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LEGISLATIVE ACTION

Senate	.	House
Comm: FAV	.	
11/12/2019	.	
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The Committee on Children, Families, and Elder Affairs
(Mayfield) recommended the following:

Senate Amendment (with title amendment)

Delete lines 413 - 697

and insert:

Section 8. Effective January 1, 2021, paragraph (b) of
subsection (8) of section 627.6675, Florida Statutes, is amended
to read:

627.6675 Conversion on termination of eligibility.—Subject
to all of the provisions of this section, a group policy
delivered or issued for delivery in this state by an insurer or



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11 nonprofit health care services plan that provides, on an
12 expense-incurred basis, hospital, surgical, or major medical
13 expense insurance, or any combination of these coverages, shall
14 provide that an employee or member whose insurance under the
15 group policy has been terminated for any reason, including
16 discontinuance of the group policy in its entirety or with
17 respect to an insured class, and who has been continuously
18 insured under the group policy, and under any group policy
19 providing similar benefits that the terminated group policy
20 replaced, for at least 3 months immediately prior to
21 termination, shall be entitled to have issued to him or her by
22 the insurer a policy or certificate of health insurance,
23 referred to in this section as a "converted policy." A group
24 insurer may meet the requirements of this section by contracting
25 with another insurer, authorized in this state, to issue an
26 individual converted policy, which policy has been approved by
27 the office under s. 627.410. An employee or member shall not be
28 entitled to a converted policy if termination of his or her
29 insurance under the group policy occurred because he or she
30 failed to pay any required contribution, or because any
31 discontinued group coverage was replaced by similar group
32 coverage within 31 days after discontinuance.

33 (8) BENEFITS OFFERED.—

34 (b) An insurer shall offer the benefits specified in s.
35 627.4193 ~~s. 627.668~~ and the benefits specified in ~~s. 627.669~~ if
36 ~~those benefits were provided in the group plan.~~

37 Section 9. Effective January 1, 2021, section 627.668,
38 Florida Statutes, is transferred, renumbered as section
39 627.4193, Florida Statutes, and amended to read:



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40 627.4193 ~~627.668~~ Requirements for mental health and
41 substance use disorder benefits; reporting requirements ~~Optional~~
42 ~~coverage for mental and nervous disorders required; exception.-~~
43 (1) Every insurer issuing, delivering, or issuing for
44 delivery comprehensive major medical individual or, health
45 ~~maintenance organization, and nonprofit hospital and medical~~
46 ~~service plan corporation transacting group health insurance~~
47 policies or providing prepaid health care in this state must
48 comply with the federal Paul Wellstone and Pete Domenici Mental
49 Health Parity and Addiction Equity Act of 2008 (MHPAEA) and any
50 regulations relating to MHPAEA, including, but not limited to,
51 45 C.F.R. s. 146.136, 45 C.F.R. s. 147.160, and 45 C.F.R. s.
52 156.115(a) (3); and must provide ~~shall make available to the~~
53 ~~policyholder as part of the application, for an appropriate~~
54 ~~additional premium under a group hospital and medical expense-~~
55 ~~incurred insurance policy, under a group prepaid health care~~
56 ~~contract, and under a group hospital and medical service plan~~
57 ~~contract,~~ the benefits or level of benefits specified in
58 subsection (2) for the medically necessary care and treatment of
59 mental and nervous disorders, including substance use disorders,
60 as described ~~defined~~ in the Diagnostic and Statistical Manual of
61 Mental Disorders, Fifth Edition, published by ~~standard~~
62 ~~nomenclature of the American Psychiatric Association, subject to~~
63 ~~the right of the applicant for a group policy or contract to~~
64 ~~select any alternative benefits or level of benefits as may be~~
65 ~~offered by the insurer, health maintenance organization, or~~
66 ~~service plan corporation provided that, if alternate inpatient,~~
67 ~~outpatient, or partial hospitalization benefits are selected,~~
68 ~~such benefits shall not be less than the level of benefits~~



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69 ~~required under paragraph (2) (a), paragraph (2) (b), or paragraph~~
70 ~~(2) (c), respectively.~~

71 (2) Under individual or group policies described in
72 subsection (1) or contracts, inpatient hospital benefits,
73 partial hospitalization benefits, and outpatient benefits
74 consisting of durational limits, dollar amounts, deductibles,
75 and coinsurance factors may not be provided in a manner that is
76 more restrictive than medical and surgical benefits, and limits
77 on the scope or duration of treatments which are not expressed
78 numerically, also known as nonquantitative treatment
79 limitations, must be provided in a manner that is comparable and
80 may not be applied more stringently than limits on medical and
81 surgical benefits, in accordance with 45 C.F.R. s.

