



469062

576-02100-16

Proposed Committee Substitute by the Committee on Appropriations
(Appropriations Subcommittee on Health and Human Services)

A bill to be entitled

An act relating to prenatal services and early
childhood development; amending s. 383.141, F.S.;
revising the requirements for the Department of Health
to maintain a clearinghouse of information for parents
and health care providers and to increase public
awareness on developmental evaluation and early
intervention programs; requiring the clearinghouse to
use a specified term; revising the information to be
included in the clearinghouse; amending s. 391.025,
F.S.; renaming the "Infants and Toddlers Early
Intervention Program" as the "Early Steps Program";
revising the components of the Children's Medical
Services program; amending s. 391.026, F.S.; requiring
the department to serve as the lead agency in
administering the Early Steps Program; amending s.
391.301, F.S.; establishing the Early Steps Program
within the department; deleting provisions relating to
legislative findings; authorizing the program to
include certain screening and referral services for
specified purposes; providing requirements and
responsibilities for the program; amending s. 391.302,
F.S.; defining terms; revising the definitions of
certain terms; and deleting outdated terms; amending
s. 391.308, F.S.; renaming the "Infants and Toddlers
Early Intervention Program" as the "Early Steps
Program"; requiring, rather than authorizing, the



469062

576-02100-16

28 department to implement and administer the program;
29 requiring the department to ensure that the program
30 follows specified performance standards; providing
31 requirements of the program to meet such performance
32 standards; revising the duties of the department;
33 requiring the department to apply specified
34 eligibility criteria for the program based on an
35 appropriation of funds; providing duties for local
36 program offices; requiring the development of an
37 individualized family support plan for each child
38 served in the program; requiring referral for services
39 by a local program office under certain circumstances;
40 requiring the local program office to negotiate and
41 maintain agreements with specified providers and
42 managed care organizations; requiring the local
43 program office to coordinate with managed care
44 organizations; requiring the department to submit an
45 annual report, subject to certain requirements, to the
46 Governor, the Legislature, and the Florida Interagency
47 Coordinating Council for Infants and Toddlers by a
48 specified date; designating the Florida Interagency
49 Coordinating Council for Infants and Toddlers as the
50 state interagency coordinating council required by
51 federal rule subject to certain requirements;
52 providing requirements for the local program office
53 and local school district to prepare certain children
54 for the transition to school under certain
55 circumstances; amending ss. 413.092 and 1003.575,
56 F.S.; conforming provisions to changes made by the



469062

576-02100-16

57 act; repealing ss. 391.303, 391.304, 391.305, 391.306,
58 and 391.307, F.S., relating to requirements for the
59 Children's Medical Services program, program
60 coordination, program standards, program funding and
61 contracts, and program review, respectively; providing
62 an effective date.

63

64 Be It Enacted by the Legislature of the State of Florida:

65

66 Section 1. Subsections (2) and (3) of section 383.141,
67 Florida Statutes, are amended, and subsection (4) is added to
68 that section, to read:

69 383.141 Prenatally diagnosed conditions; patient to be
70 provided information; definitions; information clearinghouse;
71 advisory council.—

72 (2) When a developmental disability is diagnosed based on
73 the results of a prenatal test, the health care provider who
74 ordered the prenatal test, or his or her designee, shall provide
75 the patient with current information about the nature of the
76 developmental disability, the accuracy of the prenatal test, and
77 resources for obtaining relevant support services, including
78 hotlines, resource centers, and information clearinghouses
79 related to Down syndrome or other prenatally diagnosed
80 developmental disabilities; support programs for parents and
81 families; and developmental evaluation and intervention services
82 under this part ~~s. 391.303~~.

