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LEGISLATIVE ACTION

Senate	.	House
Comm: RCS	.	
03/26/2025	.	
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The Committee on Children, Families, and Elder Affairs
(Trumbull) recommended the following:

Senate Amendment (with title amendment)

Delete everything after the enacting clause
and insert:

Section 1. Subsection (7) of section 394.9082, Florida
Statutes, is amended, paragraph (n) is added to subsection (3),
and paragraphs (v) and (w) are added to subsection (5) of that
section, to read:

394.9082 Behavioral health managing entities.—

(3) DEPARTMENT DUTIES.—The department shall:



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- 11 (n)1. Contract for all of the following:
- 12 a. Biennial operational and financial audits of each
- 13 managing entity to include all of the following:
- 14 (I) A review of business practices, personnel, financial
- 15 records, related parties, compensation, and other areas as
- 16 determined by the department.
- 17 (II) The services administered, the method of provider
- 18 payment, expenditures, outcomes, and other information as
- 19 determined by the department.
- 20 (III) Referral patterns, including managing entity referral
- 21 volume; provider referral assignments; services referred; length
- 22 of time to obtain services; and key referral performance
- 23 measures.
- 24 (IV) Provider network adequacy and provider network
- 25 participation in the department's available bed platform, the
- 26 Opioid Data Management System, the Agency for Health Care
- 27 Administration Event Notification Service, and other department
- 28 required provider data submissions.
- 29 (V) Audits of each managing entity's expenditures and
- 30 claims. Such an audit must do both of the following:
- 31 (A) Compare services administered through each managing
- 32 entity, the outcomes of each managing entity's expenditures,
- 33 each managing entity's Medicaid expenditures for behavioral
- 34 health services, and any other information as determined by the
- 35 department.
- 36 (B) Analyze services funded by each managing entity
- 37 rendered to individuals who are also Medicaid beneficiaries to,
- 38 at a minimum, assess the extent to which managing entities are
- 39 funding services that are also available as covered services



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40 under the Medicaid program.

41 b. Recommendations to improve transparency of system
42 performance, including, but not limited to, metrics and criteria
43 used to measure each managing entity's performance and patient
44 and system outcomes, and the format and method to be used to
45 collect and report necessary data and information.

46 2. Prepare a report of the information gathered in
47 subparagraph 1. and present the final report on or before
48 December 1, 2025, to the Governor, the President of the Senate,
49 and the Speaker of the House of Representatives.

50 (5) MANAGING ENTITY DUTIES.—A managing entity shall:

51 (v) Report all required data to the department in a
52 standardized electronic format to ensure interoperability and to
53 facilitate data analysis. The submission format must meet all of
54 the following criteria:

55 1. Provider payments must be reported using a standardized
56 format for electronic data interchange that is used for health
57 care claims processing.

58 2. Information must be organized into discrete, machine-
59 readable data elements that allow for efficient processing and
60 integration with other datasets.

61 3. All data fields must comply with established protocols
62 as specified by the department.

63 4. The standardized format must be compatible with
64 automated systems to enable the downloading, parsing, and
65 combining of data with other sources for analysis.

66 5. Submissions must pass validation checks to confirm
67 adherence to the required data structure and format before the
68 submission is accepted.



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69 (w) Submit to the department all documents that are
70 required under contract for submission on a routine basis in an
71 electronic format that allows for accurate text recognition and
72 data extraction as specified by the department, which may
73 include, but is not limited to, Portable Document Format or
74 machine-readable text files. The documents must be accompanied
75 by metadata containing key information that ensures proper
76 organization, processing, and integration into the department's
77 systems. The required metadata must include, but is not limited
78 to, all of the following elements:

79 1. A descriptive and unique name for the document,
80 following any naming conventions prescribed by the department.

81 2. The date the document is uploaded.

82 3. A predefined classification indicating the nature or
83 category of the document.

84 4. Any relevant identifiers, such as application numbers,
85 case numbers, or tracking codes, as specified by the department.

86 5. The name, contact information, and any other required
87 identification number, which may include, but is not limited to,
88 a contract, license, or registration number, of the person or
89 organization submitting the document.

90 6. Any other metadata fields as prescribed by the
91 department to facilitate accurate processing and analysis.

92 (7) PERFORMANCE MEASUREMENT AND ACCOUNTABILITY.—

93 (a) Managing entities shall collect and submit data to the
94 department regarding persons served, outcomes of persons served,
95 costs of services provided through the department's contract,
96 and other data as required by the department. The department
97 shall evaluate managing entity performance and the overall



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98 progress made by the managing entity, together with other
99 systems, in meeting the community's behavioral health needs,
100 based on consumer-centered outcome measures that reflect
101 national standards, if possible, that can be accurately
102 measured. The department shall work with managing entities to
103 establish performance standards, including, but not limited to:

104 1.~~(a)~~ The extent to which individuals in the community
105 receive services, including, but not limited to, parents or
106 caregivers involved in the child welfare system who need
107 behavioral health services.

