

By the Committee on Children, Families, and Elder Affairs; and  
Senator Harrell

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1                   A bill to be entitled  
2       An act relating to substance abuse services; amending  
3       s. 394.4572, F.S.; authorizing the Department of  
4       Children and Families and the Agency for Health Care  
5       Administration to grant exemptions from  
6       disqualification for certain service provider  
7       personnel; amending s. 397.311, F.S.; redefining the  
8       terms "clinical supervisor" and "recovery residence";  
9       defining the terms "clinical services supervisor,"  
10      "clinical director," and "peer specialist"; amending  
11      s. 397.321, F.S.; providing for the review of certain  
12      decisions by a department-recognized certifying  
13      entity; authorizing certain persons to request an  
14      administrative hearing within a specified timeframe  
15      and under certain circumstances; amending s. 397.4073,  
16      F.S.; requiring individuals screened on or after a  
17      specified date to undergo specified background  
18      screening; requiring the department to grant or deny a  
19      request for an exemption from qualification within a  
20      certain timeframe; authorizing certain applicants for  
21      an exemption to work under the supervision of certain  
22      persons for a specified period of time while his or  
23      her application is pending; authorizing certain  
24      persons to be exempt from disqualification from  
25      employment; authorizing the department to grant  
26      exemptions from disqualification for service provider  
27      personnel to work solely in certain treatment programs  
28      and facilities; amending s. 397.4075, F.S.; increasing  
29      the criminal penalty for certain unlawful activities

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30 relating to personnel; providing a criminal penalty  
31 for inaccurately disclosing certain facts in an  
32 application for licensure; creating s. 397.417, F.S.;  
33 providing legislative intent; authorizing an  
34 individual to seek certification as a peer specialist  
35 if he or she meets certain requirements; requiring the  
36 department to approve one or more third-party  
37 credentialing entities for specified purposes;  
38 requiring the credentialing entity to demonstrate  
39 compliance with certain standards in order to be  
40 approved by the department; requiring an individual  
41 providing department-funded recovery support services  
42 as a peer specialist to be certified; authorizing an  
43 individual who is not certified to provide recovery  
44 support services as a peer specialist under certain  
45 circumstances; prohibiting an individual who is not a  
46 certified peer specialist from advertising or  
47 providing recovery services unless the person is  
48 exempt; providing criminal penalties; authorizing the  
49 department, a behavioral health managing entity, or  
50 the Medicaid program to reimburse peer specialist  
51 services as a recovery service; encouraging Medicaid  
52 managed care plans to use peer specialists in  
53 providing recovery services; amending s. 397.487,  
54 F.S.; revising legislative findings relating to  
55 voluntary certification of recovery residences;  
56 revising background screening requirements for owners,  
57 directors, and chief financial officers of recovery  
58 residences; authorizing a certified recovery residence

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59 to immediately discharge or transfer residents under  
60 certain circumstances; specifying that a local  
61 governmental entity is not prohibited from requiring  
62 mandatory certification of recovery residences for  
63 certain purposes; requiring the Sober Homes Task Force  
64 within the Office of the State Attorney of the  
65 Fifteenth Judicial Circuit to submit a report to the  
66 Legislature containing certain recommendations;  
67 amending s. 397.4873, F.S.; expanding the exceptions  
68 to limitations on referrals by recovery residences to  
69 licensed service providers; amending s. 397.55, F.S.;  
70 revising the requirements for a service provider,  
71 operator of a recovery residence, or certain third  
72 parties to enter into certain contracts with marketing  
73 providers; amending s. 435.07, F.S.; authorizing the  
74 exemption of certain persons from disqualification  
75 from employment; amending s. 553.80, F.S.; requiring  
76 that a single-family or two-family dwelling used as a  
77 recovery residence be deemed a single-family or two-  
78 family dwelling for purposes of the Florida Building  
79 Code; amending s. 633.206, F.S.; requiring the  
80 Department of Financial Services to establish uniform  
81 firesafety standards for recovery residences;  
82 exempting a single-family or two-family dwelling used  
83 as a recovery residence from the uniform firesafety  
84 standards; requiring that such dwellings be deemed a  
85 single-family or two-family dwelling for the purposes  
86 of the Life Safety Code and Florida Fire Prevention  
87 Code; amending ss. 212.055, 397.416, and 440.102,

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88 F.S.; conforming cross-references; providing an  
89 effective date.

