### CS for SB 682

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2	An act relating to substance-abuse services;
3	amending s. 397.311, F.S.; redefining the term
4	"licensed service provider"; requiring that
5	licensure standards apply to certain housing
6	locations; redefining the term "service
7	provider personnel," to add chief financial
8	officers; requiring that owners, directors, and
9	chief financial officers of a substance-abuse
10	service provider undergo a background check
11	pursuant to ch. 435, F.S.; requiring that proof
12	of compliance with local zoning ordinances be
13	included in the applications for licensure;
14	amending s. 397.405, F.S.; clarifying that DUI
15	education and screening services must be
16	licensed if they provide treatment services;
17	amending s. 397.407, F.S.; conforming
18	cross-references; amending s. 397.416, F.S.;
19	conforming cross-references; amending s.
20	397.451, F.S.; clarifying provisions; requiring
21	level-2 background screening for employees who
22	work with children and with adults who are
23	developmentally disabled; specifying
24	circumstances under which service provider
25	owners, directors, or chief financial officers
26	are not subject to background screening;
27	allowing personnel to request, and the
28	department to grant, an exemption from
29	disqualification; amending ss. 212.055,
30	440.102, F.S.; conforming cross-references;
31	providing an effective date.
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Be It Enacted by the Legislature of the State of Florida: 1 2 3 Section 1. Section 397.311, Florida Statutes, is 4 amended to read: 5 397.311 Definitions.--As used in this chapter, except 6 part VIII: 7 "Ancillary services" are services which include, (1)8 but are not limited to, special diagnostic, prenatal and 9 postnatal, other medical, mental health, legal, economic, 10 vocational, employment, and educational services. "Assessment" means the systematic evaluation of 11 (2) 12 information gathered to determine the nature and severity of the client's substance abuse problem and the client's need and 13 14 motivation for services. Assessment entails the use of a 15 psychosocial history supplemented, as required by rule, by 16 medical examinations, laboratory testing, and psychometric 17 measures. 18 "Authorized agent of the department" means a (3) 19 person designated by the department to conduct any audit, 20 inspection, monitoring, evaluation, or other duty imposed upon the department pursuant to this chapter. An authorized agent 21 22 must be identified by the department as: 23 (a) Qualified by the requisite expertise and 24 experience; 25 (b) Having a need to know the applicable information; 26 and 27 (c) Having the assigned responsibility to carry out 28 the applicable duty. 29 (4) "Background check" means reviewing the background of service provider personnel who have direct contact with 30 unmarried clients under the age of 18 years or with clients 31 2 CODING: Words stricken are deletions; words underlined are additions.

who are developmentally disabled in accordance with the 1 provisions of s. 397.451, and includes, but is not limited to, 2 3 local criminal records checks through local law enforcement 4 agencies, fingerprinting, statewide criminal records checks 5 through the Department of Law Enforcement, federal criminal records checks through the Federal Bureau of Investigation, 6 7 and employment history checks. (4) (5) "Beyond the safe management capabilities of the 8 9 service provider" refers to a client who is in need of: 10 (a) Supervision; (b) Medical care; or 11 12 (c) Services, 13 14 beyond that which the service provider or service component 15 can deliver. (5) "Client" means a recipient of alcohol or other 16 17 drug services delivered by a service provider but does not include an inmate pursuant to part VIII unless expressly so 18 19 provided. (6) (7) "Client identifying information" means the 20 name, address, social security number, fingerprints, 21 22 photograph, and similar information by which the identity of a 23 client can be determined with reasonable accuracy and speed either directly or by reference to other publicly available 24 25 information. 26 (7)(8) "Court" means, with respect to all involuntary proceedings under this chapter, the circuit court of the 27 county in which the judicial proceeding is pending or where 28 29 the substance abuse impaired person resides or is located, and includes any general or special master that may be appointed 30 by the chief judge to preside over all or part of such 31 3