108 2.~~(b)~~ The improvement in the overall behavioral health of a
109 community.

110 3.~~(c)~~ The improvement in functioning or progress in the
111 recovery of individuals served by the managing entity, as
112 determined using person-centered measures tailored to the
113 population.

114 4.~~(d)~~ The success of strategies to:

115 a.~~1.~~ Divert admissions from acute levels of care, jails,
116 prisons, and forensic facilities as measured by, at a minimum,
117 the total number and percentage of clients who, during a
118 specified period, experience multiple admissions to acute levels
119 of care, jails, prisons, or forensic facilities;

120 b.~~2.~~ Integrate behavioral health services with the child
121 welfare system; and

122 c.~~3.~~ Address the housing needs of individuals being
123 released from public receiving facilities who are homeless.

124 5.~~(e)~~ Consumer and family satisfaction.

125 6.~~(f)~~ The level of engagement of key community
126 constituencies, such as law enforcement agencies, community-



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127 based care lead agencies, juvenile justice agencies, the courts,
128 school districts, local government entities, hospitals, and
129 other organizations, as appropriate, for the geographical
130 service area of the managing entity.

131 (b) Managing entities must submit specific measures to the
132 department regarding individual outcomes and system functioning,
133 which the department must post to, and maintain on, its website
134 by the 15th of every month. The posted measures must reflect
135 performance for the previous calendar month. Each managing
136 entity must report each measure using a standard methodology
137 determined by the department and submit the data to the
138 department by the deadline specified by the department. The
139 measures shall include data from individuals served by each
140 managing entity for services funded by the managing entity, to
141 the extent feasible and appropriate. The measures shall be
142 reported and posted stratified by, at a minimum, whether the
143 individual is a child or an adult and whether the individual is
144 a Medicaid recipient. Such measures shall include, at a minimum,
145 all of the following:

146 1. The number and percentage of individuals who are high
147 utilizers of crisis behavioral health services.

148 2. The number and percentage of individuals referred to
149 outpatient behavioral health services after their discharge from
150 a receiving or treatment facility, an emergency department under
151 this chapter, or an inpatient or residential licensed service
152 component under chapter 397 and who begin receiving such
153 services within 7 days after discharge.

154 3. The average wait time for initial appointments for
155 behavioral health services, categorized by the type of service.



156 4. The number and percentage of individuals with
157 significant behavioral health symptoms who are seeking urgent
158 but noncrisis acute care and who are scheduled to be seen by a
159 provider within 1 business day after initial contact with the
160 provider.

161 5. The number and percentage of emergency department visits
162 per capita for behavioral health-related issues.

163 6. The incidence of medication errors.

164 7. The number and percentage of adverse incidents,
165 including, but not limited to, self-harm, occurring during
166 inpatient and outpatient behavioral health services.

167 8. The number and percentage of individuals with co-
168 occurring conditions who receive integrated care.

169 9. The number and percentage of individuals discharged from
170 a receiving or treatment facility under this chapter or an
171 inpatient or residential licensed service component under
172 chapter 397 who successfully transition to ongoing services at
173 the appropriate level of care.

174 10. The rate of readmissions to emergency departments due
175 to behavioral health issues or to crisis stabilization units,
176 addictions receiving facilities, or other inpatient levels of
177 care under this chapter and chapter 397 within 30 days after
178 discharge from inpatient or outpatient behavioral health
179 services.

180 11. The average length of stay for inpatient behavioral
181 health services.

182 Section 2. This act shall take effect July 1, 2025.

183
184 ===== T I T L E A M E N D M E N T =====



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185 And the title is amended as follows:

186 Delete everything before the enacting clause
187 and insert:

188 A bill to be entitled

189 An act relating to behavioral health managing
190 entities; amending s. 394.9082, F.S.; requiring the
191 Department of Children and Families to contract
192 biennially for specified functions; requiring the
193 department to contract for recommendations for certain
194 transparency improvements; requiring the department to
195 prepare and present to the Governor and Legislature a
196 specified final report by a specified date; requiring
197 managing entities to report required data to the
198 department in a standardized electronic format;
199 providing requirements for such format; requiring
200 managing entities to electronically submit to the
201 department certain documents in a specified format and
202 with specified metadata; requiring managing entities
203 to submit certain specific measures to the department;
204 requiring the department to post and maintain such
205 measures on its website by a specified date every
206 month; requiring managing entities to report each
207 measure using a standard methodology determined by the
208 department; providing requirements for such measures;
209 providing an effective date.