

By Senator Rouson

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1 A bill to be entitled  
 2 An act relating to alcohol and substance abuse  
 3 prevention; creating s. 14.35, F.S.; creating the  
 4 Office of Alcohol and Drug Control Policy within the  
 5 Executive Office of the Governor; providing for  
 6 appointment of the director of the office; specifying  
 7 duties of the office; requiring the office to adopt  
 8 rules; requiring the office to submit an annual report  
 9 to the Governor and the Legislature; amending s.  
 10 409.912, F.S.; requiring the Agency for Health Care  
 11 Administration, in consultation with the Department of  
 12 Children and Families, to seek federal approval for  
 13 waivers to increase federal Medicaid funding for a  
 14 specified purpose; providing an effective date.

15  
 16 Be It Enacted by the Legislature of the State of Florida:

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 18 Section 1. Section 14.35, Florida Statutes, is created to  
 19 read:

20 14.35 Office of Alcohol and Drug Control Policy.-

21 (1) The Office of Alcohol and Drug Control Policy is  
 22 created within the Executive Office of the Governor. The  
 23 director, who shall be appointed by and serve at the pleasure of  
 24 the Governor, shall oversee the office.

25 (2) The office is responsible for all matters relating to  
 26 the research of, coordination of, and execution of programs  
 27 related to alcohol and drug control.

28 (3) The office shall:

29 (a) Develop a strategic plan to reduce the prevalence of

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30 alcohol and substance abuse in the state.

31 (b) Monitor data and issues related to state policies  
32 concerning youth alcohol use prevention and state substance  
33 abuse policies, the impact of such policies on state and local  
34 programs, and the flexibility of such policies to adapt to the  
35 needs of local communities and service providers.

36 (c) Collect data related to drug crimes and overdoses to  
37 generate statistical and analytical reports containing  
38 recommendations for this state's criminal justice system.

39 (d) Issue policy recommendations to executive branch  
40 agencies for alcohol and substance abuse prevention and  
41 treatment to ensure efficiency in efforts undertaken by the  
42 administration.

43 (e) Work with behavioral health managing entities to  
44 identify existing resources and programs in each community which  
45 provide alcohol and substance abuse prevention education or  
46 treatment.

47 (f) Facilitate coordination of alcohol and substance abuse  
48 prevention education and treatment between the courts, local and  
49 state agencies, organizations, service providers, and related  
50 public or private programs concerning alcohol and substance  
51 abuse.

52 (g) Assist behavioral health managing entities in  
53 coordinating activities to ensure the availability of training,  
54 technical assistance, and consultation to local service  
55 providers for programs funded by the state which provide  
56 services related to alcohol or substance abuse.

57 (h) Act as a referral source of information, using existing  
58 information clearinghouse resources.

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59 (i) Search for grant opportunities to fund the office and  
60 its initiatives.

61 (j) Be knowledgeable on alcohol and substance abuse  
62 prevention and treatment programs and initiatives in this state  
63 and in other states.

64 (k) Review existing research on programs related to  
65 substance abuse prevention and treatment.

66 (l) Coordinate with the Department of Education to link  
67 schools with community-based agencies and county health  
68 departments to implement early intervention programs for the  
69 prevention of alcohol and substance abuse.

70 (m) Coordinate media campaigns to demonstrate the negative  
71 impact of substance abuse disorders and to prevent the  
72 development of such disorders in children, young people, and  
73 adults.

74 (n) Prepare and submit legislative budget requests.

75 (o) Adopt rules necessary to administer this section.

76 (p) Submit a report annually to the Governor, the President  
77 of the Senate, and the Speaker of the House of Representatives  
78 on the effectiveness of state policies and coordinated state  
79 efforts related to substance abuse.