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proceeding. Otherwise, "court" refers to the court of legal 1 2 jurisdiction in the context in which the term is used in this 3 chapter. 4 (8)(9) "Department" means the Department of Children 5 and Family Services. 6 (9)<del>(10)</del> "Director" means the chief administrative 7 officer of a service provider. 8 (10)(11) "Disclose" or "disclosure" means a 9 communication of client identifying information, the affirmative verification of another person's communication of 10 client identifying information, or the communication of any 11 12 information of a client who has been identified. Any disclosure made pursuant to this chapter must be limited to 13 14 that information which is necessary to carry out the purpose 15 of the disclosure. (11)(12) "Fee system" means a method of establishing 16 17 charges for services rendered, in accordance with a client's 18 ability to pay, used by providers that receive state funds. 19 (12)(13) "For profit" means registered as for profit by the Secretary of State and recognized by the Internal 20 21 Revenue Service as a for-profit entity. 22 (13)(14) "Habitual abuser" means a person who is 23 brought to the attention of law enforcement for being substance impaired, who meets the criteria for involuntary 24 admission in s. 397.675, and who has been taken into custody 25 26 for such impairment three or more times during the preceding 12 months. 27 28 (14)(15) "Hospital" means a hospital or hospital-based 29 component licensed under chapter 395. (15)(16) "Impaired" or "substance abuse impaired" 30 means a condition involving the use of alcoholic beverages or 31 4 CODING: Words stricken are deletions; words underlined are additions.

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any psychoactive or mood-altering substance in such a manner 1 2 as to induce mental, emotional, or physical problems and cause 3 socially dysfunctional behavior. 4 (16)(17) "Individualized treatment or service plan" 5 means an immediate and a long-range plan for substance abuse or ancillary services developed on the basis of a client's 6 7 assessed needs. 8 (17)<del>(18)</del> "Law enforcement officer" means a law 9 enforcement officer as defined in s. 943.10(1). (18)<del>(19)</del> "Licensed service provider" means a public 10 agency under this chapter, a private for-profit or 11 12 not-for-profit agency under this chapter, a physician licensed under chapter 458 or chapter 459, or any other private 13 14 practitioner licensed under this chapter, or a hospital that 15 licensed under chapter 395, which offers substance abuse impairment services through one or more of the following 16 17 licensable service components: 18 (a) Addictions receiving facility, which is a 19 community-based facility designated by the department to receive, screen, and assess clients found to be substance 20 abuse impaired, in need of emergency treatment for substance 21 22 abuse impairment, or impaired by substance abuse to such an 23 extent as to meet the criteria for involuntary admission in s. 397.675, and to provide detoxification and stabilization. An 24 addictions receiving facility must be state-owned, 25 26 state-operated, or state-contracted, and licensed pursuant to 27 rules adopted by the department's Substance Abuse Program Office which include specific authorization for the provision 28 29 of levels of care and a requirement of separate accommodations for adults and minors. Addictions receiving facilities are 30 designated as secure facilities to provide an intensive level 31 5

of care and must have sufficient staff and the authority to 1 2 provide environmental security to handle aggressive and 3 difficult-to-manage behavior and deter elopement. 4 (b) Detoxification, which uses medical and 5 psychological procedures and a supportive counseling regimen 6 to assist clients in managing toxicity and withdrawing and 7 stabilizing from the physiological and psychological effects 8 of substance abuse impairment. 9 (c) Residential treatment, which provides a structured, live-in environment within a nonhospital setting 10 on a 24-hours-a-day, 7-days-a-week basis, and which includes: 11 12 treatment, rehabilitation, and transitional care. 13 1. Facilities that provide room and board and 14 treatment and rehabilitation within the primary residential 15 facility; and 2. Facilities that are used for room and board only 16 17 and in which treatment and rehabilitation activities are provided on a mandatory basis at locations other than the 18 19 primary residential facility. In this case, facilities used 20 for room and board and for treatment and rehabilitation are operated under the auspices of the same provider, and 21 licensing and regulatory requirements would apply to both the 22 23 residential facility and all other facilities in which treatment and rehabilitation activities occur. 24 25 (d) Day and night treatment, which provides a 26 nonresidential environment with a structured schedule of treatment and rehabilitation services. 27 28 (e) Outpatient treatment, which provides individual, 29 group, or family counseling for clients by appointment during scheduled operating hours, with an emphasis on assessment and 30 31 treatment. 6