83 (3) The Department of Health shall develop and implement a
84 comprehensive information clearinghouse to educate health care
85 providers, inform parents, and increase public awareness



469062

576-02100-16

86 regarding brain development, developmental disabilities and
87 delays, and all services, resources, and interventions available
88 to mitigate the effects of impaired development among children.
89 The clearinghouse must use the term "unique abilities" as much
90 as possible when identifying infants or children with
91 developmental disabilities and delays. The clearinghouse must
92 provide:

93 (a) Health information on conditions that may lead to
94 impaired development of physical, learning, language, or
95 behavioral skills.

96 (b) Education and information to support parents whose
97 unborn children have been prenatally diagnosed with
98 developmental disabilities or whose children have diagnosed or
99 suspected developmental delays.

100 (c) Education and training for health care providers to
101 recognize and respond appropriately to developmental
102 disabilities, delays, and conditions related to disabilities or
103 delays. Specific information approved by the advisory council
104 shall be made available to health care providers for use in
105 counseling parents whose unborn children have been prenatally
106 diagnosed with developmental disabilities or whose children have
107 diagnosed or suspected developmental delays.

108 (d) Promotion of public awareness of availability of
109 supportive services, such as resource centers, educational
110 programs, other support programs for parents and families, and
111 developmental evaluation and intervention services.

112 (e) Hotlines specific to Down syndrome and other prenatally
113 diagnosed developmental disabilities. The hotlines and the
114 department's clearinghouse must provide information to parents



469062

576-02100-16

115 and families or other caregivers regarding the Early Steps
116 Program under s. 391.301, the Florida Diagnostic Learning and
117 Resource System, the Early Learning program, Healthy Start, Help
118 Me Grow, and any other intervention programs. Information
119 offered must include directions on how to obtain early
120 intervention, rehabilitative, and habilitative services and
121 devices establish on its Internet website a clearinghouse of
122 information related to developmental disabilities concerning
123 providers of supportive services, information hotlines specific
124 to Down syndrome and other prenatally diagnosed developmental
125 disabilities, resource centers, educational programs, other
126 support programs for parents and families, and developmental
127 evaluation and intervention services under s. 391.303. Such
128 information shall be made available to health care providers for
129 use in counseling pregnant women whose unborn children have been
130 prenatally diagnosed with developmental disabilities.

131 (4) (a) There is established an advisory council within the
132 Department of Health which consists of health care providers and
133 caregivers who perform health care services for persons who have
134 developmental disabilities, including Down syndrome and autism.
135 This group shall consist of nine members as follows:

- 136 1. Three members appointed by the Governor;
137 2. Three members appointed by the President of the Senate;
138 and

139 3. Three members appointed by the Speaker of the House of
140 Representatives.

141 (b) The advisory council shall provide technical assistance
142 to the Department of Health in the establishment of the
143 information clearinghouse and give the department the benefit of



469062

576-02100-16

144 the council members' knowledge and experience relating to the
145 needs of patients and families of patients with developmental
146 disabilities and available support services.

147 (c) Members of the council shall elect a chairperson and a
148 vice chairperson. The elected chairperson and vice chairperson
149 shall serve in these roles until their terms of appointment on
150 the council expire.

151 (d) The advisory council shall meet quarterly to review
152 this clearinghouse of information, and may meet more often at
153 the call of the chairperson or as determined by a majority of
154 members.

155 (e) The council members shall be appointed to 4-year terms,
156 except that, to provide for staggered terms, one initial
157 appointee each from the Governor, the President of the Senate,
158 and the Speaker of the House of Representatives shall be
159 appointed to a 2-year term, one appointee each from these
160 officials shall be appointed to a 3-year term, and the remaining
161 initial appointees shall be appointed to 4-year terms. All
162 subsequent appointments shall be for 4-year terms. A vacancy
163 shall be filled for the remainder of the unexpired term in the
164 same manner as the original appointment.

165 (f) Members of the council shall serve without
166 compensation. Meetings of the council may be held in person,
167 without reimbursement for travel expenses, or by teleconference
168 or other electronic means.

