1 A bill to be entitled 2 An act relating to mental health and substance use 3 disorders; amending s. 394.4573, F.S.; providing that the use of peer specialists is an essential element of 4 5 a coordinated system of care in recovery from a 6 substance use disorder or mental illness; making a 7 technical change; amending s. 397.4073, F.S.; revising 8 background screening requirements for certain peer 9 specialists; amending s. 397.417, F.S.; providing 10 legislative findings and intent; revising requirements 11 for certification as a peer specialist; requiring the 12 Department of Children and Families to develop a training program for peer specialists and to give 13 14 preference to trainers who are certified peer specialists; requiring the training program to 15 16 coincide with a competency exam and to be based on 17 current practice standards; requiring the department to certify peer specialists, either directly or by 18 19 approving a third-party credentialing entity; requiring that a person providing recovery support 20 21 services be certified or be supervised by a licensed behavioral health care professional or a certified 22 23 peer specialist; authorizing the department, a 24 behavioral health managing entity, or the Medicaid 25 program to reimburse a peer specialist service as a

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recovery service; encouraging Medicaid managed care plans to use peer specialists in providing recovery services; requiring peer specialists and certain persons to meet the requirements of a background screening as a condition of employment and continued employment; requiring certain entities to forward fingerprints to specified entities; requiring that fees for state and federal fingerprint processing be borne by the peer specialist applying for employment; requiring that any arrest record identified through background screening be reported to the department; authorizing the department or certain other agencies to contract with certain vendors for fingerprinting; specifying requirements for vendors; specifying disqualifying offenses for a peer specialist who applies for certification; authorizing a person who does not meet background screening requirements to request an exemption from disqualification from the department or the agency; providing that a peer specialist certified as of the effective date of this act is deemed to satisfy the requirements of this act; providing an effective date.

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

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Section 1. Paragraph (1) of subsection (2) and subsection (3) of section 394.4573, Florida Statutes, are amended to read: 394.4573 Coordinated system of care; annual assessment; essential elements; measures of performance; system improvement grants; reports. - On or before December 1 of each year, the department shall submit to the Governor, the President of the Senate, and the Speaker of the House of Representatives an assessment of the behavioral health services in this state. The assessment shall consider, at a minimum, the extent to which designated receiving systems function as no-wrong-door models, the availability of treatment and recovery services that use recovery-oriented and peer-involved approaches, the availability of less-restrictive services, and the use of evidence-informed practices. The assessment shall also consider the availability of and access to coordinated specialty care programs and identify any gaps in the availability of and access to such programs in the state. The department's assessment shall consider, at a minimum, the needs assessments conducted by the managing entities pursuant to s. 394.9082(5). Beginning in 2017, the department shall compile and include in the report all plans submitted by managing entities pursuant to s. 394.9082(8) and the department's evaluation of each plan.

- (2) The essential elements of a coordinated system of care include:
 - (1) Recovery support, including, but not limited to, the

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use of peer specialists to assist in the individual's recovery from a substance use disorder or mental illness; support for competitive employment, educational attainment, independent living skills development, family support and education, wellness management, and self-care; and assistance in obtaining housing that meets the individual's needs. Such housing may include mental health residential treatment facilities, limited mental health assisted living facilities, adult family care homes, and supportive housing. Housing provided using state funds must provide a safe and decent environment free from abuse and neglect.

appropriation by the Legislature, the department may award system improvement grants to managing entities based on a detailed plan to enhance services in accordance with the nowrong-door model as defined in subsection (1) and to address specific needs identified in the assessment prepared by the department pursuant to this section. Such a grant must be awarded through a performance-based contract that links payments to the documented and measurable achievement of system improvements.

