

FOR CONSIDERATION By the Committee on Children, Families, and Elder Affairs

586-01925C-14

20147074__

1 A bill to be entitled
2 An act relating to child welfare; amending s. 39.01,
3 F.S.; defining the term "sibling"; creating s.
4 39.2015, F.S.; requiring the Department of Children
5 and Families to conduct specified investigations using
6 critical incident rapid response teams; providing
7 requirements for such investigations; providing
8 requirements for the team; authorizing the team to
9 access specified information; requiring the
10 cooperation of specified agencies and organizations;
11 providing for reimbursement of team members; requiring
12 a report of the investigation; requiring the secretary
13 to develop specified guidelines for investigations and
14 provide training to team members; requiring the
15 secretary to appoint an advisory committee; requiring
16 a report from the advisory committee to the Secretary
17 of Children and Families; requiring the secretary to
18 submit such report to the Governor and the
19 Legislature; amending s. 39.202, F.S.; authorizing
20 access to specified records in the event of the death
21 of a child which was reported to the department's
22 child abuse hotline; creating s. 39.2022, F.S.;
23 providing legislative intent; requiring the department
24 to publish specified information on its website if the
25 death of a child is reported to the child abuse
26 hotline; prohibiting specified information from being
27 released; providing requirements for the release of
28 information in the child's records; prohibiting
29 release of information that identifies the person who

586-01925C-14

20147074__

30 reports an incident to the child abuse hotline;
31 amending s. 39.402, F.S.; requiring the department to
32 make a reasonable effort to keep siblings together
33 when they are placed in out-of-home care under certain
34 circumstances; providing for sibling visitation under
35 certain circumstances; amending s. 39.5085, F.S.;
36 revising legislative intent; authorizing placement of
37 a child with a nonrelative caregiver and financial
38 assistance for such nonrelative caregiver through the
39 Relative Caregiver Program under certain
40 circumstances; requiring that a nonrelative caregiver
41 be given temporary legal custody of a child; amending
42 s. 39.701, F.S.; requiring the court to consider
43 contact among siblings in judicial reviews;
44 authorizing the court to remove specified disabilities
45 of nonage at judicial reviews; amending s. 39.802,
46 F.S.; requiring a petition for the termination of
47 parental rights to be signed under oath stating the
48 petitioner's good faith in filing the petition;
49 amending s. 383.402, F.S.; requiring the review of all
50 deaths of children which occur in the state and are
51 reported to the department's child abuse hotline;
52 revising the due date for a report; providing a
53 directive to the Division of Law Revision and
54 Information; creating part V of ch. 409, F.S.;
55 creating s. 409.986, F.S.; providing legislative
56 findings and intent; providing child protection and
57 child welfare outcome goals; defining terms; creating
58 s. 409.987, F.S.; providing for the procurement of

586-01925C-14

20147074__

59 community-based care lead agencies; providing
60 requirements for contracting as a lead agency;
61 creating s. 409.988, F.S.; providing the duties of a
62 community-based care lead agency; providing licensure
63 requirements for a lead agency; creating s. 409.990,
64 F.S.; providing general funding provisions; providing
65 for a matching grant program and the maximum amount of
66 funds that may be awarded; requiring the department to
67 develop and implement a community-based care risk pool
68 initiative; providing requirements for the risk pool;
69 transferring, renumbering, and amending s. 409.16713,
70 F.S.; transferring provisions relating to the
71 allocation of funds for community-based lead care
72 agencies; conforming a cross-reference; creating s.
73 409.992, F.S.; providing requirements for community-
74 based care lead agency expenditures; creating s.
75 409.993, F.S.; providing findings; providing for lead
76 agency and subcontractor liability; providing
77 limitations on damages; transferring, renumbering, and
78 amending s. 409.1675, F.S.; transferring provisions
79 relating to receivership from community-based
80 providers to lead agencies; conforming cross-
81 references and terminology; creating s. 409.996, F.S.;
82 providing duties of the department relating to
83 community-based care and lead agencies; creating s.
84 409.997, F.S.; providing goals for the department and
85 specified entities; requiring the department to
86 maintain a comprehensive, results-oriented
87 accountability system; providing requirements;

586-01925C-14

20147074__

88 requiring the department to establish a technical
89 advisory panel; providing requirements for the panel;
90 requiring the department to make the results of the
91 system public; requiring a report to the Governor and
92 the Legislature; creating s. 409.998, F.S.; requiring
93 the department to establish community-based care
94 alliances; specifying responsibilities of the
95 alliance; providing for membership of the alliance;
96 providing for compensation of and requirements for
97 alliance members; authorizing the alliance to create a
98 direct-support organization; providing requirements
99 for such organization; providing for future repeal of
100 the authority of the alliance to create a direct
101 support organization; repealing s. 20.19(4), F.S.,
102 relating to community alliances; repealing ss.
103 409.1671, 409.16715, and 409.16745, F.S., relating to
104 foster care and related services, therapy treatments,
105 and the community partnership matching grant program,
106 respectively; amending ss. 39.201, 409.1676, 409.1677,
107 409.906, 409.912, 409.91211, and 420.628, F.S.;
108 conforming cross-references; providing an effective
109 date.

110
111 Be It Enacted by the Legislature of the State of Florida:

112
113 Section 1. Present subsections (70) through (76) of section
114 39.01, Florida Statutes, are redesignated as subsections (71)
115 through (77), respectively, and a new subsection (70) is added
116 to that section, to read:

586-01925C-14

20147074__

117 39.01 Definitions.—When used in this chapter, unless the
118 context otherwise requires:

119 (70) "Sibling" means:

120 (a) A child who shares a birth parent or legal parent with
121 one or more other children; or

122 (b) Children who have lived together in a family and
123 identify themselves as siblings.

124 Section 2. Section 39.2015, Florida Statutes, is created to
125 read:

126 39.2015 Critical incident rapid response team.—

127 (1) The department shall conduct an immediate investigation
128 of deaths or other serious incidents involving children using
129 critical incident rapid response teams as provided in subsection
130 (2). The purpose of such investigation is to identify root
131 causes and rapidly determine the need to change policies and
132 practices related to child protection and child welfare.

133 (2) An immediate onsite investigation conducted by a
134 critical incident rapid response team is required for all child
135 deaths reported to the department if the child or another child
136 in his or her family was the subject of a verified report of
137 suspected abuse or neglect in the previous 12 months. The
138 secretary may also direct an immediate investigation for other
139 cases involving serious injury to a child.

140 (3) Each investigation shall be conducted by a team of at
141 least five professionals with expertise in child protection,
142 child welfare, and organizational management. The team may be
143 selected from employees of the department, community-based care
144 lead agencies, other provider organizations, faculty from the
145 institute consisting of public and private universities offering

586-01925C-14

20147074__

146 degrees in social work established pursuant to s. 1004.615, or
147 any other persons with the required expertise. The majority of
148 the team must reside in judicial circuits outside the location
149 of the incident. The secretary shall appoint a team leader for
150 each group assigned to an investigation.

151 (4) An investigation shall be initiated as soon as
152 possible, but not later than 2 business days after the case is
153 reported to the department. A preliminary report on each case
154 shall be provided to the secretary no later than 30 days after
155 the investigation begins.

156 (5) Each member of the team is authorized to access all
157 information in the case file.

158 (6) All employees of the department or other state agencies
159 and all personnel from contracted provider organizations are
160 required to cooperate with the investigation by participating in
161 interviews and timely responding to any requests for
162 information.

163 (7) The secretary shall develop cooperative agreements with
164 other entities and organizations as may be necessary to
165 facilitate the work of the team.

166 (8) The members of the team may be reimbursed by the
167 department for per diem, mileage, and other reasonable expenses
168 as provided in s. 112.061. The department may also reimburse the
169 team member's employer for the associated salary and benefits
170 during the time the team member is fulfilling the duties
171 required under this section.

172 (9) Upon completion of the investigation, a final report
173 shall be made available to community-based care lead agencies,
174 to other organizations involved in the child welfare system, and

586-01925C-14

20147074__

175 to the public through the department's website.

176 (10) The secretary, in conjunction with the institute
177 established pursuant to s. 1004.615, shall develop guidelines
178 for investigations conducted by critical incident rapid response
179 teams and provide training to team members. Such guidelines must
180 direct the teams in the conduct of a root-cause analysis that
181 identifies, classifies, and attributes responsibility for both
182 direct and latent causes for the death or other incident,
183 including organizational factors, preconditions, and specific
184 acts or omissions resulting from either error or a violation of
185 procedures.

186 (11) The secretary shall appoint an advisory committee made
187 up of experts in child protection and child welfare to make an
188 independent review of investigative reports from the critical
189 incident rapid response teams and make recommendations to
190 improve policies and practices related to child protection and
191 child welfare services. By October 1 of each year, the advisory
192 committee shall make an annual report to the secretary,
193 including findings and recommendations. The secretary shall
194 submit the report to the Governor, the President of the Senate,
195 and the Speaker of the House of Representatives.

196 Section 3. Paragraph (o) of subsection (2) of section
197 39.202, Florida Statutes, is amended to read:

198 39.202 Confidentiality of reports and records in cases of
199 child abuse or neglect.—

200 (2) Except as provided in subsection (4), access to such
201 records, excluding the name of the reporter which shall be
202 released only as provided in subsection (5), shall be granted
203 only to the following persons, officials, and agencies:

586-01925C-14

20147074__

204 (o) Any person, in the event of the death of a child
205 reported to the child abuse hotline ~~determined to be a result of~~
206 ~~abuse, abandonment, or neglect~~. Information identifying the
207 person reporting abuse, abandonment, or neglect may ~~shall~~ not be
208 released. Any information otherwise made confidential or exempt
209 by law may ~~shall~~ not be released pursuant to this paragraph. The
210 information released pursuant to this paragraph must meet the
211 requirements of s. 39.2022.

212 Section 4. Section 39.2022, Florida Statutes, is created to
213 read:

214 39.2022 Public disclosure of child deaths reported to the
215 child abuse hotline.-

216 (1) It is the intent of the Legislature to provide prompt
217 disclosure of the basic facts of all deaths of children from
218 birth through 18 years of age which occur in this state and
219 which are reported to the department's child abuse hotline.
220 Disclosure shall be posted on the department's public website.
221 This section does not limit the public access to records under
222 any other provision of law.

223 (2) If a child death is reported to the child abuse
224 hotline, the department shall post on its website all of the
225 following:

226 (a) Name of the child.

227 (b) Date of birth, race, and gender of the child.

228 (c) Date of the child's death.

229 (d) Allegations of the cause of death or the preliminary
230 cause of death.

231 (e) County and placement of the child at the time of the
232 incident leading to the child's death, if applicable.

586-01925C-14

20147074__

233 (f) Name of the community-based care lead agency, case
234 management agency, or out-of-home licensing agency involved with
235 the child, family, or licensed caregiver, if applicable.

236 (g) The relationship of any alleged offender to the child.

237 (h) Whether the child has been the subject of any prior
238 verified reports to the department's child abuse hotline.

239 (3) The department may not release the following
240 information concerning a death of a child:

241 (a) Information about the siblings of the child.

242 (b) Attorney-client communications.

243 (c) Any information if the release of such information
244 would jeopardize a criminal investigation.

245 (d) Any information that is confidential or exempt under
246 state or federal law.

247 (4) If the death of a child is determined to be the result
248 of abuse, neglect, or abandonment, the department may release
249 information in the child's record to any person. Information
250 identifying the person reporting abuse, abandonment, or neglect
251 may not be released. Any information otherwise made confidential
252 or exempt by law may not be released pursuant to this
253 subsection.

254 Section 5. Paragraph (h) of subsection (8) and subsection
255 (9) of section 39.402, Florida Statutes, are amended to read:

256 39.402 Placement in a shelter.—

257 (8)

258 (h) The order for placement of a child in shelter care must
259 identify the parties present at the hearing and must contain
260 written findings:

261 1. That placement in shelter care is necessary based on the

586-01925C-14

20147074__

262 criteria in subsections (1) and (2).

263 2. That placement in shelter care is in the best interest
264 of the child.

265 3. That continuation of the child in the home is contrary
266 to the welfare of the child because the home situation presents
267 a substantial and immediate danger to the child's physical,
268 mental, or emotional health or safety which cannot be mitigated
269 by the provision of preventive services.

270 4. That based upon the allegations of the petition for
271 placement in shelter care, there is probable cause to believe
272 that the child is dependent or that the court needs additional
273 time, which may not exceed 72 hours, in which to obtain and
274 review documents pertaining to the family in order to
275 appropriately determine the risk to the child.