169 (g) The Department of Health shall provide administrative
170 support for the advisory council.

171 Section 2. Paragraph (c) of subsection (1) of section
172 391.025, Florida Statutes, is amended to read:



469062

576-02100-16

173 391.025 Applicability and scope.—

174 (1) The Children's Medical Services program consists of the
175 following components:

176 (c) The developmental evaluation and intervention program,
177 including the Early Steps Florida Infants and Toddlers Early
178 Intervention Program.

179 Section 3. Subsection (19) is added to section 391.026,
180 Florida Statutes, to read:

181 391.026 Powers and duties of the department.—The department
182 shall have the following powers, duties, and responsibilities:

183 (19) To serve as the lead agency in administering the Early
184 Steps Program pursuant to part C of the federal Individuals with
185 Disabilities Education Act and part III of this chapter.

186 Section 4. Section 391.301, Florida Statutes, is amended to
187 read:

188 391.301 Early Steps Program; establishment and goals
189 Developmental evaluation and intervention programs; legislative
190 findings and intent.—

191 (1) The Early Steps Program is established within the
192 department to serve infants and toddlers who are at risk of
193 developmental disabilities based on a physical or mental
194 condition and infants and toddlers with developmental delays by
195 providing developmental evaluation and early intervention and by
196 providing families with training and support services in a
197 variety of home and community settings in order to enhance
198 family and caregiver competence, confidence, and capacity to
199 meet their child's developmental needs and desired outcomes. The
200 Legislature finds that the high-risk and disabled newborn
201 infants in this state need in-hospital and outpatient



469062

576-02100-16

202 ~~developmental evaluation and intervention and that their~~
203 ~~families need training and support services. The Legislature~~
204 ~~further finds that there is an identifiable and increasing~~
205 ~~number of infants who need developmental evaluation and~~
206 ~~intervention and family support due to the fact that increased~~
207 ~~numbers of low-birthweight and sick full-term newborn infants~~
208 ~~are now surviving because of the advances in neonatal intensive~~
209 ~~care medicine; increased numbers of medically involved infants~~
210 ~~are remaining inappropriately in hospitals because their parents~~
211 ~~lack the confidence or skills to care for these infants without~~
212 ~~support; and increased numbers of infants are at risk due to~~
213 ~~parent risk factors, such as substance abuse, teenage pregnancy,~~
214 ~~and other high-risk conditions.~~

215 (2) The program may include screening and referral ~~It is~~
216 ~~the intent of the Legislature to establish developmental~~
217 ~~evaluation and intervention services at all hospitals providing~~
218 ~~Level II or Level III neonatal intensive care services, in order~~
219 ~~to promptly identify newborns with disabilities or with~~
220 ~~conditions associated with risks of developmental delays so that~~
221 ~~families with high-risk or disabled infants may gain as early as~~
222 ~~possible the services and skills they need to support their~~
223 ~~infants' development~~ infants.

224 (3) The program must ~~It is the intent of the Legislature~~
225 ~~that a methodology be developed to integrate information and~~
226 ~~coordinate services on infants with potentially disabling~~
227 ~~conditions with other programs serving infants and toddlers~~
228 ~~early intervention programs, including, but not limited to, Part~~
229 ~~C of Pub. L. No. 105-17 and the Healthy Start program, the~~
230 ~~newborn screening program, and the Blind Babies Program.~~