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Medication and methadone maintenance treatment 1 (f) 2 that uses methadone or other medication as authorized by state 3 and federal law, in conjunction with medical, rehabilitative, 4 and counseling services in the treatment of clients who are 5 dependent upon opioid drugs. (g) Prevention, which is a process involving 6 7 strategies aimed at the individual, the environment, or the substance, which strategies preclude, forestall, or impede the 8 9 development of substance abuse problems and promote responsible personal and social growth of individuals and 10 families toward full human potential. 11 12 (h) Intervention, which consists of structured services targeted toward individuals or groups at risk and 13 14 focused on reducing those factors associated with the onset or the early stages of substance abuse, and related problems. 15 16 (19)(20) "Not for profit" means registered as not for 17 profit by the Secretary of State and recognized by the 18 Internal Revenue Service as a not-for-profit entity. 19 (20)(21) "Physician" means a person licensed under chapter 458 to practice medicine or licensed under chapter 459 20 to practice osteopathic medicine, and may include, if the 21 context so indicates, an intern or resident enrolled in an 22 23 intern or resident training program affiliated with an approved medical school, hospital, or other facility through 24 which training programs are normally conducted. 25 26 (21)(22) "Preliminary screening" means the gathering 27 of initial information to be used in determining a person's need for assessment or for referral. 28 29 (22)(23) "Private practitioner" means a physician licensed under chapter 458 or chapter 459, a psychologist 30 licensed under chapter 490, or a clinical social worker, 31 CODING: Words stricken are deletions; words underlined are additions.

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marriage and family therapist, or mental health counselor
 licensed under chapter 491.

3 <u>(23)</u>(24) "Program evaluation" or "evaluation" means a
4 systematic measurement of a service provider's achievement of
5 desired client or service outcomes.

6 (24)(25) "Qualified professional" means a physician 7 licensed under chapter 458 or chapter 459; a professional 8 licensed under chapter 490 or chapter 491; or a person who is 9 certified through a department-recognized certification process for substance abuse treatment services and who holds, 10 at a minimum, a bachelor's degree. A person who is certified 11 12 in substance abuse treatment services by a state-recognized certification process in another state at the time of 13 14 employment with a licensed substance abuse provider in this 15 state may perform the functions of a qualified professional as defined in this chapter but must meet certification 16 17 requirements contained in this subsection no later than 1 year 18 after his or her date of employment.

19 (25)(26) "Quality assurance" means the objective and 20 internal systematic monitoring of the appropriateness and 21 quality of client care rendered by a service provider.

(26)<del>(27)</del> "Secure facility," except where the context 22 23 indicates a correctional system facility, means a provider that has the authority to deter the premature departure of 24 involuntary clients whose leaving constitutes a violation of a 25 26 court order or community-based supervision as provided by law. The term "secure facility" includes addictions receiving 27 facilities and facilities authorized by local ordinance for 28 29 the treatment of habitual abusers.

30 <u>(27)(28)</u> "Service provider" or "provider" means a
31 public agency, a private for-profit or not-for-profit agency,