276 5. That the department has made reasonable efforts to
277 prevent or eliminate the need for removal of the child from the
278 home. A finding of reasonable effort by the department to
279 prevent or eliminate the need for removal may be made and the
280 department is deemed to have made reasonable efforts to prevent
281 or eliminate the need for removal if:

282 a. The first contact of the department with the family
283 occurs during an emergency;

284 b. The appraisal of the home situation by the department
285 indicates that the home situation presents a substantial and
286 immediate danger to the child's physical, mental, or emotional
287 health or safety which cannot be mitigated by the provision of
288 preventive services;

289 c. The child cannot safely remain at home, either because
290 there are no preventive services that can ensure the health and

586-01925C-14

20147074__

291 safety of the child or because, even with appropriate and
292 available services being provided, the health and safety of the
293 child cannot be ensured; or

294 d. The parent or legal custodian is alleged to have
295 committed any of the acts listed as grounds for expedited
296 termination of parental rights in s. 39.806(1)(f)-(i).

297 6. That the department has made reasonable efforts to keep
298 siblings together if they are removed and placed in out-of-home
299 care unless such a placement is not in the best interest of each
300 child. The department shall report to the court its efforts to
301 place siblings together unless the court finds that such
302 placement is not in the best interest of a child or his or her
303 sibling.

304 ~~7.6.~~ That the court notified the parents, relatives that
305 are providing out-of-home care for the child, or legal
306 custodians of the time, date, and location of the next
307 dependency hearing and of the importance of the active
308 participation of the parents, relatives that are providing out-
309 of-home care for the child, or legal custodians in all
310 proceedings and hearings.

311 ~~8.7.~~ That the court notified the parents or legal
312 custodians of their right to counsel to represent them at the
313 shelter hearing and at each subsequent hearing or proceeding,
314 and the right of the parents to appointed counsel, pursuant to
315 the procedures set forth in s. 39.013.

316 ~~9.8.~~ That the court notified relatives who are providing
317 out-of-home care for a child as a result of the shelter petition
318 being granted that they have the right to attend all subsequent
319 hearings, to submit reports to the court, and to speak to the

586-01925C-14

20147074__

320 court regarding the child, if they so desire.

321 (9) (a) At any shelter hearing, the department shall provide
322 to the court a recommendation for scheduled contact between the
323 child and parents, if appropriate. The court shall determine
324 visitation rights absent a clear and convincing showing that
325 visitation is not in the best interest of the child. Any order
326 for visitation or other contact must conform to ~~the provisions~~
327 ~~of~~ s. 39.0139. If visitation is ordered but will not commence
328 within 72 hours of the shelter hearing, the department shall
329 provide justification to the court.

330 (b) If siblings who are removed from the home cannot be
331 placed together, the department shall provide to the court a
332 recommendation for frequent visitation or other ongoing
333 interaction between the siblings unless this interaction would
334 be contrary to a sibling's safety or well-being. If visitation
335 among siblings is ordered but will not commence within 72 hours
336 of the shelter hearing, the department shall provide
337 justification to the court for the delay.

338 Section 6. Section 39.5085, Florida Statutes, is amended to
339 read:

340 39.5085 Relative Caregiver Program.—

341 (1) It is the intent of the Legislature in enacting this
342 section to:

343 (a) Provide for the establishment of procedures and
344 protocols that serve to advance the continued safety of children
345 by acknowledging the valued resource uniquely available through
346 grandparents, and relatives of children, and specified
347 nonrelatives of children pursuant to subparagraph (2) (a) 3.

348 (b) Recognize family relationships in which a grandparent

586-01925C-14

20147074__

349 or other relative is the head of a household that includes a
350 child otherwise at risk of foster care placement.

351 (c) Enhance family preservation and stability by
352 recognizing that most children in such placements with
353 grandparents and other relatives do not need intensive
354 supervision of the placement by the courts or by the department.

355 (d) Recognize that permanency in the best interests of the
356 child can be achieved through a variety of permanency options,
357 including permanent guardianship under s. 39.6221 if the
358 guardian is a relative, by permanent placement with a fit and
359 willing relative under s. 39.6231, by a relative, guardianship
360 under chapter 744, or adoption, by providing additional
361 placement options and incentives that will achieve permanency
362 and stability for many children who are otherwise at risk of
363 foster care placement because of abuse, abandonment, or neglect,
364 but who may successfully be able to be placed by the dependency
365 court in the care of such relatives.

366 (e) Reserve the limited casework and supervisory resources
367 of the courts and the department for those cases in which
368 children do not have the option for safe, stable care within the
369 family.

370 (f) Recognize that a child may have a close relationship
371 with a person who is not a blood relative or a relative by
372 marriage and that such person should be eligible for financial
373 assistance under this section if he or she is able and willing
374 to care for the child and provide a safe, stable home
375 environment.

376 (2) (a) The Department of Children and Families ~~Family~~
377 ~~Services~~ shall establish and operate the Relative Caregiver

586-01925C-14

20147074__

378 Program pursuant to eligibility guidelines established in this
379 section as further implemented by rule of the department. The
380 Relative Caregiver Program shall, within the limits of available
381 funding, provide financial assistance to:

382 1. Relatives who are within the fifth degree by blood or
383 marriage to the parent or stepparent of a child and who are
384 caring full-time for that dependent child in the role of
385 substitute parent as a result of a court's determination of
386 child abuse, neglect, or abandonment and subsequent placement
387 with the relative under this chapter.

388 2. Relatives who are within the fifth degree by blood or
389 marriage to the parent or stepparent of a child and who are
390 caring full-time for that dependent child, and a dependent half-
391 brother or half-sister of that dependent child, in the role of
392 substitute parent as a result of a court's determination of
393 child abuse, neglect, or abandonment and subsequent placement
394 with the relative under this chapter.

395 3. Nonrelatives who are willing to assume custody and care
396 of a dependent child and a dependent half-brother or half-sister
397 of that dependent child in the role of substitute parent as a
398 result of a court's determination of child abuse, neglect, or
399 abandonment and subsequent placement with the nonrelative
400 caregiver under this chapter. The court must find that a
401 proposed placement under this subparagraph is in the best
402 interest of the child.

403
404 The placement may be court-ordered temporary legal custody to
405 the relative under protective supervision of the department
406 pursuant to s. 39.521(1)(b)3., or court-ordered placement in the

586-01925C-14

20147074__

407 home of a relative as a permanency option under s. 39.6221 or s.
408 39.6231 or under former s. 39.622 if the placement was made
409 before July 1, 2006. If a child is placed with a nonrelative
410 under subparagraph 3., the placement shall be court-ordered
411 temporary legal custody to the nonrelative under protective
412 supervision of the department pursuant to s. 39.521(1)(b)3. The
413 Relative Caregiver Program shall offer financial assistance to
414 caregivers ~~who are relatives and~~ who would be unable to serve in
415 that capacity without the ~~relative~~ caregiver payment because of
416 financial burden, thus exposing the child to the trauma of
417 placement in a shelter or in foster care.

418 (b) Caregivers ~~who are relatives and~~ who receive assistance
419 under this section must be capable, as determined by a home
420 study, of providing a physically safe environment and a stable,
421 supportive home for the children under their care, and must
422 assure that the children's well-being is met, including, but not
423 limited to, the provision of immunizations, education, and
424 mental health services as needed.

425 (c) Relatives or nonrelatives who qualify for and
426 participate in the Relative Caregiver Program are not required
427 to meet foster care licensing requirements under s. 409.175.

428 (d) Relatives or nonrelatives who are caring for children
429 placed with them by the court pursuant to this chapter shall
430 receive a special monthly ~~relative~~ caregiver benefit established
431 by rule of the department. The amount of the special benefit
432 payment shall be based on the child's age within a payment
433 schedule established by rule of the department and subject to
434 availability of funding. The statewide average monthly rate for
435 children judicially placed with relatives or nonrelatives who

586-01925C-14

20147074__

436 are not licensed as foster homes may not exceed 82 percent of
437 the statewide average foster care rate, and ~~nor may~~ the cost of
438 providing the assistance described in this section to any
439 ~~relative~~ caregiver may not exceed the cost of providing out-of-
440 home care in emergency shelter or foster care.

441 (e) Children receiving cash benefits under this section are
442 not eligible to simultaneously receive WAGES cash benefits under
443 chapter 414.

444 (f) Within available funding, the Relative Caregiver
445 Program shall provide ~~relative~~ caregivers with family support
446 and preservation services, flexible funds in accordance with s.
447 409.165, school readiness, and other available services in order
448 to support the child's safety, growth, and healthy development.
449 Children living with ~~relative~~ caregivers who are receiving
450 assistance under this section shall be eligible for Medicaid
451 coverage.

452 (g) The department may use appropriate available state,
453 federal, and private funds to operate the Relative Caregiver
454 Program. The department may develop liaison functions to be
455 available to relatives or nonrelatives who care for children
456 pursuant to this chapter to ensure placement stability in
457 extended family settings.

458 Section 7. Paragraph (c) of subsection (2) and paragraph
459 (a) of subsection (3) of section 39.701, Florida Statutes, are
460 amended to read:

461 39.701 Judicial review.—

462 (2) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS OF
463 AGE.—

464 (c) *Review determinations.*—The court and any citizen review

586-01925C-14

20147074__

465 panel shall take into consideration the information contained in
466 the social services study and investigation and all medical,
467 psychological, and educational records that support the terms of
468 the case plan; testimony by the social services agency, the
469 parent, the foster parent or legal custodian, the guardian ad
470 litem or surrogate parent for educational decisionmaking if one
471 has been appointed for the child, and any other person deemed
472 appropriate; and any relevant and material evidence submitted to
473 the court, including written and oral reports to the extent of
474 their probative value. These reports and evidence may be
475 received by the court in its effort to determine the action to
476 be taken with regard to the child and may be relied upon to the
477 extent of their probative value, even though not competent in an
478 adjudicatory hearing. In its deliberations, the court and any
479 citizen review panel shall seek to determine:

480 1. If the parent was advised of the right to receive
481 assistance from any person or social service agency in the
482 preparation of the case plan.

483 2. If the parent has been advised of the right to have
484 counsel present at the judicial review or citizen review
485 hearings. If not so advised, the court or citizen review panel
486 shall advise the parent of such right.

487 3. If a guardian ad litem needs to be appointed for the
488 child in a case in which a guardian ad litem has not previously
489 been appointed or if there is a need to continue a guardian ad
490 litem in a case in which a guardian ad litem has been appointed.

491 4. Who holds the rights to make educational decisions for
492 the child. If appropriate, the court may refer the child to the
493 district school superintendent for appointment of a surrogate

586-01925C-14

20147074__

494 parent or may itself appoint a surrogate parent under the
495 Individuals with Disabilities Education Act and s. 39.0016.

496 5. The compliance or lack of compliance of all parties with
497 applicable items of the case plan, including the parents'
498 compliance with child support orders.

499 6. The compliance or lack of compliance with a visitation
500 contract between the parent and the social service agency for
501 contact with the child, including the frequency, duration, and
502 results of the parent-child visitation and the reason for any
503 noncompliance.

504 7. The frequency, kind, and duration of sibling contacts
505 among siblings who have been separated during placement, as well
506 as any efforts undertaken to reunite separated siblings if doing
507 so is in the best interest of the child.

508 ~~8.7.~~ The compliance or lack of compliance of the parent in
509 meeting specified financial obligations pertaining to the care
510 of the child, including the reason for failure to comply, if
511 applicable ~~such is the case.~~

512 ~~9.8.~~ Whether the child is receiving safe and proper care
513 according to s. 39.6012, including, but not limited to, the
514 appropriateness of the child's current placement, including
515 whether the child is in a setting that is as family-like and as
516 close to the parent's home as possible, consistent with the
517 child's best interests and special needs, and including
518 maintaining stability in the child's educational placement, as
519 documented by assurances from the community-based care provider
520 that:

521 a. The placement of the child takes into account the
522 appropriateness of the current educational setting and the

586-01925C-14

20147074__

523 proximity to the school in which the child is enrolled at the
524 time of placement.

525 b. The community-based care agency has coordinated with
526 appropriate local educational agencies to ensure that the child
527 remains in the school in which the child is enrolled at the time
528 of placement.

529 ~~10.9.~~ A projected date likely for the child's return home
530 or other permanent placement.

531 ~~11.10.~~ When appropriate, the basis for the unwillingness or
532 inability of the parent to become a party to a case plan. The
533 court and the citizen review panel shall determine if the
534 efforts of the social service agency to secure party
535 participation in a case plan were sufficient.

536 ~~12.11.~~ For a child who has reached 13 years of age but is
537 not yet 18 years of age, the adequacy of the child's preparation
538 for adulthood and independent living.

539 ~~13.12.~~ If amendments to the case plan are required.
540 Amendments to the case plan must be made under s. 39.6013.

541 (3) REVIEW HEARINGS FOR CHILDREN 17 YEARS OF AGE.—

542 (a) In addition to the review and report required under
543 paragraphs (1)(a) and (2)(a), respectively, the court shall hold
544 a judicial review hearing within 90 days after a child's 17th
545 birthday. The court shall also issue an order, separate from the
546 order on judicial review, that the disability of nonage of the
547 child has been removed pursuant to ss. 743.044, 743.045, and
548 743.046, and for any of these disabilities that the courts finds
549 is in the child's best interest to remove. The court s. 743.045
550 ~~and~~ shall continue to hold timely judicial review hearings. If
551 necessary, the court may review the status of the child more

586-01925C-14

20147074__

552 frequently during the year before the child's 18th birthday. At
553 each review hearing held under this subsection, in addition to
554 any information or report provided to the court by the foster
555 parent, legal custodian, or guardian ad litem, the child shall
556 be given the opportunity to address the court with any
557 information relevant to the child's best interest, particularly
558 in relation to independent living transition services. The
559 department shall include in the social study report for judicial
560 review written verification that the child has:

561 1. A current Medicaid card and all necessary information
562 concerning the Medicaid program sufficient to prepare the child
563 to apply for coverage upon reaching the age of 18, if such
564 application is appropriate.

