

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

586-02608-25

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1                                   A bill to be entitled  
2       An act relating to substance abuse and mental health  
3       care; amending s. 394.4573, F.S.; expanding mental  
4       health crisis services to include the 988 suicide and  
5       crisis lifeline call center; amending s. 394.4598,  
6       F.S.; authorizing the guardian advocate to be  
7       discharged when a patient is discharged from  
8       involuntary outpatient services; amending s. 394.4625,  
9       F.S.; requiring clinical psychologists who make  
10      determinations of involuntary placement at certain  
11      mental health facilities to have specified clinical  
12      experience; amending s. 394.4655, F.S.; providing  
13      cross-reference for specified criteria relating to  
14      orders to involuntary outpatient placement; amending  
15      s. 394.467, F.S.; providing that orders entered by  
16      administrative law judges for continued involuntary  
17      placement for patients at certain mental health  
18      facilities are final and subject to judicial review;  
19      requiring hearings to be scheduled immediately;  
20      requiring the clerk of the Division of Administrative  
21      Hearings to provide copies of petitions and  
22      individualized plans for continued services to the  
23      Department of Children and Families and other  
24      specified individuals; requiring the court or the  
25      administrative law judge to make certain  
26      determinations before waiving a patient's attendance  
27      at a hearing for continued involuntary placement;  
28      authorizing an administrative law judge to issue an  
29      order for involuntary services if the patient meets

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30 certain criteria; amending s. 394.67, F.S.; revising  
31 the definition of "crisis services" to include a 988  
32 suicide and crisis lifeline call center and defining  
33 the term "988 suicide and crisis lifeline call  
34 center"; creating s. 394.9088, F.S.; requiring the  
35 Department of Children and Families to authorize and  
36 provide oversight of the 988 suicide and crisis  
37 lifeline call centers and adopt specified rules;  
38 amending s. 397.427, F.S.; removing requirements  
39 relating to providers of medication-assisted treatment  
40 services for opiate addiction; amending s. 916.111,  
41 F.S.; revising training requirements for mental health  
42 professionals; amending s. 916.115, F.S.; requiring  
43 court appointed experts to have completed specified  
44 training and continued education; amending s. 916.12,  
45 F.S.; providing requirements for an expert to  
46 determine acceptable treatments available in a  
47 community; amending ss. 394.674, 394.74, and 397.68141  
48 F.S.; conforming cross-references; providing an  
49 effective date.

50  
51 Be It Enacted by the Legislature of the State of Florida:

52  
53 Section 1. Paragraph (d) of subsection (2) of section  
54 394.4573, Florida Statutes, is amended to read:

55 394.4573 Coordinated system of care; annual assessment;  
56 essential elements; measures of performance; system improvement  
57 grants; reports.—On or before December 1 of each year, the  
58 department shall submit to the Governor, the President of the

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59 Senate, and the Speaker of the House of Representatives an  
60 assessment of the behavioral health services in this state. The  
61 assessment shall consider, at a minimum, the extent to which  
62 designated receiving systems function as no-wrong-door models,  
63 the availability of treatment and recovery services that use  
64 recovery-oriented and peer-involved approaches, the availability  
65 of less-restrictive services, and the use of evidence-informed  
66 practices. The assessment shall also consider the availability  
67 of and access to coordinated specialty care programs and  
68 identify any gaps in the availability of and access to such  
69 programs in the state. The department's assessment shall  
70 consider, at a minimum, the needs assessments conducted by the  
71 managing entities pursuant to s. 394.9082(5). The department  
72 shall compile and include in the report all plans submitted by  
73 managing entities pursuant to s. 394.9082(8) and the  
74 department's evaluation of each plan.

75 (2) The essential elements of a coordinated system of care  
76 include:

77 (d) Crisis services, including the 988 suicide and crisis  
78 lifeline call center, mobile response teams, crisis  
79 stabilization units, addiction receiving facilities, and  
80 detoxification facilities.

