

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

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A bill to be entitled

An act relating to child welfare; amending s. 39.407, F.S.; providing that a new medical report relating to the provision of psychotropic medication to a child in the legal custody of the Department of Children and Families may be required only under certain circumstances; amending s. 409.1451, F.S.; increasing the maximum age of eligibility for certain postsecondary education services and support; revising the requirements for a renewal award of postsecondary education services and support; requiring the inclusion of specific metrics for measuring outcomes and performance of postsecondary education services and support and aftercare services in a certain annual report; conforming provisions to changes made by the act; amending s. 409.175, F.S.; revising the definition of the terms "personnel" and "placement screening"; amending s. 409.912, F.S.; requiring a physician to provide to a pharmacy a copy of certain documentation, rather than a signed attestation, with certain prescriptions; providing an effective date.

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

Section 1. Paragraph (c) of subsection (3) of section

39.407, Florida Statutes, is amended to read:

39.407 Medical, psychiatric, and psychological examination and treatment of child; physical, mental, or substance abuse examination of person with or requesting child custody.-

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30 (3)

31 (c) Except as provided in paragraphs (b) and (e), the
32 department must file a motion seeking the court's authorization
33 to initially provide or continue to provide psychotropic
34 medication to a child in its legal custody. The motion must be
35 supported by a written report prepared by the department which
36 describes the efforts made to enable the prescribing physician
37 or psychiatric nurse, as defined in s. 394.455, to obtain
38 express and informed consent for providing the medication to the
39 child and other treatments considered or recommended for the
40 child. In addition, the motion must be supported by the
41 prescribing physician's or psychiatric nurse's signed medical
42 report providing:

43 1. The name of the child, the name and range of the dosage
44 of the psychotropic medication, and that there is a need to
45 prescribe psychotropic medication to the child based upon a
46 diagnosed condition for which such medication is being
47 prescribed.

48 2. A statement indicating that the physician or psychiatric
49 nurse, as defined in s. 394.455, has reviewed all medical
50 information concerning the child which has been provided.

51 3. A statement indicating that the psychotropic medication,
52 at its prescribed dosage, is appropriate for treating the
53 child's diagnosed medical condition, as well as the behaviors
54 and symptoms the medication, at its prescribed dosage, is
55 expected to address.

56 4. An explanation of the nature and purpose of the
57 treatment; the recognized side effects, risks, and
58 contraindications of the medication; drug-interaction

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59 precautions; the possible effects of stopping the medication;
60 and how the treatment will be monitored, followed by a statement
61 indicating that this explanation was provided to the child if
62 age appropriate and to the child's caregiver.

63 5. Documentation addressing whether the psychotropic
64 medication will replace or supplement any other currently
65 prescribed medications or treatments; the length of time the
66 child is expected to be taking the medication; and any
67 additional medical, mental health, behavioral, counseling, or
68 other services that the prescribing physician or psychiatric
69 nurse, as defined in s. 394.455, recommends.

70
71 A new medical report may be required only when there is a change
72 in the dosage or dosage range of the medication, the type of
73 medication prescribed, the manner of administration of the
74 medication, or the prescribing physician or psychiatric nurse.
75 For purposes of this paragraph, prescribing physicians and
76 psychiatric nurses belonging to the same group practice are
77 considered a single prescriber.

78 Section 2. Paragraphs (a) and (e) of subsection (2) of
79 section 409.1451, Florida Statutes, are amended, and paragraphs
80 (d) and (e) are added to subsection (6) of that section, to
81 read:

82 409.1451 The Road-to-Independence Program.—

83 (2) POSTSECONDARY EDUCATION SERVICES AND SUPPORT.—

84 (a) A young adult is eligible for services and support
85 under this subsection if he or she:

86 1. Was living in licensed care on his or her 18th birthday
87 or is currently living in licensed care; or was at least 14

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88 years of age and was adopted from foster care or placed with a
89 court-approved dependency guardian after spending at least 6
90 months in licensed care within the 12 months immediately
91 preceding such placement or adoption;

92 2. Spent at least 6 months in licensed care before reaching
93 his or her 18th birthday;

94 3. Earned a standard high school diploma pursuant to s.
95 1002.3105(5), s. 1003.4281, or s. 1003.4282, or its equivalent
96 pursuant to s. 1003.435;

97 4. Has been admitted for enrollment as a full-time student
98 or its equivalent in an eligible postsecondary educational
99 institution as provided in s. 1009.533. For purposes of this
100 section, the term "full-time" means 9 credit hours or the
101 vocational school equivalent. A student may enroll part-time if
102 he or she has a recognized disability or is faced with another
103 challenge or circumstance that would prevent full-time
104 attendance. A student needing to enroll part-time for any reason
105 other than having a recognized disability must get approval from
106 his or her academic advisor;

107 5. Has reached 18 years of age but is not yet 26 23 years
108 of age;

109 6. Has applied, with assistance from the young adult's
110 caregiver and the community-based lead agency, for any other
111 grants and scholarships for which he or she may qualify;

112 7. Submitted a Free Application for Federal Student Aid
113 which is complete and error free; and

114 8. Signed an agreement to allow the department and the
115 community-based care lead agency access to school records.

