2024330e1

1	
1	A bill to be entitled
2	An act relating to behavioral health teaching
3	hospitals; creating part VI of ch. 395, F.S., entitled
4	"Behavioral Health Teaching Hospitals"; creating s.
5	395.901, F.S.; defining terms; providing legislative
6	findings and intent; creating s. 395.902, F.S.;
7	authorizing hospitals to apply for a behavioral health
8	teaching hospital designation beginning on a specified
9	date; specifying criteria a hospital must meet to
10	receive such designation; notwithstanding such
11	criteria, requiring the Agency for Health Care
12	Administration to designate specified existing
13	hospitals as behavioral health teaching hospitals;
14	requiring such hospitals to meet the designation
15	criteria within a specified timeframe; authorizing the
16	agency to designate a specified number of additional
17	behavioral health teaching hospitals by a specified
18	date, taking into account specified factors; requiring
19	the agency to award behavioral health teaching
20	hospitals certain funds upon their designation;
21	requiring designated behavioral health teaching
22	hospitals to submit an annual report to the agency and
23	the Department of Children and Families; specifying
24	requirements for the report; providing for expiration
25	and renewal of behavioral health teaching hospital
26	designations; authorizing the agency to deny, revoke,
27	or suspend a designation at any time under certain
28	circumstances; authorizing the agency to adopt rules;
29	creating s. 395.903, F.S.; establishing a grant
I	

Page 1 of 18

2024330e1

30 program within the agency for the purpose of funding 31 designated behavioral health teaching hospitals; 32 providing an administrative process to receive, evaluate, and rank applications that request grant 33 34 funds; authorizing the agency to submit a budget 35 amendment to the Legislature requesting the release of 36 grant funds to make awards; providing a carry forward 37 for a specified period for obligated funds not 38 disbursed in the same year in which the funds were 39 appropriated; authorizing the agency to adopt rules; 40 amending s. 1004.44, F.S.; establishing the Florida Center for Behavioral Health Workforce within the 41 Louis de la Parte Florida Mental Health Institute for 42 a specified purpose; specifying the goals and duties 43 44 of the center; authorizing the center to convene groups to assist in its work; authorizing the center 45 46 to request, and requiring certain boards to provide, 47 certain information regarding behavioral health professionals licensed or practicing in this state; 48 49 requiring the center to submit an annual report of 50 certain information to the Governor and the 51 Legislature; requiring the Board of Governors of the 52 State University System and the State Board of 53 Education, in consultation with the center, to adopt 54 certain regulations and rules, as applicable; requiring the Department of Children and Families to 55 56 contract for a specified study of the state's 57 forensic, voluntary and involuntary civil commitment, 58 and statewide inpatient psychiatric programs;

Page 2 of 18

2024330e1

59	requiring that the study be completed by a specified
60	date and include specified information and
61	recommendations; providing appropriations; providing
62	effective dates.
63	
64	Be It Enacted by the Legislature of the State of Florida:
65	
66	Section 1. Part VI of chapter 395, Florida Statutes,
67	consisting of ss. 395.901, 395.902, and 395.903, Florida
68	Statutes, is created and entitled "Behavioral Health Teaching
69	Hospitals."
70	Section 2. Section 395.901, Florida Statutes, is created to
71	read:
72	395.901 Definitions; legislative findings and intent
73	(1) DEFINITIONSAs used in this part, the term:
74	(a) "Agency" means the Agency for Health Care
75	Administration.
76	(b) "Behavioral health" means the prevention and treatment
77	of, and recovery from, any substance use disorder, mental health
78	disorder, or co-occurring disorder.
79	(c) "Behavioral health professions" means licensed or
80	certified professionals serving the needs of patients with
81	behavioral health disorders, including, but not limited to,
82	psychiatrists licensed under chapter 458 or chapter 459,
83	psychologists licensed under chapter 490, psychiatric nurses
84	licensed under chapter 464, and social workers, marriage and
85	family therapists, and mental health counselors licensed under
86	chapter 491.
87	(d) "Behavioral health teaching hospital" means a hospital

Page 3 of 18

88	licensed under this chapter and designated as a behavioral
89	health teaching hospital by the agency under s. 395.902.
90	(e) "Department" means the Department of Children and
91	Families.
92	(2) LEGISLATIVE FINDINGS AND INTENT
93	(a) The Legislature finds that there is a critical shortage
94	of behavioral health professionals and recognizes the urgent
95	need to expand the existing behavioral health workforce, prepare
96	for an aging workforce, incentivize entry into behavioral health
97	professions, and train a modernized workforce in innovative
98	integrated care.
99	(b) The Legislature finds that there is a specific need to
100	support a behavioral health education system that not only
101	trains the next generation of professionals in innovative and
102	integrated care for those with behavioral health needs, but also
103	works to modernize the state's overall behavioral health system
104	of care.
105	(c) The Legislature intends to identify and designate
106	multiple behavioral health teaching hospitals that work to
107	provide the necessary research, education, and services to
108	enhance the state's behavioral health workforce and make that
109	workforce and system of care the national standard.
110	(d) The Legislature intends to create the Florida Center
111	for Behavioral Health Workforce within the Louis de la Parte
112	Florida Mental Health Institute at the University of South
113	Florida to address issues of workforce supply and demand in
114	behavioral health professions, including issues of recruitment,
115	retention, and workforce resources.
116	(e) The Legislature intends for designated behavioral

Page 4 of 18

117	health teaching hospitals to:
118	1. Conduct state-of-the-art behavioral health research.
119	2. Provide leading-edge education and training in
120	innovative and integrated care for the state's behavioral health
121	workforce.
122	3. Collaborate with other university colleges and schools
123	of medicine, nursing, psychology, social work, public health,
124	and other relevant disciplines to promote and enhance a
125	modernized behavioral health system of care.
126	4. Develop, implement, and promote public-private
127	partnerships throughout this state to support and enhance the
128	intent of this part.
129	5. Partner with the state to provide behavioral health
130	care, address regional and systemwide behavioral health needs,
131	and support the state in providing treatment and care for those
132	whose need and acuity has resulted in the need for long-term
133	voluntary services or involuntary civil commitment.
134	Section 3. Section 395.902, Florida Statutes, is created to
135	read:
136	395.902 Behavioral health teaching hospitals
137	(1) Beginning July 1, 2025, a licensed hospital may apply
138	to the agency for designation as a behavioral health teaching
139	hospital by submitting a form furnished by the agency and
140	providing documentation establishing eligibility.
141	(2) To be designated as a behavioral health teaching
142	hospital, a hospital must meet all of the following criteria:
143	(a) Operate as a teaching hospital as defined in s. 408.07.
144	(b) Offer a psychiatric residency program accredited
145	through the Residency Review Committee of the Accreditation