81 Section 2. Subsection (8) of section 394.4598, Florida  
82 Statutes, are amended to read:

83 394.4598 Guardian advocate.—

84 (8) The guardian advocate shall be discharged when the  
85 patient is discharged from an order for involuntary outpatient  
86 services placement ~~placement~~ or involuntary inpatient placement or when  
87 the patient is transferred from involuntary to voluntary status.

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88 The court or a hearing officer shall consider the competence of  
89 the patient pursuant to subsection (1) and may consider an  
90 involuntarily placed patient's competence to consent to  
91 treatment at any hearing. Upon sufficient evidence, the court  
92 may restore, or the hearing officer may recommend that the court  
93 restore, the patient's competence. A copy of the order restoring  
94 competence or the certificate of discharge containing the  
95 restoration of competence shall be provided to the patient and  
96 the guardian advocate.

97 Section 3. Subsection (5) of section 394.4625, Florida  
98 Statutes, is amended to read:

99 394.4625 Voluntary admissions.—

100 (5) TRANSFER TO INVOLUNTARY STATUS.—When a voluntary  
101 patient, or an authorized person on the patient's behalf, makes  
102 a request for discharge, the request for discharge, unless  
103 freely and voluntarily rescinded, must be communicated to a  
104 physician, a clinical psychologist with at least 3 years of  
105 clinical ~~postdoctoral~~ experience ~~in the practice of clinical~~  
106 ~~psychology~~, or a psychiatrist as quickly as possible, but not  
107 later than 12 hours after the request is made. If the patient  
108 meets the criteria for involuntary placement, the administrator  
109 of the facility must file with the court a petition for  
110 involuntary placement, within 2 court working days after the  
111 request for discharge is made. If the petition is not filed  
112 within 2 court working days, the patient must be discharged.  
113 Pending the filing of the petition, the patient may be held and  
114 emergency treatment rendered in the least restrictive manner,  
115 upon the order of a physician or a psychiatric nurse practicing  
116 within the framework of an established protocol with a

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117 psychiatrist, if it is determined that such treatment is  
118 necessary for the safety of the patient or others.

119 Section 4. Subsection (2) of section 394.4655, Florida  
120 Statutes, is amended to read:

121 394.4655 Orders to involuntary outpatient placement.—

122 (2) A court or a county court may order an individual to  
123 involuntary outpatient placement under s. 394.467. The criteria  
124 for ordering a person to involuntary outpatient placement, as  
125 well as all of the requirements and processes for placement,  
126 including, but not limited to, recommendations for involuntary  
127 outpatient placement, petitions, appointment of counsel, and  
128 hearings on involuntary outpatient placement are provided in s.  
129 394.467.

130 (3) When recommending an order to involuntary outpatient  
131 placement, the petitioner, as defined in s. 394.467(4), shall  
132 prepare a services plan for the patient in accordance with s.  
133 394.467.

134 Section 5. Paragraph (a) of subsection (1) and subsection  
135 (11) of section 394.467, Florida Statutes, are amended to read:

136 394.467 Involuntary inpatient placement and involuntary  
137 outpatient services.—

138 (1) DEFINITIONS.—As used in this section, the term:

139 (a) "Court" means a circuit court or, for commitments only  
140 to involuntary outpatient services ~~as defined in s. 394.4655,~~ a  
141 county court.

142 (11) PROCEDURE FOR CONTINUED INVOLUNTARY SERVICES.—

143 (a) A petition for continued involuntary services must be  
144 filed if the patient continues to meet ~~meets~~ the criteria for  
145 involuntary services.

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146 (b)1. If a patient receiving involuntary outpatient  
147 services continues to meet the criteria for involuntary  
148 outpatient services, the service provider must file in the court  
149 that issued the initial order for involuntary outpatient  
150 services a petition for continued involuntary outpatient  
151 services.