116 (e)1. The department must advertise the availability of the

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117 stipend and must provide notification of the criteria and
118 application procedures for the stipend to children and young
119 adults leaving, or who were formerly in, foster care;
120 caregivers; case managers; guidance and family services
121 counselors; principals or other relevant school administrators;
122 and guardians ad litem.

123 2. If the award recipient transfers from one eligible
124 institution to another and continues to meet eligibility
125 requirements, the award shall be transferred with the recipient.

126 3. The department, or an agency under contract with the
127 department, shall evaluate each Road-to-Independence award for
128 renewal eligibility on an annual basis. In order to be eligible
129 for a renewal award for the subsequent year, the young adult
130 must:

131 a. Be enrolled for or have completed the number of hours,
132 or the equivalent, to be considered a full-time student under
133 subparagraph (a)4., unless the young adult qualifies for an
134 exception under subparagraph (a)4.

135 b. Maintain standards of academic progress as defined by
136 the education institution, except that if the young adult's
137 progress is insufficient to renew the award at any time during
138 the eligibility period, the young adult may continue to be
139 enrolled for additional terms while attempting to restore
140 eligibility as long as progress towards the required level is
141 maintained.

142 c. Not have exceeded the lifetime limit of 60 months of
143 financial assistance for services and support provided under
144 this subsection. The lifetime limit applies without exception
145 and regardless of whether the award recipient receives the

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146 services and support under this subsection in consecutive or
147 nonconsecutive months.

148 4. Funds may be terminated during the interim between an
149 award and the evaluation for a renewal award if the department,
150 or an agency under contract with the department, determines that
151 the award recipient is no longer enrolled in an educational
152 institution as described in subparagraph (a)4. or is no longer a
153 resident of this state.

154 5. The department, or an agency under contract with the
155 department, shall notify a recipient who is terminated and
156 inform the recipient of his or her right to appeal.

157 6. An award recipient who does not qualify for a renewal
158 award or who chooses not to renew the award may apply for
159 reinstatement. An application for reinstatement must be made
160 before the young adult reaches 26 23 years of age. In order to
161 be eligible for reinstatement, the young adult must meet the
162 eligibility criteria and the criteria for award renewal for the
163 program.

164 7. The department, or an agency under contract with the
165 department, shall work with the young adult to create a
166 financial plan that is guided by the young adult's financial
167 goals in meeting his or her needs while in postsecondary
168 education. The financial plan must be included in the transition
169 plan required under s. 39.6035. The department, or an agency
170 under contract with the department, shall review and, if
171 necessary, update the financial plan with the young adult every
172 6 months until funding under this subsection is no longer
173 provided.

174 8. The department, or an agency under contract with the

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175 department, shall review with the young adult the transition
176 plan required under s. 39.6035 during the year before the young
177 adult graduates from postsecondary education or the year before
178 the young adult reaches 26 ~~23~~ years of age, whichever occurs
179 first. The transition plan must include an assessment of the
180 young adult's current and future needs and challenges for self-
181 sufficiency and address, at a minimum, how the young adult will
182 meet his or her financial needs and obligations when funding
183 under this subsection is no longer provided.

184 (6) ACCOUNTABILITY.—The department shall develop outcome
185 measures for the program and other performance measures in order
186 to maintain oversight of the program. No later than January 31
187 of each year, the department shall prepare a report on the
188 outcome measures and the department's oversight activities and
189 submit the report to the President of the Senate, the Speaker of
190 the House of Representatives, and the committees with
191 jurisdiction over issues relating to children and families in
192 the Senate and the House of Representatives. The report must
193 include:

194 (d) Specific metrics for postsecondary education services
195 and support provided under subsection (2). Such metrics must be
196 aggregated on a statewide basis and disaggregated by community-
197 based care lead agency, age, race, and postsecondary educational
198 institution type as provided in s. 1009.533. Such metrics must
199 include, but are not limited to, the following information for
200 the preceding state fiscal year:

201 1. The total number of young adults eligible for services
202 and support under subsection (2).