Page 5 of 18

146 Council of Graduate Medical Education and an accredited 147 postdoctoral clinical psychology fellowship program. 148 (c) Provide behavioral health services. 149 (d) Establish an affiliation with a university in this 150 state to create and maintain integrated workforce development 151 programs for students of the university's colleges or schools of 152 medicine, nursing, psychology, social work, and public health related to the entire continuum of behavioral health care, 153 154 including, at a minimum, screening, therapeutic and supportive 155 services, community outpatient care, crisis stabilization, 156 short-term residential treatment, and long-term care. 157 (e) Develop a plan to create and maintain integrated workforce development programs with the affiliated university's 158 159 colleges or schools and to supervise clinical care provided by 160 students participating in such programs. 161 (3) A designated behavioral health teaching hospital must: 162 (a) Within 90 days after receiving the designation, develop 163 and maintain a consultation agreement with the Florida Center 164 for Behavioral Health Workforce within the Louis de la Parte 165 Florida Mental Health Institute to establish best practices 166 related to integrated workforce development programs for the 167 behavioral health professions. (b) Collaborate with the department and managing entities 168 169 as defined in s. 394.9082(2) to identify gaps in the regional 170 continuum of behavioral health care which are appropriate for 171 the behavioral health teaching hospital to address, either 172 independently or in collaboration with other organizations 173 providing behavioral health services, and which will facilitate 174 implementation of the plan developed under paragraph (2)(e).

Page 6 of 18

1	
175	(c) Within 90 days after receiving the designation, enter
176	into an agreement with the department to provide state treatment
177	facility beds when determined necessary by the department.
178	(d) Provide data related to the hospital's integrated
179	workforce development programs and the services provided by the
180	hospital to the agency, the department, and the Office of
181	Reimagining Education and Career Help created under s. 14.36, as
182	determined by the agency, department, or the office.
183	(4) Notwithstanding subsections (1) and (2), within 30 days
184	after this act becomes a law, the agency shall designate the
185	following hospitals as behavioral health teaching hospitals:
186	(a) Tampa General Hospital, in affiliation with the
187	University of South Florida.
188	(b) UF Health Shands Hospital, in affiliation with the
189	University of Florida.
190	(c) UF Health Jacksonville, in affiliation with the
191	University of Florida.
192	(d) Jackson Memorial Hospital, in affiliation with the
193	University of Miami.
194	
195	Within 90 days after receiving the designation, each behavioral
196	health teaching hospital designated under this subsection shall
197	submit documentation to the agency establishing compliance with
198	the requirements of paragraphs (2)(a)-(d) and submit the plan
199	required by paragraph (2)(e).
200	(5) The agency may designate up to four additional
201	behavioral health teaching hospitals by July 1, 2027, taking
202	into account equitable distribution of such hospitals by
203	geographical service area and behavioral health services access.
I	

Page 7 of 18

204	(6) Upon designating a behavioral health teaching hospital
205	under this section, the agency shall award the hospital funds as
206	follows:
207	(a) For up to 10 resident positions through the Slots for
208	Doctors Program established in s. 409.909. Notwithstanding that
209	section, the agency shall allocate \$150,000 for each such
210	position.
211	(b) Through the Training, Education, and Clinicals in
212	Health Funding Program established in s. 409.91256 to offset the
213	costs of maintaining integrated workforce development programs.
214	(7) By December 1 of each year, a designated behavioral
215	health teaching hospital must submit a report to the agency and
216	the department on the designated behavioral health teaching
217	hospital program, including, but not limited to, all of the
218	following:
219	(a) The number of psychiatric residents.
220	(b) The number of postdoctoral clinical psychology fellows.
221	(c) The status and details of the consultation agreement
222	with the Florida Center for Behavioral Health Workforce within
223	the Louis de la Parte Florida Mental Health Institute.
224	(d) The implementation status of the plan required by
225	paragraph (2)(e).
226	(e) Activities, agreements, and accomplishments of the
227	collaboration required by paragraph (3)(b).
228	(f) The number of any facility beds and patients served
229	under paragraph (3)(c).
230	(8) A behavioral health teaching hospital designation is
231	valid for 2 years. To renew the designation, a hospital must
232	submit an application for renewal to the agency on a form

Page 8 of 18

233	established by the agency at least 90 days before the expiration
234	of the designation. The renewal process is subject to the time
235	periods and tolling provisions of s. 120.60. The agency may
236	deny, revoke, or suspend a designation at any time if a
237	behavioral health teaching hospital is not in compliance with
238	the requirements of this section.
239	(9) The agency may adopt rules necessary to implement this
240	section.
241	Section 4. Section 395.903, Florida Statutes, is created to
242	read:
243	395.903 Behavioral Health Teaching Hospital grant program
244	(1) There is established within the agency a grant program
245	for the purpose of funding designated behavioral health teaching
246	hospitals, subject to legislative appropriation. Grant funding
247	may be used for operations and expenses and fixed capital
248	outlay, including, but not limited to, facility renovation and
249	upgrades.
250	(a)1. For the 2024-2025 fiscal year, the agency shall hold
251	a 30-day, open application period beginning November 1, 2024, to
252	accept applications from the behavioral health teaching
253	hospitals designated under s. 395.902(4), in a manner determined
254	by the agency. Applicants must include a detailed spending plan
255	with the application.
256	2. For the 2025-2026 and 2026-2027 fiscal years, subject to
257	the availability of funds, the agency shall hold a 30-day, open
258	application period beginning October 1 of each year to accept
259	applications from behavioral health teaching hospitals
260	designated under s. 395.902, in a manner determined by the
261	agency. Applicants must include a detailed spending plan with

Page 9 of 18

262	the application.
263	(b) The agency, in consultation with the department, shall
264	evaluate and rank grant applications based on compliance with s.
265	395.902(2) and the quality of the plan submitted under s.
266	395.902(2)(e) or plan implementation, as applicable, related to
267	achieving the purposes of the behavioral health teaching
268	hospital program. The agency, in consultation with the
269	department, shall make recommendations for grant awards and
270	distribution of available funding for such awards. The agency
271	shall submit the evaluation and grant award recommendations to
272	the President of the Senate and the Speaker of the House of
273	Representatives within 90 days after the open application period
274	<u>closes.</u>
275	(c) Notwithstanding ss. 216.181 and 216.292, the agency may
276	submit budget amendments, subject to the notice, review, and
277	objection procedures under s. 216.177, requesting the release of
278	the funds to make awards. The agency is authorized to submit
279	budget amendments relating to expenses under subsection (1)
280	under the grant program only within the 90 days after the open
281	application period closes.
282	(2) Notwithstanding s. 216.301 and pursuant to s. 216.351,
283	the balance of any appropriation from the General Revenue Fund
284	for the program which is not disbursed but which is obligated
285	pursuant to contract or committed to be expended by June 30 of
286	the fiscal year for which the funds are appropriated may be
287	carried forward for up to 8 years after the effective date of
288	the original appropriation.
289	(3) The agency may adopt rules necessary to implement this
290	section.