565 2. A certified copy of the child's birth certificate and,
566 if the child does not have a valid driver license, a Florida
567 identification card issued under s. 322.051.

568 3. A social security card and information relating to
569 social security insurance benefits if the child is eligible for
570 those benefits. If the child has received such benefits and they
571 are being held in trust for the child, a full accounting of
572 these funds must be provided and the child must be informed as
573 to how to access those funds.

574 4. All relevant information related to the Road-to-
575 Independence Program, including, but not limited to, eligibility
576 requirements, information on participation, and assistance in
577 gaining admission to the program. If the child is eligible for
578 the Road-to-Independence Program, he or she must be advised that
579 he or she may continue to reside with the licensed family home
580 or group care provider with whom the child was residing at the

586-01925C-14

20147074__

581 time the child attained his or her 18th birthday, in another
582 licensed family home, or with a group care provider arranged by
583 the department.

584 5. An open bank account or the identification necessary to
585 open a bank account and to acquire essential banking and
586 budgeting skills.

587 6. Information on public assistance and how to apply for
588 public assistance.

589 7. A clear understanding of where he or she will be living
590 on his or her 18th birthday, how living expenses will be paid,
591 and the educational program or school in which he or she will be
592 enrolled.

593 8. Information related to the ability of the child to
594 remain in care until he or she reaches 21 years of age under s.
595 39.013.

596 9. A letter providing the dates that the child is under the
597 jurisdiction of the court.

598 10. A letter stating that the child is in compliance with
599 financial aid documentation requirements.

600 11. The child's educational records.

601 12. The child's entire health and mental health records.

602 13. The process for accessing his or her case file.

603 14. A statement encouraging the child to attend all
604 judicial review hearings occurring after the child's 17th
605 birthday.

606 Section 8. Subsection (2) of section 39.802, Florida
607 Statutes, is amended to read:

608 39.802 Petition for termination of parental rights; filing;
609 elements.-

586-01925C-14

20147074__

610 (2) The form of the petition is governed by the Florida
611 Rules of Juvenile Procedure. The petition must be in writing and
612 signed by the petitioner under oath stating the petitioner's
613 good faith in ~~or, if the department is the petitioner, by an~~
614 ~~employee of the department, under oath stating the petitioner's~~
615 ~~good faith in~~ filing the petition.

616 Section 9. Subsection (1) and paragraph (c) of subsection
617 (3) of section 383.402, Florida Statutes, are amended to read:

618 383.402 Child abuse death review; State Child Abuse Death
619 Review Committee; local child abuse death review committees.—

620 (1) It is the intent of the Legislature to establish a
621 statewide multidisciplinary, multiagency child abuse death
622 assessment and prevention system that consists of state and
623 local review committees. The state and local review committees
624 shall review the facts and circumstances of all deaths of
625 children from birth through age 18 which occur in this state and
626 are reported to the child abuse hotline of the Department of
627 Children and Families ~~as the result of verified child abuse or~~
628 ~~neglect~~. The purpose of the review shall be to:

629 (a) Achieve a greater understanding of the causes and
630 contributing factors of deaths resulting from child abuse.

631 (b) Whenever possible, develop a communitywide approach to
632 address such cases and contributing factors.

633 (c) Identify any gaps, deficiencies, or problems in the
634 delivery of services to children and their families by public
635 and private agencies which may be related to deaths that are the
636 result of child abuse.

637 (d) Make and implement recommendations for changes in law,
638 rules, and policies, as well as develop practice standards that

586-01925C-14

20147074__

639 support the safe and healthy development of children and reduce
640 preventable child abuse deaths.

641 (3) The State Child Abuse Death Review Committee shall:

642 (c) Prepare an annual statistical report on the incidence
643 and causes of death resulting from reported child abuse in the
644 state during the prior calendar year. The state committee shall
645 submit a copy of the report by October 1 ~~December 31~~ of each
646 year to the Governor, the President of the Senate, and the
647 Speaker of the House of Representatives. The report must include
648 recommendations for state and local action, including specific
649 policy, procedural, regulatory, or statutory changes, and any
650 other recommended preventive action.

651 Section 10. The Division of Law Revision and Information is
652 directed to create part V of chapter 409, Florida Statutes,
653 consisting of ss. 409.986-409.998, Florida Statutes, to be
654 titled "Community-Based Child Welfare."

655 Section 11. Section 409.986, Florida Statutes, is created
656 to read:

657 409.986 Legislative findings, intent, and definitions.—

658 (1) LEGISLATIVE FINDINGS AND INTENT.—

659 (a) It is the intent of the Legislature that the Department
660 of Children and Families provide child protection and child
661 welfare services to children through contracting with community-
662 based care lead agencies. It is further the Legislature's intent
663 that communities and other stakeholders in the well-being of
664 children participate in assuring safety, permanence, and well-
665 being for all children in the state.

666 (b) The Legislature finds that, when private entities
667 assume responsibility for the care of children in the child

586-01925C-14

20147074__

668 protection and child welfare system, adequate oversight of the
669 programmatic, administrative, and fiscal operation of those
670 entities is essential. The Legislature finds that, ultimately,
671 the appropriate care of children is the responsibility of the
672 state and outsourcing the provision of such care does not
673 relieve the state of its responsibility to ensure that
674 appropriate care is provided.

675 (2) CHILD PROTECTION AND CHILD WELFARE OUTCOMES.—It is the
676 goal of the department to achieve the following outcomes in
677 conjunction with the community-based care lead agency,
678 community-based subcontractors, and the community-based care
679 alliance:

680 (a) Children are first and foremost protected from abuse
681 and neglect.

682 (b) Children are safely maintained in their homes if
683 possible and appropriate.

684 (c) Services are provided to protect children and prevent
685 removal from the home.

686 (d) Children have permanency and stability in their living
687 arrangements.

688 (e) Family relationships and connections are preserved for
689 children.

690 (f) Families have enhanced capacity to provide for their
691 children's needs.

692 (g) Children receive appropriate services to meet their
693 educational needs.

694 (h) Children receive adequate services to meet their
695 physical and mental health needs.

696 (3) DEFINITIONS.—As used in this part, except as otherwise

586-01925C-14

20147074__

697 specially provided, the term:

698 (a) "Child" or "children" means has the same meaning as the
699 term "child" as defined in s. 39.01.

700 (b) "Dependent child" means a child who has been determined
701 by the court to be in need of care due to allegations of abuse,
702 neglect, or abandonment.

703 (c) "Care" means services of any kind which are designed to
704 facilitate a child remaining safely in his or her own home,
705 returning safely to his or her own home if he or she is removed,
706 or obtaining an alternative permanent home if he or she cannot
707 remain home or be returned home.

708 (d) "Community-based care lead agency" or "lead agency"
709 means a single entity with which the department has a contract
710 for the provision of care for children in the child protection
711 and child welfare system in a community that is no smaller than
712 a county and no larger than two contiguous judicial circuits.
713 The secretary of the department may authorize more than one
714 eligible lead agency within a single county if doing so will
715 result in more effective delivery of services to children.

716 (e) "Community-based care alliance" or "alliance" means the
717 group of stakeholders, community leaders, client
718 representatives, and funders of human services established to
719 provide a focal point for community participation and governance
720 of community-based services.

721 (f) "Related services" includes, but is not limited to,
722 family preservation, independent living, emergency shelter,
723 residential group care, foster care, therapeutic foster care,
724 intensive residential treatment, foster care supervision, case
725 management, postplacement supervision, permanent foster care,

586-01925C-14

20147074__

726 and family reunification.

727 Section 12. Section 409.987, Florida Statutes, is created
728 to read:

729 409.987 Lead agency procurement.-

730 (1) Community-based care lead agencies shall be procured by
731 the department through a competitive process as required by
732 chapter 287.

733 (2) The department shall produce a schedule for the
734 procurement of community-based care lead agencies and provide
735 the schedule to the community-based care alliances established
736 pursuant to s. 409.998.

737 (3) Notwithstanding s. 287.057, the department shall use 5-
738 year contracts with lead agencies.

739 (4) In order to compete for a contract to serve as a lead
740 agency, an entity must:

741 (a) Be organized as a Florida corporation or a governmental
742 entity.

743 (b) Be governed by a board of directors. The membership of
744 the board of directors must be described in the bylaws or
745 articles of incorporation of each lead agency. At least 75
746 percent of the membership of the board of directors must be
747 composed of persons residing in this state. Of the state
748 residents, at least 51 percent must also reside within the
749 service area of the lead agency.

750 (c) Demonstrate financial responsibility through an
751 organized plan for regular fiscal audits and the posting of a
752 performance bond.

753 (5) The procurement of lead agencies must be done in
754 consultation with the local community-based care alliances.

586-01925C-14

20147074__

755 Section 13. Section 409.988, Florida Statutes, is created
756 to read:

757 409.988 Lead agency duties; general provisions.-

758 (1) DUTIES.-A lead agency:

759 (a) Shall serve all children referred as a result of a
760 report of abuse, neglect, or abandonment to the department's
761 child abuse hotline regardless of the level of funding allocated
762 to the lead agency by the state if all related funding is
763 transferred.

764 (b) Shall provide accurate and timely information necessary
765 for oversight by the department pursuant to the child welfare
766 results-oriented accountability system required by s. 409.997.

767 (c) Shall follow the financial guidelines developed by the
768 department and provide for a regular independent auditing of its
769 financial activities. Such financial information shall be
770 provided to the community-based care alliance established under
771 s. 409.998.

772 (d) Shall prepare all judicial reviews, case plans, and
773 other reports necessary for court hearings for dependent
774 children, except those related to the investigation of a
775 referral from the department's child abuse hotline, and shall
776 provide testimony as required for dependency court proceedings.
777 This duty does not include the preparation of legal pleadings or
778 other legal documents, which remain the responsibility of the
779 department.

780 (e) Shall ensure that all individuals providing care for
781 dependent children receive appropriate training and meet the
782 minimum employment standards established by the department.

783 (f) Shall maintain eligibility to receive all available

586-01925C-14

20147074__

784 federal child welfare funds.

785 (g) Shall maintain written agreements with Healthy Families
786 Florida lead entities in its service area pursuant to s. 409.153
787 to promote cooperative planning for the provision of prevention
788 and intervention services.

789 (h) Shall comply with federal and state statutory
790 requirements and agency rules in the provision of contractual
791 services.

792 (i) May subcontract for the provision of services required
793 by the contract with the lead agency and the department;
794 however, the subcontracts must specify how the provider will
795 contribute to the lead agency meeting the performance standards
796 established pursuant to the child welfare results-oriented
797 accountability system required by s. 409.997.

798 (2) LICENSURE.—

799 (a) A lead agency must be licensed as a child-caring or
800 child-placing agency by the department under this chapter.

801 (b) Each foster home, therapeutic foster home, emergency
802 shelter, or other placement facility operated by the lead agency
803 must be licensed by the department under chapter 402 or this
804 chapter.

805 (c) Substitute care providers who are licensed under s.
806 409.175 and who have contracted with a lead agency are also
807 authorized to provide registered or licensed family day care
808 under s. 402.313 if such care is consistent with federal law and
809 if the home has met the requirements of s. 402.313.

810 (d) A foster home licensed under s. 409.175 may be dually
811 licensed as a child care home under chapter 402 and may receive
812 a foster care maintenance payment and, to the extent permitted

586-01925C-14

20147074__

813 under federal law, school readiness funding for the same child.

814 (e) In order to eliminate or reduce the number of duplicate
815 inspections by various program offices, the department shall
816 coordinate inspections required for licensure of agencies under
817 this subsection.

818 (f) The department may adopt rules to administer this
819 subsection.

820 (3) SERVICES.—A lead agency must serve dependent children
821 through services that are supported by research or are best
822 child welfare practices. The agency may also provide innovative
823 services such as family-centered, cognitive-behavioral
824 interventions designed to mitigate out-of-home placements.

825 (4) LEAD AGENCY ACTING AS GUARDIAN.—

826 (a) If a lead agency or other provider has accepted case
827 management responsibilities for a child who is sheltered or
828 found to be dependent and who is assigned to the care of the
829 lead agency or other provider, the agency or provider may act as
830 the child's guardian for the purpose of registering the child in
831 school if a parent or guardian of the child is unavailable and
832 his or her whereabouts cannot reasonably be ascertained.

