

By Senator Bradley

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1                   A bill to be entitled  
2       An act relating to behavioral health services;  
3       creating s. 394.47892, F.S.; authorizing counties to  
4       fund treatment-based mental health court programs;  
5       providing legislative intent; providing that pretrial  
6       program participation is voluntary; specifying  
7       criteria that a court must consider before sentencing  
8       a person to a postadjudicatory treatment-based mental  
9       health court program; requiring a judge presiding over  
10      a postadjudicatory treatment-based mental health court  
11      program to hear a violation of probation or community  
12      control under certain circumstances; providing that  
13      treatment-based mental health court programs may  
14      include specified programs; requiring a judicial  
15      circuit with a treatment-based mental health court  
16      program to establish a coordinator position, subject  
17      to annual appropriation by the Legislature; providing  
18      county funding requirements for treatment-based mental  
19      health court programs; authorizing the chief judge of  
20      a judicial circuit to appoint an advisory committee  
21      for the treatment-based mental health court program;  
22      specifying membership of the committee; amending s.  
23      394.656, F.S.; revising the composition and duties of  
24      the Criminal Justice, Mental Health, and Substance  
25      Abuse Statewide Grant Review Committee within the  
26      Department of Children and Families; requiring the  
27      department to create a grant review and selection  
28      committee; prescribing duties of the committee;  
29      authorizing a designated not-for-profit community

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30 provider to apply for certain grants; amending s.  
31 394.9082, F.S.; requiring managing entities to  
32 establish a process for enrolling priority substance  
33 abuse and mental health populations into substance  
34 abuse and mental health services; requiring the  
35 department to establish enrollment criteria; defining  
36 the term "public receiving facility"; requiring the  
37 department to establish specified standards and  
38 protocols with respect to the administration of the  
39 crisis stabilization services utilization database;  
40 directing managing entities to require public  
41 receiving facilities to submit utilization data on a  
42 periodic basis; providing requirements for the data;  
43 requiring managing entities to periodically submit  
44 aggregate data to the department; requiring the  
45 department to adopt rules; requiring the department to  
46 annually submit a report to the Governor and the  
47 Legislature; prescribing report requirements;  
48 specifying that implementation of the database is  
49 contingent upon an appropriation; amending s. 409.906,  
50 F.S.; requiring the Agency for Health Care  
51 Administration to submit a federal waiver or Medicaid  
52 state plan amendment for the provision of health  
53 homes; specifying conditions for the health home  
54 program; amending ss. 29.004, 39.001, 39.507, and  
55 39.521, F.S.; conforming provisions to changes made by  
56 the act; requiring the agency to submit a planning  
57 grant application to the United States Department of  
58 Health and Human Services; providing an effective

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59 date.

60  
61 WHEREAS, Florida's residents with mental illnesses and  
62 substance abuse disorders are best able to recover and become  
63 productive citizens when served in their own communities and  
64 surrounded by family and natural support systems, and

65 WHEREAS, untreated mental illnesses and substance abuse  
66 disorders place a burden on the health care and public safety  
67 system, and

68 WHEREAS, research has demonstrated that the delivery of  
69 behavioral health services to treat mental illnesses and  
70 substance abuse disorders are cost-effective and efficient, and

71 WHEREAS, the Legislature intends to ensure greater access  
72 to behavioral health services by promoting the high quality,  
73 adequacy, and availability of these essential services, NOW,  
74 THEREFORE,

75  
76 Be It Enacted by the Legislature of the State of Florida:

77  
78 Section 1. Section 394.47892, Florida Statutes, is created  
79 to read:

80 394.47892 Treatment-based mental health court programs.—

81 (1) Each county may fund a treatment-based mental health  
82 court program under which persons in the justice system assessed  
83 with a mental illness will be processed in such a manner as to  
84 appropriately address the severity of the identified mental  
85 health problem through treatment services tailored to the  
86 individual needs of the participant. The Legislature intends to  
87 encourage the Department of Corrections, the Department of

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88 Children and Families, the Department of Juvenile Justice, the  
89 Department of Health, the Department of Law Enforcement, the  
90 Department of Education, and such agencies, local governments,  
91 law enforcement agencies, other interested public or private  
92 sources, and individuals to support the creation and  
93 establishment of these problem-solving court programs.  
94 Participation in the treatment-based mental health court  
95 programs does not divest any public or private agency of its  
96 responsibility for a child or adult, but enables these agencies  
97 to better meet their needs through shared responsibility and  
98 resources.

