

By the Committee on Rules; and Senators Garcia and Book

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1 A bill to be entitled
2 An act relating to suicide prevention; amending s.
3 111.09, F.S.; defining the term "affiliated first
4 responder organization"; revising the definition of
5 the term "first responder peer"; amending s. 112.1815,
6 F.S.; authorizing certain diagnoses to be made through
7 telehealth; amending s. 394.9086, F.S.; renaming the
8 Commission on Mental Health and Substance Abuse as the
9 Commission on Mental Health and Substance Use
10 Disorder; revising the purposes of the commission to
11 include an assessment of the state's suicide
12 prevention infrastructure; revising the membership and
13 duties of the commission; requiring the commission to
14 submit annual interim reports to the Governor and
15 Legislature for a specified timeframe; revising the
16 date by which the commission must submit its final
17 report; extending the repeal date of the commission;
18 providing an effective date.

19
20 Be It Enacted by the Legislature of the State of Florida:

21
22 Section 1. Subsection (1) of section 111.09, Florida
23 Statutes, is amended to read:

24 111.09 Peer support for first responders.—

25 (1) For purposes of this section, the term:

26 (a) "Affiliated first responder organization" includes, but
27 is not limited to, any of the following organizations:

28 1. Regularly organized volunteer firefighting departments
29 or associations.

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30 2. Regularly organized volunteer ambulance services.

31 3. Combination fire departments, as that term is defined in
32 s. 633.135(1).

33 (b) "First responder" has the same meaning as provided in
34 s. 112.1815 and includes 911 public safety telecommunicators as
35 defined in s. 401.465.

36 (c)~~(b)~~ "First responder peer" means a person who:

37 1. Is not a health care practitioner as defined in s.
38 456.001.

39 2. Has experience working as or with a first responder,
40 including active, volunteer, and retired first responders,
41 regarding any physical or emotional conditions or issues
42 associated with the first responder's employment.

43 3. Has been designated by the first responder's employing
44 agency or affiliated first responder organization to provide
45 peer support as provided in this section and has received
46 training for this purpose.

47 (d)~~(e)~~ "Peer support" means the provision of physical,
48 moral, or emotional support to a first responder by a first
49 responder peer for the purpose of addressing physical or
50 emotional conditions or other issues associated with being a
51 first responder.

52 (e)~~(d)~~ "Peer support communication" means electronic, oral,
53 or written communication, made with a mutual expectation of
54 confidentiality while a first responder peer is providing peer
55 support in his or her official capacity.

56 Section 2. Paragraph (a) of subsection (5) of section
57 112.1815, Florida Statutes, is amended to read:

58 112.1815 Firefighters, paramedics, emergency medical

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59 technicians, and law enforcement officers; special provisions
60 for employment-related accidents and injuries.—

61 (5) (a) For the purposes of this section and chapter 440,
62 and notwithstanding sub-subparagraph (2) (a) 3. and ss. 440.093
63 and 440.151(2), posttraumatic stress disorder, as described in
64 the Diagnostic and Statistical Manual of Mental Disorders, Fifth
65 Edition, published by the American Psychiatric Association,
66 suffered by a first responder is a compensable occupational
67 disease within the meaning of subsection (4) and s. 440.151 if:

68 1. The posttraumatic stress disorder resulted from the
69 first responder acting within the course of his or her
70 employment as provided in s. 440.091; and

71 2. The first responder is examined and subsequently
72 diagnosed with such disorder by a licensed psychiatrist, in
73 person or through telehealth as that term is defined in s.
74 456.47, who is an authorized treating physician as provided in
75 chapter 440 due to one of the following events:

76 a. Seeing for oneself a deceased minor;

77 b. Directly witnessing the death of a minor;

78 c. Directly witnessing an injury to a minor who
79 subsequently died before or upon arrival at a hospital emergency
80 department;

81 d. Participating in the physical treatment of an injured
82 minor who subsequently died before or upon arrival at a hospital
83 emergency department;

84 e. Manually transporting an injured minor who subsequently
85 died before or upon arrival at a hospital emergency department;

86 f. Seeing for oneself a decedent whose death involved
87 grievous bodily harm of a nature that shocks the conscience;

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88 g. Directly witnessing a death, including suicide, that
89 involved grievous bodily harm of a nature that shocks the
90 conscience;

91 h. Directly witnessing a homicide regardless of whether the
92 homicide was criminal or excusable, including murder, mass
93 killing as defined in 28 U.S.C. s. 530C, manslaughter, self-
94 defense, misadventure, and negligence;

95 i. Directly witnessing an injury, including an attempted
96 suicide, to a person who subsequently died before or upon
97 arrival at a hospital emergency department if the person was
98 injured by grievous bodily harm of a nature that shocks the
99 conscience;

100 j. Participating in the physical treatment of an injury,
101 including an attempted suicide, to a person who subsequently
102 died before or upon arrival at a hospital emergency department
103 if the person was injured by grievous bodily harm of a nature
104 that shocks the conscience; or

105 k. Manually transporting a person who was injured,
106 including by attempted suicide, and subsequently died before or
107 upon arrival at a hospital emergency department if the person
108 was injured by grievous bodily harm of a nature that shocks the
109 conscience.

