

Amendment No. 1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED (Y/N)
ADOPTED AS AMENDED (Y/N)
ADOPTED W/O OBJECTION (Y/N)
FAILED TO ADOPT (Y/N)
WITHDRAWN (Y/N)
OTHER

1 Committee/Subcommittee hearing bill: Education & Employment
2 Committee

3 Representative Redondo offered the following:

4
5 **Amendment (with title amendment)**

6 Remove everything after the enacting clause and insert:

7 Section 1. Section 1006.05, Florida Statutes, is created
8 to read:

9 1006.05 Mental health coordinated system of care.-

10 (1) For purposes of this section, the term "care
11 coordinator" means a person who is responsible for participating
12 in the development and implementation of a services plan,
13 linking service providers to a child or adolescent and his or
14 her family, monitoring the delivery of services, providing
15 advocacy, collecting information to determine the effect of

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16 services and treatment, and performing care coordination as
17 defined in s. 394.4573(1).

18 (2) Pursuant to s. 394.491 and to further promote the
19 effective implementation of a coordinated system of care
20 pursuant to ss. 394.4573 and 394.495, each school district that
21 provides mental health assessment, diagnosis, intervention,
22 treatment, and recovery services to students diagnosed with one
23 or more mental health or any co-occurring substance use disorder
24 and students at high risk of such diagnoses must be guided by
25 and adhere to the guiding principles of the mental health
26 treatment and support system as provided under s. 394.491.

27 (3)(a) School districts shall contract with managing
28 entities to provide care coordinators for students with complex
29 behavioral health needs who continue to experience adverse
30 outcomes due to unmet needs or an inability to engage.

31 (b) A care coordinator provided by the managing entity
32 must be placed in each school district implementing a
33 coordinated system of care to ensure that students are receiving
34 necessary services and that appropriate funds are being used to
35 support the cost of treatment, including all available public
36 and private health insurance funds, before school-based mental
37 health treatment and support system funding is accessed to
38 purchase community-based services.

39 (c) When a student is identified as having experienced an
40 involuntary admission to an acute psychiatric care facility,

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41 school districts must address recommendations from the care
42 coordinator provided by the managing entity upon the return of
43 the student to the school setting.

44 (4)(a) Pursuant to s. 394.494, each school district shall
45 meet the general performance outcomes for the child and
46 adolescent mental health treatment and support system.

47 (b) Each school district shall report annually to the
48 department on the general performance outcomes for the child and
49 adolescent mental health treatment and support system and how
50 the support system funding is allocated and spent.

51 Section 2. This act shall take effect July 1, 2024.

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

55 Remove everything before the enacting clause and insert:
56 An act relating to coordinated systems of care for children;
57 creating s. 1006.05, F.S.; defining the term "care coordinator";
58 requiring certain school districts to be guided by and adhere to
59 a specified mental health and treatment support system for
60 certain children; requiring school districts to contract with
61 managing entities to provide care coordinators for certain
62 students; requiring that a care coordinator provided by the
63 managing entity be placed in certain school districts, for
64 specified purposes; requiring school districts to address
65 certain recommendations, and meet specified performance

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66 | outcomes; requiring each school district to report annually to
67 | the Department of Education on certain performance outcomes and
68 | the allocation and expenditure of certain funding; providing an
69 | effective date.