99 (2) Entry into any pretrial treatment-based mental health  
100 court program is voluntary.

101 (3) (a) Entry into any postadjudicatory treatment-based  
102 mental health court program as a condition of probation or  
103 community control pursuant to s. 948.01 or s. 948.06 must be  
104 based upon the sentencing court's assessment of the defendant's  
105 criminal history, mental health screening outcome, amenability  
106 to the services of the program, the recommendation of the state  
107 attorney and the victim, if any, and the defendant's agreement  
108 to enter the program.

109 (b) An offender who is sentenced to a postadjudicatory  
110 treatment-based mental health court program and who, while a  
111 mental health court program participant, is the subject of a  
112 violation of probation or community control under s. 948.06  
113 shall have the violation of probation or community control heard  
114 by the judge presiding over the postadjudicatory treatment-based  
115 mental health court program. The judge shall dispose of any such  
116 violation, after a hearing on or admission of the violation, as

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117 he or she deems appropriate if the resulting sentence or  
118 conditions are lawful.

119 (4) Treatment-based mental health court programs may  
120 include pretrial intervention programs as provided in s. 948.08,  
121 treatment-based mental health court programs authorized in  
122 chapter 39, postadjudicatory programs as provided in ss. 948.01  
123 and 948.06, and review of the status of compliance or  
124 noncompliance of sentenced offenders through a treatment-based  
125 mental health court program.

126 (5) Contingent upon an annual appropriation by the  
127 Legislature, each judicial circuit with a treatment-based mental  
128 health court program shall establish, at a minimum, one  
129 coordinator position for the treatment-based mental health court  
130 program within the state courts system to coordinate the  
131 responsibilities of the participating agencies and service  
132 providers. Each coordinator shall provide direct support to the  
133 treatment-based mental health court program by providing  
134 coordination between the multidisciplinary team and the  
135 judiciary, providing case management, monitoring compliance of  
136 the participants in the treatment-based mental health court  
137 program with court requirements, and providing program  
138 evaluation and accountability.

139 (6) If a county chooses to fund a treatment-based mental  
140 health court program, the county must secure funding from  
141 sources other than the state for those costs not otherwise  
142 assumed by the state pursuant to s. 29.004. However, this does  
143 not preclude a county from using treatment and other service  
144 funding provided through state executive branch agencies.  
145 Counties may provide, by interlocal agreement, for the

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146 collective funding of these programs.

147 (7) The chief judge of each judicial circuit may appoint an  
148 advisory committee for the treatment-based mental health court  
149 program. The committee shall be composed of the chief judge, or  
150 his or her designee, who shall serve as chair; the judge of the  
151 treatment-based mental health court program, if not otherwise  
152 designated by the chief judge as his or her designee; the state  
153 attorney, or his or her designee; the public defender, or his or  
154 her designee; the treatment-based mental health court program  
155 coordinators; community representatives; treatment  
156 representatives; and any other persons the chair finds are  
157 appropriate.

158 Section 2. Section 394.656, Florida Statutes, is amended to  
159 read:

160 394.656 Criminal Justice, Mental Health, and Substance  
161 Abuse Reinvestment Grant Program.—

162 (1) There is created within the Department of Children and  
163 Families the Criminal Justice, Mental Health, and Substance  
164 Abuse Reinvestment Grant Program. The purpose of the program is  
165 to provide funding to counties with which they can plan,  
166 implement, or expand initiatives that increase public safety,  
167 avert increased spending on criminal justice, and improve the  
168 accessibility and effectiveness of treatment services for adults  
169 and juveniles who have a mental illness, substance abuse  
170 disorder, or co-occurring mental health and substance abuse  
171 disorders and who are in, or at risk of entering, the criminal  
172 or juvenile justice systems.