90

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

92

93 Section 1. Subsection (2) of section 394.4572, Florida  
94 Statutes, is amended to read:

95 394.4572 Screening of mental health personnel.—

96 (2) (a) The department or the Agency for Health Care  
97 Administration may grant exemptions from disqualification as  
98 provided in chapter 435.

99 (b) The department or the Agency for Health Care  
100 Administration, as applicable, may grant exemptions from  
101 disqualification for service provider personnel to work solely  
102 in mental health treatment programs or facilities, or in  
103 programs or facilities that treat co-occurring substance use and  
104 mental health disorders.

105 Section 2. Present subsections (30) through (49) of section  
106 397.311, Florida Statutes, are redesignated as subsections (31)  
107 through (50), respectively, subsection (8) and present  
108 subsection (37) of that section are amended, and subsection (30)  
109 is added to that section, to read:

110 397.311 Definitions.—As used in this chapter, except part  
111 VIII, the term:

112 (8) "Clinical supervisor," "clinical services supervisor,"  
113 or "clinical director" means a person who meets the requirements  
114 of a qualified professional and who manages personnel who  
115 provide direct clinical services, or who maintains lead  
116 responsibility for the overall coordination and provision of

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117 clinical services ~~treatment~~.

118 (30) "Peer specialist" means a person who has been in  
119 recovery from a substance use disorder or mental illness for at  
120 least 2 years and who uses his or her personal experience to  
121 provide services in behavioral health settings, supporting  
122 others in their recovery; or a person who has at least 2 years  
123 of experience as a family member or caregiver of an individual  
124 who has a substance use disorder or mental illness. The term  
125 does not include a qualified professional or a person otherwise  
126 certified under chapter 394 or chapter 397.

127 (38)~~(37)~~ "Recovery residence" means a residential dwelling  
128 unit, or other form of group housing, including group housing  
129 that is part of any licensable community housing component  
130 established by rule or statute, which ~~that~~ is offered or  
131 advertised through any means, including oral, written,  
132 electronic, or printed means, by any person or entity as a  
133 residence that provides a peer-supported, alcohol-free, and  
134 drug-free living environment.

135 Section 3. Subsection (15) of section 397.321, Florida  
136 Statutes, is amended to read:

137 397.321 Duties of the department.—The department shall:

138 (15) Recognize a statewide certification process for  
139 addiction professionals and identify and endorse one or more  
140 agencies responsible for such certification of service provider  
141 personnel. Any decision by a department-recognized certifying  
142 entity to deny, revoke, or suspend a certification, or otherwise  
143 impose sanctions on an individual who is certified, is  
144 reviewable by the department. Upon receiving an adverse  
145 determination, the person aggrieved may request an

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146 administrative hearing conducted pursuant to ss. 120.569 and  
147 120.57(1) within 30 days after completing any appeals process  
148 offered by the credentialing entity or the department, as  
149 applicable.

150 Section 4. Paragraphs (a), (f), and (g) of subsection (1),  
151 and subsection (4) of section 397.4073, Florida Statutes, are  
152 amended to read:

153 397.4073 Background checks of service provider personnel.-

154 (1) PERSONNEL BACKGROUND CHECKS; REQUIREMENTS AND  
155 EXCEPTIONS.-

156 (a) For all individuals screened on or after July 1, 2019,  
157 background checks shall apply as follows:

158 1. All owners, directors, chief financial officers, and  
159 clinical supervisors of service providers are subject to level 2  
160 background screening as provided under chapter 435 and s.  
161 408.809. Inmate substance abuse programs operated directly or  
162 under contract with the Department of Corrections are exempt  
163 from this requirement.

164 2. All service provider personnel who have direct contact  
165 with children receiving services or with adults who are  
166 developmentally disabled receiving services are subject to level  
167 2 background screening as provided under chapter 435 and s.  
168 408.809.

169 3. All peer specialists who have direct contact with  
170 individuals receiving services are subject to level 2 background  
171 screening as provided under chapter 435 and s. 408.809.

172 (f) Service provider personnel who request an exemption  
173 from disqualification must submit the request within 30 days  
174 after being notified of the disqualification. The department

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175 shall grant or deny the request within 60 days after receipt of  
176 a complete application.