110 Section 3. Subsections (1), (2), and (3), paragraph (a) of
111 subsection (4), and subsections (5) and (6) of section 394.9086,
112 Florida Statutes, are amended to read:

113 394.9086 Commission on Mental Health and Substance Use
114 Disorder Abuse.—

115 (1) CREATION.—The Commission on Mental Health and Substance
116 Use Disorder Abuse, a commission as defined in s. 20.03(10), is

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117 created adjunct to the department. The department shall provide
118 administrative and staff support services relating to the
119 functions of the commission.

120 (2) PURPOSES.—The purposes of the commission are to examine
121 the current methods of providing mental health and substance use
122 disorder ~~abuse~~ services in the state and to improve the
123 effectiveness of current practices, procedures, programs, and
124 initiatives in providing such services; identify any barriers or
125 deficiencies in the delivery of such services; assess the
126 adequacy of the current infrastructure of Florida's 988 Suicide
127 and Crisis Lifeline system and other components of the state's
128 crisis response services; and recommend changes to existing
129 laws, rules, and policies necessary to implement the
130 commission's recommendations.

131 (3) MEMBERSHIP; TERM LIMITS; MEETINGS.—

132 (a) The commission shall be composed of 20 ~~19~~ members as
133 follows:

134 1. A member of the Senate, appointed by the President of
135 the Senate.

136 2. A member of the House of Representatives, appointed by
137 the Speaker of the House of Representatives.

138 3. The Secretary of Children and Families or his or her
139 designee.

140 4. The Secretary of the Agency for Health Care
141 Administration or his or her designee.

142 5. A person living with a mental health disorder, appointed
143 by the President of the Senate.

144 6. A family member of a consumer of publicly funded mental
145 health services, appointed by the President of the Senate.

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146 7. A representative of the Louis de la Parte Florida Mental
147 Health Institute within the University of South Florida,
148 appointed by the President of the Senate.

149 8. A representative of a county school district, appointed
150 by the President of the Senate.

151 9. A representative of mental health courts, appointed by
152 the Governor.

153 10. A representative of a treatment facility, as defined in
154 s. 394.455, appointed by the Speaker of the House of
155 Representatives.

156 11. A representative of a managing entity, as defined in s.
157 394.9082(2), appointed by the Speaker of the House of
158 Representatives.

159 12. A representative of a community substance use disorder
160 ~~abuse~~ provider, appointed by the Speaker of the House of
161 Representatives.

162 13. A psychiatrist licensed under chapter 458 or chapter
163 459 practicing within the mental health delivery system,
164 appointed by the Speaker of the House of Representatives.

165 14. A psychologist licensed under chapter 490 practicing
166 within the mental health delivery system, appointed by the
167 Governor.

168 15. A mental health professional licensed under chapter
169 491, appointed by the Governor.

170 16. An emergency room physician, appointed by the Governor.

171 17. A representative from the field of law enforcement,
172 appointed by the Governor.

173 18. A representative from the criminal justice system,
174 appointed by the Governor.

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175 19. A representative of a child welfare agency involved in
176 the delivery of behavioral health services, appointed by the
177 Governor.

178 20. A representative of the statewide Florida 211 Network
179 as described in s. 408.918, appointed by the Governor.

180 (4) DUTIES.—

181 (a) The duties of the Commission on Mental Health and
182 Substance Use Disorder ~~abuse~~ include the following:

183 1. Conducting a review and evaluation of the management and
184 functioning of the existing publicly supported mental health and
185 substance use disorder ~~abuse~~ systems and services in the
186 department, the Agency for Health Care Administration, and all
187 other departments which administer mental health and substance
188 use disorder ~~abuse~~ services. Such review shall include, at a
189 minimum, a review of current goals and objectives, current
190 planning, services strategies, coordination management,
191 purchasing, contracting, financing, local government funding
192 responsibility, and accountability mechanisms.

193 2. Considering the unique needs of persons who are dually
194 diagnosed.

195 3. Addressing access to, financing of, and scope of
196 responsibility in the delivery of emergency behavioral health
197 care services.