173 (2) The department shall establish a Criminal Justice,  
174 Mental Health, and Substance Abuse Statewide Grant Review

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175 Committee. The committee shall include:

176 (a) One representative of the Department of Children and  
177 Families;

178 (b) One representative of the Department of Corrections;

179 (c) One representative of the Department of Juvenile  
180 Justice;

181 (d) One representative of the Department of Elderly  
182 Affairs; ~~and~~

183 (e) One representative of the Office of the State Courts  
184 Administrator;

185 (f) One representative of the Department of Veterans'  
186 Affairs;

187 (g) One representative of the Florida Sheriffs Association;

188 (h) One representative of the Florida Police Chiefs  
189 Association;

190 (i) One representative of the Florida Association of  
191 Counties;

192 (j) One representative of the Florida Alcohol and Drug  
193 Abuse Association; and

194 (k) One representative from the Florida Council for  
195 Community Mental Health.

196

197 The committee shall serve as the advisory body to review policy  
198 and funding issues that help reduce the impact of persons with  
199 mental illness and substance abuse disorders on communities and  
200 the court system. The committee shall advise the department in  
201 selecting priorities for applying and reviewing grants and  
202 investing awarded grant moneys.

203 (3) In addition to the committee established pursuant to

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204 subsection (2), the department shall create a grant review and  
205 selection committee. To the extent possible, the members of the  
206 grant review and selection committee shall have expertise in the  
207 content areas relating to grant applications, including, but not  
208 limited to, substance abuse and mental health disorders,  
209 community corrections, and law enforcement. In addition, members  
210 shall have experience in grant writing, grant reviewing, and  
211 grant application scoring.

212 (4) (a) ~~(3) (a)~~ A county, or a not-for-profit community  
213 provider designated by a local county planning council or  
214 committee described in s. 394.657, may apply for a ~~1-year~~  
215 ~~planning grant or a~~ 3-year implementation or expansion grant.  
216 The purpose of the grants is to demonstrate that investment in  
217 treatment efforts related to mental illness, substance abuse  
218 disorders, or co-occurring mental health and substance abuse  
219 disorders results in a reduced demand on the resources of the  
220 judicial, corrections, juvenile detention, and health and social  
221 services systems.

222 (b) To be eligible to receive a ~~1-year planning grant or a~~  
223 3-year implementation or expansion grant, a county applicant  
224 must have a county planning council or committee that is in  
225 compliance with the membership requirements set forth in this  
226 section.

227 (5) ~~(4)~~ The Criminal Justice, Mental Health, and Substance  
228 Abuse Statewide Grant Review Committee shall notify the  
229 Department of Children and Families in writing of the names of  
230 the applicants who have been selected by the committee to  
231 receive a grant. Contingent upon the availability of funds and  
232 upon notification by the ~~review~~ committee of those applicants



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233 approved to receive ~~planning~~, implementation, or expansion  
 234 grants, the Department of Children and Families may transfer  
 235 funds appropriated for the grant program to an approved  
 236 applicant ~~any county awarded a grant~~.

237 Section 3. Present paragraphs (b) through (g) of subsection  
 238 (7) of section 394.9082, Florida Statutes, are redesignated as  
 239 paragraphs (c) through (h), respectively, a new paragraph (b) is  
 240 added to that subsection, present paragraphs (c) and (d) of that  
 241 subsection are amended, present subsections (10) and (11) of  
 242 that section are redesignated as subsections (11) and (12),  
 243 respectively, and a new subsection (10) is added to that  
 244 section, to read:

245 394.9082 Behavioral health managing entities.—

246 (7) MANAGING ENTITY REQUIREMENTS.—The department may adopt  
 247 rules and standards and a process for the qualification and  
 248 operation of managing entities which are based, in part, on the  
 249 following criteria:

250 (b) A managing entity shall establish a process for the  
 251 enrollment of the state's priority substance abuse and mental  
 252 health populations into substance abuse and mental health  
 253 services. The department shall establish enrollment criteria to  
 254 be implemented by managing entities and their contracted service  
 255 providers. A client's enrollment establishes the client's  
 256 eligibility to receive services and the department's  
 257 participation in the cost of such services. A person seeking  
 258 services may not be denied services pending his or her  
 259 enrollment.