469062

576-02100-16

- 231 (4) The program must:
- 232 (a) Provide services to enhance the development of infants
233 and toddlers with disabilities and delays.
- 234 (b) Expand the recognition by health care providers,
235 families, and the public of the significant brain development
236 that occurs during a child's first 3 years of life.
- 237 (c) Maintain the importance of the family in all areas of
238 the child's development and support the family's participation
239 in early intervention services and decisions affecting the
240 child.
- 241 (d) Operate a comprehensive, coordinated interagency system
242 of early intervention services and supports in accordance with
243 part C of the federal Individuals with Disabilities Education
244 Act.
- 245 (e) Ensure timely evaluation, individual planning, and
246 early intervention services necessary to meet the unique needs
247 of eligible infants and toddlers.
- 248 (f) Build the service capacity and enhance the competencies
249 of health care providers serving infants and toddlers with
250 unique needs and abilities.
- 251 (g) Ensure programmatic and fiscal accountability through
252 establishment of a high-capacity data system, active monitoring
253 of performance indicators, and ongoing quality improvement.
- 254 Section 5. Section 391.302, Florida Statutes, is amended to
255 read:
- 256 391.302 Definitions.—As used in ss. 391.301-391.308 ~~ss.~~
257 ~~391.301-391.307~~, the term:
- 258 (1) "Developmental delay" means a condition, identified and
259 measured through appropriate instruments and procedures, which



469062

576-02100-16

260 may delay physical, cognitive, communication, social/emotional,
261 or adaptive development.

262 (2) "Developmental disability" means a condition,
263 identified and measured through appropriate instruments and
264 procedures, which may impair physical, cognitive, communication,
265 social/emotional, or adaptive development.

266 (3) "Developmental intervention" or "early intervention"
267 means individual and group individualized therapies and services
268 needed to enhance both the infant's or toddler's growth and
269 development and family functioning. The term includes
270 habilitative services and assistive technology devices,
271 rehabilitative services and assistive technology devices, and
272 parent support and training.

273 (4) "Habilitative services and devices" means health care
274 services and assistive technology devices that help a child
275 maintain, learn, or improve skills and functioning for daily
276 living.

277 (5) ~~(2)~~ "Infant or toddler" or "child" means a child from
278 birth until the child's third birthday.

279 ~~(3) "In-hospital intervention services" means the provision~~
280 ~~of assessments; the provision of individualized services;~~
281 ~~monitoring and modifying the delivery of medical interventions;~~
282 ~~and enhancing the environment for the high-risk, developmentally~~
283 ~~disabled, or medically involved infant or toddler in order to~~
284 ~~achieve optimum growth and development.~~

285 (7) "Local program office" means an office that administers
286 the Early Steps Program within a municipality, county, or
287 region.

288 ~~(4) "Parent support and training" means a range of services~~



469062

576-02100-16

289 ~~to families of high risk, developmentally disabled, or medically~~
290 ~~involved infants or toddlers, including family counseling,~~
291 ~~financial planning; agency referral; development of parent to~~
292 ~~parent support groups; education concerning growth, development,~~
293 ~~and developmental intervention and objective measurable skills,~~
294 ~~including abuse avoidance skills; training of parents to~~
295 ~~advocate for their child; and bereavement counseling.~~

296 (9) "Rehabilitative services and devices" means restorative
297 and remedial services that maintain or enhance the current level
298 of functioning of a child if there is a possibility of
299 improvement or reversal of impairment.

300 Section 6. Section 391.308, Florida Statutes, is amended to
301 read:

302 391.308 Early Steps ~~Infants and Toddlers Early Intervention~~
303 ~~Program.~~—The department shall ~~Department of Health may~~ implement
304 and administer part C of the federal Individuals with
305 Disabilities Education Act (IDEA), which shall be known as the
306 "Early Steps ~~"Florida Infants and Toddlers Early Intervention~~
307 Program."

308 (1) PERFORMANCE STANDARDS.—The department shall ensure that
309 the Early Steps Program complies with the following performance
310 standards:

311 (a) The program must provide services from referral through
312 transition in a family-centered manner that recognizes and
313 responds to unique circumstances and needs of infants and
314 toddlers and their families as measured by a variety of
315 qualitative data, including satisfaction surveys, interviews,
316 focus groups, and input from stakeholders.