177 (g) If 5 years or more have elapsed since an applicant for  
178 an exemption from disqualification has completed or has been  
179 lawfully released from confinement, supervision, or a  
180 nonmonetary condition imposed by a court for the applicant's  
181 most recent disqualifying offense, the applicant may work with  
182 adults with substance use disorders or co-occurring disorders  
183 under the supervision of persons who meet all personnel  
184 requirements of this chapter for up to 90 days after being  
185 notified of his or her disqualification or until the department  
186 makes a final determination regarding his or her request for an  
187 exemption from disqualification, whichever is earlier ~~the most~~  
188 ~~recent disqualifying offense, service provider personnel may~~  
189 ~~work with adults with substance use disorders under the~~  
190 ~~supervision of a qualified professional licensed under chapter~~  
191 ~~490 or chapter 491 or a master's level certified addictions~~  
192 ~~professional until the agency makes a final determination~~  
193 ~~regarding the request for an exemption from disqualification.~~

194 (h) ~~(g)~~ The department may not issue a regular license to  
195 any service provider that fails to provide proof that background  
196 screening information has been submitted in accordance with  
197 chapter 435.

198 (4) EXEMPTIONS FROM DISQUALIFICATION.—

199 (a) The department may grant to any service provider  
200 personnel an exemption from disqualification as provided in s.  
201 435.07.

202 (b) Since rehabilitated substance abuse impaired persons  
203 are effective in the successful treatment and rehabilitation of

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204 individuals with substance use disorders, for service providers  
205 which treat adolescents 13 years of age and older, service  
206 provider personnel whose background checks indicate crimes under  
207 s. 796.07(2)(e), s. 810.02(4), s. 812.014(2)(c), s. 817.563, s.  
208 831.01, s. 831.02, s. 893.13, or s. 893.147, and any related  
209 criminal attempt, solicitation, or conspiracy under s. 777.04,  
210 may be exempted from disqualification from employment pursuant  
211 to this paragraph.

212 (c) The department may grant exemptions from  
213 disqualification for service provider personnel to work solely  
214 in substance use disorder treatment programs, facilities, or  
215 recovery residences or in programs or facilities that treat co-  
216 occurring substance use and mental health disorders. The  
217 department may further limit such ~~grant~~ exemptions from  
218 disqualification ~~which would limit service provider personnel to~~  
219 working with adults in substance abuse treatment facilities.

220 Section 5. Section 397.4075, Florida Statutes, is amended  
221 to read:

222 397.4075 Unlawful activities relating to personnel;  
223 penalties.—It is a felony of the third ~~misdemeanor of the first~~  
224 degree, punishable as provided in s. 775.082 or s. 775.083, for  
225 any person willfully, knowingly, or intentionally to:

226 (1) Inaccurately disclose by false statement,  
227 misrepresentation, impersonation, or other fraudulent means, or  
228 fail to disclose, in any application for licensure or voluntary  
229 or paid employment, any fact which is material in making a  
230 determination as to the person's qualifications to be an owner,  
231 a director, a volunteer, or other personnel of a service  
232 provider;



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233 (2) Operate or attempt to operate as a service provider  
234 with personnel who are in noncompliance with the minimum  
235 standards contained in this chapter; or

236 (3) Use or release any criminal or juvenile information  
237 obtained under this chapter for any purpose other than  
238 background checks of personnel for employment.

239 Section 6. Section 397.417, Florida Statutes, is created to  
240 read:

241 397.417 Peer Specialists.-

242 (1) The Legislature intends to expand the use of peer  
243 specialists as a cost-effective means of providing services by  
244 ensuring that peer specialists meet specified qualifications,  
245 meet modified background screening requirements, and are  
246 adequately reimbursed for their services.

247 (2) An individual may seek certification as a peer  
248 specialist if he or she has been in recovery from a substance  
249 use disorder or mental illness for at least 2 years, or if he or  
250 she has at least 2 years of experience as a family member or  
251 caregiver of a person with a substance use disorder or mental  
252 illness.

253 (3) The department shall approve one or more third-party  
254 credentialing entities for the purposes of certifying peer  
255 specialists, approving training programs for individuals seeking  
256 certification as peer specialists, approving continuing  
257 education programs, and establishing the minimum requirements  
258 and standards that applicants must achieve to maintain  
259 certification. To obtain approval, the third-party credentialing  
260 entity must demonstrate compliance with nationally recognized  
261 standards for developing and administering professional

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262 certification programs to certify peer specialists.