152 2. If a patient in involuntary inpatient placement  
153 continues to meet the criteria for involuntary services and is  
154 being treated at a receiving facility, the administrator must,  
155 before the expiration of the period the receiving facility is  
156 authorized to retain the patient, file in the court that issued  
157 the initial order for involuntary inpatient placement, a  
158 petition requesting authorization for continued involuntary  
159 services. The administrator may petition for inpatient or  
160 outpatient services.

161 3. If a patient in involuntary inpatient placement  
162 continues to meet the criteria for involuntary services and is  
163 being treated at a treatment facility, the administrator must,  
164 before expiration of the period the treatment facility is  
165 authorized to retain the patient, file a petition requesting  
166 authorization for continued involuntary services. The  
167 administrator may petition for inpatient or outpatient services.  
168 Hearings on petitions for continued involuntary services of an  
169 individual placed at any treatment facility are administrative  
170 hearings and must be conducted in accordance with s. 120.57(1),  
171 except that any order entered by the administrative law judge is  
172 final and subject to judicial review in accordance with s.  
173 120.68. Orders concerning patients committed after successfully  
174 pleading not guilty by reason of insanity are governed by s.

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175 916.15.

176 4. ~~The court shall immediately schedule~~ A hearing on the  
177 petition ~~shall to~~ be scheduled immediately and held within 15  
178 days after the petition is filed.

179 5. The existing involuntary services order shall remain in  
180 effect until disposition on the petition for continued  
181 involuntary services.

182 (c) The petition must be accompanied by a statement from  
183 the patient's physician, psychiatrist, psychiatric nurse, or  
184 clinical psychologist justifying the request, a brief  
185 description of the patient's treatment during the time he or she  
186 was receiving involuntary services, and an individualized plan  
187 of continued treatment developed in consultation with the  
188 patient or the patient's guardian advocate, if applicable. If  
189 the petition is for involuntary outpatient services, it must  
190 comply with the requirements of subparagraph (4)(d)3. When the  
191 petition has been filed, the clerk of the court or the clerk of  
192 the Division of Administrative Hearings, as applicable, shall  
193 provide copies of the petition and the individualized plan of  
194 continued services to the department, the patient, the patient's  
195 guardian advocate, the state attorney, and the patient's private  
196 counsel or the public defender.

197 (d) The court shall appoint counsel to represent the person  
198 who is the subject of the petition for continued involuntary  
199 services in accordance with the provisions set forth in  
200 subsection (5), unless the person is otherwise represented by  
201 counsel or ineligible.

202 (e) Hearings on petitions for continued involuntary  
203 outpatient services must be before the court that issued the

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204 order for involuntary outpatient services. However, the patient  
205 and the patient's attorney may agree to a period of continued  
206 outpatient services without a court hearing.

207 (f) Hearings on petitions for continued involuntary  
208 inpatient placement in receiving facilities, or involuntary  
209 outpatient services following involuntary inpatient services,  
210 must be held in the county or the facility, as appropriate,  
211 where the patient is located.

212 (g) The court may appoint a magistrate to preside at the  
213 hearing. The procedures for obtaining an order pursuant to this  
214 paragraph must meet the requirements of subsection (7).

215 (h) Notice of the hearing must be provided as set forth in  
216 s. 394.4599.

217 (i) If a patient's attendance at the hearing is voluntarily  
218 waived, the court or the administrative law judge must determine  
219 that the patient knowingly, intelligently, and voluntarily  
220 waived his or her right to be present, before waiving the  
221 presence of the patient from all or a portion of the hearing.  
222 Alternatively, if at the hearing the court or the administrative  
223 law judge finds that attendance at the hearing is not consistent  
224 with the best interests of the patient, the court or the  
225 administrative law judge may waive the presence of the patient  
226 from all or any portion of the hearing, unless the patient,  
227 through counsel, objects to the waiver of presence. The  
228 testimony in the hearing must be under oath, and the proceedings  
229 must be recorded.