82 146.136(c) (2), (3), and (4) shall not be less favorable than for
83 physical illness generally, except that:

84 ~~(a) Inpatient benefits may be limited to not less than 30~~
85 ~~days per benefit year as defined in the policy or contract. If~~
86 ~~inpatient hospital benefits are provided beyond 30 days per~~
87 ~~benefit year, the durational limits, dollar amounts, and~~
88 ~~coinsurance factors thereto need not be the same as applicable~~
89 ~~to physical illness generally.~~

90 ~~(b) Outpatient benefits may be limited to \$1,000 for~~
91 ~~consultations with a licensed physician, a psychologist licensed~~
92 ~~pursuant to chapter 490, a mental health counselor licensed~~
93 ~~pursuant to chapter 491, a marriage and family therapist~~
94 ~~licensed pursuant to chapter 491, and a clinical social worker~~
95 ~~licensed pursuant to chapter 491. If benefits are provided~~
96 ~~beyond the \$1,000 per benefit year, the durational limits,~~
97 ~~dollar amounts, and coinsurance factors thereof need not be the~~



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98 ~~same as applicable to physical illness generally.~~

99 ~~(c) Partial hospitalization benefits shall be provided~~
100 ~~under the direction of a licensed physician. For purposes of~~
101 ~~this part, the term "partial hospitalization services" is~~
102 ~~defined as those services offered by a program that is~~
103 ~~accredited by an accrediting organization whose standards~~
104 ~~incorporate comparable regulations required by this state.~~
105 ~~Alcohol rehabilitation programs accredited by an accrediting~~
106 ~~organization whose standards incorporate comparable regulations~~
107 ~~required by this state or approved by the state and licensed~~
108 ~~drug abuse rehabilitation programs shall also be qualified~~
109 ~~providers under this section. In a given benefit year, if~~
110 ~~partial hospitalization services or a combination of inpatient~~
111 ~~and partial hospitalization are used, the total benefits paid~~
112 ~~for all such services may not exceed the cost of 30 days after~~
113 ~~inpatient hospitalization for psychiatric services, including~~
114 ~~physician fees, which prevail in the community in which the~~
115 ~~partial hospitalization services are rendered. If partial~~
116 ~~hospitalization services benefits are provided beyond the limits~~
117 ~~set forth in this paragraph, the durational limits, dollar~~
118 ~~amounts, and coinsurance factors thereof need not be the same as~~
119 ~~those applicable to physical illness generally.~~

120 (3) Insurers must maintain strict confidentiality regarding
121 psychiatric and psychotherapeutic records submitted to an
122 insurer for the purpose of reviewing a claim for benefits
123 payable under this section. These records submitted to an
124 insurer are subject to the limitations of s. 456.057, relating
125 to the furnishing of patient records.

126 (4) Every insurer shall submit an annual affidavit



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127 attesting to compliance with the applicable provisions of the
128 MHPAEA.

129 (5) The office shall implement and enforce applicable
130 provisions of MHPAEA and federal guidance or regulations
131 relating to MHPAEA, including, but not limited to, 45 C.F.R. s.
132 146.136, 45 C.F.R. s. 147.160, and 45 C.F.R. s. 156.115(a) (3),
133 and this section.

134 (6) The Financial Services Commission may adopt rules to
135 implement this section.

136 Section 10. Subsection (4) is added to section 627.669,
137 Florida Statutes, to read:

138 627.669 Optional coverage required for substance abuse
139 impaired persons; exception.—

140 (4) This section is repealed January 1, 2021.