Page 10 of 18

2024330e1

0.01	
291	Section 5. Subsections (6) and (7) are added to section
292	1004.44, Florida Statutes, to read:
293	1004.44 Louis de la Parte Florida Mental Health Institute.—
294	There is established the Louis de la Parte Florida Mental Health
295	Institute within the University of South Florida.
296	(6)(a) There is established within the institute the
297	Florida Center for Behavioral Health Workforce. The purpose of
298	the center is to support an adequate, highly skilled, resilient,
299	and innovative workforce that meets the current and future human
300	resources needs of the state's behavioral health system in order
301	to provide high-quality care, services, and supports to
302	Floridians with, or at risk of developing, behavioral health
303	conditions through original research, policy analysis,
304	evaluation, and development and dissemination of best practices.
305	The goals of the center are, at a minimum, to research the
306	state's current behavioral health workforce and future needs;
307	expand the number of clinicians, professionals, and other
308	workers involved in the behavioral health workforce; and enhance
309	the skill level and innovativeness of the workforce. The center
310	shall, at a minimum, do all of the following:
311	1. Describe and analyze the current workforce and project
312	possible future workforce demand, especially in critical roles,
313	and develop strategies for addressing any gaps. The center's
314	efforts may include, but need not be limited to, producing a
315	statistically valid biennial analysis of the supply and demand
316	of the behavioral health workforce.
317	2. Expand pathways to behavioral health professions through
318	enhanced educational opportunities and improved faculty
319	development and retention. The center's efforts may include, but

Page 11 of 18

 321 a. Identifying best practices in the academic preparation 322 and continuing education of behavioral health professionals. 323 b. Facilitating and coordinating the development of 324 academic-practice partnerships that support behavioral health 325 faculty employment and advancement. 326 c. Developing and implementing innovative projects to 327 support the recruitment, development, and retention of 328 behavioral health educators, faculty, and clinical preceptors. 	
 323 <u>b. Facilitating and coordinating the development of</u> 324 <u>academic-practice partnerships that support behavioral health</u> 325 <u>faculty employment and advancement.</u> 326 <u>c. Developing and implementing innovative projects to</u> 327 <u>support the recruitment, development, and retention of</u> 	
324 <u>academic-practice partnerships that support behavioral health</u> 325 <u>faculty employment and advancement.</u> 326 <u>c. Developing and implementing innovative projects to</u> 327 <u>support the recruitment, development, and retention of</u>	
325 <u>faculty employment and advancement.</u> 326 <u>c. Developing and implementing innovative projects to</u> 327 <u>support the recruitment, development, and retention of</u>	
326 <u>c. Developing and implementing innovative projects to</u> 327 <u>support the recruitment, development, and retention of</u>	
327 support the recruitment, development, and retention of	
328 behavioral health educators, faculty, and clinical preceptors.	
329 d. Developing distance learning infrastructure for	
330 behavioral health education and the evidence-based use of	
331 technology, simulation, and distance learning techniques.	
332 <u>3. Promote behavioral health professions. The center's</u>	
333 efforts may include, but need not be limited to:	
334 a. Conducting original research on the factors affecting	
335 recruitment, retention, and advancement of the behavioral healt	h
336 workforce, such as designing and implementing a longitudinal	
337 study of the state's behavioral health workforce.	
338 b. Developing and implementing innovative projects to	
339 support the recruitment, development, and retention of	
340 behavioral health workers.	
341 (b) The center may:	
342 <u>1. Convene groups, including, but not limited to,</u>	
343 behavioral health clinicians, professionals, and workers, and	
344 employers of such individuals; other health care providers;	
345 individuals with behavioral health conditions and their	
346 families; business and industry leaders, policymakers, and	
347 educators to assist the center in its work; and	
348 2. Request from any board as defined in s. 456.001 any	

Page 12 of 18

349	information held by the board regarding a behavioral health
350	professional licensed in this state or holding a multistate
351	license pursuant to a professional multistate licensure compact
352	or information reported to the board by employers of such
353	behavioral health professionals, other than personal identifying
354	information. The boards must provide such information to the
355	center upon request.
356	(c) By January 10 of each year, the center shall submit a
357	report to the Governor, the President of the Senate, and the
358	Speaker of the House of Representatives providing details of its
359	activities during the preceding calendar year in pursuit of its
360	goals and in the execution of its duties under paragraph (a).
361	The report submitted in 2025 must include an initial statewide
362	strategic plan for meeting the goals in subsection (6), which
363	must be updated in each subsequent report.
364	(7) The Board of Governors and the State Board of
365	Education, in consultation with the center, shall expeditiously
366	adopt any necessary regulations and rules, as applicable, to
367	allow the center to perform its responsibilities under
368	subsection (6) as soon as practicable.
369	Section 6. Effective upon this act becoming a law, the
370	Department of Children and Families must contract for a detailed
371	study of capacity for inpatient treatment services for adults
372	with serious mental illness and children with serious emotional
373	disturbance or psychosis in this state's forensic inpatient,
374	safety-net voluntary and involuntary civil inpatient placement,
375	and Medicaid statewide inpatient psychiatric programs. The study
376	must include analyses of current capacity, current and projected
377	future demand, and the state's current and projected future