263 (4) An individual providing department-funded recovery  
264 support services as a peer specialist shall be certified  
265 pursuant to subsection (3). An individual who is not certified  
266 may provide recovery support services as a peer specialist for  
267 up to 1 year if he or she is working toward certification and is  
268 supervised by a qualified professional or by a certified peer  
269 specialist who has at least 3 years of full-time experience as a  
270 peer specialist at a licensed behavioral health organization.

271 (5) An individual who is not a certified peer specialist  
272 may not advertise recovery services to the public in any way, or  
273 by any medium; or provide recovery services as a peer  
274 specialist, unless the person is exempt under subsection (4).  
275 Any individual who violates this subsection commits a  
276 misdemeanor of the first degree, punishable as provided in s.  
277 775.082 or s. 775.083.

278 (6) Peer specialist services may be reimbursed as a  
279 recovery service through the department, a behavioral health  
280 managing entity, or the Medicaid program. Medicaid managed care  
281 plans are encouraged to use peer specialists in providing  
282 recovery services.

283 Section 7. Subsections (1) and (6) of section 397.487,  
284 Florida Statutes, are amended, and subsections (11), (12), and  
285 (13) are added to that section, to read:

286 397.487 Voluntary certification of recovery residences.—

287 (1) The Legislature finds that a person suffering from  
288 addiction has a higher success rate of achieving long-lasting  
289 sobriety when given the opportunity to build a stronger  
290 foundation by living in a recovery residence while receiving

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291 treatment or after completing treatment. The Legislature further  
292 finds that this state and its subdivisions have a legitimate  
293 state interest in protecting these persons, who represent a  
294 vulnerable consumer population in need of adequate housing. It  
295 is the intent of the Legislature to protect persons who reside  
296 in a recovery residence.

297 (6) All owners, directors, and chief financial officers of  
298 an applicant recovery residence are subject to level 2  
299 background screening as provided under chapter 435 and s.  
300 408.809. A recovery residence is ineligible for certification,  
301 and a credentialing entity shall deny a recovery residence's  
302 application, if any owner, director, or chief financial officer  
303 has been found guilty of, or has entered a plea of guilty or  
304 nolo contendere to, regardless of adjudication, any offense  
305 listed in s. 435.04(2) or s. 408.809(4) unless the department  
306 has issued an exemption under s. 397.4073 or s. 397.4872. In  
307 accordance with s. 435.04, the department shall notify the  
308 credentialing agency of an owner's, director's, or chief  
309 financial officer's eligibility based on the results of his or  
310 her background screening.

311 (11) Notwithstanding any landlord and tenant rights and  
312 obligations under chapter 83, a recovery residence that is  
313 certified under this section and that has a discharge policy  
314 approved by a credentialing entity may immediately discharge or  
315 transfer a resident under any of the following circumstances:

316 (a) The discharge or transfer is necessary for the  
317 resident's welfare.

318 (b) The resident's needs cannot be met at the recovery  
319 residence.

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320 (c) The health and safety of other residents or recovery  
321 residence employees is at risk or would be at risk if the  
322 resident continues to live at the recovery residence.

323 (12) This section does not prohibit a local governmental  
324 entity from requiring mandatory certification of recovery  
325 residences as part of a reasonable accommodation process to  
326 protect the health and safety of the residents.

327 (13) By January 1, 2020, the Sober Homes Task Force within  
328 the Office of the State Attorney of the Fifteenth Judicial  
329 Circuit shall submit a report to the President of the Senate and  
330 the Speaker of the House of Representatives which contains  
331 recommendations on mandatory statewide certification of recovery  
332 residences.

333 Section 8. Paragraph (d) is added to subsection (2) of  
334 section 397.4873, Florida Statutes, and subsection (1) of that  
335 section is republished, to read:

336 397.4873 Referrals to or from recovery residences;  
337 prohibitions; penalties.—

338 (1) A service provider licensed under this part may not  
339 make a referral of a prospective, current, or discharged patient  
340 to, or accept a referral of such a patient from, a recovery  
341 residence unless the recovery residence holds a valid  
342 certificate of compliance as provided in s. 397.487 and is  
343 actively managed by a certified recovery residence administrator  
344 as provided in s. 397.4871.