203 2. The total number of applicants and the total number of

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204 applicants approved for financial assistance under subsection
205 (2).

206 3. The rate of housing instability or homelessness
207 experienced by award recipients during their enrollment period.

208 4. The percentage of award recipients described in
209 subparagraph 3. who also received financial assistance under
210 subsection (3) and the average amount of such assistance.

211 5. The primary reason for an award recipient's termination,
212 discontinuation, or nonrenewal under the program, including, but
213 not limited to, academic deficiency, voluntary withdrawal,
214 reaching the age limit, or reaching the lifetime limit.

215 6. The educational achievements of award recipients,
216 including, but not limited to:

217 a. The postsecondary student retention rate, expressed as a
218 percentage of award recipients who remain continuously enrolled
219 or reenroll for the subsequent academic term.

220 b. The postsecondary degree, certificate, or vocational
221 program completion rate.

222 c. The average time in which award recipients complete
223 their program of study.

224 d. The average unweighted grade point average of award
225 recipients, aggregated on a statewide basis and disaggregated
226 only by postsecondary educational institution type as provided
227 in s. 1009.533.

228 e. The percentage of award recipients who graduated from a
229 postsecondary educational institution.

230 (e) Specific metrics for aftercare services provided under
231 subsection (3). Such metrics must be aggregated on a statewide
232 basis and disaggregated by community-based care lead agency,

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233 age, race, and postsecondary educational institution type as
234 provided in s. 1009.533. Such metrics must include, but are not
235 limited to, the following information for the preceding state
236 fiscal year:

237 1. The total number of young adults eligible for the
238 aftercare services under subsection (3).
239 2. The total number of young adults who received aftercare
240 services.

241 3. The average duration of a young adult's participation in
242 the program.

243 4. The primary reason that a young adult seeks aftercare
244 services.

245 5. The total number of financial assistance disbursements
246 made under subparagraph (3) (b) 7. for necessities or under
247 subparagraph (3) (b) 8. for emergency situations.

248 6. The utilization rate of key aftercare components,
249 including, but not limited to, the percentage of participants
250 who:

251 a. Receive mentoring or tutoring services.
252 b. Receive mental health or substance abuse counseling
253 referrals.
254 c. Complete a life skill class, which may include, but is
255 not limited to, a financial literacy or credit management class.

256 d. Receive job or career skills training.
257 e. Report housing stability within 90 days after receiving
258 housing-related assistance, which may include, but is not
259 limited to, security deposits for rent and utilities.

260 f. Enroll in educational or vocational programs, including,
261 but not limited to, the postsecondary education services and

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262 support provided under subsection (2), while receiving at least
263 one aftercare service disbursement.

264 Section 3. Paragraphs (j) and (k) of subsection (2) of
265 section 409.175, Florida Statutes, are amended to read:

266 409.175 Licensure of family foster homes, residential
267 child-caring agencies, and child-placing agencies; public
268 records exemption.—

269 (2) As used in this section, the term:

270 (j) "Personnel" means all owners, operators, employees, and
271 volunteers working in a child-placing agency or residential
272 child-caring agency who may be employed by or do volunteer work
273 for a person, corporation, or agency that holds a license as a
274 child-placing agency or a residential child-caring agency, but
275 the term does not include those who do not work on the premises
276 where child care is furnished and have no direct contact with a
277 child or have no contact with a child outside of the presence of
278 the child's parent or guardian. For purposes of screening, the
279 term includes any member, over the age of 12 years, of the
280 family of the owner or operator or any person other than a
281 client, a child who is found to be dependent as defined in s.
282 39.01, or a child as defined in s. 39.6251(1), over the age of
283 12 years, residing with the owner or operator if the agency is
284 located in or adjacent to the home of the owner or operator or
285 if the family member of, or person residing with, the owner or
286 operator has any direct contact with the children. Members of
287 the family of the owner or operator, or persons residing with
288 the owner or operator, who are between the ages of 12 years and
289 18 years are not required to be fingerprinted, but must be
290 screened for delinquency records. For purposes of screening, the

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291 term also includes owners, operators, employees, and volunteers
292 working in summer day camps, or summer 24-hour camps providing
293 care for children. A volunteer who assists on an intermittent
294 basis for less than 10 hours per month shall not be included in
295 the term "personnel" for the purposes of screening if a person
296 who meets the screening requirement of this section is always
297 present and has the volunteer in his or her line of sight.