260 (d) ~~(e)~~ A managing entity must submit a network management  
 261 plan and budget in a form and manner determined by the

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262 department. The plan must detail the means for implementing the  
263 duties to be contracted to the managing entity and the  
264 efficiencies to be anticipated by the department as a result of  
265 executing the contract. The department may require modifications  
266 to the plan and must approve the plan before contracting with a  
267 managing entity. The department may contract with a managing  
268 entity that demonstrates readiness to assume core functions, and  
269 may continue to add functions and responsibilities to the  
270 managing entity's contract over time as additional competencies  
271 are developed as identified in paragraph (h) ~~(g)~~.

272 Notwithstanding other provisions of this section, the department  
273 may continue and expand managing entity contracts if the  
274 department determines that the managing entity meets the  
275 requirements specified in this section.

276 (e) ~~(d)~~ Notwithstanding paragraphs (c) ~~(b)~~ and (d) ~~(e)~~, a  
277 managing entity that is currently a fully integrated system  
278 providing mental health and substance abuse services, Medicaid,  
279 and child welfare services is permitted to continue operating  
280 under its current governance structure as long as the managing  
281 entity can demonstrate to the department that consumers, other  
282 stakeholders, and network providers are included in the planning  
283 process.

284 (10) CRISIS STABILIZATION SERVICES UTILIZATION DATABASE.—  
285 The department shall develop, implement, and maintain standards  
286 under which a managing entity shall collect utilization data  
287 from all public receiving facilities situated within its  
288 geographic service area. As used in this subsection, the term  
289 "public receiving facility" means an entity that meets the  
290 licensure requirements of and is designated by the department to

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291 operate as a public receiving facility under s. 394.875 and that  
292 is operating as a licensed crisis stabilization unit.

293 (a) The department shall develop standards and protocols  
294 for managing entities and public receiving facilities to use in  
295 the collection, storage, transmittal, and analysis of data. The  
296 standards and protocols must allow for compatibility of data and  
297 data transmittal between public receiving facilities, managing  
298 entities, and the department for the implementation and  
299 requirements of this subsection. The department shall require  
300 managing entities contracted under this section to comply with  
301 this subsection by August 1, 2015.

302 (b) A managing entity shall require a public receiving  
303 facility within its provider network to submit data to the  
304 managing entity, in real time or at least daily, for:

305 1. All admissions and discharges of clients receiving  
306 public receiving facility services who qualify as indigent, as  
307 defined in s. 394.4787; and

308 2. Current active census of total licensed beds, the number  
309 of beds purchased by the department, the number of clients  
310 qualifying as indigent occupying those beds, and the total  
311 number of unoccupied licensed beds regardless of funding.

312 (c) A managing entity shall require a public receiving  
313 facility within its provider network to submit data, on a  
314 monthly basis, to the managing entity which aggregates the daily  
315 data submitted under paragraph (b). The managing entity shall  
316 reconcile the data in the monthly submission to the data  
317 received by the managing entity under paragraph (b) to check for  
318 consistency. If the monthly aggregate data submitted by a public  
319 receiving facility under this paragraph is inconsistent with the

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320 daily data submitted under paragraph (b), the managing entity  
321 shall consult with the public receiving facility to make  
322 corrections as necessary to ensure accurate data.

323 (d) A managing entity shall require a public receiving  
324 facility within its provider network to submit data, on an  
325 annual basis, to the managing entity which aggregates the data  
326 submitted and reconciled under paragraph (c). The managing  
327 entity shall reconcile the data in the annual submission to the  
328 data received and reconciled by the managing entity under  
329 paragraph (c) to check for consistency. If the annual aggregate  
330 data submitted by a public receiving facility under this  
331 paragraph is inconsistent with the data received and reconciled  
332 under paragraph (c), the managing entity shall consult with the  
333 public receiving facility to make corrections as necessary to  
334 ensure accurate data.

335 (e) After ensuring accurate data under paragraphs (c) and  
336 (d), the managing entity shall submit the data to the department  
337 on a monthly and an annual basis. The department shall create a  
338 statewide database for the data described under paragraph (b)  
339 and submitted under this paragraph for the purpose of analyzing  
340 the payments for and the use of crisis stabilization services  
341 funded under the Baker Act on a statewide basis and on an  
342 individual public receiving facility basis.