833 (b) The lead agency or other provider may also seek
834 emergency medical attention for the child, but only if a parent
835 or guardian of the child is unavailable, the parent's
836 whereabouts cannot reasonably be ascertained, and a court order
837 for such emergency medical services cannot be obtained because
838 of the severity of the emergency or because it is after normal
839 working hours.

840 (c) A lead agency or other provider may not consent to
841 sterilization, abortion, or termination of life support.

586-01925C-14

20147074__

842 (d) If a child's parents' rights have been terminated, the
843 lead agency shall act as guardian of the child in all
844 circumstances.

845 Section 14. Section 409.990, Florida Statutes, is created
846 to read:

847 409.990 Funding for lead agencies.—A contract established
848 between the department and a lead agency must be funded by a
849 grant of general revenue, other applicable state funds, or
850 applicable federal funding sources.

851 (1) The method of payment for a fixed-price contract with a
852 lead agency must provide for a 2-month advance payment at the
853 beginning of each fiscal year and equal monthly payments
854 thereafter.

855 (2) Notwithstanding s. 215.425, all documented federal
856 funds earned for the current fiscal year by the department and
857 lead agencies which exceed the amount appropriated by the
858 Legislature shall be distributed to all entities that
859 contributed to the excess earnings based on a schedule and
860 methodology developed by the department and approved by the
861 Executive Office of the Governor.

862 (a) Distribution shall be pro rata based on total earnings
863 and shall be made only to those entities that contributed to
864 excess earnings.

865 (b) Excess earnings of lead agencies shall be used only in
866 the service district in which they were earned.

867 (c) Additional state funds appropriated by the Legislature
868 for lead agencies or made available pursuant to the budgetary
869 amendment process described in s. 216.177 shall be transferred
870 to the lead agencies.

586-01925C-14

20147074__

871 (d) The department shall amend a lead agency's contract to
872 permit expenditure of the funds.

873 (3) Notwithstanding other provisions in this section, the
874 amount of the annual contract for a lead agency may be increased
875 by excess federal funds earned in accordance with s.
876 216.181(11).

877 (4) Each contract with a lead agency shall provide for the
878 payment by the department to the lead agency of a reasonable
879 administrative cost in addition to funding for the provision of
880 services.

881 (5) A lead agency may carry forward documented unexpended
882 state funds from one fiscal year to the next; however, the
883 cumulative amount carried forward may not exceed 8 percent of
884 the total contract. Any unexpended state funds in excess of that
885 percentage must be returned to the department.

886 (a) The funds carried forward may not be used in any way
887 that would create increased recurring future obligations, and
888 such funds may not be used for any type of program or service
889 that is not currently authorized by the existing contract with
890 the department.

891 (b) Expenditures of funds carried forward must be
892 separately reported to the department.

893 (c) Any unexpended funds that remain at the end of the
894 contract period shall be returned to the department.

895 (d) Funds carried forward may be retained through any
896 contract renewals and any new procurements as long as the same
897 lead agency is retained by the department.

898 (6) It is the intent of the Legislature to improve services
899 and local participation in community-based care initiatives by

586-01925C-14

20147074__

900 fostering community support and providing enhanced prevention
901 and in-home services, thereby reducing the risk otherwise faced
902 by lead agencies. There is established a community partnership
903 matching grant program to be operated by the department for the
904 purpose of encouraging local participation in community-based
905 care for child welfare. A community-based care alliance direct-
906 support organization, a children's services council, or another
907 local entity that makes a financial commitment to a community-
908 based care lead agency may be eligible for a matching grant. The
909 total amount of the local contribution may be matched on a one-
910 to-one basis up to a maximum annual amount of \$500,000 per lead
911 agency. Awarded matching grant funds may be used for any
912 prevention or in-home services that can be reasonably expected
913 to reduce the number of children entering the child welfare
914 system. Funding available for the matching grant program is
915 subject to legislative appropriation of nonrecurring funds
916 provided for this purpose.

917 (7) (a) The department, in consultation with the Florida
918 Coalition for Children, Inc., shall develop and implement a
919 community-based care risk pool initiative to mitigate the
920 financial risk to eligible lead agencies. This initiative must
921 include:

922 1. A risk pool application and protocol developed by the
923 department which outline submission criteria, including, but not
924 limited to, financial and program management, descriptive data
925 requirements, and timeframes for submission of applications.
926 Requests for funding from risk pool applicants shall be based on
927 relevant and verifiable service trends and changes that have
928 occurred during the current fiscal year. The application shall

586-01925C-14

20147074__

929 confirm that expenditure of approved risk pool funds by the lead
930 agency shall be completed within the current fiscal year.

931 2. A risk pool peer review committee, appointed by the
932 secretary and consisting of department staff and representatives
933 from at least three nonapplicant lead agencies, which reviews
934 and assesses all risk pool applications. Upon completion of each
935 application review, the peer review committee shall report its
936 findings and recommendations to the secretary providing, at a
937 minimum, the following information:

938 a. Justification for the specific funding amount required
939 by the risk pool applicant based on current year service trend
940 data, including validation that the applicant's financial need
941 was caused by circumstances beyond the control of the lead
942 agency management;

943 b. Verification that the proposed use of risk pool funds
944 meets at least one of the criteria in paragraph (c); and

945 c. Evidence of technical assistance provided in an effort
946 to avoid the need to access the risk pool and recommendations
947 for technical assistance to the lead agency to ensure that risk
948 pool funds are expended effectively and that the agency's need
949 for future risk pool funding is diminished.

950 (b) Upon approval by the secretary of a risk pool
951 application, the department may request funds from the risk pool
952 in accordance with s. 216.181(6) (a).

953 (c) The purposes for which the community-based care risk
954 pool shall be used include:

955 1. Significant changes in the number or composition of
956 clients eligible to receive services.

957 2. Significant changes in the services that are eligible

586-01925C-14

20147074__

958 for reimbursement.

959 3. Continuity of care in the event of failure,
960 discontinuance of service, or financial misconduct by a lead
961 agency.

962 4. Significant changes in the mix of available funds.

963 (d) The department may also request in its annual
964 legislative budget request, and the Governor may recommend, that
965 the funding necessary to carry out paragraph (c) be appropriated
966 to the department. In addition, the department may request the
967 allocation of funds from the community-based care risk pool in
968 accordance with s. 216.181(6) (a). Funds from the pool may be
969 used to match available federal dollars.

970 1. Such funds shall constitute partial security for
971 contract performance by lead agencies and shall be used to
972 offset the need for a performance bond.

973 2. The department may separately require a bond to mitigate
974 the financial consequences of potential acts of malfeasance or
975 misfeasance or criminal violations by the provider.

976 Section 15. Section 409.16713, Florida Statutes, is
977 transferred, renumbered as section 409.991, Florida Statutes,
978 and paragraph (a) of subsection (1) of that section is amended,
979 to read:

980 409.991 ~~409.16713~~ Allocation of funds for community-based
981 care lead agencies.—

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

983 (a) "Core services funding" means all funds allocated to
984 community-based care lead agencies operating under contract with
985 the department pursuant to s. 409.987 ~~s. 409.1671~~, with the
986 following exceptions:

586-01925C-14

20147074__

- 987 1. Funds appropriated for independent living;
988 2. Funds appropriated for maintenance adoption subsidies;
989 3. Funds allocated by the department for protective
990 investigations training;
991 4. Nonrecurring funds;
992 5. Designated mental health wrap-around services funds; and
993 6. Funds for special projects for a designated community-
994 based care lead agency.

995 Section 16. Section 409.992, Florida Statutes, is created
996 to read:

997 409.992 Lead agency expenditures.—

998 (1) The procurement of commodities or contractual services
999 by lead agencies shall be governed by the financial guidelines
1000 developed by the department which comply with applicable state
1001 and federal law and follow good business practices. Pursuant to
1002 s. 11.45, the Auditor General may provide technical advice in
1003 the development of the financial guidelines.

1004 (2) Notwithstanding any other provision of law, a
1005 community-based care lead agency may make expenditures for staff
1006 cellular telephone allowances, contracts requiring deferred
1007 payments and maintenance agreements, security deposits for
1008 office leases, related agency professional membership dues other
1009 than personal professional membership dues, promotional
1010 materials, and grant writing services. Expenditures for food and
1011 refreshments, other than those provided to clients in the care
1012 of the agency or to foster parents, adoptive parents, and
1013 caseworkers during training sessions, are not allowable.

1014 (3) A lead community-based care agency and its
1015 subcontractors are exempt from state travel policies as provided

586-01925C-14

20147074__

1016 in s. 112.061(3)(a) for their travel expenses incurred in order
1017 to comply with the requirements of this section.

1018 Section 17. Section 409.993, Florida Statutes, is created
1019 to read:

1020 409.993 Lead agencies and subcontractor liability.-

1021 (1) FINDINGS.-

1022 (a) The Legislature finds that the state has traditionally
1023 provided foster care services to children who have been the
1024 responsibility of the state. As such, foster children have not
1025 had the right to recover for injuries beyond the limitations
1026 specified in s. 768.28. The Legislature has determined that
1027 foster care and related services need to be outsourced pursuant
1028 to this section and that the provision of such services is of
1029 paramount importance to the state. The purpose for such
1030 outsourcing is to increase the level of safety, security, and
1031 stability of children who are or become the responsibility of
1032 the state. One of the components necessary to secure a safe and
1033 stable environment for such children is that private providers
1034 maintain liability insurance. As such, insurance needs to be
1035 available and remain available to nongovernmental foster care
1036 and related services providers without the resources of such
1037 providers being significantly reduced by the cost of maintaining
1038 such insurance.

1039 (b) The Legislature further finds that, by requiring the
1040 following minimum levels of insurance, children in outsourced
1041 foster care and related services will gain increased protection
1042 and rights of recovery in the event of injury than provided for
1043 in s. 768.28.

1044 (2) LEAD AGENCY LIABILITY.-

586-01925C-14

20147074__

1045 (a) Other than an entity to which s. 768.28 applies, an
1046 eligible community-based care lead agency, or its employees or
1047 officers, except as otherwise provided in paragraph (b), must,
1048 as a part of its contract, obtain a minimum of \$1 million per
1049 claim/\$3 million per incident in general liability insurance
1050 coverage. The eligible community-based care lead agency must
1051 also require that staff who transport client children and
1052 families in their personal automobiles in order to carry out
1053 their job responsibilities obtain minimum bodily injury
1054 liability insurance in the amount of \$100,000 per claim,
1055 \$300,000 per incident, on their personal automobiles. In lieu of
1056 personal motor vehicle insurance, the lead agency's casualty,
1057 liability, or motor vehicle insurance carrier may provide
1058 nonowned automobile liability coverage. Such insurance provides
1059 liability insurance for automobiles that the provider uses in
1060 connection with the agency's business but does not own, lease,
1061 rent, or borrow. Such coverage includes automobiles owned by the
1062 employees of the lead agency or a member of the employee's
1063 household but only while the automobiles are used in connection
1064 with the agency's business. The nonowned automobile coverage for
1065 the lead agency applies as excess coverage over any other
1066 collectible insurance. The personal automobile policy for the
1067 employee of the lead agency must be primary insurance, and the
1068 nonowned automobile coverage of the agency acts as excess
1069 insurance to the primary insurance. The lead agency shall
1070 provide a minimum limit of \$1 million in nonowned automobile
1071 coverage. In a tort action brought against such an eligible
1072 community-based care lead agency or employee, net economic
1073 damages shall be limited to \$1 million per liability claim and

586-01925C-14

20147074__

1074 \$100,000 per automobile claim, including, but not limited to,
1075 past and future medical expenses, wage loss, and loss of earning
1076 capacity, offset by any collateral source payment paid or
1077 payable. In any tort action brought against such an eligible
1078 community-based care lead agency, noneconomic damages shall be
1079 limited to \$200,000 per claim. A claims bill may be brought on
1080 behalf of a claimant pursuant to s. 768.28 for any amount
1081 exceeding the limits specified in this paragraph. Any offset of
1082 collateral source payments made as of the date of the settlement
1083 or judgment shall be in accordance with s. 768.76. The
1084 community-based care lead agency is not liable in tort for the
1085 acts or omissions of its subcontractors or the officers, agents,
1086 or employees of its subcontractors.

1087 (b) The liability of an eligible community-based care lead
1088 agency described in this section shall be exclusive and in place
1089 of all other liability of such lead agency. The same immunities
1090 from liability enjoyed by such lead agencies shall extend as
1091 well to each employee of the lead agency when such employee is
1092 acting in furtherance of the agency's business, including the
1093 transportation of clients served, as described in this
1094 subsection, in privately owned vehicles. Such immunities are not
1095 applicable to a lead agency or an employee who acts in a
1096 culpably negligent manner or with willful and wanton disregard
1097 or unprovoked physical aggression if such acts result in injury
1098 or death or such acts proximately cause such injury or death.
1099 Such immunities are not applicable to employees of the same lead
1100 agency when each is operating in the furtherance of the agency's
1101 business, but they are assigned primarily to unrelated work
1102 within private or public employment. The same immunity

586-01925C-14

20147074__

1103 provisions enjoyed by a lead agency also apply to any sole
1104 proprietor, partner, corporate officer or director, supervisor,
1105 or other person who in the course and scope of his or her duties
1106 acts in a managerial or policymaking capacity and the conduct
1107 that caused the alleged injury arose within the course and scope
1108 of those managerial or policymaking duties. As used in this
1109 subsection and subsection (3), the term "culpable negligence"
1110 means reckless indifference or grossly careless disregard of
1111 human life.