Page 13 of 18

379for enhancing the availability of inpatient treatment services380and for providing alternatives to such services. The study mus381be completed by January 31, 2025, and must include, at a382minimum, all of the following:383(1) By facility and by program type, the current number a384allocation of beds for inpatient treatment, the number of385individuals admitted and discharged annually, and the lengths386stays.387(2) By department region, the current number and allocati398of beds in receiving, treatment, and state treatment facilitie399and residential treatment centers for children and adolescents391the number of individuals admitted and discharged annually, th392types and frequency of diagnoses, and the lengths of stays.393(3) By department region, the current and projected future394treatment, and state treatment facilities and residential395treatment, and state treatment facilities and residential396treatment centers for children and adolescents, any gaps in397current and projected future availability of these services398compared to current and projected future service demand, and t399number of inpatient beds needed by facility type and placement391type to meet current and projected future demand.392(4) By agency region, the number of individuals admitted393and discharged annually, the types and frequency of diagnoses,394and discharged annually, the types and frequency of di	378	ability to most that demand and must include recommondations
380and for providing alternatives to such services. The study mus381be completed by January 31, 2025, and must include, at a382minimum, all of the following:383(1) By facility and by program type, the current number a384allocation of beds for inpatient treatment, the number of385individuals admitted and discharged annually, and the lengths386stays.387(2) By department region, the current number and allocati388of beds in receiving, treatment, and state treatment facilitie399and residential treatment centers for children and adolescents390for inpatient treatment between forensic and civil placements,391the number of individuals admitted and discharged annually, th392(3) By department region, the current and projected future394demand for civil and forensic inpatient placements at receivin395treatment, and state treatment facilities and residential396treatment centers for children and adolescents, any gaps in397current and projected future availability of these services398compared to current and projected future demand.399(4) By agency region, the number of individuals admitted391and discharged annually, the types and frequency of diagnoses,393and the lengths of stays for Medicaid statewide inpatient394psychiatric program services, the current and projected future		
381 be completed by January 31, 2025, and must include, at a minimum, all of the following: 382 (1) By facility and by program type, the current number and 384 allocation of beds for inpatient treatment, the number of 385 individuals admitted and discharged annually, and the lengths 386 stays. 387 (2) By department region, the current number and allocati 388 of beds in receiving, treatment, and state treatment facilities 399 and residential treatment centers for children and adolescents 390 for inpatient treatment between forensic and civil placements, 391 the number of individuals admitted and discharged annually, th 392 types and frequency of diagnoses, and the lengths of stays. 393 (3) By department region, the current and projected futur 394 demand for civil and forensic inpatient placements at receivin 395 treatment, and state treatment facilities and residential 396 treatment, and state treatment facilities and residential 397 current and projected future availability of these services 398 compared to current and projected future demand. 399 number of inpatient beds needed by facility type and placement 390 type to meet current and projected future demand. 391 (4) By agency region, the number of individuals admitted 392 and discharged annually, the types and frequency of diagnoses, 393 and the lengths of stays for Medicaid statewide inpatient 304 psychiatric program services, the current and projected future 305 demand for these services, any gaps in current and projected future 306 demand for these services, any gaps in current and projected future 309 demand for these services, any gaps in current and projected future 301 demand for these services, any gaps in current and projected future 302 demand for these services, any gaps in current and projected future 303 and the lengths of stays for Medicaid statewide inpatient 304 psychiatric program services, the current and projected future 305 demand for these services, any gaps in current and projected future 305 demand for these services, any gaps in c		
minimum, all of the following: minimum, all of the following: (1) By facility and by program type, the current number a allocation of beds for inpatient treatment, the number of individuals admitted and discharged annually, and the lengths stays. (2) By department region, the current number and allocati of beds in receiving, treatment, and state treatment facilitie and residential treatment centers for children and adolescents for inpatient treatment between forensic and civil placements, the number of individuals admitted and discharged annually, th types and frequency of diagnoses, and the lengths of stays. (3) By department region, the current and projected futur demand for civil and forensic inpatient placements at receivin treatment, and state treatment facilities and residential treatment, and state treatment facilities and residential treatment centers for children and adolescents, any gaps in current and projected future availability of these services compared to current and projected future demand. (4) By agency region, the number of individuals admitted and discharged annually, the types and frequency of diagnoses, and the lengths of stays for Medicaid statewide inpatient psychiatric program services, the current and projected future demand for these services, any gaps in current and projected	380	and for providing alternatives to such services. The study must
 (1) By facility and by program type, the current number a allocation of beds for inpatient treatment, the number of individuals admitted and discharged annually, and the lengths stays. (2) By department region, the current number and allocati of beds in receiving, treatment, and state treatment facilitie and residential treatment centers for children and adolescents for inpatient treatment between forensic and civil placements, the number of individuals admitted and discharged annually, th types and frequency of diagnoses, and the lengths of stays. (3) By department region, the current and projected futur demand for civil and forensic inpatient placements at receivin treatment, and state treatment facilities and residential treatment centers for children and adolescents, any gaps in current and projected future availability of these services compared to current and projected future demand. (4) By agency region, the number of individuals admitted and discharged annually, the types and frequency of diagnoses, and the lengths of stays for Medicaid statewide inpatient psychiatric program services, any gaps in current and projected future 	381	be completed by January 31, 2025, and must include, at a
384allocation of beds for inpatient treatment, the number of individuals admitted and discharged annually, and the lengths385individuals admitted and discharged annually, and the lengths386stays.387(2) By department region, the current number and allocati388of beds in receiving, treatment, and state treatment facilitie389and residential treatment centers for children and adolescents390for inpatient treatment between forensic and civil placements,391the number of individuals admitted and discharged annually, th392types and frequency of diagnoses, and the lengths of stays.393(3) By department region, the current and projected future394demand for civil and forensic inpatient placements at receivin395treatment, and state treatment facilities and residential396treatment centers for children and adolescents, any gaps in397current and projected future availability of these services398compared to current and projected future demand.400(4) By agency region, the number of individuals admitted402and discharged annually, the types and frequency of diagnoses,403and the lengths of stays for Medicaid statewide inpatient404psychiatric program services, the current and projected future405demand for these services, any gaps in current and projected	382	minimum, all of the following:
385individuals admitted and discharged annually, and the lengths386stays.387(2) By department region, the current number and allocati388of beds in receiving, treatment, and state treatment facilitie389and residential treatment centers for children and adolescents390for inpatient treatment between forensic and civil placements,391the number of individuals admitted and discharged annually, th392types and frequency of diagnoses, and the lengths of stays.393(3) By department region, the current and projected futur394demand for civil and forensic inpatient placements at receivin395treatment, and state treatment facilities and residential396treatment centers for children and adolescents, any gaps in397current and projected future availability of these services398compared to current and projected future demand.401(4) By agency region, the number of individuals admitted402and discharged annually, the types and frequency of diagnoses,403and the lengths of stays for Medicaid statewide inpatient404psychiatric program services, the current and projected future405demand for these services, any gaps in current and projected	383	(1) By facility and by program type, the current number and
stays. (2) By department region, the current number and allocati of beds in receiving, treatment, and state treatment facilitie and residential treatment centers for children and adolescents for inpatient treatment between forensic and civil placements, the number of individuals admitted and discharged annually, th types and frequency of diagnoses, and the lengths of stays. (3) By department region, the current and projected future demand for civil and forensic inpatient placements at receivin treatment, and state treatment facilities and residential treatment centers for children and adolescents, any gaps in current and projected future availability of these services compared to current and projected future demand. (4) By agency region, the number of individuals admitted and discharged annually, the types and frequency of diagnoses, and the lengths of stays for Medicaid statewide inpatient psychiatric program services, any gaps in current and projected future	384	allocation of beds for inpatient treatment, the number of