Section 2. Paragraph (a) of subsection (1) of section 397.4073, Florida Statutes, is amended to read:

397.4073 Background checks of service provider personnel.-

(1) PERSONNEL BACKGROUND CHECKS; REQUIREMENTS AND

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- (a) For all individuals screened on or after July 1, $\underline{2021}$ 2019, background checks shall apply as follows:
- 1. All owners, directors, chief financial officers, and clinical supervisors of service providers are subject to level 2 background screening as provided under s. 408.809 and chapter 435. Inmate substance abuse programs operated directly or under contract with the Department of Corrections are exempt from this requirement.
- 2. All service provider personnel who have direct contact with children receiving services or with adults who are developmentally disabled receiving services are subject to level 2 background screening as provided under s. 408.809 and chapter 435.
- 3. All peer specialists who have direct contact with individuals receiving services are subject to a background screening as provided in s. 397.417(5) level 2 background screening as provided under s. 408.809 and chapter 435.
- Section 3. Section 397.417, Florida Statutes, is amended to read:
 - 397.417 Peer specialists.-
 - (1) LEGISLATIVE FINDINGS AND INTENT.—
 - (a) The Legislature finds that:
- 124 <u>1. The ability to provide adequate behavioral health</u>
 125 services is limited by a shortage of professionals and

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126 paraprofessionals.

- 2. The state is experiencing an increase in opioid addictions, many of which prove fatal.
- 3. Peer specialists provide effective support services because they share common life experiences with the persons they assist.
- 4. Peer specialists promote a sense of community among those in recovery.
- 5. Research has shown that peer support facilitates recovery and reduces health care costs.
- 6. Persons who are otherwise qualified to serve as peer specialists may have a criminal history that prevents them from meeting background screening requirements.
- (b) The Legislature intends to expand the use of peer specialists as a cost-effective means of providing services. The Legislature also intends to ensure that peer specialists meet specified qualifications and modified background screening requirements and are adequately reimbursed for their services.
 - (2) QUALIFICATIONS.-
- (a) A person may seek certification as a peer specialist if he or she has been in recovery from a substance use disorder or mental illness for the past 2 years or if he or she is a family member or caregiver of a person with a substance use disorder or mental illness.
 - (b) To obtain certification as a peer specialist, a person

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must complete the training program developed under subsection

(3), achieve a passing score on the competency exam described in paragraph (3)(a), and meet the background screening requirements specified in subsection (5).

(3) DUTIES OF THE DEPARTMENT.

- (a) The department shall develop a training program for persons seeking certification as peer specialists. The department must give preference to trainers who are certified peer specialists. The training program must coincide with a competency exam and be based on current practice standards.
- (b) The department may certify peer specialists directly or may approve one or more third-party credentialing entities for the purposes of certifying peer specialists, approving training programs for individuals seeking certification as peer specialists, approving continuing education programs, and establishing the minimum requirements and standards applicants must meet to maintain certification.
- (c) The department shall require that a person providing recovery support services be certified; however, an individual who is not certified may provide recovery support services as a peer specialist for up to 1 year if he or she is working toward certification and is supervised by a qualified professional or by a certified peer specialist who has at least 2 years of full-time experience as a peer specialist at a licensed behavioral health organization.

(4) PAYMENT.—Recovery support services may be reimbursed as a recovery service through the department, a behavioral health managing entity, or the Medicaid program. Medicaid managed care plans are encouraged to use peer specialists in providing recovery services.

(5) BACKGROUND SCREENING.-

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(a) A peer specialist, or an individual who is working toward certification and providing recovery support services as provided in subsection (3), must have completed or have been lawfully released from confinement, supervision, or any nonmonetary condition imposed by the court for any felony and must undergo a background screening as a condition of initial and continued employment. The applicant must submit a full set of fingerprints to the department or to a vendor, an entity, or an agency that enters into an agreement with the Department of Law Enforcement as provided in s. 943.053(13). The department, vendor, entity, or agency shall forward the fingerprints to the Department of Law Enforcement for state processing and the Department of Law Enforcement shall forward the fingerprints to the Federal Bureau of Investigation for national processing. The applicant is responsible for all fees charged in connection with state and federal fingerprint processing and retention. The state cost for fingerprint processing shall be as provided in s. 943.053(3)(e) for records provided to persons or entities other than those specified as exceptions therein. Fingerprints

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submitted to the Department of Law Enforcement pursuant to this paragraph shall be retained as provided in s. 435.12 and, when the Department of Law Enforcement begins participation in the program, enrolled in the Federal Bureau of Investigation's national retained fingerprint arrest notification program, as provided in s. 943.05(4). Any arrest record identified must be reported to the department.