345 (2) Subsection (1) does not apply to:

346 (d) The referral of a patient to, or acceptance of a  
347 referral of such a patient from, a recovery residence that has  
348 no direct or indirect financial or other referral relationship

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349 with the provider and that is democratically operated by its  
350 residents pursuant to a charter from an entity recognized or  
351 sanctioned by Congress, and where the residence or any resident  
352 of the residence does not receive a benefit, directly or  
353 indirectly, for the referral.

354 Section 9. Paragraph (d) of subsection (1) of section  
355 397.55, Florida Statutes, is amended to read:

356 397.55 Prohibition of deceptive marketing practices.—

357 (1) The Legislature recognizes that consumers of substance  
358 abuse treatment have disabling conditions and that such  
359 consumers and their families are vulnerable and at risk of being  
360 easily victimized by fraudulent marketing practices that  
361 adversely impact the delivery of health care. To protect the  
362 health, safety, and welfare of this vulnerable population, a  
363 service provider, an operator of a recovery residence, or a  
364 third party who provides any form of advertising or marketing  
365 services to a service provider or an operator of a recovery  
366 residence may not engage in any of the following marketing  
367 practices:

368 (d) Entering into a contract with a marketing provider who  
369 agrees to generate referrals or leads for the placement of  
370 patients with a service provider or in a recovery residence  
371 through a call center or a web-based presence, unless the  
372 contract requires such agreement and the marketing provider  
373 ~~service provider or the operator of the recovery residence~~  
374 discloses the following to the prospective patient so that the  
375 patient can make an informed health care decision:

376 1. Information about the specific licensed service  
377 providers or recovery residences that are represented by the

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378 marketing provider and pay a fee to the marketing provider,  
379 including the identity of such service providers or recovery  
380 residences; and

381 2. Clear and concise instructions that allow the  
382 prospective patient to easily access lists of licensed service  
383 providers and recovery residences on the department website.

384 Section 10. Subsection (2) of section 435.07, Florida  
385 Statutes, is amended to read:

386 435.07 Exemptions from disqualification.—Unless otherwise  
387 provided by law, the provisions of this section apply to  
388 exemptions from disqualification for disqualifying offenses  
389 revealed pursuant to background screenings required under this  
390 chapter, regardless of whether those disqualifying offenses are  
391 listed in this chapter or other laws.

392 (2) Persons employed, or applicants for employment, by  
393 treatment providers who treat adolescents 13 years of age and  
394 older who are disqualified from employment solely because of  
395 crimes under s. 796.07(2)(e), s. 810.02(4), s. 812.014(2)(c), s.  
396 817.563, s. 831.01, s. 831.02, s. 893.13, or s. 893.147, or any  
397 related criminal attempt, solicitation, or conspiracy under s.  
398 777.04, may be exempted from disqualification from employment  
399 pursuant to this chapter without application of the waiting  
400 period in subparagraph (1)(a)1.

401 Section 11. Subsection (9) is added to section 553.80,  
402 Florida Statutes, to read:

403 553.80 Enforcement.—

404 (9) If a single-family or two-family dwelling is used as a  
405 recovery residence, as defined in s. 397.311, such dwelling  
406 shall be deemed a single-family or two-family dwelling for

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407 purposes of the Florida Building Code.

408 Section 12. Paragraph (b) of subsection (1) of section  
409 633.206, Florida Statutes, is amended, and subsection (5) is  
410 added to that section, to read:

411 633.206 Uniform firesafety standards—The Legislature hereby  
412 determines that to protect the public health, safety, and  
413 welfare it is necessary to provide for firesafety standards  
414 governing the construction and utilization of certain buildings  
415 and structures. The Legislature further determines that certain  
416 buildings or structures, due to their specialized use or to the  
417 special characteristics of the person utilizing or occupying  
418 these buildings or structures, should be subject to firesafety  
419 standards reflecting these special needs as may be appropriate.

420 (1) The department shall establish uniform firesafety  
421 standards that apply to:

422 (b) All new, existing, and proposed hospitals, nursing  
423 homes, assisted living facilities, adult family-care homes,  
424 recovery residences, correctional facilities, public schools,  
425 transient public lodging establishments, public food service  
426 establishments, elevators, migrant labor camps, mobile home  
427 parks, lodging parks, recreational vehicle parks, recreational  
428 camps, residential and nonresidential child care facilities,  
429 facilities for the developmentally disabled, motion picture and  
430 television special effects productions, tunnels, and self-  
431 service gasoline stations, of which standards the State Fire  
432 Marshal is the final administrative interpreting authority.