317 (b) The program must provide individualized family support



469062

576-02100-16

318 plans that are understandable and usable by families, health
319 care providers, and payers and that identify the current level
320 of functioning of the infant or toddler, family supports and
321 resources, expected outcomes, and specific early intervention
322 services needed to achieve the expected outcomes, as measured by
323 periodic system independent evaluation.

324 (c) The program must help each family to use available
325 resources in a way that maximizes the child's access to services
326 necessary to achieve the outcomes of the individualized family
327 support plan, as measured by family feedback and by independent
328 assessments of services used by each child.

329 (d) The program must offer families access to quality
330 services that effectively enable infants and toddlers with
331 developmental disabilities and developmental delays to achieve
332 optimal functional levels as measured by an independent
333 evaluation of outcome indicators in social emotional skills,
334 communication, and adaptive behaviors.

335 (2) DUTIES OF THE DEPARTMENT.—The department, shall:

336 (a) Jointly with the Department of Education, shall
337 Annually prepare a grant application to the United States
338 Department of Education for funding early intervention services
339 for infants and toddlers with disabilities, from birth through
340 36 months of age, and their families pursuant to part C of the
341 federal Individuals with Disabilities Education Act.

342 (b) ~~(2)~~ The department, Jointly with the Department of
343 Education, provide shall include a reading initiative as an
344 early intervention service for infants and toddlers.

345 (c) Annually develop a state plan for the Early Steps
346 Program.



469062

576-02100-16

347 1. The plan must assess the need for early intervention
348 services, evaluate the extent of the statewide need that is met
349 by the program, identify barriers to fully meeting the need, and
350 recommend specific action steps to improve program performance.

351 2. The plan must be developed through an inclusive process
352 that involves families, local program offices, health care
353 providers, and other stakeholders.

354 (d) Ensure local program offices educate hospitals that
355 provide Level II and Level III neonatal intensive care services
356 about the Early Steps Program and the referral process for the
357 provision of developmental evaluation and intervention services.

358 (e) Establish standards and qualifications for
359 developmental evaluation and early intervention service
360 providers, including standards for determining the adequacy of
361 provider networks in each local program office service area.

362 (f) Establish statewide uniform protocols and procedures to
363 determine eligibility for developmental evaluation and early
364 intervention services.

365 (g) Establish a consistent, statewide format and procedure
366 for preparing and completing an individualized family support
367 plan.

368 (h) Promote interagency cooperation and coordination, with
369 the Medicaid program, the Department of Education program
370 pursuant to part B of the federal Individuals with Disabilities
371 Education Act, and programs providing child screening such as
372 the Florida Diagnostic Learning and Resource System, the Office
373 of Early Learning, Healthy Start, and Help Me Grow program.

374 1. Coordination with the Medicaid program shall be
375 developed and maintained through written agreements with the



469062

576-02100-16

376 Agency for Health Care Administration and Medicaid managed care
377 organizations as well as through active and ongoing
378 communication with these organizations. The department shall
379 assist local program offices to negotiate agreements with
380 Medicaid managed care organizations in the service areas of the
381 local program offices. Such agreements may be formal or
382 informal.

383 2. Coordination with education programs pursuant to part B
384 of the federal Individuals with Disabilities Education Act shall
385 be developed and maintained through written agreements with the
386 Department of Education. The department shall assist local
387 program offices to negotiate agreements with school districts in
388 the service areas of the local program offices.

389 (i) Develop and disseminate the knowledge and methods
390 necessary to effectively coordinate benefits among various payer
391 types.

392 (j) Provide a mediation process and if necessary, an
393 appeals process under chapter 120 for applicants found
394 ineligible for developmental evaluation or early intervention
395 services or denied financial support for such services.

396 (k) Competitively procure local program offices to provide
397 services throughout the state in accordance with chapter 287.
398 The department shall specify the requirements and qualifications
399 for local program offices in the procurement document.