230 (j) If at a hearing it is shown that the patient continues  
231 to meet the criteria for involuntary services, the court or the  
232 administrative law shall issue an order for continued



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233 involuntary outpatient services, involuntary inpatient  
234 placement, or a combination of involuntary services for up to 6  
235 months. The same procedure shall be repeated before the  
236 expiration of each additional period the patient is retained.

237 (k) If the patient has been ordered to undergo involuntary  
238 services and has previously been found incompetent to consent to  
239 treatment, the court shall consider testimony and evidence  
240 regarding the patient's competence. If the patient's competency  
241 to consent to treatment is restored, the discharge of the  
242 guardian advocate is governed by s. 394.4598. If the patient has  
243 been ordered to undergo involuntary inpatient placement only and  
244 the patient's competency to consent to treatment is restored,  
245 the administrative law judge may issue a recommended order, to  
246 the court that found the patient incompetent to consent to  
247 treatment, that the patient's competence be restored and that  
248 any guardian advocate previously appointed be discharged.

249 (l) If continued involuntary inpatient placement is  
250 necessary for a patient in involuntary inpatient placement who  
251 was admitted while serving a criminal sentence, but his or her  
252 sentence is about to expire, or for a minor involuntarily  
253 placed, but who is about to reach the age of 18, the  
254 administrator shall petition the administrative law judge for an  
255 order authorizing continued involuntary inpatient placement.

256  
257 The procedure required in this subsection must be followed  
258 before the expiration of each additional period the patient is  
259 involuntarily receiving services.

260 Section 6. Present subsections (1) through (25) of section  
261 394.67, Florida Statutes, are redesignated as subsections (2)

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262 through (26), respectively, subsection (4) is amended, and a new  
263 subsection (1) is added to that section, to read:

264 394.67 Definitions.—As used in this part, the term:

265 (1) "988 suicide and crisis lifeline call center" means a  
266 call center meeting national accreditation and recognized by the  
267 department to receive 988 calls, texts, or other forms of  
268 communication in this state.

269 (4) "Crisis services" means short-term evaluation,  
270 stabilization, and brief intervention services provided to a  
271 person who is experiencing an acute mental or emotional crisis,  
272 as defined in subsection (19) ~~(18)~~, or an acute substance abuse  
273 crisis, as defined in subsection (20) ~~(19)~~, to prevent further  
274 deterioration of the person's mental health. Crisis services are  
275 provided in settings such as a crisis stabilization unit, an  
276 inpatient unit, a short-term residential treatment program, a  
277 detoxification facility, or an addictions receiving facility; at  
278 the site of the crisis by a mobile crisis response team; or at a  
279 hospital on an outpatient basis; or telephonically by a 988  
280 suicide and crisis lifeline call center.

281 Section 7. Section 394.9088, Florida Statutes, is created  
282 to read:

283 394.9088 988 suicide and crisis lifeline call center.—

284 (1) The department shall authorize and provide oversight to  
285 988 suicide and crisis lifeline call centers. Unless authorized  
286 by the department, call centers are not permitted to conduct 988  
287 suicide and crisis lifeline services. The department may  
288 implement a corrective action plan, suspension, or revocation of  
289 authorization for failure to comply with this section and rules  
290 adopted under this section.

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- 291 (2) The department shall adopt rules relating to:  
292 (a) The process for authorization of 988 suicide and crisis  
293 lifeline call centers.  
294 (b) Minimum standards for 988 suicide and crisis lifeline  
295 call centers to be authorized, including but not limited to,  
296 service delivery, quality of care, and performance outcomes.  
297 (c) The adequacy and consistency of 988 suicide and crisis  
298 lifeline call centers' personnel certifications, accreditations,  
299 quality assurance standards, and minimum training standards.  
300 (d) Implementation of a cohesive statewide plan for 988  
301 suicide and crisis lifeline call centers to achieve statewide  
302 interoperability with the 911 system and to provide individuals  
303 with rapid and direct access to the appropriate care.