433

434 In the event there is a dispute between the owners of the  
435 buildings specified in paragraph (b) and a local authority

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436 requiring a more stringent uniform firesafety standard for  
437 sprinkler systems, the State Fire Marshal shall be the final  
438 administrative interpreting authority and the State Fire  
439 Marshal's interpretation regarding the uniform firesafety  
440 standards shall be considered final agency action.

441 (5) If a single-family or two-family dwelling is used as a  
442 recovery residence, as defined in s. 397.311, such dwelling is  
443 exempt from the uniform firesafety standards for recovery  
444 residences and shall be deemed a single-family or two-family  
445 dwelling for the purposes of the Life Safety Code and Florida  
446 Fire Prevention Code.

447 Section 13. Paragraph (e) of subsection (5) of section  
448 212.055, Florida Statutes, is amended to read:

449 212.055 Discretionary sales surtaxes; legislative intent;  
450 authorization and use of proceeds.—It is the legislative intent  
451 that any authorization for imposition of a discretionary sales  
452 surtax shall be published in the Florida Statutes as a  
453 subsection of this section, irrespective of the duration of the  
454 levy. Each enactment shall specify the types of counties  
455 authorized to levy; the rate or rates which may be imposed; the  
456 maximum length of time the surtax may be imposed, if any; the  
457 procedure which must be followed to secure voter approval, if  
458 required; the purpose for which the proceeds may be expended;  
459 and such other requirements as the Legislature may provide.  
460 Taxable transactions and administrative procedures shall be as  
461 provided in s. 212.054.

462 (5) COUNTY PUBLIC HOSPITAL SURTAX.—Any county as defined in  
463 s. 125.011(1) may levy the surtax authorized in this subsection  
464 pursuant to an ordinance either approved by extraordinary vote



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465 of the county commission or conditioned to take effect only upon  
466 approval by a majority vote of the electors of the county voting  
467 in a referendum. In a county as defined in s. 125.011(1), for  
468 the purposes of this subsection, "county public general  
469 hospital" means a general hospital as defined in s. 395.002  
470 which is owned, operated, maintained, or governed by the county  
471 or its agency, authority, or public health trust.

472 (e) A governing board, agency, or authority shall be  
473 chartered by the county commission upon this act becoming law.  
474 The governing board, agency, or authority shall adopt and  
475 implement a health care plan for indigent health care services.  
476 The governing board, agency, or authority shall consist of no  
477 more than seven and no fewer than five members appointed by the  
478 county commission. The members of the governing board, agency,  
479 or authority shall be at least 18 years of age and residents of  
480 the county. No member may be employed by or affiliated with a  
481 health care provider or the public health trust, agency, or  
482 authority responsible for the county public general hospital.  
483 The following community organizations shall each appoint a  
484 representative to a nominating committee: the South Florida  
485 Hospital and Healthcare Association, the Miami-Dade County  
486 Public Health Trust, the Dade County Medical Association, the  
487 Miami-Dade County Homeless Trust, and the Mayor of Miami-Dade  
488 County. This committee shall nominate between 10 and 14 county  
489 citizens for the governing board, agency, or authority. The  
490 slate shall be presented to the county commission and the county  
491 commission shall confirm the top five to seven nominees,  
492 depending on the size of the governing board. Until such time as  
493 the governing board, agency, or authority is created, the funds

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494 provided for in subparagraph (d)2. shall be placed in a  
495 restricted account set aside from other county funds and not  
496 disbursed by the county for any other purpose.

497 1. The plan shall divide the county into a minimum of four  
498 and maximum of six service areas, with no more than one  
499 participant hospital per service area. The county public general  
500 hospital shall be designated as the provider for one of the  
501 service areas. Services shall be provided through participants'  
502 primary acute care facilities.