198 4. Addressing the quality and effectiveness of current
199 mental health and substance use disorder ~~abuse~~ services delivery
200 systems, and professional staffing and clinical structure of
201 services, roles, and responsibilities of public and private
202 providers, such as community mental health centers; community
203 substance use disorder ~~abuse~~ agencies; hospitals, including

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204 emergency services departments; law enforcement agencies; and
205 the judicial system.

206 5. Addressing priority population groups for publicly
207 funded mental health and substance use disorder ~~abuse~~ services,
208 identifying the comprehensive mental health and substance use
209 disorder ~~abuse~~ services delivery systems, mental health and
210 substance use disorder ~~abuse~~ needs assessment and planning
211 activities, and local government funding responsibilities for
212 mental health and substance use disorder ~~abuse~~ services.

213 6. Reviewing the implementation of chapter 2020-107, Laws
214 of Florida.

215 7. Identifying any gaps in the provision of mental health
216 and substance use disorder services.

217 8. Providing recommendations on how behavioral health
218 managing entities may fulfill their purpose of promoting service
219 continuity and work with community stakeholders throughout this
220 state in furtherance of supporting the 988 Suicide and Crisis
221 Lifeline system and other crisis response services.

222 9. Conducting an overview of the current infrastructure of
223 the 988 Suicide and Crisis Lifeline system.

224 10. Analyzing the current capacity of crisis response
225 services available throughout this state, including services
226 provided by mobile response teams and centralized receiving
227 facilities. The analysis must include information on the
228 geographic area and the total population served by each mobile
229 response team along with the average response time to each call
230 made to a mobile response team; the number of calls that a
231 mobile response team was unable to respond to due to staff
232 limitations, travel distance, or other factors; and the veteran

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233 status and age groups of individuals served by mobile response
234 teams.

235 11. Evaluating and making recommendations to improve
236 linkages between the 988 Suicide and Crisis Lifeline
237 infrastructure and crisis response services within this state.

238 12. Identifying available mental health block grant funds
239 that can be used to support the 988 Suicide and Crisis Lifeline
240 and crisis response infrastructure within this state, including
241 any available funding through opioid settlements or through the
242 American Rescue Plan Act of 2021, Pub. L. No. 117-2; the
243 Coronavirus Aid, Relief, and Economic Security (CARES) Act, Pub.
244 L. No. 116-136; or other federal legislation.

245 13. In consultation with the Agency for Health Care
246 Administration, identifying sources of funding available through
247 the Medicaid program specifically for crisis response services,
248 including funding that may be available by seeking approval of a
249 Section 1115 waiver submitted to the Centers for Medicare and
250 Medicaid Services.

251 14.9. Making recommendations regarding the mission and
252 objectives of state-supported mental health and substance use
253 disorder ~~abuse~~ services and the planning, management, staffing,
254 financing, contracting, coordination, and accountability
255 mechanisms which will best foster the recommended mission and
256 objectives.

257 15.10. ~~Evaluating and making recommendations regarding the~~
258 establishment of a permanent, agency-level entity to manage
259 mental health, substance use disorder ~~abuse~~, and related
260 services statewide. At a minimum, the evaluation must consider
261 and describe the:

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- 262 a. Specific duties and organizational structure proposed
263 for the entity;
- 264 b. Resource needs of the entity and possible sources of
265 funding;
- 266 c. Estimated impact on access to and quality of services;
- 267 d. Impact on individuals with behavioral health needs and
268 their families, both those currently served through the affected
269 systems providing behavioral health services and those in need
270 of services; and
- 271 e. Relation to, integration with, and impact on providers,
272 managing entities, communities, state agencies, and systems
273 which provide mental health and substance use disorder ~~abuse~~
274 services in this state. Such recommendations must ensure that
275 the ability of such other agencies and systems to carry out
276 their missions and responsibilities is not impaired.
- 277 16. Evaluating and making recommendations regarding skills-
278 based training that teaches participants about mental health and
279 substance use disorder issues, including, but not limited to,
280 Mental Health First Aid models.
- 281 (5) REPORTS.~~Beginning~~ By January 1, 2023, and annually
282 thereafter through January 1, 2025, the commission shall submit
283 an interim report to the President of the Senate, the Speaker of
284 the House of Representatives, and the Governor containing its
285 findings and recommendations on how to best provide and
286 facilitate mental health and substance use disorder ~~abuse~~
287 services in the state. The commission shall submit its final
288 report to the President of the Senate, the Speaker of the House
289 of Representatives, and the Governor by September 1, 2026 ~~2023~~.
- 290 (6) REPEAL.—This section is repealed September 1, 2026

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291 2023, unless saved from repeal through reenactment by the
292 Legislature.

293 Section 4. This act shall take effect July 1, 2023.