343 (f) The department shall adopt rules to administer this  
344 subsection.

345 (g) The department shall submit a report by January 31,  
346 2016, and annually thereafter, to the Governor, the President of  
347 the Senate, and the Speaker of the House of Representatives  
348 which provides details on the implementation of this subsection,

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349 including the status of the data collection process and a  
350 detailed analysis of the data collected under this subsection.

351 (h) The implementation of this subsection is subject to  
352 specific appropriations provided to the department under the  
353 General Appropriations Act.

354 Section 4. Paragraph (c) is added to subsection (8) of  
355 section 409.906, Florida Statutes, to read:

356 409.906 Optional Medicaid services.—Subject to specific  
357 appropriations, the agency may make payments for services which  
358 are optional to the state under Title XIX of the Social Security  
359 Act and are furnished by Medicaid providers to recipients who  
360 are determined to be eligible on the dates on which the services  
361 were provided. Any optional service that is provided shall be  
362 provided only when medically necessary and in accordance with  
363 state and federal law. Optional services rendered by providers  
364 in mobile units to Medicaid recipients may be restricted or  
365 prohibited by the agency. Nothing in this section shall be  
366 construed to prevent or limit the agency from adjusting fees,  
367 reimbursement rates, lengths of stay, number of visits, or  
368 number of services, or making any other adjustments necessary to  
369 comply with the availability of moneys and any limitations or  
370 directions provided for in the General Appropriations Act or  
371 chapter 216. If necessary to safeguard the state's systems of  
372 providing services to elderly and disabled persons and subject  
373 to the notice and review provisions of s. 216.177, the Governor  
374 may direct the Agency for Health Care Administration to amend  
375 the Medicaid state plan to delete the optional Medicaid service  
376 known as "Intermediate Care Facilities for the Developmentally  
377 Disabled." Optional services may include:

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378 (8) COMMUNITY MENTAL HEALTH SERVICES.—

379 (c) The agency shall submit a federal waiver or a Medicaid  
380 state plan amendment for the provision of health homes for  
381 individuals with chronic conditions, including those with severe  
382 mental illnesses or substance use disorders, as authorized under  
383 42 U.S.C. s. 1396w-4. The waiver or plan amendment shall allow  
384 for a health home services provider to be reimbursed for the  
385 delivery of primary care services and other core services. The  
386 agency shall direct managed care plans to incorporate providers  
387 with health homes into their network and to reimburse the health  
388 home services providers for any services delivered.

389 1. To be eligible for inclusion in a health home program, a  
390 Medicaid beneficiary must have at least two chronic health  
391 conditions, must have one chronic health condition and is at  
392 risk of having a second chronic health condition, or must have  
393 one serious and persistent mental health condition.

394 2. A health home must meet standards developed by the Joint  
395 Commission or the Commission on Accreditation of Rehabilitation  
396 Facilities and be a behavioral health organization that provides  
397 screening, evaluation, crisis intervention, medication  
398 management, psychosocial treatment and rehabilitation, care  
399 management, and community integration and support services  
400 designed to assist individuals in addressing their behavioral  
401 health care needs. In addition, a health home must:

402 a. Embody a recovery-focused model of care which respects  
403 and promotes independence and recovery.

404 b. Promote healthy lifestyles and provide prevention and  
405 education services that focus on wellness and self-care.

406 c. Ensure access to and coordinate care across prevention,

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407 primary care, and specialty health care services.

408 d. Monitor critical health indicators.

409 e. Support individuals in the self-management of chronic  
410 health conditions.

411 f. Coordinate and monitor emergency room visits and  
412 hospitalizations, including participation in transition and  
413 discharge planning and followup.

414 Section 5. Paragraph (e) is added to subsection (10) of  
415 section 29.004, Florida Statutes, to read:

416 29.004 State courts system.—For purposes of implementing s.  
417 14, Art. V of the State Constitution, the elements of the state  
418 courts system to be provided from state revenues appropriated by  
419 general law are as follows:

420 (10) Case management. Case management includes:

421 (e) Service referral, coordination, monitoring, and  
422 tracking for treatment-based mental health court programs under  
423 s. 394.47892.