 387 (2) By department region, the current number and allocati of beds in receiving, treatment, and state treatment facilitie and residential treatment centers for children and adolescents for inpatient treatment between forensic and civil placements, the number of individuals admitted and discharged annually, th types and frequency of diagnoses, and the lengths of stays. (3) By department region, the current and projected futur demand for civil and forensic inpatient placements at receivin treatment, and state treatment facilities and residential treatment centers for children and adolescents, any gaps in current and projected future availability of these services compared to current and projected future demand. (4) By agency region, the number of individuals admitted and discharged annually, the types and frequency of diagnoses, and the lengths of stays for Medicaid statewide inpatient psychiatric program services, any gaps in current and projected 	385	individuals admitted and discharged annually, and the lengths of
388of beds in receiving, treatment, and state treatment facilitie389and residential treatment centers for children and adolescents390for inpatient treatment between forensic and civil placements,391the number of individuals admitted and discharged annually, th392types and frequency of diagnoses, and the lengths of stays.393(3) By department region, the current and projected futur394demand for civil and forensic inpatient placements at receivin395treatment, and state treatment facilities and residential396treatment centers for children and adolescents, any gaps in397current and projected future availability of these services398compared to current and projected future demand.400(4) By agency region, the number of individuals admitted402and discharged annually, the types and frequency of diagnoses,403and the lengths of stays for Medicaid statewide inpatient404psychiatric program services, any gaps in current and projected future	386	stays.
and residential treatment centers for children and adolescents for inpatient treatment between forensic and civil placements, the number of individuals admitted and discharged annually, th types and frequency of diagnoses, and the lengths of stays. (3) By department region, the current and projected futur demand for civil and forensic inpatient placements at receivin treatment, and state treatment facilities and residential treatment centers for children and adolescents, any gaps in current and projected future availability of these services compared to current and projected future service demand, and t number of inpatient beds needed by facility type and placement type to meet current and projected future demand. (4) By agency region, the number of individuals admitted and discharged annually, the types and frequency of diagnoses, and the lengths of stays for Medicaid statewide inpatient psychiatric program services, any gaps in current and projected demand for these services, any gaps in current and projected	387	(2) By department region, the current number and allocation
390 for inpatient treatment between forensic and civil placements, 391 the number of individuals admitted and discharged annually, th 392 types and frequency of diagnoses, and the lengths of stays. 393 (3) By department region, the current and projected futur 394 demand for civil and forensic inpatient placements at receivin 395 treatment, and state treatment facilities and residential 396 treatment centers for children and adolescents, any gaps in 397 current and projected future availability of these services 398 compared to current and projected future service demand, and t 399 number of inpatient beds needed by facility type and placement 400 type to meet current and projected future demand. 401 (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, any gaps in current and projected 405 demand for these services, any gaps in current and projected	388	of beds in receiving, treatment, and state treatment facilities
391 the number of individuals admitted and discharged annually, th 392 types and frequency of diagnoses, and the lengths of stays. 393 (3) By department region, the current and projected futur 394 demand for civil and forensic inpatient placements at receivin 395 treatment, and state treatment facilities and residential 396 treatment centers for children and adolescents, any gaps in 397 current and projected future availability of these services 398 compared to current and projected future service demand, and t 399 number of inpatient beds needed by facility type and placement 400 type to meet current and projected future demand. 401 (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	389	and residential treatment centers for children and adolescents
392 types and frequency of diagnoses, and the lengths of stays. (3) By department region, the current and projected futur demand for civil and forensic inpatient placements at receivin treatment, and state treatment facilities and residential treatment centers for children and adolescents, any gaps in current and projected future availability of these services compared to current and projected future service demand, and t number of inpatient beds needed by facility type and placement type to meet current and projected future demand. (4) By agency region, the number of individuals admitted and discharged annually, the types and frequency of diagnoses, and the lengths of stays for Medicaid statewide inpatient psychiatric program services, the current and projected future demand for these services, any gaps in current and projected	390	for inpatient treatment between forensic and civil placements,
(3) By department region, the current and projected futur demand for civil and forensic inpatient placements at receivin treatment, and state treatment facilities and residential treatment centers for children and adolescents, any gaps in current and projected future availability of these services compared to current and projected future service demand, and t number of inpatient beds needed by facility type and placement type to meet current and projected future demand. (4) By agency region, the number of individuals admitted and discharged annually, the types and frequency of diagnoses, and the lengths of stays for Medicaid statewide inpatient psychiatric program services, the current and projected demand for these services, any gaps in current and projected	391	the number of individuals admitted and discharged annually, the
394 demand for civil and forensic inpatient placements at receivin 395 treatment, and state treatment facilities and residential 396 treatment centers for children and adolescents, any gaps in 397 current and projected future availability of these services 398 compared to current and projected future service demand, and t 399 number of inpatient beds needed by facility type and placement 400 type to meet current and projected future demand. 401 (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	392	types and frequency of diagnoses, and the lengths of stays.
395 treatment, and state treatment facilities and residential 396 treatment centers for children and adolescents, any gaps in 397 current and projected future availability of these services 398 compared to current and projected future service demand, and t 399 number of inpatient beds needed by facility type and placement 400 type to meet current and projected future demand. 401 (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	393	(3) By department region, the current and projected future
396 treatment centers for children and adolescents, any gaps in 397 current and projected future availability of these services 398 compared to current and projected future service demand, and t 399 number of inpatient beds needed by facility type and placement 400 type to meet current and projected future demand. 401 (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	394	demand for civil and forensic inpatient placements at receiving,
397 <u>current and projected future availability of these services</u> 398 <u>compared to current and projected future service demand, and t</u> 399 <u>number of inpatient beds needed by facility type and placement</u> 400 <u>type to meet current and projected future demand.</u> 401 <u>(4) By agency region, the number of individuals admitted</u> 402 <u>and discharged annually, the types and frequency of diagnoses,</u> 403 <u>and the lengths of stays for Medicaid statewide inpatient</u> 404 <u>psychiatric program services, the current and projected future</u> 405 <u>demand for these services, any gaps in current and projected</u>	395	treatment, and state treatment facilities and residential
398 compared to current and projected future service demand, and t 399 number of inpatient beds needed by facility type and placement 400 type to meet current and projected future demand. 401 (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	396	treatment centers for children and adolescents, any gaps in
399 <u>number of inpatient beds needed by facility type and placement</u> 400 <u>type to meet current and projected future demand.</u> 401 <u>(4) By agency region, the number of individuals admitted</u> 402 <u>and discharged annually, the types and frequency of diagnoses,</u> 403 <u>and the lengths of stays for Medicaid statewide inpatient</u> 404 <u>psychiatric program services, the current and projected future</u> 405 <u>demand for these services, any gaps in current and projected</u>	397	current and projected future availability of these services
400 type to meet current and projected future demand. (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	398	compared to current and projected future service demand, and the
 401 (4) By agency region, the number of individuals admitted 402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected 	399	number of inpatient beds needed by facility type and placement
402 and discharged annually, the types and frequency of diagnoses, 403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	400	type to meet current and projected future demand.
403 and the lengths of stays for Medicaid statewide inpatient 404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	401	(4) By agency region, the number of individuals admitted
404 psychiatric program services, the current and projected future 405 demand for these services, any gaps in current and projected	402	and discharged annually, the types and frequency of diagnoses,
405 demand for these services, any gaps in current and projected	403	and the lengths of stays for Medicaid statewide inpatient
	404	psychiatric program services, the current and projected future
406 future availability of these services compared to current and	405	demand for these services, any gaps in current and projected
	406	future availability of these services compared to current and

