purposes of this section. Each

2073 council shall establish bylaws providing for the length of term
 2074 of its members, but the term may not exceed 4 years. The
 2075 substate entity ~~district~~ administrator, as defined in s. 20.19,
 2076 and the chief judge of the circuit court shall each appoint six
 2077 members of the council. The substate entity ~~district~~
 2078 administrator shall appoint a representative from the
 2079 department, a school district representative, a substance abuse
 2080 impairment treatment professional, a child advocate, a parent,
 2081 and a high school student. The chief judge of the circuit court
 2082 shall appoint a business leader and representatives from the
 2083 state attorney's office, the public defender's office, the
 2084 religious community, the circuit court, and law enforcement
 2085 agencies.

2086 (3) The council shall provide recommendations to the
 2087 Program Director for Substance Abuse annually for consideration
 2088 for inclusion in the substance abuse ~~district alcohol, drug~~
 2089 ~~abuse~~, and mental health substate-entity plans.

2090 Section 44. Subsection (1), paragraph (c) of subsection
 2091 (2), and subsection (3) of section 397.94, Florida Statutes, are
 2092 amended to read:

2093 397.94 Children's substance abuse services; information
 2094 and referral network.--

2095 (1) Each substate entity ~~service-district~~ of the
 2096 department shall develop a plan for and implement a ~~districtwide~~
 2097 comprehensive children's substance abuse information and
 2098 referral network to be operational by July 1, 2000.

2099 (2) The substate entity ~~district~~ shall determine the most
 2100 cost-effective method for delivering this service and may select

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2101 a new provider or utilize an existing provider or providers with
 2102 a record of success in providing information and referral
 2103 services.

2104 (c) Develop and implement procedures for documenting
 2105 requests for services, including, but not limited to:

- 2106 1. Number of calls by type of service requested, if any;
- 2107 2. Ages of children for whom services are requested; and
- 2108 3. Disposition on all referrals, including location of
 2109 resource if referred for ~~face-to-face~~ screening.

2110 (3) In planning the information and referral network, the
 2111 substate entity ~~district~~ shall consider the establishment of a
 2112 24-hour toll-free telephone number to call for information and a
 2113 public service campaign to inform the public about the
 2114 information and referral service.

2115 Section 45. Section 397.95, Florida Statutes, is amended
 2116 to read:

2117 397.95 Children's substance abuse services; services
 2118 provided by licensed providers.--Each substate entity ~~service~~
 2119 ~~district~~ of the department shall ensure that all screening,
 2120 intake, assessment, enrollment, service planning, and case
 2121 management services provided under this part are provided by
 2122 children's substance abuse services providers licensed under
 2123 part II of this chapter and in accordance with standards set
 2124 forth in department rules.

2125 Section 46. Paragraph (a) of subsection (3) of section
 2126 397.97, Florida Statutes, is amended to read:

2127 397.97 Children's substance abuse services; demonstration
 2128 models.--

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2129 (3) PURCHASE OF SERVICES; OPERATION CRITERIA.--
 2130 (a) Each demonstration model shall be governed by a
 2131 multiagency consortium of state and county agencies or other
 2132 public agencies, or a community-based, not-for-profit substance
 2133 abuse or behavioral health network designated by the department,
 2134 hereafter referred to as the purchasing agent, which shall
 2135 purchase individualized services for children who are at risk of
 2136 substance abuse or have a substance abuse problem. Services
 2137 shall be based on ~~client~~ need rather than on traditional
 2138 services limited to narrowly defined cost centers or
 2139 appropriations categories. Approval to operate as a Children's
 2140 Network of Care Demonstration Model shall be given by the
 2141 secretary of the department and shall be based on criteria
 2142 developed by the department.

2143 Section 47. Paragraph (g) of subsection (2) of section
 2144 397.99, Florida Statutes, is amended to read:

2145 397.99 School substance abuse prevention partnership
 2146 grants.--

2147 (2) APPLICATION PROCEDURES; FUNDING REQUIREMENTS.--

2148 (g) The department shall consider the following in
 2149 awarding such grants:

- 2150 1. The number of youths that will be targeted.
- 2151 2. The validity of the program design to achieve project
 2152 goals and objectives that are clearly related to performance-
 2153 based program budgeting effectiveness measures.
- 2154 3. The desirability of funding at least one approved
 2155 project in each of the department's substate entities ~~service~~
 2156 ~~districts~~.