424  
425 Case management may not include costs associated with the  
426 application of therapeutic jurisprudence principles by the  
427 courts. Case management also may not include case intake and  
428 records management conducted by the clerk of court.

429 Section 6. Subsection (6) of section 39.001, Florida  
430 Statutes, is amended to read:

431 39.001 Purposes and intent; personnel standards and  
432 screening.—

433 (6) MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES.—

434 (a) The Legislature recognizes that early referral and  
435 comprehensive treatment can help combat mental illnesses and

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436 substance abuse disorders in families and that treatment is  
437 cost-effective.

438 (b) The Legislature establishes the following goals for the  
439 state related to mental illness and substance abuse treatment  
440 services in the dependency process:

441 1. To ensure the safety of children.

442 2. To prevent and remediate the consequences of mental  
443 illnesses and substance abuse disorders on families involved in  
444 protective supervision or foster care and reduce the occurrences  
445 of mental illnesses and substance abuse disorders, including  
446 alcohol abuse or related disorders, for families who are at risk  
447 of being involved in protective supervision or foster care.

448 3. To expedite permanency for children and reunify healthy,  
449 intact families, when appropriate.

450 4. To support families in recovery.

451 (c) The Legislature finds that children in the care of the  
452 state's dependency system need appropriate health care services,  
453 that the impact of mental illnesses and substance abuse  
454 disorders on health indicates the need for health care services  
455 to include treatment for mental health and substance abuse  
456 disorders ~~services~~ to children and parents where appropriate,  
457 and that it is in the state's best interest that such children  
458 be provided the services they need to enable them to become and  
459 remain independent of state care. In order to provide these  
460 services, the state's dependency system must have the ability to  
461 identify and provide appropriate intervention and treatment for  
462 children with personal or family-related mental illness and  
463 substance abuse problems.

464 (d) It is the intent of the Legislature to encourage the



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465 use of the treatment-based mental health court program model  
466 established by s. 394.47892 and drug court program model  
467 established by s. 397.334 and authorize courts to assess  
468 children and persons who have custody or are requesting custody  
469 of children where good cause is shown to identify and address  
470 mental illnesses and substance abuse disorders ~~problems~~ as the  
471 court deems appropriate at every stage of the dependency  
472 process. Participation in treatment, including a treatment-based  
473 mental health court program or a treatment-based drug court  
474 program, may be required by the court following adjudication.  
475 Participation in assessment and treatment before ~~prior to~~  
476 adjudication is ~~shall be~~ voluntary, except as provided in s.  
477 39.407(16).

478 (e) It is therefore the purpose of the Legislature to  
479 provide authority for the state to contract with mental health  
480 service providers and community substance abuse treatment  
481 providers for the development and operation of specialized  
482 support and overlay services for the dependency system, which  
483 will be fully implemented and used as resources permit.

484 (f) Participation in a treatment-based mental health court  
485 program or a ~~the~~ treatment-based drug court program does not  
486 divest any public or private agency of its responsibility for a  
487 child or adult, but is intended to enable these agencies to  
488 better meet their needs through shared responsibility and  
489 resources.

490 Section 7. Subsection (10) of section 39.507, Florida  
491 Statutes, is amended to read:

492 39.507 Adjudicatory hearings; orders of adjudication.—

493 (10) After an adjudication of dependency, or a finding of

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494 dependency where adjudication is withheld, the court may order a  
495 person who has custody or is requesting custody of the child to  
496 submit to a mental health or substance abuse disorder assessment  
497 or evaluation. The assessment or evaluation must be administered  
498 by a qualified professional, as defined in s. 397.311. The court  
499 may also require such person to participate in and comply with  
500 treatment and services identified as necessary, including, when  
501 appropriate and available, participation in and compliance with  
502 a treatment-based mental health court program established under  
503 s. 394.47892 or a treatment-based drug court program established  
504 under s. 397.334. In addition to supervision by the department,  
505 the court, including the treatment-based mental health court  
506 program or treatment-based drug court program, may oversee the  
507 progress and compliance with treatment by a person who has  
508 custody or is requesting custody of the child. The court may  
509 impose appropriate available sanctions for noncompliance upon a  
510 person who has custody or is requesting custody of the child or  
511 make a finding of noncompliance for consideration in determining  
512 whether an alternative placement of the child is in the child's  
513 best interests. Any order entered under this subsection may be  
514 made only upon good cause shown. This subsection does not  
515 authorize placement of a child with a person seeking custody,  
516 other than the parent or legal custodian, who requires mental  
517 health or substance abuse disorder treatment.