141 Section 11. Effective January 1, 2021, present subsection
142 (17) of section 627.6699, Florida Statutes, is redesignated as
143 subsection (18), and a new subsection (17) is added to that
144 section, to read:

145 627.6699 Employee Health Care Access Act.—

146 (17) MENTAL HEALTH AND SUBSTANCE ABUSE BENEFITS.—A health
147 benefit plan that provides coverage to employees of a small
148 employer is subject to s. 627.4193.

149 Section 12. Effective January 1, 2021, subsection (9) is
150 added to section 641.26, Florida Statutes, to read:

151 641.26 Annual and quarterly reports.—

152 (9) Every health maintenance organization issuing,
153 delivering, or issuing for delivery contracts providing
154 comprehensive major medical coverage shall annually submit an
155 affidavit to the office attesting to compliance with the



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156 requirements of s. 627.4193. The office may adopt rules to
157 implement this subsection.

158 Section 13. Effective January 1, 2021, subsection (48) is
159 added to section 641.31, Florida Statutes, to read:

160 641.31 Health maintenance contracts.—

161 (48) All health maintenance contracts that provide
162 comprehensive medical coverage must comply with the coverage
163 provisions of s. 627.4193. The commission may adopt rules to
164 implement this subsection.

165 Section 14. Section 786.1516, Florida Statutes, is created
166 to read:

167 786.1516 Immunity for providing assistance in a suicide
168 emergency.—

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

170 (a) "Emergency care" means assistance or advice offered to
171 avoid, mitigate, or attempt to mitigate the effects of a suicide
172 emergency.

173 (b) "Suicide emergency" means an occurrence that reasonably
174 indicates an individual is at risk of dying or attempting to die
175 by suicide.

176 (2) A person who provides emergency care at or near the
177 scene of a suicide emergency, gratuitously and in good faith, is
178 not liable for any civil damages or penalties as a result of any
179 act or omission by the person providing the emergency care
180 unless the person is grossly negligent or caused the suicide
181 emergency.

182 Section 15. Present subsection (28) of section 1002.33,
183 Florida Statutes, is redesignated as subsection (29), and a new
184 subsection (28) is added to that section, to read:



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185 1002.33 Charter schools.—
186 (28) CONTINUING EDUCATION AND INSERVICE TRAINING FOR YOUTH
187 SUICIDE AWARENESS AND PREVENTION.—
188 (a) By October 1, 2020, every charter school must:
189 1. Incorporate 2 hours of training offered pursuant to s.
190 1012.583. The training must be included in the existing
191 continuing education or inservice training requirements for
192 instructional personnel and may not add to the total hours
193 currently required by the department. Every charter school must
194 require all instructional personnel to participate.
195 2. Have at least two school-based staff members certified
196 or otherwise deemed competent in the use of a suicide screening
197 instrument approved under s. 1012.583(1) and have a policy to
198 use such suicide risk screening instrument to evaluate a
199 student's suicide risk before requesting the initiation of, or
200 initiating, an involuntary examination due to concerns about
201 that student's suicide risk.
202 (b) Every charter school must report its compliance with
203 this subsection to the department.
204 Section 16. Subsections (2) and (3) of section 1012.583,
205 Florida Statutes, are amended to read:
206 1012.583 Continuing education and inservice training for
207 youth suicide awareness and prevention.—
208 (2) By October 1, 2020, every public school must ~~A school~~
209 ~~shall be considered a "Suicide Prevention Certified School" if~~
210 ~~it:~~
211 (a) Incorporate ~~Incorporates~~ 2 hours of training offered
212 pursuant to this section. The training must be included in the
213 existing continuing education or inservice training requirements



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214 for instructional personnel and may not add to the total hours
215 currently required by the department. Every public school A
216 ~~school that chooses to participate in the training~~ must require
217 all instructional personnel to participate.

218 (b) Have ~~Has~~ at least two school-based staff members
219 certified or otherwise deemed competent in the use of a suicide
220 screening instrument approved under subsection (1) and have ~~has~~
221 a policy to use such suicide risk screening instrument to
222 evaluate a student's suicide risk before requesting the
223 initiation of, or initiating, an involuntary examination due to
224 concerns about that student's suicide risk.