Page 14 of 18

413treatment centers for children and adolescents, and for414enhancing services that could prevent the need for involuntary415inpatient placements.416(6) A gap analysis as recommended by the Commission on417Mental Health and Substance Use Disorder in the annual interim418report dated January 1, 2024.419Section 7. For the 2024-2025 fiscal year, the sum of \$5420million in recurring funds from the General Revenue Fund is421appropriated to the Louis de la Parte Florida Mental Health422Institute for the operation of the Florida Center for Behavioral423Health Workforce as created by this act.424Section 8. (1) For the 2024-2025 fiscal year, the sums of425\$2,557,800 in recurring funds from the General Revenue Fund and426\$3,442,200 in recurring funds from the Medical Care Trust Fund427are appropriated to the Agency for Health Care Administration428for the Slots for Doctors Program established in s. 409.909,429Florida Statutes, for up to 10 newly created resident positions431designated under s. 395.902(4), Florida Statutes, as created by432this act. Notwithstanding s. 409.909, Florida Statutes, the433agency shall allocate \$150,000 for each newly created position.434(2) For the 2024-2025 fiscal year, the sums of \$2,557,800	407	projected future service demand, and the number of inpatient
 (5) Policy recommendations for ensuring sufficient bed (5) Policy recommendations for ensuring sufficient bed (5) Policy recommendations for ensuring sufficient bed (7) treatment facilities, or receiving facilities, or at residential (8) treatment centers for children and adolescents, and for (9) enhancing services that could prevent the need for involuntary (10) A gap analysis as recommended by the Commission on (11) Mental Health and Substance Use Disorder in the annual interim (12) report dated January 1, 2024. (13) Section 7. For the 2024-2025 fiscal year, the sum of \$5 (14) million in recurring funds from the General Revenue Fund is (14) appropriated to the Louis de la Parte Florida Mental Health (14) Institute for the operation of the Florida Center for Behavioral (14) Health Workforce as created by this act. (14) Section 8. (1) For the 2024-2025 fiscal year, the sums of (15) \$2,557,800 in recurring funds from the General Revenue Fund and (20) For the Slots for Doctors Program established in s. 409.909, (14) Florida Statutes, for up to 10 newly created resident positions (15) for each designated behavioral health teaching hospital (21) For the 2024-2025 fiscal year, the sums of \$2,557,800 	408	beds needed by facility type to meet current and projected
411capacity for inpatient treatment at treatment facilities, state412treatment facilities, or receiving facilities, or at residential413treatment centers for children and adolescents, and for414enhancing services that could prevent the need for involuntary415inpatient placements.416(6) A gap analysis as recommended by the Commission on417Mental Health and Substance Use Disorder in the annual interim418report dated January 1, 2024.420Section 7. For the 2024-2025 fiscal year, the sum of \$5421million in recurring funds from the General Revenue Fund is422appropriated to the Louis de la Parte Florida Mental Health423Health Workforce as created by this act.424Section 8. (1) For the 2024-2025 fiscal year, the sums of425\$2,557,800 in recurring funds from the General Revenue Fund and426\$3,442,200 in recurring funds from the General Revenue Fund and427are appropriated to the Agency for Health Care Administration428for the Slots for Doctors Program established in s. 409.909,429Florida Statutes, for up to 10 newly created resident positions430for each designated behavioral health teaching hospital431designated under s. 395.902(4), Florida Statutes, as created by432this act. Notwithstanding s. 409.909, Florida Statutes, the433agency shall allocate \$150,000 for each newly created position.434(2) For the 2024-2025 fiscal year, the sums of \$2,557,800	409	future demand.
412 treatment facilities, or receiving facilities, or at residential 413 treatment centers for children and adolescents, and for 414 enhancing services that could prevent the need for involuntary 415 inpatient placements. 416 (6) A gap analysis as recommended by the Commission on 417 Mental Health and Substance Use Disorder in the annual interim 418 report dated January 1, 2024. 419 Section 7. For the 2024-2025 fiscal year, the sum of \$5 420 million in recurring funds from the General Revenue Fund is 421 appropriated to the Louis de la Parte Florida Mental Health 422 Institute for the operation of the Florida Center for Behavioral 423 Health Workforce as created by this act. 424 Section 8. (1) For the 2024-2025 fiscal year, the sums of 425 §2,557,800 in recurring funds from the General Revenue Fund and 426 \$3,442,200 in recurring funds from the Medical Care Trust Fund 427 are appropriated to the Agency for Health Care Administration 428 for the Slots for Doctors Program established in s. 409.909, 429 Florida Statutes, for up to 10 newly created resident positions 430 for each designated behavioral health teaching hospital 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	410	(5) Policy recommendations for ensuring sufficient bed
413 treatment centers for children and adolescents, and for enhancing services that could prevent the need for involuntary inpatient placements. (6) A gap analysis as recommended by the Commission on Mental Health and Substance Use Disorder in the annual interim report dated January 1, 2024. (19) Section 7. For the 2024-2025 fiscal year, the sum of \$5 million in recurring funds from the General Revenue Fund is appropriated to the Louis de la Parte Florida Mental Health Institute for the operation of the Florida Center for Behavioral Health Workforce as created by this act. Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the Medical Care Trust Fund are appropriated to the Agency for Health Care Administration for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	411	capacity for inpatient treatment at treatment facilities, state
 enhancing services that could prevent the need for involuntary inpatient placements. (6) A gap analysis as recommended by the Commission on Mental Health and Substance Use Disorder in the annual interim report dated January 1, 2024. Section 7. For the 2024-2025 fiscal year, the sum of \$5 million in recurring funds from the General Revenue Fund is appropriated to the Louis de la Parte Florida Mental Health Health Workforce as created by this act. section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the General Revenue Fund and for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	412	treatment facilities, or receiving facilities, or at residential
inpatient placements. (6) A gap analysis as recommended by the Commission on Mental Health and Substance Use Disorder in the annual interim report dated January 1, 2024. Section 7. For the 2024-2025 fiscal year, the sum of \$5 million in recurring funds from the General Revenue Fund is appropriated to the Louis de la Parte Florida Mental Health Health Workforce as created by this act. Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$2,557,800 in recurring funds from the General Revenue Fund and \$2,557,800 in recurring funds from the General Revenue Fund and \$2,557,800 in recurring funds from the Medical Care Trust Fund are appropriated to the Agency for Health Care Administration for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	413	treatment centers for children and adolescents, and for
(6) A gap analysis as recommended by the Commission on Mental Health and Substance Use Disorder in the annual interim report dated January 1, 2024. Section 7. For the 2024-2025 fiscal year, the sum of \$5 million in recurring funds from the General Revenue Fund is appropriated to the Louis de la Parte Florida Mental Health Institute for the operation of the Florida Center for Behavioral Health Workforce as created by this act. Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the Medical Care Trust Fund are appropriated to the Agency for Health Care Administration for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	414	enhancing services that could prevent the need for involuntary