1112 (3) SUBCONTRACTOR LIABILITY.—

1113 (a) A subcontractor of an eligible community-based care
1114 lead agency which is a direct provider of foster care and
1115 related services to children and families, and its employees or
1116 officers, except as otherwise provided in paragraph (b), must,
1117 as a part of its contract, obtain a minimum of \$1 million per
1118 claim/\$3 million per incident in general liability insurance
1119 coverage. The subcontractor of an eligible community-based care
1120 lead agency must also require that staff who transport client
1121 children and families in their personal automobiles in order to
1122 carry out their job responsibilities obtain minimum bodily
1123 injury liability insurance in the amount of \$100,000 per claim,
1124 \$300,000 per incident, on their personal automobiles. In lieu of
1125 personal motor vehicle insurance, the subcontractor's casualty,
1126 liability, or motor vehicle insurance carrier may provide
1127 nonowned automobile liability coverage. Such insurance provides
1128 liability insurance for automobiles that the subcontractor uses
1129 in connection with the subcontractor's business but does not
1130 own, lease, rent, or borrow. Such coverage includes automobiles
1131 owned by the employees of the subcontractor or a member of the

586-01925C-14

20147074__

1132 employee's household but only while the automobiles are used in
1133 connection with the subcontractor's business. The nonowned
1134 automobile coverage for the subcontractor applies as excess
1135 coverage over any other collectible insurance. The personal
1136 automobile policy for the employee of the subcontractor shall be
1137 primary insurance, and the nonowned automobile coverage of the
1138 subcontractor acts as excess insurance to the primary insurance.
1139 The subcontractor shall provide a minimum limit of \$1 million in
1140 nonowned automobile coverage. In a tort action brought against
1141 such subcontractor or employee, net economic damages shall be
1142 limited to \$1 million per liability claim and \$100,000 per
1143 automobile claim, including, but not limited to, past and future
1144 medical expenses, wage loss, and loss of earning capacity,
1145 offset by any collateral source payment paid or payable. In a
1146 tort action brought against such subcontractor, noneconomic
1147 damages shall be limited to \$200,000 per claim. A claims bill
1148 may be brought on behalf of a claimant pursuant to s. 768.28 for
1149 any amount exceeding the limits specified in this paragraph. Any
1150 offset of collateral source payments made as of the date of the
1151 settlement or judgment shall be in accordance with s. 768.76.

1152 (b) The liability of a subcontractor of an eligible
1153 community-based care lead agency that is a direct provider of
1154 foster care and related services as described in this section
1155 shall be exclusive and in place of all other liability of such
1156 lead agency. The same immunities from liability enjoyed by such
1157 subcontractor provider shall extend as well to each employee of
1158 the subcontractor when such employee is acting in furtherance of
1159 the subcontractor's business, including the transportation of
1160 clients served, as described in this subsection, in privately

586-01925C-14

20147074__

1161 owned vehicles. Such immunities are not applicable to a
 1162 subcontractor or an employee who acts in a culpably negligent
 1163 manner or with willful and wanton disregard or unprovoked
 1164 physical aggression when such acts result in injury or death or
 1165 such acts proximately cause such injury or death. Such
 1166 immunities are not applicable to employees of the same
 1167 subcontractor when each is operating in the furtherance of the
 1168 subcontractor's business, but they are assigned primarily to
 1169 unrelated works within private or public employment. The same
 1170 immunity provisions enjoyed by a subcontractor also apply to any
 1171 sole proprietor, partner, corporate officer or director,
 1172 supervisor, or other person who in the course and scope of his
 1173 or her duties acts in a managerial or policymaking capacity and
 1174 the conduct that caused the alleged injury arose within the
 1175 course and scope of those managerial or policymaking duties.

1176 (4) LIMITATIONS ON DAMAGES.—The Legislature is cognizant of
 1177 the increasing costs of goods and services each year and
 1178 recognizes that fixing a set amount of compensation has the
 1179 effect of a reduction in compensation each year. Accordingly,
 1180 the conditional limitations on damages in this section shall be
 1181 increased at the rate of 5 percent each year, prorated from July
 1182 1, 2014, to the date at which damages subject to such
 1183 limitations are awarded by final judgment or settlement.

1184 Section 18. Section 409.1675, Florida Statutes, is
 1185 transferred and renumbered as section 409.994, Florida Statutes,
 1186 and amended to read:

1187 409.994 409.1675 ~~Lead~~ Community-based care lead agencies
 1188 ~~providers~~; receivership.—

1189 (1) The Department of Children and Families ~~Family Services~~

586-01925C-14

20147074__

1190 may petition a court of competent jurisdiction for the
1191 appointment of a receiver for a ~~lead~~ community-based care lead
1192 agency provider established pursuant to s. 409.987 if s.
1193 ~~409.1671~~ when any of the following conditions exist:

1194 (a) The lead agency ~~community-based provider~~ is operating
1195 without a license as a child-placing agency.

1196 (b) The lead agency ~~community-based provider~~ has given less
1197 than 120 days' notice of its intent to cease operations, and
1198 arrangements have not been made for another lead agency
1199 ~~community-based provider~~ or for the department to continue the
1200 uninterrupted provision of services.

1201 (c) The department determines that conditions exist in the
1202 lead agency ~~community-based provider~~ which present an imminent
1203 danger to the health, safety, or welfare of the dependent
1204 children under that agency's ~~provider's~~ care or supervision.
1205 Whenever possible, the department shall make a reasonable effort
1206 to facilitate the continued operation of the program.

1207 (d) The lead agency ~~community-based provider~~ cannot meet
1208 its current financial obligations to its employees, contractors,
1209 or foster parents. Issuance of bad checks or the existence of
1210 delinquent obligations for payment of salaries, utilities, or
1211 invoices for essential services or commodities shall constitute
1212 prima facie evidence that the lead agency ~~community-based~~
1213 ~~provider~~ lacks the financial ability to meet its financial
1214 obligations.

1215 (2) (a) The petition for receivership shall take precedence
1216 over other court business unless the court determines that some
1217 other pending proceeding, having statutory precedence, has
1218 priority.

586-01925C-14

20147074__

1219 (b) A hearing shall be conducted within 5 days after the
1220 filing of the petition, at which time interested parties shall
1221 have the opportunity to present evidence as to whether a
1222 receiver should be appointed. The department shall give
1223 reasonable notice of the hearing on the petition to the lead
1224 agency ~~community-based provider~~.

1225 (c) The court shall grant the petition upon finding that
1226 one or more of the conditions in subsection (1) exists and the
1227 continued existence of the condition or conditions jeopardizes
1228 the health, safety, or welfare of dependent children. A receiver
1229 may be appointed ex parte when the court determines that one or
1230 more of the conditions in subsection (1) exists. After such
1231 finding, the court may appoint any person, including an employee
1232 of the department who is qualified by education, training, or
1233 experience to carry out the duties of the receiver pursuant to
1234 this section, except that the court may ~~shall~~ not appoint any
1235 member of the governing board or any officer of the lead agency
1236 ~~community-based provider~~. The receiver may be selected from a
1237 list of persons qualified to act as receivers which is developed
1238 by the department and presented to the court with each petition
1239 of receivership.

1240 (d) A receiver may be appointed for up to 90 days, and the
1241 department may petition the court for additional 30-day
1242 extensions. Sixty days after appointment of a receiver and every
1243 30 days thereafter until the receivership is terminated, the
1244 department shall submit to the court an assessment of the lead
1245 agency's ~~community-based provider's~~ ability to ensure the
1246 health, safety, and welfare of the dependent children under its
1247 supervision.

586-01925C-14

20147074__

1248 (3) The receiver shall take such steps as are reasonably
1249 necessary to ensure the continued health, safety, and welfare of
1250 the dependent children under the supervision of the lead agency
1251 ~~community-based provider~~ and shall exercise those powers and
1252 perform those duties set out by the court, including, but not
1253 limited to:

1254 (a) Taking such action as is reasonably necessary to
1255 protect or conserve the assets or property of the lead agency
1256 ~~community-based provider~~. The receiver may use the assets and
1257 property and any proceeds from any transfer thereof only in the
1258 performance of the powers and duties provided ~~set forth~~ in this
1259 section and by order of the court.

1260 (b) Using the assets of the lead agency ~~community-based~~
1261 ~~provider~~ in the provision of care and services to dependent
1262 children.

1263 (c) Entering into contracts and hiring agents and employees
1264 to carry out the powers and duties of the receiver under this
1265 section.

1266 (d) Having full power to direct, manage, hire, and
1267 discharge employees of the lead agency ~~community-based provider~~.
1268 The receiver shall hire and pay new employees at the rate of
1269 compensation, including benefits, approved by the court.

1270 (e) Honoring all leases, mortgages, and contractual
1271 obligations of the lead agency ~~community-based provider~~, but
1272 only to the extent of payments that become due during the period
1273 of the receivership.

1274 (4) (a) The receiver shall deposit funds received in a
1275 separate account and shall use this account for all
1276 disbursements.

586-01925C-14

20147074__

1277 (b) A payment to the receiver of any sum owing to the lead
1278 agency ~~community-based provider~~ shall discharge any obligation
1279 to the provider to the extent of the payment.

1280 (5) A receiver may petition the court for temporary relief
1281 from obligations entered into by the lead agency ~~community-based~~
1282 ~~provider~~ if the rent, price, or rate of interest required to be
1283 paid under the agreement was substantially in excess of a
1284 reasonable rent, price, or rate of interest at the time the
1285 contract was entered into, or if any material provision of the
1286 agreement was unreasonable when compared to contracts negotiated
1287 under similar conditions. Any relief in this form provided by
1288 the court shall be limited to the life of the receivership,
1289 unless otherwise determined by the court.

1290 (6) The court shall set the compensation of the receiver,
1291 which shall be considered a necessary expense of a receivership
1292 and may grant to the receiver such other authority necessary to
1293 ensure the health, safety, and welfare of the children served.

1294 (7) A receiver may be held liable in a personal capacity
1295 only for the receiver's own gross negligence, intentional acts,
1296 or breaches of fiduciary duty. This section may ~~shall~~ not be
1297 interpreted to be a waiver of sovereign immunity should the
1298 department be appointed receiver.

1299 (8) If the receiver is not the department, the court may
1300 require a receiver to post a bond to ensure the faithful
1301 performance of these duties.

1302 (9) The court may terminate a receivership when:

1303 (a) The court determines that the receivership is no longer
1304 necessary because the conditions that gave rise to the
1305 receivership no longer exist; or

586-01925C-14

20147074__

1306 (b) The department has entered into a contract with a new
1307 lead agency ~~community-based provider~~ pursuant to s. 409.987 ~~s.~~
1308 ~~409.1671~~, and that contractor is ready and able to assume the
1309 duties of the previous lead agency ~~provider~~.

1310 (10) Within 30 days after the termination, unless this time
1311 period is extended by the court, the receiver shall give the
1312 court a complete accounting of all property of which the
1313 receiver has taken possession, of all funds collected and
1314 disbursed, and of the expenses of the receivership.

1315 (11) ~~Nothing in~~ This section does not ~~shall be construed to~~
1316 relieve any employee of the lead agency ~~community-based provider~~
1317 placed in receivership of any civil or criminal liability
1318 incurred, or any duty imposed by law, by reason of acts or
1319 omissions of the employee before ~~prior to~~ the appointment of a
1320 receiver, ~~and; nor shall anything contained in this section~~ does
1321 not be construed to suspend during the receivership any
1322 obligation of the employee for payment of taxes or other
1323 operating or maintenance expenses of the lead agency ~~community-~~
1324 ~~based provider~~ or for the payment of mortgages or liens. The
1325 lead agency ~~community-based provider~~ shall retain the right to
1326 sell or mortgage any facility under receivership, subject to the
1327 prior approval of the court that ordered the receivership.

1328 Section 19. Section 409.996, Florida Statutes, is created
1329 to read:

1330 409.996 Duties of the Department of Children and Families.-
1331 The department shall contract for the delivery, administration,
1332 or management of care for children in the child protection and
1333 child welfare system. In doing so, the department retains
1334 responsibility for the quality of contracted services and

586-01925C-14

20147074__

1335 programs and shall ensure that services are delivered in
1336 accordance with applicable federal and state statutes and
1337 regulations.

1338 (1) The department shall enter into contracts with lead
1339 agencies to perform the duties of a lead agency pursuant to s.
1340 409.988. At a minimum, the contracts must:

1341 (a) Provide for the services needed to accomplish the
1342 duties established in s. 409.988 and provide information to the
1343 department which is necessary to meet the requirements for a
1344 quality assurance program pursuant to subsection (18) and the
1345 child welfare results-oriented accountability system pursuant to
1346 s. 409.997.