- Administration, as applicable, may contract with one or more vendors to perform all or part of the electronic fingerprinting pursuant to this section. Such contracts must ensure that the owners and personnel of the vendor performing the electronic fingerprinting are qualified and will ensure the integrity and security of all personal identifying information.
- (c) Vendors who submit fingerprints on behalf of employers must:
 - 1. Meet the requirements of s. 943.053; and
- 2. Have the ability to communicate electronically with the department or the Agency for Health Care Administration, as applicable, and to accept screening results from the Department of Law Enforcement and provide the applicant's full first name, middle initial, and last name; social security number or individual taxpayer identification number; date of birth; mailing address; sex; and race.
 - (d) The background screening conducted under this

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subsection must ensure that a peer specialist has not, during the previous 3 years, been arrested for and is not awaiting final disposition of, been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, or been adjudicated delinquent and the record has not been sealed or expunged for, any felony.

- (e) The background screening conducted under this subsection must ensure that a peer specialist has not been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, or been adjudicated delinquent and the record has not been sealed or expunged for, any offense prohibited under any of the following state laws or similar laws of another jurisdiction:
- 1. Section 393.135, relating to sexual misconduct with certain developmentally disabled clients and reporting of such sexual misconduct.
- 2. Section 394.4593, relating to sexual misconduct with certain mental health patients and reporting of such sexual misconduct.
- 3. Section 409.920, relating to Medicaid provider fraud, if the offense was a felony of the first or second degree.
- 4. Section 415.111, relating to abuse, neglect, or exploitation of vulnerable adults.
 - 5. Section 741.28, relating to domestic violence.
 - 6. Section 777.04, relating to attempts, solicitation, and

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251	conspiracy to commit an offense listed in this paragraph.
252	7. Section 782.04, relating to murder.
253	8. Section 782.07, relating to manslaughter, aggravated
254	manslaughter of an elderly person or a disabled adult,
255	aggravated manslaughter of a child, or aggravated manslaughter
256	of an officer, a firefighter, an emergency medical technician,
257	or a paramedic.
258	9. Section 782.071, relating to vehicular homicide.
259	10. Section 782.09, relating to killing an unborn child by
260	injury to the mother.
261	11. Chapter 784, relating to assault, battery, and
262	culpable negligence, if the offense was a felony.
263	12. Section 787.01, relating to kidnapping.
264	13. Section 787.02, relating to false imprisonment.
265	14. Section 787.025, relating to luring or enticing a
266	child.
267	15. Section 787.04(2), relating to leading, taking,
268	enticing, or removing a minor beyond state limits, or concealing
269	the location of a minor, with criminal intent pending custody
270	proceedings.
271	16. Section 787.04(3), relating to leading, taking,
272	enticing, or removing a minor beyond state limits, or concealing
273	the location of a minor, with criminal intent pending dependency
274	proceedings or proceedings concerning alleged abuse or neglect

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CODING: Words stricken are deletions; words underlined are additions.

of a minor.

276	17. Section 790.115(1), relating to exhibiting firearms or
277	weapons within 1,000 feet of a school.
278	18. Section 790.115(2)(b), relating to possessing an
279	electric weapon or device, a destructive device, or any other
280	weapon on school property.
281	19. Section 794.011, relating to sexual battery.
282	20. Former s. 794.041, relating to prohibited acts of
283	persons in familial or custodial authority.
284	21. Section 794.05, relating to unlawful sexual activity
285	with certain minors.
286	22. Section 794.08, relating to female genital mutilation.
287	23. Section 796.07, relating to procuring another to
288	commit prostitution, except for those offenses expunged pursuant
289	to s. 943.0583.
290	24. Section 798.02, relating to lewd and lascivious
291	behavior.
292	25. Chapter 800, relating to lewdness and indecent
293	exposure.
294	26. Section 806.01, relating to arson.
295	27. Section 810.02, relating to burglary, if the offense
296	was a felony of the first degree.
297	28. Section 810.14, relating to voyeurism, if the offense
298	was a felony.
299	29. Section 810.145, relating to video voyeurism, if the

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CODING: Words stricken are deletions; words underlined are additions.

offense was a felony.