304 Section 8. Present subsections (3) through (9) of section  
305 397.427, Florida Statutes, are redesignated as subsections (2)  
306 through (8), respectively, and present subsections (2) and (5)  
307 of that section are amended, to read:

308 397.427 Medication-assisted treatment service providers;  
309 rehabilitation program; needs assessment and provision of  
310 services; persons authorized to issue takeout medication;  
311 unlawful operation; penalty.-

312 ~~(2) The department shall determine the need for~~  
313 ~~establishing providers of medication-assisted treatment services~~  
314 ~~for opiate addiction.~~

315 ~~(a) Providers of medication-assisted treatment services for~~  
316 ~~opiate addiction may be established only in response to the~~  
317 ~~department's determination and publication of need for~~  
318 ~~additional medication treatment services.~~

319 ~~(b) If needs assessment is required, the department shall~~

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320 ~~annually conduct the assessment and publish a statement of~~  
321 ~~findings which identifies each substate entity's need.~~

322 ~~(c) Notwithstanding paragraphs (a) and (b), the license for~~  
323 ~~medication-assisted treatment programs for opiate addiction~~  
324 ~~licensed before October 1, 1990, may not be revoked solely~~  
325 ~~because of the department's determination concerning the need~~  
326 ~~for medication-assisted treatment services for opiate addiction.~~

327 ~~(4)(5) The department shall also determine the need for~~  
328 ~~establishing medication-assisted treatment for substance use~~  
329 ~~disorders other than opiate dependence. Service providers within~~  
330 ~~the publicly funded system shall be funded for provision of~~  
331 ~~these services based on the availability of funds.~~

332 Section 9. Subsection (3) of section 397.68141, Florida  
333 Statutes, is amended to read:

334 397.68141 Contents of petition for involuntary treatment  
335 services.—A petition for involuntary services must contain the  
336 name of the respondent; the name of the petitioner; the  
337 relationship between the respondent and the petitioner; the name  
338 of the respondent's attorney, if known; and the factual  
339 allegations presented by the petitioner establishing the need  
340 for involuntary services for substance abuse impairment.

341 (3) If there is an emergency, the petition must also  
342 describe the respondent's exigent circumstances and include a  
343 request for an ex parte assessment and stabilization order that  
344 must be executed pursuant to s. 397.6818 ~~s. 397.68151~~.

345 Section 10. Section 916.111, Florida Statutes, is amended  
346 to read:

347 916.111 Training of mental health experts.—The evaluation  
348 of defendants for competency to proceed or for sanity at the

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349 time of the commission of the offense shall be conducted in such  
350 a way as to ensure uniform application of the criteria  
351 enumerated in Rules 3.210 and 3.216, Florida Rules of Criminal  
352 Procedure. The department shall develop, and may contract with  
353 accredited institutions:

354 (1) To provide:

355 (a) A plan for training mental health professionals to  
356 perform forensic evaluations and to standardize the criteria and  
357 procedures to be used in these evaluations;

358 (b) Clinical protocols and procedures based upon the  
359 criteria of Rules 3.210 and 3.216, Florida Rules of Criminal  
360 Procedure; and

361 (c) Training for mental health professionals in the  
362 application of these protocols and procedures in performing  
363 forensic evaluations and providing reports to the courts.  
364 Training must include, but is not limited to, information on  
365 statutes and rules related to competency restoration, evidence-  
366 based practices, least restrictive treatment alternatives and  
367 placement options as described in s. 916.12(4)(c); and

368 (2) To compile and maintain the necessary information for  
369 evaluating the success of this program, including the number of  
370 persons trained, the cost of operating the program, and the  
371 effect on the quality of forensic evaluations as measured by  
372 appropriateness of admissions to state forensic facilities and  
373 to community-based care programs.