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a person who is a private practitioner, or a hospital, which 1 agency, person, or hospital is licensed under this chapter or 2 3 exempt from licensure under this chapter. 4 (28)(29) "Service provider personnel" or "personnel" 5 includes all owners, directors, chief financial officers, 6 staff, and volunteers, including foster parents, of a service 7 provider. 8 (29)(30) "Stabilization" means: 9 (a) Alleviation of a crisis condition; or (b) Prevention of further deterioration, 10 11 12 and connotes short-term emergency treatment. Section 2. Subsection (1) of section 397.403, Florida 13 14 Statutes, is amended to read: 397.403 License application .--15 (1) Applicants for a license under this chapter must 16 17 apply to the department on forms provided by the department 18 and in accordance with rules adopted by the department. 19 Applications must include at a minimum: 20 (a) Information establishing the name and address of the applicant service provider and its director, and also of 21 each member, owner, officer, and shareholder, if any. 22 23 (b) Information establishing the competency and ability of the applicant service provider and its director to 24 carry out the requirements of this chapter. 25 26 (c) Proof satisfactory to the department of the applicant service provider's financial ability and 27 organizational capability to operate in accordance with this 28 29 chapter. (d) Proof of liability insurance coverage in amounts 30 set by the department by rule. 31 9 CODING: Words stricken are deletions; words underlined are additions.

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1	(e) Sufficient information to conduct background
2	screening as provided in s. 397.451 Personnel fingerprints for
3	background checks as required by this chapter.
4	1. If the results of the background screening indicate
5	that any owner, director, or chief financial officer has been
6	found guilty of, regardless of adjudication, or has entered a
7	plea of nolo contendere or guilty to any offense prohibited
8	under the screening standard, a license may not be issued to
9	the applicant service provider unless an exemption from
10	disqualification has been granted by the department as set
11	forth in chapter 435. The owner, director, or manager has 90
12	days within which to obtain the required exemption, during
13	which time the applicant's license remains in effect.
14	2. If any owner, director, or chief financial officer
15	is arrested or found guilty of, regardless of adjudication, or
16	has entered a plea of nolo contendere or guilty to any offense
17	prohibited under the screening standard while acting in that
18	capacity, the provider shall immediately remove the person
19	from that position and shall notify the department within 2
20	days after such removal, excluding weekends and holidays.
21	Failure to remove the owner, director, or manager will result
22	in revocation of the provider's license.
23	(f) Proof of satisfactory fire, safety, and health
24	inspections, and compliance with local zoning ordinances.
25	Service providers operating under a regular annual license
26	shall have 18 months from the expiration date of their regular
27	license within which to meet local zoning requirements.
28	Applicants for a new license must demonstrate proof of
29	compliance with zoning requirements prior to the department
30	issuing a probationary license.
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1 (g) A comprehensive outline of the proposed services 2 for: 3 1. Any new applicant; or 4 2. Any licensed service provider adding a new 5 licensable service component. 6 Section 3. Section 397.405, Florida Statutes, is 7 amended to read: 8 397.405 Exemptions from licensure.--The following are 9 exempt from the licensing provisions of this chapter: 10 (1) A hospital or hospital-based component licensed 11 under chapter 395. 12 (2) A nursing home facility as defined in s. 400.021. 13 (3) A substance abuse education program established 14 pursuant to s. 233.061. 15 (4) A facility or institution operated by the Federal 16 Government. 17 (5) A physician licensed under chapter 458 or chapter 459. 18 19 (6) A psychologist licensed under chapter 490. 20 A social worker, marriage and family therapist, or (7) 21 mental health counselor licensed under chapter 491. 22 (8) An established and legally cognizable church or nonprofit religious organization or, denomination, or sect 23 providing substance abuse services, including prevention 24 25 services, which are exclusively religious, spiritual, or 26 ecclesiastical in nature. A church or nonprofit religious organization or, denomination, or sect providing any of the 27 licensable service components itemized under s. 397.311(18)s. 28 29 397.311(19) is not exempt for purposes of its provision of 30 such licensable service components but retains its exemption 31 11