1347 (b) Provide for graduated penalties for failure to comply
1348 with contract terms. Such penalties may include financial
1349 penalties, enhanced monitoring and reporting, corrective action
1350 plans, and early termination of contracts or other appropriate
1351 action to ensure contract compliance.

1352 (c) Ensure that the lead agency shall furnish current and
1353 accurate information on its activities in all cases in client
1354 case records in the state's statewide automated child welfare
1355 information system.

1356 (d) Specify the procedures to be used by the parties to
1357 resolve differences in interpreting the contract or to resolve
1358 disputes as to the adequacy of the parties' compliance with
1359 their respective obligations under the contract.

1360 (2) The department must adopt written policies and
1361 procedures for monitoring the contract for delivery of services
1362 by lead agencies. These policies and procedures must, at a
1363 minimum, address the evaluation of fiscal accountability and

586-01925C-14

20147074__

1364 program operations, including provider achievement of
1365 performance standards, provider monitoring of subcontractors,
1366 and timely follow up of corrective actions for significant
1367 monitoring findings related to providers and subcontractors.
1368 These policies and procedures must also include provisions for
1369 reducing the duplication of the department's program monitoring
1370 activities both internally and with other agencies, to the
1371 extent possible. The department's written procedures must ensure
1372 that the written findings, conclusions, and recommendations from
1373 monitoring the contract for services of lead agencies are
1374 communicated to the director of the provider agency and the
1375 community-based care alliance as expeditiously as possible.

1376 (3) The department shall receive federal and state funds as
1377 appropriated for the operation of the child welfare system and
1378 shall transmit these funds to the lead agencies as agreed. The
1379 department retains responsibility for the appropriate spending
1380 of these funds. The department shall monitor lead agencies to
1381 assess compliance with the financial guidelines established
1382 pursuant to s. 409.992 and other applicable state and federal
1383 laws.

1384 (4) The department shall provide technical assistance and
1385 consultation to lead agencies in the provision of care to
1386 children in the child protection and child welfare system.

1387 (5) The department retains the responsibility for the
1388 review, approval or denial, and issuances of all foster home
1389 licenses.

1390 (6) The department shall process all applications submitted
1391 by lead agencies for the Interstate Compact for Placement of
1392 Children and the Interstate Compact for Adoption and Medical

586-01925C-14

20147074__

1393 Assistance.

1394 (7) The department shall assist lead agencies with access
1395 to and coordination with other service programs within the
1396 department.

1397 (8) The department shall determine Medicaid eligibility for
1398 all referred children and will coordinate services with the
1399 Agency for Health Care Administration.

1400 (9) The department shall develop, in cooperation with the
1401 lead agencies, a standardized competency-based curriculum for
1402 certification training and for administering the certification
1403 testing program for child protection staff.

1404 (10) The department shall maintain the statewide adoptions
1405 website and provide information and training to the lead
1406 agencies relating to the website.

1407 (11) The department shall provide training and assistance
1408 to lead agencies regarding the responsibility of lead agencies
1409 relating to children receiving supplemental security income,
1410 social security, railroad retirement, or veterans' benefits.

1411 (12) With the assistance of a lead agency, the department
1412 shall develop and implement statewide and local interagency
1413 agreements needed to coordinate services for children and
1414 parents involved in the child welfare system who are also
1415 involved with the Agency for Persons with Disabilities, the
1416 Department of Juvenile Justice, the Department of Education, the
1417 Department of Health, and other governmental organizations that
1418 share responsibilities for children or parents in the child
1419 welfare system.

1420 (13) With the assistance of a lead agency, the department
1421 shall develop and implement a working agreement between the lead

586-01925C-14

20147074__

1422 agency and the substance abuse and mental health managing entity
1423 to integrate services and supports for children and parents
1424 serviced in the child welfare system.

1425 (14) The department shall work with the Agency for Health
1426 Care Administration to provide each child the services of the
1427 Medicaid early and periodic screening, diagnosis, and treatment
1428 entitlement including 72-hour screening, periodic child health
1429 checkups, and prescribed follow up for ordered services,
1430 including medical, dental, and vision care.

1431 (15) The department shall assist lead agencies in
1432 developing an array of services in compliance with the Title IV-
1433 E Waiver and shall monitor the provision of those services.

1434 (16) The department shall provide a mechanism to allow lead
1435 agencies to request a waiver of department policies and
1436 procedures that create inefficiencies or inhibit the performance
1437 of the lead agency duties.

1438 (17) The department shall directly or through contract
1439 provide attorneys to prepare and present cases in dependency
1440 court and shall ensure that the court is provided with adequate
1441 information for informed decisionmaking in dependency cases,
1442 including a fact sheet for each case which lists the names and
1443 contact information for any child protective investigator, child
1444 protective investigation supervisor, case manager, case manager
1445 supervisor, and the regional department official responsible for
1446 the lead agency contract. For the Sixth Judicial Circuit, the
1447 department shall contract with the state attorney for the
1448 provision of these services.

1449 (18) The department, in consultation with lead agencies,
1450 shall establish a quality assurance program for contracted

586-01925C-14

20147074__

1451 services to dependent children. The quality assurance program
1452 shall be based on standards established by federal and state law
1453 and national accrediting organizations.

1454 (a) The department must evaluate each lead agency under
1455 contract at least annually. These evaluations shall cover the
1456 programmatic, operational, and fiscal operations of the lead
1457 agency and be consistent with the child welfare results-oriented
1458 accountability system pursuant to s. 409.997. The department
1459 must consult with the chief judge on the performance of the lead
1460 agency.

1461 (b) The department shall, to the extent possible, use
1462 independent financial audits provided by the lead agency to
1463 eliminate or reduce the ongoing contract and administrative
1464 reviews conducted by the department. If the department
1465 determines that such independent financial audits are
1466 inadequate, other audits, as necessary, may be conducted by the
1467 department. This paragraph does not abrogate the requirements of
1468 s. 215.97.

1469 (c) The department may suggest additional items to be
1470 included in such independent financial audits to meet the
1471 department's needs.

1472 (d) The department may outsource programmatic,
1473 administrative, or fiscal monitoring oversight of lead agencies.

1474 (e) A lead agency must assure that all subcontractors are
1475 subject to the same quality assurance activities as the lead
1476 agency.

1477 Section 20. Section 409.997, Florida Statutes, is created
1478 to read:

1479 409.997 Child welfare results-oriented accountability

586-01925C-14

20147074__

1480 system.-

1481 (1) The department and its contract providers, including
1482 lead agencies, community-based care providers, and other
1483 community partners participating in the state's child protection
1484 and child welfare system, share the responsibility for achieving
1485 the outcome goals specified in s. 409.986(2).

1486 (2) In order to assess the achievement of the goals
1487 specified in s. 409.986(2), the department shall maintain a
1488 comprehensive, results-oriented accountability system that
1489 monitors the use of resources, the quality and amount of
1490 services provided, and the child and family outcomes through
1491 data analysis, research review, evaluation, and quality
1492 improvement. In maintaining the accountability system, the
1493 department shall:

1494 (a) Identify valid and reliable outcome measures for each
1495 of the goals specified in this subsection. The outcome data set
1496 must consist of a limited number of understandable measures
1497 using available data to quantify outcomes as children move
1498 through the system of care. Such measures may aggregate multiple
1499 variables that affect the overall achievement of the outcome
1500 goal. Valid and reliable measures must be based on adequate
1501 sample sizes, be gathered over suitable time periods, reflect
1502 authentic rather than spurious results, and may not be
1503 susceptible to manipulation.

1504 (b) Implement a monitoring system to track the identified
1505 outcome measures on a statewide, regional, and provider-specific
1506 basis. The monitoring system must identify trends and chart
1507 progress toward achievement of the goals specified in this
1508 section. The requirements of the monitoring system may be

586-01925C-14

20147074__

1509 incorporated into the quality assurance system required under s.
1510 409.996(18).

1511 (c) Develop and maintain an analytical system that builds
1512 on the outcomes monitoring system to assess the statistical
1513 validity of observed associations between child welfare
1514 interventions and the measured outcomes. The analysis must use
1515 quantitative methods to adjust for variations in demographic or
1516 other conditions. The analysis must include longitudinal studies
1517 to evaluate longer term outcomes such as continued safety,
1518 family permanence, and transition to self-sufficiency. The
1519 analysis may also include qualitative research methods to
1520 provide insight into statistical patterns.

1521 (d) Develop and maintain a program of research review to
1522 identify interventions that are supported by evidence as
1523 causally linked to improved outcomes.

1524 (e) Support an ongoing process of evaluation to determine
1525 the efficacy and effectiveness of various interventions.
1526 Efficacy evaluation is intended to determine the validity of a
1527 causal relationship between an intervention and an outcome.
1528 Effectiveness evaluation is intended to determine the extent to
1529 which the results can be generalized.

1530 (f) Develop and maintain an inclusive, interactive, and
1531 evidence-supported program of quality improvement which promotes
1532 individual skill building as well as organizational learning.

1533 (g) Develop and implement a method for making the results
1534 of the accountability system transparent for all parties
1535 involved in the child welfare system as well as policymakers and
1536 the public. The presentation shall provide a comprehensible,
1537 visual report card for the state and each community-based care

586-01925C-14

20147074__

1538 region, indicating the current status relative to each goal and
1539 trends in that status over time.

1540 (3) The department shall establish a technical advisory
1541 panel consisting of representatives from the Florida Institute
1542 for Child Welfare established pursuant to s. 1004.615, lead
1543 agencies, community-based care providers, other contract
1544 providers, community-based care alliances, and family
1545 representatives. The President of the Senate and the Speaker of
1546 the House of Representatives shall each appoint a member to
1547 serve as a legislative liaison to the panel. The technical
1548 advisory panel shall advise the department on meeting the
1549 requirements of this section.

1550 (4) The accountability system may not rank or compare
1551 performance among community-based care regions unless adequate
1552 and specific adjustments are adopted which account for the
1553 diversity in regions' demographics, resources, and other
1554 relevant characteristics.

1555 (5) The results of the accountability system must provide
1556 the basis for performance incentives if funds for such payments
1557 are made available through the General Appropriations Act.

1558 (6) At least quarterly, the department shall make the
1559 results of the accountability system available to the public
1560 through publication on its website. The website must allow for
1561 custom searches of the performance data.

1562 (7) The department shall report by October 1 of each year
1563 the statewide and individual community-based care lead agency
1564 results for child protection and child welfare systems. The
1565 department shall use the accountability system and consult with
1566 the community-based care alliance and the chief judge or judges

586-01925C-14

20147074__

1567 in the community-based care service area to prepare the report
1568 to the Governor, the President of the Senate, and the Speaker of
1569 the House of Representatives.

1570 Section 21. Section 409.998, Florida Statutes, is created
1571 to read:

1572 409.998 Community-based care alliances.—

1573 (1) The department shall, in consultation with local
1574 communities, establish at least one alliance in each community-
1575 based care service area to provide a focal point for community
1576 participation and governance of child protection and child
1577 welfare services. The alliance shall be administratively housed
1578 within the department.

1579 (2) The primary duty of the alliance is to provide
1580 independent, community-focused oversight of child welfare
1581 services and the local system of community-based care. To
1582 perform this duty, the community alliance shall, with the
1583 assistance of the department, perform the following activities:

1584 (a) Conduct a needs assessment and establishment of
1585 community priorities for child protection and child welfare
1586 services.

1587 (b) Advise the department on the programmatic or financial
1588 performance of the lead agency.

1589 (c) Recommend a competitive procurement for the lead agency
1590 if programmatic or financial performance is poor.

1591 (d) Recommend a contract extension for the lead agency if
1592 programmatic or financial performance is superior.

1593 (e) Make recommendations on the development of the
1594 procurement document. The alliance may suggest specific
1595 requirements relating to local needs and services.

586-01925C-14

20147074__

1596 (f) Make recommendations to the department on selection of
1597 a community-based care lead agency.

1598 (g) Review the programmatic and financial performance of a
1599 lead agency at least quarterly.

1600 (h) In partnership with the Florida Institute for Child
1601 Welfare established under s. 1004.615, develop recommendations
1602 to the department and the community-based care lead agency to
1603 improve child protection and child welfare policies and
1604 practices.

1605 (i) Promote greater community involvement in community-
1606 based care through participation in community-based care lead
1607 agency services and activities, solicitation of local financial
1608 and in-kind resources, recruitment and retention of community
1609 volunteers, and public awareness efforts.

1610 (3) The membership of the alliance shall be composed of the
1611 following:

1612 (a) A representative from county government chosen by
1613 mutual agreement by the county boards of commission in the
1614 service area.

1615 (b) A representative from the school district chosen by
1616 mutual agreement by the county school boards in the service
1617 area.

1618 (c) A representative from the county sheriff's office
1619 chosen by mutual agreement by the county sheriffs in the service
1620 area.

1621 (d) A representative from the circuit court chosen by the
1622 chief judge of the judicial circuit.