374 Section 11. Subsection (1) of section 916.115, Florida  
375 Statutes, is amended to read:

376 916.115 Appointment of experts.—

377 (1) The court shall appoint no more than three experts to

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378 determine the mental condition of a defendant in a criminal  
379 case, including competency to proceed, insanity, involuntary  
380 placement, and treatment. The experts may evaluate the defendant  
381 in jail or in another appropriate local facility or in a  
382 facility of the Department of Corrections.

383 (a) The court ~~To the extent possible,~~ The appointed experts  
384 shall:

385 1. have completed forensic evaluator training approved by  
386 ~~the department, and each shall~~ Be a psychiatrist, licensed  
387 psychologist, or physician.

388 2. Have completed initial and ongoing forensic evaluator  
389 training, provided by the department.

390 3. If performing juvenile evaluations, complete annually,  
391 juvenile forensic competency evaluation training approved by the  
392 department.

393 (b) Existing evaluators shall complete department-provided  
394 continuing education training by July 1, 2026, to remain active  
395 on the list.

396 (c) ~~(b)~~ The department shall maintain and annually provide  
397 the courts with a list of available mental health professionals  
398 who have completed the initial and annual approved training as  
399 experts.

400 Section 12. Paragraph (d) of subsection (4) of section  
401 916.12, Florida Statutes, is amended to read:

402 916.12 Mental competence to proceed.—

403 (4) If an expert finds that the defendant is incompetent to  
404 proceed, the expert shall report on any recommended treatment  
405 for the defendant to attain competence to proceed. In  
406 considering the issues relating to treatment, the examining

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407 expert shall specifically report on:

408 (d) The availability of acceptable treatment and, if  
409 treatment is available in the community, the expert shall so  
410 state in the report. In determining what acceptable treatments  
411 are available in the community, the expert shall, at a minimum,  
412 use current information or resources on less restrictive  
413 treatment alternatives, as described in paragraph (c) and those  
414 obtained from training and continuing education approved by the  
415 department.

416

417 The examining expert's report to the court shall include a full  
418 and detailed explanation regarding why the alternative treatment  
419 options referenced in the evaluation are insufficient to meet  
420 the needs of the defendant.

421 Section 13. Paragraph (a) of subsection (1) of section  
422 394.674, Florida Statutes, is amended to read:

423 394.674 Eligibility for publicly funded substance abuse and  
424 mental health services; fee collection requirements.—

425 (1) To be eligible to receive substance abuse and mental  
426 health services funded by the department, an individual must be  
427 a member of at least one of the department's priority  
428 populations approved by the Legislature. The priority  
429 populations include:

430 (a) For adult mental health services:

431 1. Adults who have severe and persistent mental illness, as  
432 designated by the department using criteria that include  
433 severity of diagnosis, duration of the mental illness, ability  
434 to independently perform activities of daily living, and receipt  
435 of disability income for a psychiatric condition. Included

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436 within this group are:

437 a. Older adults in crisis.

438 b. Older adults who are at risk of being placed in a more  
439 restrictive environment because of their mental illness.

440 c. Persons deemed incompetent to proceed or not guilty by  
441 reason of insanity under chapter 916.

442 d. Other persons involved in the criminal justice system.

443 e. Persons diagnosed as having co-occurring mental illness  
444 and substance abuse disorders.

445 2. Persons who are experiencing an acute mental or  
446 emotional crisis as defined in s. 394.67 ~~s. 394.67(18)~~.

447 Section 14. Paragraph (a) of subsection (3) of section  
448 394.74, Florida Statutes, is amended to read:

449 394.74 Contracts for provision of local substance abuse and  
450 mental health programs.—

451 (3) Contracts shall include, but are not limited to:

452 (a) A provision that, within the limits of available  
453 resources, substance abuse and mental health crisis services, as  
454 defined in s. 394.67 ~~s. 394.67(4)~~, shall be available to any  
455 individual residing or employed within the service area,  
456 regardless of ability to pay for such services, current or past  
457 health condition, or any other factor;

458 Section 15. This act shall take effect July 1, 2025.