518 Section 8. Paragraph (b) of subsection (1) of section  
519 39.521, Florida Statutes, is amended to read:

520 39.521 Disposition hearings; powers of disposition.—

521 (1) A disposition hearing shall be conducted by the court,  
522 if the court finds that the facts alleged in the petition for

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523 dependency were proven in the adjudicatory hearing, or if the  
524 parents or legal custodians have consented to the finding of  
525 dependency or admitted the allegations in the petition, have  
526 failed to appear for the arraignment hearing after proper  
527 notice, or have not been located despite a diligent search  
528 having been conducted.

529 (b) When any child is adjudicated by a court to be  
530 dependent, the court having jurisdiction of the child has the  
531 power by order to:

532 1. Require the parent and, when appropriate, the legal  
533 custodian and the child to participate in treatment and services  
534 identified as necessary. The court may require the person who  
535 has custody or who is requesting custody of the child to submit  
536 to a mental health or substance abuse disorder assessment or  
537 evaluation. The assessment or evaluation must be administered by  
538 a qualified professional, as defined in s. 397.311. The court  
539 may also require such person to participate in and comply with  
540 treatment and services identified as necessary, including, when  
541 appropriate and available, participation in and compliance with  
542 a treatment-based mental health court program established under  
543 s. 394.47892 or treatment-based drug court program established  
544 under s. 397.334. In addition to supervision by the department,  
545 the court, including the treatment-based mental health court  
546 program or treatment-based drug court program, may oversee the  
547 progress and compliance with treatment by a person who has  
548 custody or is requesting custody of the child. The court may  
549 impose appropriate available sanctions for noncompliance upon a  
550 person who has custody or is requesting custody of the child or  
551 make a finding of noncompliance for consideration in determining

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552 whether an alternative placement of the child is in the child's  
553 best interests. Any order entered under this subparagraph may be  
554 made only upon good cause shown. This subparagraph does not  
555 authorize placement of a child with a person seeking custody of  
556 the child, other than the child's parent or legal custodian, who  
557 requires mental health or substance abuse disorder treatment.

558 2. Require, if the court deems necessary, the parties to  
559 participate in dependency mediation.

560 3. Require placement of the child either under the  
561 protective supervision of an authorized agent of the department  
562 in the home of one or both of the child's parents or in the home  
563 of a relative of the child or another adult approved by the  
564 court, or in the custody of the department. Protective  
565 supervision continues until the court terminates it or until the  
566 child reaches the age of 18, whichever date is first. Protective  
567 supervision shall be terminated by the court whenever the court  
568 determines that permanency has been achieved for the child,  
569 whether with a parent, another relative, or a legal custodian,  
570 and that protective supervision is no longer needed. The  
571 termination of supervision may be with or without retaining  
572 jurisdiction, at the court's discretion, and shall in either  
573 case be considered a permanency option for the child. The order  
574 terminating supervision by the department shall set forth the  
575 powers of the custodian of the child and shall include the  
576 powers ordinarily granted to a guardian of the person of a minor  
577 unless otherwise specified. Upon the court's termination of  
578 supervision by the department, no further judicial reviews are  
579 required, so long as permanency has been established for the  
580 child.

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581           Section 9. The Agency for Health Care Administration shall  
582 apply to the United States Department of Health and Human  
583 Services for a planning grant and any other subsequent grant  
584 programs that become available through s. 203 of the federal  
585 Protecting Access to Medicare Act of 2014, Pub. L. No. 113-93,  
586 and that create opportunity to improve access to community  
587 mental health services while improving Medicaid reimbursement  
588 rates for such services. The agency shall collaborate with the  
589 Department of Children and Families in preparing the state's  
590 application for submission.

591           Section 10. This act shall take effect July 1, 2015.