503 2. The plan and subsequent amendments to it shall fund a  
504 defined range of health care services for both indigent persons  
505 and the medically poor, including primary care, preventive care,  
506 hospital emergency room care, and hospital care necessary to  
507 stabilize the patient. For the purposes of this section,  
508 "stabilization" means stabilization as defined in s. 397.311 ~~s.~~  
509 ~~397.311(45)~~. Where consistent with these objectives, the plan  
510 may include services rendered by physicians, clinics, community  
511 hospitals, and alternative delivery sites, as well as at least  
512 one regional referral hospital per service area. The plan shall  
513 provide that agreements negotiated between the governing board,  
514 agency, or authority and providers shall recognize hospitals  
515 that render a disproportionate share of indigent care, provide  
516 other incentives to promote the delivery of charity care to draw  
517 down federal funds where appropriate, and require cost  
518 containment, including, but not limited to, case management.  
519 From the funds specified in subparagraphs (d)1. and 2. for  
520 indigent health care services, service providers shall receive  
521 reimbursement at a Medicaid rate to be determined by the  
522 governing board, agency, or authority created pursuant to this

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523 paragraph for the initial emergency room visit, and a per-member  
524 per-month fee or capitation for those members enrolled in their  
525 service area, as compensation for the services rendered  
526 following the initial emergency visit. Except for provisions of  
527 emergency services, upon determination of eligibility,  
528 enrollment shall be deemed to have occurred at the time services  
529 were rendered. The provisions for specific reimbursement of  
530 emergency services shall be repealed on July 1, 2001, unless  
531 otherwise reenacted by the Legislature. The capitation amount or  
532 rate shall be determined before program implementation by an  
533 independent actuarial consultant. In no event shall such  
534 reimbursement rates exceed the Medicaid rate. The plan must also  
535 provide that any hospitals owned and operated by government  
536 entities on or after the effective date of this act must, as a  
537 condition of receiving funds under this subsection, afford  
538 public access equal to that provided under s. 286.011 as to any  
539 meeting of the governing board, agency, or authority the subject  
540 of which is budgeting resources for the retention of charity  
541 care, as that term is defined in the rules of the Agency for  
542 Health Care Administration. The plan shall also include  
543 innovative health care programs that provide cost-effective  
544 alternatives to traditional methods of service and delivery  
545 funding.

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

550 4. Eligible residents who participate in the health care  
551 plan shall receive coverage for a period of 12 months or the

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552 period extending from the time of enrollment to the end of the  
553 current fiscal year, per enrollment period, whichever is less.

554 5. At the end of each fiscal year, the governing board,  
555 agency, or authority shall prepare an audit that reviews the  
556 budget of the plan, delivery of services, and quality of  
557 services, and makes recommendations to increase the plan's  
558 efficiency. The audit shall take into account participant  
559 hospital satisfaction with the plan and assess the amount of  
560 poststabilization patient transfers requested, and accepted or  
561 denied, by the county public general hospital.

562 Section 14. Section 397.416, Florida Statutes, is amended  
563 to read:

564 397.416 Substance abuse treatment services; qualified  
565 professional.—Notwithstanding any other provision of law, a  
566 person who was certified through a certification process  
567 recognized by the former Department of Health and Rehabilitative  
568 Services before January 1, 1995, may perform the duties of a  
569 qualified professional with respect to substance abuse treatment  
570 services as defined in this chapter, and need not meet the  
571 certification requirements contained in s. 397.311(35) ~~s.~~  
572 ~~397.311(34)~~.

573 Section 15. Paragraphs (d) and (g) of subsection (1) of  
574 section 440.102, Florida Statutes, are amended to read:

575 440.102 Drug-free workplace program requirements.—The  
576 following provisions apply to a drug-free workplace program  
577 implemented pursuant to law or to rules adopted by the Agency  
578 for Health Care Administration:

579 (1) DEFINITIONS.—Except where the context otherwise  
580 requires, as used in this act:

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581 (d) "Drug rehabilitation program" means a service provider  
582 as defined in s. 397.311 which, ~~established pursuant to s.~~  
583 ~~397.311(43),~~ that provides confidential, timely, and expert  
584 identification, assessment, and resolution of employee drug  
585 abuse.

586 (g) "Employee assistance program" means an established  
587 program capable of providing expert assessment of employee  
588 personal concerns; confidential and timely identification  
589 services with regard to employee drug abuse; referrals of  
590 employees for appropriate diagnosis, treatment, and assistance;  
591 and followup services for employees who participate in the  
592 program or require monitoring after returning to work. If, in  
593 addition to the above activities, an employee assistance program  
594 provides diagnostic and treatment services, these services shall  
595 in all cases be provided by service providers as defined in s.  
596 397.311 ~~pursuant to s. 397.311(43).~~

597 Section 16. This act shall take effect July 1, 2019.