1623 (e) An advocate for persons receiving child protection and
1624 child welfare services chosen by the secretary.

586-01925C-14

20147074__

1625 (f) One member appointed by the President of the Senate.

1626 (g) One member appointed by the Speaker of the House of
1627 Representatives.

1628 (h) Three other members chosen by the secretary of the
1629 department based on their expertise in child protection and
1630 child welfare.

1631 (4) A member of the alliance may not receive payment for
1632 contractual services from the department or a community-based
1633 care lead agency.

1634 (5) A member of the alliance shall serve without
1635 compensation but is entitled to receive reimbursement for per
1636 diem and travel expenses as provided in s. 112.061. Payment may
1637 also be authorized for preapproved child care expenses or lost
1638 wages for members who are consumers of the department's services
1639 and for preapproved child care expenses for other members who
1640 demonstrate hardship.

1641 (6) A member of the alliance is subject to part III of
1642 chapter 112, the Code of Ethics for Public Officers and
1643 Employees.

1644 (7) Actions taken by an alliance must be consistent with
1645 department, state, and federal laws, rules, and regulations.

1646 (8) A member of the alliance shall annually submit a
1647 disclosure statement of services interests to the department's
1648 inspector general. A member who has an interest in a matter
1649 under consideration by the alliance must abstain from voting on
1650 that matter.

1651 (9) (a) Authority to create a direct-support organization.-
1652 The alliance is authorized to create a direct-support
1653 organization.

586-01925C-14

20147074__

1654 1. The direct-support organization must be a Florida
1655 corporation, not for profit, incorporated under the provisions
1656 of chapter 617. The direct-support organization shall be exempt
1657 from paying fees under s. 617.0122.

1658 2. The direct-support organization shall be organized and
1659 operated to conduct programs and activities; raise funds;
1660 request and receive grants, gifts, and bequests of moneys;
1661 acquire, receive, hold, invest, and administer, in its own name,
1662 securities, funds, objects of value, or other property, real or
1663 personal; and make expenditures to or for the direct or indirect
1664 benefit of the lead agency.

1665 3. If the Secretary of Children and Families determines
1666 that the direct-support organization is operating in a manner
1667 that is inconsistent with the goals and purposes of community-
1668 based care or not acting in the best interest of the community,
1669 the secretary may terminate the contract and thereafter the
1670 organization may not use the name of the community-based care
1671 alliance.

1672 (b) Contract.—The direct-support organization shall operate
1673 under a written contract with the department. The written
1674 contract must, at a minimum, provide for:

1675 1. Approval of the articles of incorporation and bylaws of
1676 the direct-support organization by the secretary.

1677 2. Submission of an annual budget for the approval by the
1678 secretary or his or her designee.

1679 3. The reversion without penalty to the department of all
1680 moneys and property held in trust by the direct-support
1681 organization for the community-based care alliance if the
1682 direct-support organization ceases to exist or if the contract

586-01925C-14

20147074__

1683 is terminated.

1684 4. The fiscal year of the direct-support organization,
1685 which must begin July 1 of each year and end June 30 of the
1686 following year.

1687 5. The disclosure of material provisions of the contract
1688 and the distinction between the community-based care alliance
1689 and the direct-support organization to donors of gifts,
1690 contributions, or bequests, as well as on all promotional and
1691 fundraising publications.

1692 (c) Board of directors.—The secretary or his or her
1693 designee shall appoint a board of directors for the direct-
1694 support organization. The secretary or his or her designee may
1695 designate members of the alliance or employees of the department
1696 and the lead agency to serve on the board of directors. Members
1697 of the board shall serve at the pleasure of the secretary or his
1698 or her designee.

1699 (d) Use of property and services.—The secretary or his or
1700 her designee may:

1701 1. Authorize the use of facilities and property other than
1702 moneys that are owned by the state to be used by the direct-
1703 support organization.

1704 2. Authorize the use of personal services provided by
1705 employees of the department. For the purposes of this section,
1706 the term "personal services" includes full-time personnel and
1707 part-time personnel as well as payroll processing.

1708 3. Prescribe the conditions by which the direct-support
1709 organization may use property, facilities, or personal services
1710 of the office.

1711 4. Not authorize the use of property, facilities, or

586-01925C-14

20147074__

1712 personal services of the direct-support organization if the
1713 organization does not provide equal employment opportunities to
1714 all persons, regardless of race, color, religion, sex, age, or
1715 national origin.

1716 (e) Moneys.—Moneys of the direct-support organization may
1717 be held in a separate depository account in the name of the
1718 direct-support organization and subject to the provisions of the
1719 contract with the department.

1720 (f) Annual audit.—The direct-support organization shall
1721 provide for an annual financial audit in accordance with s.
1722 215.981.

1723 (g) Limits on the direct-support organization.—The direct-
1724 support organization may not exercise any power under s.
1725 617.0302(12) or (16). A state employee may not receive
1726 compensation from the direct-support organization for service on
1727 the board of directors or for services rendered to the direct-
1728 support organization.

1729 (h) Repeal.—The authority to create a direct-support
1730 organization expires October 1, 2019, unless saved from repeal
1731 by reenactment by the Legislature.

1732 (10) All alliance meetings are open to the public pursuant
1733 to s. 286.011 and the public records provision of s. 119.07(1).

1734 Section 22. Subsection (4) of section 20.19, Florida
1735 Statutes, is repealed.

1736 Section 23. Sections 409.1671, 409.16715, and 409.16745,
1737 Florida Statutes, are repealed.

1738 Section 24. Paragraph (g) of subsection (1) of section
1739 39.201, Florida Statutes, is amended to read:

1740 39.201 Mandatory reports of child abuse, abandonment, or

586-01925C-14

20147074__

1741 neglect; mandatory reports of death; central abuse hotline.-

1742 (1)

1743 (g) Nothing in this chapter or in the contracting with
1744 community-based care providers for foster care and related
1745 services as specified in s. 409.987 ~~s. 409.1671~~ shall be
1746 construed to remove or reduce the duty and responsibility of any
1747 person, including any employee of the community-based care
1748 provider, to report a suspected or actual case of child abuse,
1749 abandonment, or neglect or the sexual abuse of a child to the
1750 department's central abuse hotline.

1751 Section 25. Subsections (1), (3), and (5) of section
1752 409.1676, Florida Statutes, are amended to read:

1753 409.1676 Comprehensive residential group care services to
1754 children who have extraordinary needs.-

1755 (1) It is the intent of the Legislature to provide
1756 comprehensive residential group care services, including
1757 residential care, case management, and other services, to
1758 children in the child protection system who have extraordinary
1759 needs. These services are to be provided in a residential group
1760 care setting by a not-for-profit corporation or a local
1761 government entity under a contract with the Department of
1762 Children and Families ~~Family Services~~ or by a lead agency as
1763 described in s. 409.986 ~~s. 409.1671~~. These contracts should be
1764 designed to provide an identified number of children with access
1765 to a full array of services for a fixed price. Further, it is
1766 the intent of the Legislature that the Department of Children
1767 and Families ~~Family Services~~ and the Department of Juvenile
1768 Justice establish an interagency agreement by December 1, 2002,
1769 which describes respective agency responsibilities for referral,

586-01925C-14

20147074__

1770 placement, service provision, and service coordination for
1771 dependent and delinquent youth who are referred to these
1772 residential group care facilities. The agreement must require
1773 interagency collaboration in the development of terms,
1774 conditions, and performance outcomes for residential group care
1775 contracts serving the youth referred who have been adjudicated
1776 both dependent and delinquent.

1777 (3) The department, in accordance with a specific
1778 appropriation for this program, shall contract with a not-for-
1779 profit corporation, a local government entity, or the lead
1780 agency that has been established in accordance with s. 409.987
1781 ~~s. 409.1671~~ for the performance of residential group care
1782 services described in this section. A lead agency that is
1783 currently providing residential care may provide this service
1784 directly with the approval of the local community alliance. The
1785 department or a lead agency may contract for more than one site
1786 in a county if that is determined to be the most effective way
1787 to achieve the goals set forth in this section.

1788 (5) The department may transfer all casework
1789 responsibilities for children served under this program to the
1790 entity that provides this service, including case management and
1791 development and implementation of a case plan in accordance with
1792 current standards for child protection services. When the
1793 department establishes this program in a community that has a
1794 lead agency as described in s. 409.986 ~~s. 409.1671~~, the casework
1795 responsibilities must be transferred to the lead agency.

1796 Section 26. Subsection (2) of section 409.1677, Florida
1797 Statutes, is amended to read:

1798 409.1677 Model comprehensive residential services

586-01925C-14

20147074__

1799 programs.—

1800 (2) The department shall establish a model comprehensive
1801 residential services program in Manatee and Miami-Dade Counties
1802 through a contract with the designated lead agency established
1803 in accordance with s. 409.987 ~~s. 409.1671~~ or with a private
1804 entity capable of providing residential group care and home-
1805 based care and experienced in the delivery of a range of
1806 services to foster children, if no lead agency exists. These
1807 model programs are to serve that portion of eligible children
1808 within each county which is specified in the contract, based on
1809 funds appropriated, to include a full array of services for a
1810 fixed price. The private entity or lead agency is responsible
1811 for all programmatic functions necessary to carry out the intent
1812 of this section.

1813 Section 27. Subsection (24) of section 409.906, Florida
1814 Statutes, is amended to read:

1815 409.906 Optional Medicaid services.—Subject to specific
1816 appropriations, the agency may make payments for services which
1817 are optional to the state under Title XIX of the Social Security
1818 Act and are furnished by Medicaid providers to recipients who
1819 are determined to be eligible on the dates on which the services
1820 were provided. Any optional service that is provided shall be
1821 provided only when medically necessary and in accordance with
1822 state and federal law. Optional services rendered by providers
1823 in mobile units to Medicaid recipients may be restricted or
1824 prohibited by the agency. Nothing in this section shall be
1825 construed to prevent or limit the agency from adjusting fees,
1826 reimbursement rates, lengths of stay, number of visits, or
1827 number of services, or making any other adjustments necessary to

586-01925C-14

20147074__

1828 comply with the availability of moneys and any limitations or
1829 directions provided for in the General Appropriations Act or
1830 chapter 216. If necessary to safeguard the state's systems of
1831 providing services to elderly and disabled persons and subject
1832 to the notice and review provisions of s. 216.177, the Governor
1833 may direct the Agency for Health Care Administration to amend
1834 the Medicaid state plan to delete the optional Medicaid service
1835 known as "Intermediate Care Facilities for the Developmentally
1836 Disabled." Optional services may include:

1837 (24) CHILD-WELFARE-TARGETED CASE MANAGEMENT.—The Agency for
1838 Health Care Administration, in consultation with the Department
1839 of Children and Families ~~Family Services~~, may establish a
1840 targeted case-management project in those counties identified by
1841 the Department of Children and Families ~~Family Services~~ and for
1842 all counties with a community-based child welfare project, as
1843 authorized under s. 409.987 ~~s. 409.1671~~, which have been
1844 specifically approved by the department. The covered group of
1845 individuals who are eligible to receive targeted case management
1846 include children who are eligible for Medicaid; who are between
1847 the ages of birth through 21; and who are under protective
1848 supervision or postplacement supervision, under foster-care
1849 supervision, or in shelter care or foster care. The number of
1850 individuals who are eligible to receive targeted case management
1851 is limited to the number for whom the Department of Children and
1852 Families ~~Family Services~~ has matching funds to cover the costs.
1853 The general revenue funds required to match the funds for
1854 services provided by the community-based child welfare projects
1855 are limited to funds available for services described under s.
1856 409.990 ~~s. 409.1671~~. The Department of Children and Families

586-01925C-14

20147074__

1857 ~~Family Services~~ may transfer the general revenue matching funds
1858 as billed by the Agency for Health Care Administration.