Mental Health and Substance Use Disorder in the annual interim report dated January 1, 2024. Section 7. For the 2024-2025 fiscal year, the sum of \$5 million in recurring funds from the General Revenue Fund is appropriated to the Louis de la Parte Florida Mental Health Health Workforce as created by this act. Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the General Revenue Fund and for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	415	inpatient placements.
418report dated January 1, 2024.419Section 7. For the 2024-2025 fiscal year, the sum of \$5420million in recurring funds from the General Revenue Fund is421appropriated to the Louis de la Parte Florida Mental Health422Institute for the operation of the Florida Center for Behavioral423Health Workforce as created by this act.424Section 8. (1) For the 2024-2025 fiscal year, the sums of425\$2,557,800 in recurring funds from the General Revenue Fund and426\$3,442,200 in recurring funds from the Medical Care Trust Fund427are appropriated to the Agency for Health Care Administration428for the Slots for Doctors Program established in s. 409.909,429Florida Statutes, for up to 10 newly created resident positions431designated under s. 395.902(4), Florida Statutes, as created by432this act. Notwithstanding s. 409.909, Florida Statutes, the433agency shall allocate \$150,000 for each newly created position.434(2) For the 2024-2025 fiscal year, the sums of \$2,557,800	416	(6) A gap analysis as recommended by the Commission on
 419 Section 7. For the 2024-2025 fiscal year, the sum of \$5 420 million in recurring funds from the General Revenue Fund is 421 appropriated to the Louis de la Parte Florida Mental Health 422 Institute for the operation of the Florida Center for Behavioral 423 Health Workforce as created by this act. 424 Section 8. (1) For the 2024-2025 fiscal year, the sums of 425 \$2,557,800 in recurring funds from the General Revenue Fund and 426 \$3,442,200 in recurring funds from the Medical Care Trust Fund 427 are appropriated to the Agency for Health Care Administration 428 for the Slots for Doctors Program established in s. 409.909, 429 Florida Statutes, for up to 10 newly created resident positions 430 for each designated behavioral health teaching hospital 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	417	Mental Health and Substance Use Disorder in the annual interim
 million in recurring funds from the General Revenue Fund is appropriated to the Louis de la Parte Florida Mental Health Institute for the operation of the Florida Center for Behavioral Health Workforce as created by this act. Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the Medical Care Trust Fund are appropriated to the Agency for Health Care Administration for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	418	report dated January 1, 2024.
 421 appropriated to the Louis de la Parte Florida Mental Health 422 Institute for the operation of the Florida Center for Behavioral 423 Health Workforce as created by this act. 424 Section 8. (1) For the 2024-2025 fiscal year, the sums of 425 \$2,557,800 in recurring funds from the General Revenue Fund and 426 \$3,442,200 in recurring funds from the Medical Care Trust Fund 427 are appropriated to the Agency for Health Care Administration 428 for the Slots for Doctors Program established in s. 409.909, 429 Florida Statutes, for up to 10 newly created resident positions 430 for each designated behavioral health teaching hospital 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	419	Section 7. For the 2024-2025 fiscal year, the sum of $\$5$
 Institute for the operation of the Florida Center for Behavioral Health Workforce as created by this act. Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the Medical Care Trust Fund are appropriated to the Agency for Health Care Administration for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	420	million in recurring funds from the General Revenue Fund is
 Health Workforce as created by this act. Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the Medical Care Trust Fund are appropriated to the Agency for Health Care Administration for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	421	appropriated to the Louis de la Parte Florida Mental Health
Section 8. (1) For the 2024-2025 fiscal year, the sums of \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the Medical Care Trust Fund are appropriated to the Agency for Health Care Administration for the Slots for Doctors Program established in s. 409.909, Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	422	Institute for the operation of the Florida Center for Behavioral
425 \$2,557,800 in recurring funds from the General Revenue Fund and \$3,442,200 in recurring funds from the Medical Care Trust Fund 426 are appropriated to the Agency for Health Care Administration 428 for the Slots for Doctors Program established in s. 409.909, 429 Florida Statutes, for up to 10 newly created resident positions 430 for each designated behavioral health teaching hospital 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	423	Health Workforce as created by this act.
426 \$3,442,200 in recurring funds from the Medical Care Trust Fund 427 are appropriated to the Agency for Health Care Administration 428 for the Slots for Doctors Program established in s. 409.909, 429 Florida Statutes, for up to 10 newly created resident positions 430 for each designated behavioral health teaching hospital 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	424	Section 8. (1) For the 2024-2025 fiscal year, the sums of
 427 <u>are appropriated to the Agency for Health Care Administration</u> 428 <u>for the Slots for Doctors Program established in s. 409.909,</u> 429 <u>Florida Statutes, for up to 10 newly created resident positions</u> 430 <u>for each designated behavioral health teaching hospital</u> 431 <u>designated under s. 395.902(4), Florida Statutes, as created by</u> 432 <u>this act. Notwithstanding s. 409.909, Florida Statutes, the</u> 433 <u>agency shall allocate \$150,000 for each newly created position.</u> 434 <u>(2) For the 2024-2025 fiscal year, the sums of \$2,557,800</u> 	425	\$2,557,800 in recurring funds from the General Revenue Fund and
428 for the Slots for Doctors Program established in s. 409.909, 429 Florida Statutes, for up to 10 newly created resident positions 430 for each designated behavioral health teaching hospital 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	426	\$3,442,200 in recurring funds from the Medical Care Trust Fund
Florida Statutes, for up to 10 newly created resident positions for each designated behavioral health teaching hospital designated under s. 395.902(4), Florida Statutes, as created by this act. Notwithstanding s. 409.909, Florida Statutes, the agency shall allocate \$150,000 for each newly created position. (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	427	are appropriated to the Agency for Health Care Administration
 430 for each designated behavioral health teaching hospital 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	428	for the Slots for Doctors Program established in s. 409.909,
 431 designated under s. 395.902(4), Florida Statutes, as created by 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	429	Florida Statutes, for up to 10 newly created resident positions
 432 this act. Notwithstanding s. 409.909, Florida Statutes, the 433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800 	430	for each designated behavioral health teaching hospital
433 agency shall allocate \$150,000 for each newly created position. 434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	431	designated under s. 395.902(4), Florida Statutes, as created by
434 (2) For the 2024-2025 fiscal year, the sums of \$2,557,800	432	this act. Notwithstanding s. 409.909, Florida Statutes, the
	433	agency shall allocate \$150,000 for each newly created position.
435 in recurring funds from the General Revenue Fund and \$3,442,200	434	(2) For the 2024-2025 fiscal year, the sums of \$2,557,800
	435	in recurring funds from the General Revenue Fund and \$3,442,200