301	30. Section 812.13, relating to robbery.
302	31. Section 812.131, relating to robbery by sudden
303	snatching.
304	32. Section 812.133, relating to carjacking.
305	33. Section 812.135, relating to home-invasion robbery.
306	34. Section 817.034, relating to communications fraud, if
307	the offense was a felony of the first degree.
308	35. Section 817.234, relating to false and fraudulent
309	insurance claims, if the offense was a felony of the first or
310	second degree.
311	36. Section 817.50, relating to fraudulently obtaining
312	goods or services from a health care provider and false reports
313	of a communicable disease.
314	37. Section 817.505, relating to patient brokering.
315	38. Section 817.568, relating to fraudulent use of
316	personal identification, if the offense was a felony of the
317	first or second degree.
318	39. Section 825.102, relating to abuse, aggravated abuse,
319	or neglect of an elderly person or a disabled adult.
320	40. Section 825.1025, relating to lewd or lascivious
321	offenses committed upon or in the presence of an elderly person
322	or a disabled person.
323	41. Section 825.103, relating to exploitation of an
324	elderly person or a disabled adult, if the offense was a felony.
325	42. Section 826.04, relating to incest.

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326	43. Section 827.03, relating to child abuse, aggravated
327	child abuse, or neglect of a child.
328	44. Section 827.04, relating to contributing to the
329	delinquency or dependency of a child.
330	45. Former s. 827.05, relating to negligent treatment of
331	children.
332	46. Section 827.071, relating to sexual performance by a
333	child.
334	47. Section 831.30, relating to fraud in obtaining
335	medicinal drugs.
336	48. Section 831.31, relating to sale, manufacture,
337	delivery, possession with intent to sell, manufacture, or
338	deliver of any counterfeit controlled substance, if the offense
339	was a felony.
340	49. Section 843.01, relating to resisting arrest with
341	violence.
342	50. Section 843.025, relating to depriving a law
343	enforcement, correctional, or correctional probation officer of
344	the means of protection or communication.
345	51. Section 843.12, relating to aiding in an escape.
346	52. Section 843.13, relating to aiding in the escape of
347	juvenile inmates of correctional institutions.
348	53. Chapter 847, relating to obscenity.
349	54. Section 874.05, relating to encouraging or recruiting
350	another to join a griminal gang

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351	55. Chapter 893, relating to drug abuse prevention and
352	control, if the offense was a felony of the second degree or
353	greater severity.
354	56. Section 895.03, relating to racketeering and
355	collection of unlawful debts.
356	57. Section 896.101, relating to the Florida Money
357	Laundering Act.
358	58. Section 916.1075, relating to sexual misconduct with
359	certain forensic clients and reporting of such sexual
360	misconduct.
361	59. Section 944.35(3), relating to inflicting cruel or
362	inhuman treatment on an inmate resulting in great bodily harm.
363	60. Section 944.40, relating to escape.
364	61. Section 944.46, relating to harboring, concealing, or
365	aiding an escaped prisoner.
366	62. Section 944.47, relating to introduction of contraband
367	into a correctional institution.
368	63. Section 985.701, relating to sexual misconduct in
369	juvenile justice programs.
370	64. Section 985.711, relating to introduction of
371	contraband into a detention facility.
372	(6) EXEMPTION REQUESTS.—A person who wishes to become a
373	peer specialist and is disqualified under subsection (5) may
374	request an exemption from disqualification pursuant to s. 435.07
375	from the department or the Agency for Health Care

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Administration, as applicable.

- (7) GRANDFATHER CLAUSE.—A peer specialist certified as of the effective date of this act is deemed to satisfy the requirements of this act
- (1) An individual may seek certification as a peer specialist if he or she has been in recovery from a substance use disorder or mental illness for at least 2 years, or if he or she has at least 2 years of experience as a family member or caregiver of a person with a substance use disorder or mental illness.
- (2) The department shall approve one or more third-party credentialing entities for the purposes of certifying peer specialists, approving training programs for individuals seeking certification as peer specialists, approving continuing education programs, and establishing the minimum requirements and standards that applicants must achieve to maintain certification. To obtain approval, the third-party credentialing entity must demonstrate compliance with nationally recognized standards for developing and administering professional certification programs to certify peer specialists.
- (3) An individual providing department-funded recovery support services as a peer specialist shall be certified pursuant to subsection (2). An individual who is not certified may provide recovery support services as a peer specialist for up to 1 year if he or she is working toward certification and is

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supervised by a qualified professional or by a certified peer specialist who has at least 3 years of full-time experience as a peer specialist at a licensed behavioral health organization.

Section 4. This act shall take effect July 1, 2021.

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