1859 Section 28. Paragraph (b) of subsection (4) of section
1860 409.912, Florida Statutes, is amended to read:

1861 409.912 Cost-effective purchasing of health care.—The
1862 agency shall purchase goods and services for Medicaid recipients
1863 in the most cost-effective manner consistent with the delivery
1864 of quality medical care. To ensure that medical services are
1865 effectively utilized, the agency may, in any case, require a
1866 confirmation or second physician's opinion of the correct
1867 diagnosis for purposes of authorizing future services under the
1868 Medicaid program. This section does not restrict access to
1869 emergency services or poststabilization care services as defined
1870 in 42 C.F.R. part 438.114. Such confirmation or second opinion
1871 shall be rendered in a manner approved by the agency. The agency
1872 shall maximize the use of prepaid per capita and prepaid
1873 aggregate fixed-sum basis services when appropriate and other
1874 alternative service delivery and reimbursement methodologies,
1875 including competitive bidding pursuant to s. 287.057, designed
1876 to facilitate the cost-effective purchase of a case-managed
1877 continuum of care. The agency shall also require providers to
1878 minimize the exposure of recipients to the need for acute
1879 inpatient, custodial, and other institutional care and the
1880 inappropriate or unnecessary use of high-cost services. The
1881 agency shall contract with a vendor to monitor and evaluate the
1882 clinical practice patterns of providers in order to identify
1883 trends that are outside the normal practice patterns of a
1884 provider's professional peers or the national guidelines of a
1885 provider's professional association. The vendor must be able to

586-01925C-14

20147074__

1886 provide information and counseling to a provider whose practice
1887 patterns are outside the norms, in consultation with the agency,
1888 to improve patient care and reduce inappropriate utilization.
1889 The agency may mandate prior authorization, drug therapy
1890 management, or disease management participation for certain
1891 populations of Medicaid beneficiaries, certain drug classes, or
1892 particular drugs to prevent fraud, abuse, overuse, and possible
1893 dangerous drug interactions. The Pharmaceutical and Therapeutics
1894 Committee shall make recommendations to the agency on drugs for
1895 which prior authorization is required. The agency shall inform
1896 the Pharmaceutical and Therapeutics Committee of its decisions
1897 regarding drugs subject to prior authorization. The agency is
1898 authorized to limit the entities it contracts with or enrolls as
1899 Medicaid providers by developing a provider network through
1900 provider credentialing. The agency may competitively bid single-
1901 source-provider contracts if procurement of goods or services
1902 results in demonstrated cost savings to the state without
1903 limiting access to care. The agency may limit its network based
1904 on the assessment of beneficiary access to care, provider
1905 availability, provider quality standards, time and distance
1906 standards for access to care, the cultural competence of the
1907 provider network, demographic characteristics of Medicaid
1908 beneficiaries, practice and provider-to-beneficiary standards,
1909 appointment wait times, beneficiary use of services, provider
1910 turnover, provider profiling, provider licensure history,
1911 previous program integrity investigations and findings, peer
1912 review, provider Medicaid policy and billing compliance records,
1913 clinical and medical record audits, and other factors. Providers
1914 are not entitled to enrollment in the Medicaid provider network.

586-01925C-14

20147074__

1915 The agency shall determine instances in which allowing Medicaid
1916 beneficiaries to purchase durable medical equipment and other
1917 goods is less expensive to the Medicaid program than long-term
1918 rental of the equipment or goods. The agency may establish rules
1919 to facilitate purchases in lieu of long-term rentals in order to
1920 protect against fraud and abuse in the Medicaid program as
1921 defined in s. 409.913. The agency may seek federal waivers
1922 necessary to administer these policies.

1923 (4) The agency may contract with:

1924 (b) An entity that is providing comprehensive behavioral
1925 health care services to certain Medicaid recipients through a
1926 capitated, prepaid arrangement pursuant to the federal waiver
1927 provided for by s. 409.905(5). Such entity must be licensed
1928 under chapter 624, chapter 636, or chapter 641, or authorized
1929 under paragraph (c) or paragraph (d), and must possess the
1930 clinical systems and operational competence to manage risk and
1931 provide comprehensive behavioral health care to Medicaid
1932 recipients. As used in this paragraph, the term "comprehensive
1933 behavioral health care services" means covered mental health and
1934 substance abuse treatment services that are available to
1935 Medicaid recipients. The secretary of the Department of Children
1936 and Families ~~Family Services~~ shall approve provisions of
1937 procurements related to children in the department's care or
1938 custody before enrolling such children in a prepaid behavioral
1939 health plan. Any contract awarded under this paragraph must be
1940 competitively procured. In developing the behavioral health care
1941 prepaid plan procurement document, the agency shall ensure that
1942 the procurement document requires the contractor to develop and
1943 implement a plan to ensure compliance with s. 394.4574 related

586-01925C-14

20147074__

1944 to services provided to residents of licensed assisted living
1945 facilities that hold a limited mental health license. Except as
1946 provided in subparagraph 5., and except in counties where the
1947 Medicaid managed care pilot program is authorized pursuant to s.
1948 409.91211, the agency shall seek federal approval to contract
1949 with a single entity meeting these requirements to provide
1950 comprehensive behavioral health care services to all Medicaid
1951 recipients not enrolled in a Medicaid managed care plan
1952 authorized under s. 409.91211, a provider service network
1953 authorized under paragraph (d), or a Medicaid health maintenance
1954 organization in an AHCA area. In an AHCA area where the Medicaid
1955 managed care pilot program is authorized pursuant to s.
1956 409.91211 in one or more counties, the agency may procure a
1957 contract with a single entity to serve the remaining counties as
1958 an AHCA area or the remaining counties may be included with an
1959 adjacent AHCA area and are subject to this paragraph. Each
1960 entity must offer a sufficient choice of providers in its
1961 network to ensure recipient access to care and the opportunity
1962 to select a provider with whom they are satisfied. The network
1963 shall include all public mental health hospitals. To ensure
1964 unimpaired access to behavioral health care services by Medicaid
1965 recipients, all contracts issued pursuant to this paragraph must
1966 require 80 percent of the capitation paid to the managed care
1967 plan, including health maintenance organizations and capitated
1968 provider service networks, to be expended for the provision of
1969 behavioral health care services. If the managed care plan
1970 expends less than 80 percent of the capitation paid for the
1971 provision of behavioral health care services, the difference
1972 shall be returned to the agency. The agency shall provide the

586-01925C-14

20147074__

1973 plan with a certification letter indicating the amount of
1974 capitation paid during each calendar year for behavioral health
1975 care services pursuant to this section. The agency may reimburse
1976 for substance abuse treatment services on a fee-for-service
1977 basis until the agency finds that adequate funds are available
1978 for capitated, prepaid arrangements.

1979 1. The agency shall modify the contracts with the entities
1980 providing comprehensive inpatient and outpatient mental health
1981 care services to Medicaid recipients in Hillsborough, Highlands,
1982 Hardee, Manatee, and Polk Counties, to include substance abuse
1983 treatment services.

1984 2. Except as provided in subparagraph 5., the agency and
1985 the Department of Children and Families ~~Family Services~~ shall
1986 contract with managed care entities in each AHCA area except
1987 area 6 or arrange to provide comprehensive inpatient and
1988 outpatient mental health and substance abuse services through
1989 capitated prepaid arrangements to all Medicaid recipients who
1990 are eligible to participate in such plans under federal law and
1991 regulation. In AHCA areas where eligible individuals number less
1992 than 150,000, the agency shall contract with a single managed
1993 care plan to provide comprehensive behavioral health services to
1994 all recipients who are not enrolled in a Medicaid health
1995 maintenance organization, a provider service network authorized
1996 under paragraph (d), or a Medicaid capitated managed care plan
1997 authorized under s. 409.91211. The agency may contract with more
1998 than one comprehensive behavioral health provider to provide
1999 care to recipients who are not enrolled in a Medicaid capitated
2000 managed care plan authorized under s. 409.91211, a provider
2001 service network authorized under paragraph (d), or a Medicaid

586-01925C-14

20147074__

2002 health maintenance organization in AHCA areas where the eligible
2003 population exceeds 150,000. In an AHCA area where the Medicaid
2004 managed care pilot program is authorized pursuant to s.

2005 409.91211 in one or more counties, the agency may procure a
2006 contract with a single entity to serve the remaining counties as
2007 an AHCA area or the remaining counties may be included with an
2008 adjacent AHCA area and shall be subject to this paragraph.

2009 Contracts for comprehensive behavioral health providers awarded
2010 pursuant to this section shall be competitively procured. Both
2011 for-profit and not-for-profit corporations are eligible to
2012 compete. Managed care plans contracting with the agency under
2013 subsection (3) or paragraph (d) shall provide and receive
2014 payment for the same comprehensive behavioral health benefits as
2015 provided in AHCA rules, including handbooks incorporated by
2016 reference. In AHCA area 11, the agency shall contract with at
2017 least two comprehensive behavioral health care providers to
2018 provide behavioral health care to recipients in that area who
2019 are enrolled in, or assigned to, the MediPass program. One of
2020 the behavioral health care contracts must be with the existing
2021 provider service network pilot project, as described in
2022 paragraph (d), for the purpose of demonstrating the cost-
2023 effectiveness of the provision of quality mental health services
2024 through a public hospital-operated managed care model. Payment
2025 shall be at an agreed-upon capitated rate to ensure cost
2026 savings. Of the recipients in area 11 who are assigned to
2027 MediPass under s. 409.9122(2)(k), a minimum of 50,000 of those
2028 MediPass-enrolled recipients shall be assigned to the existing
2029 provider service network in area 11 for their behavioral care.

2030 3. Children residing in a statewide inpatient psychiatric

586-01925C-14

20147074__

2031 program, or in a Department of Juvenile Justice or a Department
2032 of Children and Families ~~Family Services~~ residential program
2033 approved as a Medicaid behavioral health overlay services
2034 provider may not be included in a behavioral health care prepaid
2035 health plan or any other Medicaid managed care plan pursuant to
2036 this paragraph.

2037 4. Traditional community mental health providers under
2038 contract with the Department of Children and Families ~~Family~~
2039 ~~Services~~ pursuant to part IV of chapter 394, child welfare
2040 providers under contract with the Department of Children and
2041 Families ~~Family Services~~ in areas 1 and 6, and inpatient mental
2042 health providers licensed pursuant to chapter 395 must be
2043 offered an opportunity to accept or decline a contract to
2044 participate in any provider network for prepaid behavioral
2045 health services.

2046 5. All Medicaid-eligible children, except children in area
2047 1 and children in Highlands County, Hardee County, Polk County,
2048 or Manatee County of area 6, which ~~that~~ are open for child
2049 welfare services in the statewide automated child welfare
2050 information system, shall receive their behavioral health care
2051 services through a specialty prepaid plan operated by community-
2052 based lead agencies through a single agency or formal agreements
2053 among several agencies. The agency shall work with the specialty
2054 plan to develop clinically effective, evidence-based
2055 alternatives as a downward substitution for the statewide
2056 inpatient psychiatric program and similar residential care and
2057 institutional services. The specialty prepaid plan must result
2058 in savings to the state comparable to savings achieved in other
2059 Medicaid managed care and prepaid programs. Such plan must

586-01925C-14

20147074__

2060 provide mechanisms to maximize state and local revenues. The
2061 specialty prepaid plan shall be developed by the agency and the
2062 Department of Children and Families ~~Family Services~~. The agency
2063 may seek federal waivers to implement this initiative. Medicaid-
2064 eligible children whose cases are open for child welfare
2065 services in the statewide automated child welfare information
2066 system and who reside in AHCA area 10 shall be enrolled in a
2067 capitated provider service network or other capitated managed
2068 care plan, which, in coordination with available community-based
2069 care providers specified in s. 409.987 ~~s. 409.1671~~, shall
2070 provide sufficient medical, developmental, and behavioral health
2071 services to meet the needs of these children.

2072
2073 Effective July 1, 2012, in order to ensure continuity of care,
2074 the agency is authorized to extend or modify current contracts
2075 based on current service areas or on a regional basis, as
2076 determined appropriate by the agency, with comprehensive
2077 behavioral health care providers as described in this paragraph
2078 during the period prior to its expiration. This paragraph
2079 expires October 1, 2014.

2080 Section 29. Paragraph (dd) of subsection (3) of section
2081 409.91211, Florida Statutes, is amended to read:

2082 409.91211 Medicaid managed care pilot program.—

2083 (3) The agency shall have the following powers, duties, and
2084 responsibilities with respect to the pilot program:

2085 (dd) To implement service delivery mechanisms within a
2086 specialty plan in area 10 to provide behavioral health care
2087 services to Medicaid-eligible children whose cases are open for
2088 child welfare services in the HomeSafeNet system. These services

586-01925C-14

20147074__

2089 must be coordinated with community-based care providers as
2090 specified in s. 409.986 ~~s. 409.1671~~, where available, and be
2091 sufficient to meet the developmental, behavioral, and emotional
2092 needs of these children. Children in area 10 who have an open
2093 case in the HomeSafeNet system shall be enrolled into the
2094 specialty plan. These service delivery mechanisms must be
2095 implemented no later than July 1, 2011, in AHCA area 10 in order
2096 for the children in AHCA area 10 to remain exempt from the
2097 statewide plan under s. 409.912(4)(b)5. An administrative fee
2098 may be paid to the specialty plan for the coordination of
2099 services based on the receipt of the state share of that fee
2100 being provided through intergovernmental transfers.

2101 Section 30. Paragraph (d) of subsection (1) of section
2102 420.628, Florida Statutes, is amended to read:

2103 420.628 Affordable housing for children and young adults
2104 leaving foster care; legislative findings and intent.—

2105 (1)

2106 (d) The Legislature intends that the Florida Housing
2107 Finance Corporation, agencies within the State Housing
2108 Initiative Partnership Program, local housing finance agencies,
2109 public housing authorities, and their agents, and other
2110 providers of affordable housing coordinate with the Department
2111 of Children and Families ~~Family Services~~, their agents, and
2112 community-based care providers who provide services under s.
2113 409.986 ~~s. 409.1671~~ to develop and implement strategies and
2114 procedures designed to make affordable housing available
2115 whenever and wherever possible to young adults who leave the
2116 child welfare system.

2117 Section 31. This act shall take effect July 1, 2014.