Page 15 of 18

436	in recurring funds from the Medical Care Trust Fund are
437	appropriated to the Agency for Health Care Administration for
438	the Slots for Doctors Program established in s. 409.909, Florida
439	Statutes, for up to 10 newly created resident positions for each
440	designated behavioral health teaching hospital designated under
441	s. 395.902, Florida Statutes, other than those designated under
442	s. 395.902(4), Florida Statutes, if any, as created by this act.
443	Notwithstanding s. 409.909, Florida Statutes, the agency shall
444	allocate \$150,000 for each newly created position. The funds
445	shall be held in reserve. Upon designation of a behavioral
446	health teaching hospital, the Agency for Health Care
447	Administration shall submit budget amendments to request release
448	of the funds pursuant to chapter 216, Florida Statutes.
449	Section 9. (1) For the 2024-2025 fiscal year, the sum of $\$2$
450	million in recurring funds from the General Revenue Fund is
451	appropriated to the Agency for Health Care Administration to
452	implement the Training, Education, and Clinicals in Health
453	(TEACH) Funding Program established in s. 409.91256, Florida
454	Statutes, as created by SB 7016, 2024 Regular Session.
455	Notwithstanding s. 409.91256(5)(b), Florida Statutes, as created
456	by SB 7016, 2024 Regular Session, the funds appropriated under
457	this section shall be equally distributed to the behavioral
458	health teaching hospitals designated under s. 395.902(4),
459	Florida Statutes, as created by this act.
460	(2) For the 2024-2025 fiscal year, the sum of \$2 million in
461	recurring funds from the General Revenue Fund is appropriated to
462	the Agency for Health Care Administration to implement TEACH
463	
464	as created by SB 7016, 2024 Regular Session. Notwithstanding s.
I	

Page 16 of 18

465	409.91256(5)(b), Florida Statutes, as created by SB 7016, 2024
466	Regular Session, the funds appropriated pursuant to this section
467	shall be equally distributed to the behavioral health teaching
468	hospitals designated under s. 395.902, Florida Statutes, other
469	than those designated under s. 395.902(4), Florida Statutes, as
470	created by this act. The funds shall be held in reserve. Upon
471	designation of a behavioral health teaching hospital, the Agency
472	for Health Care Administration shall submit budget amendments to
473	request release of the funds pursuant to chapter 216, Florida
474	Statutes. The agency is authorized to submit a final budget
475	amendment in the last quarter of the fiscal year to provide an
476	adjustment in the amount of funds provided to behavioral health
477	teaching hospitals based upon the number of designations
478	finalized during the fiscal year.
479	Section 10. For the 2024-2025 fiscal year, the nonrecurring
480	sum of \$300 million from the General Revenue Fund is
481	appropriated to the Agency for Health Care Administration for
482	the behavioral health teaching hospital grant program as created
483	in s. 395.902(7), Florida Statutes. Grant funds shall be awarded
484	over a 3-year period. Notwithstanding s. 216.301, Florida
485	Statutes, and pursuant to s. 216.351, Florida Statutes, funds
486	appropriated for this purpose which are not disbursed by June 30
487	shall be carried forward for up to 8 years after the effective
488	date of the original appropriation.
489	(1) For the 2024-2025 fiscal year, the Agency for Health
490	Care Administration is authorized to award grants in an amount
491	not to exceed \$100 million to the behavioral health teaching
492	hospitals designated under s. 395.902(4), Florida Statutes, as
493	created by this act.

Page 17 of 18

494	(2) For the 2025-2026 fiscal year, the Agency for Health
495	Care Administration is authorized to award grants in an amount
496	not to exceed \$100 million to behavioral health teaching
497	hospitals designated under s. 395.902, Florida Statutes, as
498	created by this act.
499	(3) For the 2026-2027 fiscal year, the Agency for Health
500	Care Administration is authorized to award grants up to the
501	amount of the original appropriation which has not yet been
502	awarded as of June 30, 2026, to behavioral health teaching
503	hospitals designated under s. 395.902, Florida Statutes, as
504	created by this act.
505	Section 11. Except as otherwise expressly provided in this
506	act and except for this section, which shall take effect upon
507	this act becoming a law, this act shall take effect July 1,

508 2024.

Page 18 of 18