400 (l) Establish performance standards and other metrics for
401 evaluation of local program offices, including standards for
402 measuring timeliness of services, outcomes of early intervention
403 services, and administrative efficiency. Performance standards
404 and metrics shall be developed in consultation with local



469062

576-02100-16

405 program offices.

406 (m) Provide technical assistance to the local program
407 offices.

408 (3) ELIGIBILITY.—The department shall apply the following
409 eligibility criteria if specific funding is provided in the
410 General Appropriations Act.

411 (a) Infants and toddlers are eligible for an evaluation to
412 determine the presence of a developmental disability or risk of
413 a developmental delay based on a physical or medical condition.

414 (b) Infants and toddlers determined to have a developmental
415 delay based on a standardized evaluation instrument that results
416 in a score that is 1.5 standard deviations from the mean in two
417 or more of the following domains: physical, cognitive,
418 communication, social or emotional, and adaptive.

419 (c) Infants and toddlers determined to have a developmental
420 delay based on a standardized evaluation instrument that results
421 in a score that is 2.0 standard deviations from the mean in one
422 of the following domains: physical, cognitive, communication,
423 social/emotional, and adaptive.

424 (d) Infants and toddlers with a developmental delay based
425 on informed clinical opinion.

426 (e) Infants and toddlers at risk of developmental delay
427 based on an established condition known to result in
428 developmental delay, or a physical or mental condition known to
429 create a risk of developmental delay.

430 (4) DUTIES OF THE LOCAL PROGRAM OFFICES.—A local program
431 office shall:

432 (a) Evaluate a child to determine eligibility within 45
433 calendar days after the child is referred to the program.



469062

576-02100-16

434 (b) Notify the parent or legal guardian of his or her
435 child's eligibility status initially and at least annually
436 thereafter. If a child is determined not to be eligible, the
437 local program office must provide the parent or legal guardian
438 with written information on the right to an appeal and the
439 process for making such an appeal.

440 (c) Secure and maintain interagency agreements or contracts
441 with local school districts in a local service area.

442 (d) Provide services directly or procure services from
443 health care providers that meet or exceed the minimum
444 qualifications established for service providers. The local
445 program office must become a Medicaid provider if it provides
446 services directly.

447 (e) Provide directly or procure services that are, to the
448 extent possible, delivered in a child's natural environment,
449 such as in the child's home or community setting. The inability
450 to provide services in the natural environment is not a
451 sufficient reason to deny services.

452 (f) Develop an individualized family support plan for each
453 child served. The plan must:

454 1. Be completed within 45 calendar days after the child is
455 referred to the program;

456 2. Be developed in conjunction with the child's parent or
457 legal guardian who provides written consent for the services
458 included in the plan;

459 3. Be reviewed at least every six months with the parent or
460 legal guardian and updated if needed; and

461 4. Include steps to transition to school or other future
462 services by the child's third birthday.



469062

576-02100-16

463 (g) Assess the progress of the child and his or her family
464 in meeting the goals of the individualized family support plan.

465 (h) For each service required by the individualized family
466 support plan, refer the child to an appropriate service provider
467 or work with Medicaid managed care organizations or private
468 insurers to secure the needed services.

469 (i) Provide service coordination, including contacting the
470 appropriate service provider to determine whether the provider
471 can timely deliver the service, providing the parent or legal
472 guardian with the name and contact information of the service
473 provider and the date and location of the service of any
474 appointment made on behalf of the child, and contacting the
475 parent or legal guardian after the service is provided to ensure
476 that the service is delivered timely and to determine whether
477 the family requests additional services.

478 (j) Negotiate and maintain agreements with Medicaid
479 providers and Medicaid managed care organizations in its area.

480 1. With the parent's or legal guardian's permission, the
481 services in the child's approved individualized family support
482 plan shall be communicated to the Medicaid managed care
483 organization. Services that cannot be funded by Medicaid must be
484 specifically identified and explained to the family.