225 (3) Every public school ~~A school that meets the criteria in~~
226 ~~subsection (2)~~ must report its compliance with this section to
227 the department. ~~The department shall keep an updated record of~~
228 ~~all Suicide Prevention Certified Schools and shall post the list~~
229 ~~of these schools on the department's website. Each school shall~~
230 ~~also post on its own website whether it is a Suicide Prevention~~
231 ~~Certified School, and each school district shall post on its~~
232 ~~district website a list of the Suicide Prevention Certified~~
233 ~~Schools in that district.~~

234 Section 17. Paragraphs (a) and (c) of subsection (3) of
235 section 394.495, Florida Statutes, are amended to read:

236 394.495 Child and adolescent mental health system of care;
237 programs and services.-

238 (3) Assessments must be performed by:

239 (a) A professional as defined in s. 394.455(5), (7), (33)
240 ~~(32)~~, (36) ~~(35)~~, or (37) ~~(36)~~;

241 (c) A person who is under the direct supervision of a
242 qualified professional as defined in s. 394.455(5), (7), (33)



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243 ~~(32)~~, (36) ~~(35)~~, or (37) ~~(36)~~ or a professional licensed under
244 chapter 491.

245 Section 18. Subsection (5) of section 394.496, Florida
246 Statutes, is amended to read:

247 394.496 Service planning.—

248 (5) A professional as defined in s. 394.455(5), (7), (33)
249 ~~(32)~~, (36) ~~(35)~~, or (37) ~~(36)~~ or a professional licensed under
250 chapter 491 must be included among those persons developing the
251 services plan.

252 Section 19. Subsection (6) of section 394.9085, Florida
253 Statutes, is amended to read:

254 394.9085 Behavioral provider liability.—

255 (6) For purposes of this section, the terms “detoxification
256 services,” “addictions receiving facility,” and “receiving
257 facility” have the same meanings as those provided in ss.
258 397.311(26)(a)4., 397.311(26)(a)1., and 394.455(40) ~~394.455(39)~~,
259 respectively.

260 Section 20. Paragraph (b) of subsection (1) of section
261 409.972, Florida Statutes, is amended to read:

262 409.972 Mandatory and voluntary enrollment.—

263 (1) The following Medicaid-eligible persons are exempt from
264 mandatory managed care enrollment required by s. 409.965, and
265 may voluntarily choose to participate in the managed medical
266 assistance program:

267 (b) Medicaid recipients residing in residential commitment
268 facilities operated through the Department of Juvenile Justice
269 or a treatment facility as defined in s. 394.455~~(47)~~.

270 Section 21. Paragraph (e) of subsection (4) of section
271 464.012, Florida Statutes, is amended to read:



272 464.012 Licensure of advanced practice registered nurses;
273 fees; controlled substance prescribing.—

274 (4) In addition to the general functions specified in
275 subsection (3), an advanced practice registered nurse may
276 perform the following acts within his or her specialty:

277 (e) A psychiatric nurse, who meets the requirements in s.
278 394.455(36) ~~s. 394.455(35)~~, within the framework of an
279 established protocol with a psychiatrist, may prescribe
280 psychotropic controlled substances for the treatment of mental
281 disorders.

282 Section 22. Subsection (7) of section 744.2007, Florida
283 Statutes, is amended to read:

284 744.2007 Powers and duties.—

285 (7) A public guardian may not commit a ward to a treatment
286 facility, as defined in s. 394.455(47), without an involuntary
287 placement proceeding as provided by law.

288 Section 23. The Office of Program Policy Analysis and
289 Government Accountability shall perform a review of suicide
290 prevention programs and efforts made by other states and make
291 recommendations on their applicability to this state. The office
292 shall submit a report containing the findings and
293 recommendations to the President of the Senate and the Speaker
294 of the House of Representatives by January 1, 2021.

295 Section 24. Except as otherwise expressly provided in this
296 act, this act shall take effect July 1, 2020.

298 ===== T I T L E A M E N D M E N T =====

299 And the title is amended as follows:

300 Delete line 77



301 and insert:
302 specified date; providing effective dates.