298 (k) "Placement screening" means the act of assessing the
299 background of household members in the family foster home and
300 includes, but is not limited to, criminal history records checks
301 as provided in s. 39.0138 using the standards for screening set
302 forth in that section. The term "household member" means a
303 member of the family or a person, other than the child being
304 placed, a child who is found to be dependent as defined in s.
305 39.01, or a child as defined in s. 39.6251(1), over the age of
306 12 years who resides with the owner who operates the family
307 foster home if such family member or person has any direct
308 contact with the child. Household members who are between the
309 ages of 12 and 18 years are not required to be fingerprinted but
310 must be screened for delinquency records.

311 Section 4. Subsection (13) of section 409.912, Florida
312 Statutes, is amended to read:

313 409.912 Cost-effective purchasing of health care.—The
314 agency shall purchase goods and services for Medicaid recipients
315 in the most cost-effective manner consistent with the delivery
316 of quality medical care. To ensure that medical services are
317 effectively utilized, the agency may, in any case, require a
318 confirmation or second physician's opinion of the correct
319 diagnosis for purposes of authorizing future services under the

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320 Medicaid program. This section does not restrict access to
321 emergency services or poststabilization care services as defined
322 in 42 C.F.R. s. 438.114. Such confirmation or second opinion
323 shall be rendered in a manner approved by the agency. The agency
324 shall maximize the use of prepaid per capita and prepaid
325 aggregate fixed-sum basis services when appropriate and other
326 alternative service delivery and reimbursement methodologies,
327 including competitive bidding pursuant to s. 287.057, designed
328 to facilitate the cost-effective purchase of a case-managed
329 continuum of care. The agency shall also require providers to
330 minimize the exposure of recipients to the need for acute
331 inpatient, custodial, and other institutional care and the
332 inappropriate or unnecessary use of high-cost services. The
333 agency shall contract with a vendor to monitor and evaluate the
334 clinical practice patterns of providers in order to identify
335 trends that are outside the normal practice patterns of a
336 provider's professional peers or the national guidelines of a
337 provider's professional association. The vendor must be able to
338 provide information and counseling to a provider whose practice
339 patterns are outside the norms, in consultation with the agency,
340 to improve patient care and reduce inappropriate utilization.
341 The agency may mandate prior authorization, drug therapy
342 management, or disease management participation for certain
343 populations of Medicaid beneficiaries, certain drug classes, or
344 particular drugs to prevent fraud, abuse, overuse, and possible
345 dangerous drug interactions. The Pharmaceutical and Therapeutics
346 Committee shall make recommendations to the agency on drugs for
347 which prior authorization is required. The agency shall inform
348 the Pharmaceutical and Therapeutics Committee of its decisions

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349 regarding drugs subject to prior authorization. The agency is
350 authorized to limit the entities it contracts with or enrolls as
351 Medicaid providers by developing a provider network through
352 provider credentialing. The agency may competitively bid single-
353 source-provider contracts if procurement of goods or services
354 results in demonstrated cost savings to the state without
355 limiting access to care. The agency may limit its network based
356 on the assessment of beneficiary access to care, provider
357 availability, provider quality standards, time and distance
358 standards for access to care, the cultural competence of the
359 provider network, demographic characteristics of Medicaid
360 beneficiaries, practice and provider-to-beneficiary standards,
361 appointment wait times, beneficiary use of services, provider
362 turnover, provider profiling, provider licensure history,
363 previous program integrity investigations and findings, peer
364 review, provider Medicaid policy and billing compliance records,
365 clinical and medical record audits, and other factors. Providers
366 are not entitled to enrollment in the Medicaid provider network.
367 The agency shall determine instances in which allowing Medicaid
368 beneficiaries to purchase durable medical equipment and other
369 goods is less expensive to the Medicaid program than long-term
370 rental of the equipment or goods. The agency may establish rules
371 to facilitate purchases in lieu of long-term rentals in order to
372 protect against fraud and abuse in the Medicaid program as
373 defined in s. 409.913. The agency may seek federal waivers
374 necessary to administer these policies.

375 (13) The agency may not pay for psychotropic medication
376 prescribed for a child in the Medicaid program without the
377 express and informed consent of the child's parent or legal

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378 guardian. The physician shall document the consent in the
379 child's medical record and provide a copy of such documentation
380 ~~to the pharmacy with a signed attestation of this documentation~~
381 with the prescription. The express and informed consent or court
382 authorization for a prescription of psychotropic medication for
383 a child in the custody of the Department of Children and
384 Families shall be obtained pursuant to s. 39.407.

385 Section 5. This act shall take effect July 1, 2026.