485 2. The agreement between the local program office and
486 Medicaid managed care organizations must establish methods of
487 communication and procedures for the timely approval of services
488 covered by Medicaid.

489 (k) Develop agreements and arrangements with private
490 insurers in order to coordinate benefits and services for any
491 mutual enrollee.



469062

576-02100-16

492 1. The child's approved individualized family support plan
493 may be communicated to the child's insurer with the parent's or
494 legal guardian's permission.

495 2. The local program office and private insurers shall
496 establish methods of communication and procedures for the timely
497 approval of services covered by the child's insurer, if
498 appropriate and approved by the child's parent or legal
499 guardian.

500 (1) Provide to the department data necessary for an
501 evaluation of the local program office performance.

502 (5) ACCOUNTABILITY REPORTING.—By December 1 of each year,
503 the department shall prepare and submit a report that assesses
504 the performance of the Early Steps Program to the Governor, the
505 President of the Senate, the Speaker of the House of
506 Representatives, and the Florida Interagency Coordinating
507 Council for Infants and Toddlers. The department must address
508 the performance standards in subsection (1) and report actual
509 performance compared to the standards for the prior fiscal year.
510 The data used to compile the report must be submitted by each
511 local program office in the state. The department shall report
512 on all of the following measures:

513 (a) Number and percentage of infants and toddlers served
514 with an individualized family support plan.

515 (b) Number and percentage of infants and toddlers
516 demonstrating improved social/emotional skills after the
517 program.

518 (c) Number and percentage of infants and toddlers
519 demonstrating improved use of knowledge and cognitive skills
520 after the program.



469062

576-02100-16

521 (d) Number and percentage of families reporting positive
522 outcomes in their infant's and toddler's development as a result
523 of early intervention services.

524 (e) Progress toward meeting the goals of individualized
525 family support plans.

526 (f) Any additional measures established by the department.

527 (6) STATE INTERAGENCY COORDINATING COUNCIL.—The Florida
528 Interagency Coordinating Council for Infants and Toddlers shall
529 serve as the state interagency coordinating council required by
530 34 C.F.R. s. 303.600. The council shall be housed for
531 administrative purposes in the department, and the department
532 shall provide administrative support to the council.

533 (7) TRANSITION TO EDUCATION.—

534 (a) At least 90 days before a child reaches 3 years of age,
535 the local program office shall initiate transition planning to
536 ensure the child's successful transition from the Early Steps
537 Program to a school district program for children with
538 disabilities or to another program as part of an individual
539 family support plan.

540 (b) At least 90 days before a child reaches 3 years of age,
541 the local program office shall:

542 1. Notify the local school district in which the child
543 resides and the Department of Education that the child may be
544 eligible for special education or related services as determined
545 by the local school district pursuant to ss. 1003.21 and
546 1003.57, unless the child's parent or legal guardian has opted
547 out of such notification; and

548 2. Upon approval by the child's parent or legal guardian,
549 convene a transition conference that includes participation of a



469062

576-02100-16

550 local school district representative and the parent or legal
551 guardian to discuss options for and availability of services.

552 (c) The local school district shall evaluate and determine
553 a child's eligibility to receive special education or related
554 services pursuant to part B of the federal Individuals with
555 Disabilities Education Act and ss. 1003.21 and 1003.57.

556 (d) The local program office, in conjunction with the local
557 school district, shall modify a child's individual family
558 support plan or, if applicable, the local school district shall
559 develop an individual education plan for the child pursuant to
560 ss. 1003.57, 1003.571, and 1003.5715, which identifies special
561 education or related services that the child will receive and
562 the providers or agencies that will provide such services.

563 (e) If a child is determined to be ineligible for school
564 district program services, the local program office and the
565 local school district shall provide the child's parent or legal
566 guardian with written information on other available services or
567 community resources.