80 Section 2. Subsection (14) is added to section 409.912,  
81 Florida Statutes, to read:

82 409.912 Cost-effective purchasing of health care.—The  
83 agency shall purchase goods and services for Medicaid recipients  
84 in the most cost-effective manner consistent with the delivery  
85 of quality medical care. To ensure that medical services are  
86 effectively utilized, the agency may, in any case, require a  
87 confirmation or second physician's opinion of the correct

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88 diagnosis for purposes of authorizing future services under the  
89 Medicaid program. This section does not restrict access to  
90 emergency services or poststabilization care services as defined  
91 in 42 C.F.R. s. 438.114. Such confirmation or second opinion  
92 shall be rendered in a manner approved by the agency. The agency  
93 shall maximize the use of prepaid per capita and prepaid  
94 aggregate fixed-sum basis services when appropriate and other  
95 alternative service delivery and reimbursement methodologies,  
96 including competitive bidding pursuant to s. 287.057, designed  
97 to facilitate the cost-effective purchase of a case-managed  
98 continuum of care. The agency shall also require providers to  
99 minimize the exposure of recipients to the need for acute  
100 inpatient, custodial, and other institutional care and the  
101 inappropriate or unnecessary use of high-cost services. The  
102 agency shall contract with a vendor to monitor and evaluate the  
103 clinical practice patterns of providers in order to identify  
104 trends that are outside the normal practice patterns of a  
105 provider's professional peers or the national guidelines of a  
106 provider's professional association. The vendor must be able to  
107 provide information and counseling to a provider whose practice  
108 patterns are outside the norms, in consultation with the agency,  
109 to improve patient care and reduce inappropriate utilization.  
110 The agency may mandate prior authorization, drug therapy  
111 management, or disease management participation for certain  
112 populations of Medicaid beneficiaries, certain drug classes, or  
113 particular drugs to prevent fraud, abuse, overuse, and possible  
114 dangerous drug interactions. The Pharmaceutical and Therapeutics  
115 Committee shall make recommendations to the agency on drugs for  
116 which prior authorization is required. The agency shall inform

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117 the Pharmaceutical and Therapeutics Committee of its decisions  
118 regarding drugs subject to prior authorization. The agency is  
119 authorized to limit the entities it contracts with or enrolls as  
120 Medicaid providers by developing a provider network through  
121 provider credentialing. The agency may competitively bid single-  
122 source-provider contracts if procurement of goods or services  
123 results in demonstrated cost savings to the state without  
124 limiting access to care. The agency may limit its network based  
125 on the assessment of beneficiary access to care, provider  
126 availability, provider quality standards, time and distance  
127 standards for access to care, the cultural competence of the  
128 provider network, demographic characteristics of Medicaid  
129 beneficiaries, practice and provider-to-beneficiary standards,  
130 appointment wait times, beneficiary use of services, provider  
131 turnover, provider profiling, provider licensure history,  
132 previous program integrity investigations and findings, peer  
133 review, provider Medicaid policy and billing compliance records,  
134 clinical and medical record audits, and other factors. Providers  
135 are not entitled to enrollment in the Medicaid provider network.  
136 The agency shall determine instances in which allowing Medicaid  
137 beneficiaries to purchase durable medical equipment and other  
138 goods is less expensive to the Medicaid program than long-term  
139 rental of the equipment or goods. The agency may establish rules  
140 to facilitate purchases in lieu of long-term rentals in order to  
141 protect against fraud and abuse in the Medicaid program as  
142 defined in s. 409.913. The agency may seek federal waivers  
143 necessary to administer these policies.

144 (14) The agency, in consultation with the department, shall  
145 seek federal approval for a waiver to increase the availability

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146 of federal Medicaid funding to provide programs that improve the  
147 quality of and access to treatment for individuals with  
148 substance abuse disorders served by the Medicaid program and to  
149 provide a more comprehensive continuum of care for individuals  
150 with substance abuse disorders, including detoxification  
151 services, residential services, medication-assisted treatment,  
152 targeted case management, and recovery support that Medicaid is  
153 unable to cover without a waiver.

154 Section 3. This act shall take effect July 1, 2018.