2157 Section 48. Paragraphs (d) and (g) of subsection (1) of
 2158 section 440.102, Florida Statutes, are amended to read:

2159 440.102 Drug-free workplace program requirements.--The
 2160 following provisions apply to a drug-free workplace program
 2161 implemented pursuant to law or to rules adopted by the Agency
 2162 for Health Care Administration:

2163 (1) DEFINITIONS.--Except where the context otherwise
 2164 requires, as used in this act:

2165 (d) "Drug rehabilitation program" means a service
 2166 provider, established pursuant to s. 397.311(31) ~~s. 397.311(28)~~,
 2167 that provides confidential, timely, and expert identification,
 2168 assessment, and resolution of employee drug abuse.

2169 (g) "Employee assistance program" means an established
 2170 program capable of providing expert assessment of employee
 2171 personal concerns; confidential and timely identification
 2172 services with regard to employee drug abuse; referrals of
 2173 employees for appropriate diagnosis, treatment, and assistance;
 2174 and followup services for employees who participate in the
 2175 program or require monitoring after returning to work. If, in
 2176 addition to the above activities, an employee assistance program
 2177 provides diagnostic and treatment services, these services shall
 2178 in all cases be provided by service providers pursuant to s.
 2179 397.311(31) ~~s. 397.311(28)~~.

2180 Section 49. Paragraph (a) of subsection (1) of section
 2181 766.101, Florida Statutes, is amended to read:

2182 766.101 Medical review committee, immunity from
 2183 liability.--

2184 (1) As used in this section:

2185 (a) The term "medical review committee" or "committee"
 2186 means:

2187 1.a. A committee of a hospital or ambulatory surgical
 2188 center licensed under chapter 395 or a health maintenance
 2189 organization certificated under part I of chapter 641,

2190 b. A committee of a physician-hospital organization, a
 2191 provider-sponsored organization, or an integrated delivery
 2192 system,

2193 c. A committee of a state or local professional society of
 2194 health care providers,

2195 d. A committee of a medical staff of a licensed hospital
 2196 or nursing home, provided the medical staff operates pursuant to
 2197 written bylaws that have been approved by the governing board of
 2198 the hospital or nursing home,

2199 e. A committee of the Department of Corrections or the
 2200 Correctional Medical Authority as created under s. 945.602, or
 2201 employees, agents, or consultants of either the department or
 2202 the authority or both,

2203 f. A committee of a professional service corporation
 2204 formed under chapter 621 or a corporation organized under
 2205 chapter 607 or chapter 617, which is formed and operated for the
 2206 practice of medicine as defined in s. 458.305(3), and which has
 2207 at least 25 health care providers who routinely provide health
 2208 care services directly to patients,

2209 g. A committee of the Department of Children and Family
 2210 Services which includes employees, agents, or consultants to the
 2211 department as deemed necessary to provide peer review,
 2212 utilization review, and mortality review of treatment services

2213 provided pursuant to chapters 394, 397, and 916,
 2214 h.g. A committee of a mental health treatment facility
 2215 licensed under chapter 394 or a community mental health center
 2216 as defined in s. 394.907, provided the quality assurance program
 2217 operates pursuant to the guidelines which have been approved by
 2218 the governing board of the agency,
 2219 i.h. A committee of a substance abuse treatment and
 2220 education prevention program licensed under chapter 397 provided
 2221 the quality assurance program operates pursuant to the
 2222 guidelines which have been approved by the governing board of
 2223 the agency,
 2224 j.i. A peer review or utilization review committee
 2225 organized under chapter 440,
 2226 k.j. A committee of the Department of Health, a county
 2227 health department, healthy start coalition, or certified rural
 2228 health network, when reviewing quality of care, or employees of
 2229 these entities when reviewing mortality records, or
 2230 l.k. A continuous quality improvement committee of a
 2231 pharmacy licensed pursuant to chapter 465,
 2232
 2233 which committee is formed to evaluate and improve the quality of
 2234 health care rendered by providers of health service, or to
 2235 determine that health services rendered were professionally
 2236 indicated or were performed in compliance with the applicable
 2237 standard of care, or that the cost of health care rendered was
 2238 considered reasonable by the providers of professional health
 2239 services in the area; or
 2240 2. A committee of an insurer, self-insurer, or joint

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2241 | underwriting association of medical malpractice insurance, or
2242 | other persons conducting review under s. 766.106.

2243 | Section 50. Section 394.9081, Florida Statutes, is
2244 | repealed.

2245 | Section 51. This act shall take effect July 1, 2009.