568 (f) The local program office shall negotiate and maintain
569 an interagency agreement with each local school district in its
570 service area pursuant to the Individuals with Disabilities
571 Education Act, 20 U.S.C. s. 1435(a)(10)(F). Each interagency
572 agreement must be reviewed at least annually and updated upon
573 review, if needed.

574 Section 7. Subsections (1) and (2) of section 413.092,
575 Florida Statutes, are amended to read:

576 413.092 Blind Babies Program.—

577 (1) The Blind Babies Program is created within the Division
578 of Blind Services of the Department of Education to provide



469062

576-02100-16

579 community-based early-intervention education to children from
580 birth through 5 years of age who are blind or visually impaired,
581 and to their parents, families, and caregivers, through
582 community-based provider organizations. The division shall
583 enlist parents, ophthalmologists, pediatricians, schools, the
584 Early Steps Program Infant and Toddlers Early Intervention
585 Programs, and therapists to help identify and enroll blind and
586 visually impaired children, as well as their parents, families,
587 and caregivers, in these educational programs.

588 (2) The program is not an entitlement but shall promote
589 early development with a special emphasis on vision skills to
590 minimize developmental delays. The education shall lay the
591 groundwork for future learning by helping a child progress
592 through normal developmental stages. It shall teach children to
593 discover and make the best use of their skills for future
594 success in school. It shall seek to ensure that visually
595 impaired and blind children enter school as ready to learn as
596 their sighted classmates. The program shall seek to link these
597 children, and their parents, families, and caregivers, to other
598 available services, training, education, and employment programs
599 that could assist these families in the future. This linkage may
600 include referrals to the school districts and the Early Steps
601 Infants and Toddlers Early Intervention Program for assessments
602 to identify any additional services needed which are not
603 provided by the Blind Babies Program. The division shall develop
604 a formula for eligibility based on financial means and may
605 create a means-based matrix to set a copayment fee for families
606 having sufficient financial means.

607 Section 8. Subsection (1) of section 1003.575, Florida



469062

576-02100-16

608 Statutes, is amended to read:

609 1003.575 Assistive technology devices; findings;
610 interagency agreements.—Accessibility, utilization, and
611 coordination of appropriate assistive technology devices and
612 services are essential as a young person with disabilities moves
613 from early intervention to preschool, from preschool to school,
614 from one school to another, and from school to employment or
615 independent living. If an individual education plan team makes a
616 recommendation in accordance with State Board of Education rule
617 for a student with a disability, as defined in s. 1003.01(3), to
618 receive an assistive technology assessment, that assessment must
619 be completed within 60 school days after the team's
620 recommendation. To ensure that an assistive technology device
621 issued to a young person as part of his or her individualized
622 family support plan, individual support plan, or an individual
623 education plan remains with the individual through such
624 transitions, the following agencies shall enter into interagency
625 agreements, as appropriate, to ensure the transaction of
626 assistive technology devices:

627 (1) The Early Steps ~~Florida Infants and Toddlers Early~~
628 ~~Intervention~~ Program in the Division of Children's Medical
629 Services of the Department of Health.

630
631 Interagency agreements entered into pursuant to this section
632 shall provide a framework for ensuring that young persons with
633 disabilities and their families, educators, and employers are
634 informed about the utilization and coordination of assistive
635 technology devices and services that may assist in meeting
636 transition needs, and shall establish a mechanism by which a



469062

576-02100-16

637 young person or his or her parent may request that an assistive
638 technology device remain with the young person as he or she
639 moves through the continuum from home to school to postschool.

640 Section 9. Section 391.303, Florida Statutes, is repealed.

641 Section 10. Section 391.304, Florida Statutes, is repealed.

642 Section 11. Section 391.305, Florida Statutes, is repealed.

643 Section 12. Section 391.306, Florida Statutes, is repealed.

644 Section 13. Section 391.307, Florida Statutes, is repealed.

645 Section 14. This act shall take effect July 1, 2016.