with respect to all services which are exclusively religious, 1 2 spiritual, or ecclesiastical in nature. (9) Facilities licensed under s. 393.063(8) that, in 3 4 addition to providing services to persons who are 5 developmentally disabled as defined therein, also provide services to persons developmentally at risk as a consequence 6 7 of exposure to alcohol or other legal or illegal drugs while 8 in utero. 9 (10) DUI education and screening services provided required to be attended pursuant to ss. 316.192, 316.193, 10 322.095, 322.271, and 322.291 are exempt from licensure under 11 12 this chapter. Persons or entities providing treatment services programs must continue to be licensed under this 13 14 chapter unless exempted from licensing as provided in this 15 section. 16 17 The exemptions from licensure in this section do not apply to any service provider that facility or entity which receives an 18 19 appropriation, grant, or contract from the state to operate as a service provider as defined in this chapter or to any 20 21 substance abuse program regulated pursuant to s. 397.406. 22 Furthermore, No provision of this chapter may not shall be 23 construed to limit the practice of a physician licensed under chapter 458 or chapter 459, a psychologist licensed under 24 chapter 490, or a psychotherapist licensed under chapter 491 25 26 who provides, providing outpatient or inpatient substance abuse treatment to a voluntary patient, so long as the 27 physician, psychologist, or psychotherapist does not represent 28 29 to the public that he or she is a licensed service provider and does not provide services to clients pursuant to part V of 30 this chapter under this act. Failure to comply with any 31 12

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requirement necessary to maintain an exempt status under this 1 2 section is a misdemeanor of the first degree, punishable as 3 provided in s. 775.082 or s. 775.083. 4 Section 4. Subsection (1) of section 397.407, Florida 5 Statutes, is amended to read: 6 397.407 Licensure fees.--7 (1) The department shall establish licensure fees by 8 The rule must prescribe a fee range that is based, at rule. 9 least in part, on the number and complexity of programs listed 10 in s. 397.311(18)<del>s. 397.311(19)</del>which are operated by a The fee range must be implemented over a 5-year 11 licensee. 12 period. The fee schedule for licensure of service components must be increased annually in substantially equal increments 13 14 so that, by July 1, 1998, the fees from the licensure of 15 service components are sufficient to cover at least 50 percent 16 of the costs of regulating the service components. The 17 department shall specify by rule a fee range and phase-in plan for privately funded licensed service providers and a fee 18 19 range and phase-in plan for publicly funded licensed service providers. Fees for privately funded licensed service 20 providers must exceed the fees for publicly funded licensed 21 22 service providers. The first year phase-in licensure fees 23 must be at least \$150 per initial license. The rule must provide for a reduction in licensure fees for licensed service 24 25 providers who hold more than one license. 26 Section 5. Subsection (2) of section 397.416, Florida Statutes, is amended to read: 27 28 397.416 Substance abuse treatment services; qualified 29 professional.--(2) Notwithstanding any other provision of law, a 30 person who was certified through a certification process 31 13 CODING: Words stricken are deletions; words underlined are additions.

recognized by the former Department of Health and 1 Rehabilitative Services before January 1, 1995, may perform 2 3 the duties of a qualified professional with respect to 4 substance abuse treatment services as defined in this chapter, 5 and need not meet the certification requirements contained in 6 s. 397.311(24)<del>s. 397.311(25)</del>. 7 Section 6. Section 397.451, Florida Statutes, is 8 amended to read: 397.451 Background checks of service provider 9 personnel who have direct contact with unmarried minor clients 10 or clients who are developmentally disabled .--11 12 (1) PERSONNEL BACKGROUND CHECKS; REQUIREMENTS AND EXCEPTIONS. --13 14 (a) Background checks shall apply as follows: 1. All owners, directors, and chief financial officers 15 16 of service providers are subject to level-2 background 17 screening as provided under chapter 435. 18 2. All service provider personnel who have direct 19 contact with children receiving services or with adults who 20 are developmentally disabled receiving services are subject to level-2 background screening as provided under chapter 435. 21 Service provider personnel who have direct contact with 22 23 unmarried clients under the age of 18 years or with clients who are developmentally disabled are subject to background 24 checks, except as otherwise provided in this section. 25 26 (b) Students in the health care professions who are 27 interning under the actual physical presence supervision of a licensed health care professional in a service provider 28 29 licensed under chapter 395, where the primary purpose of the 30 service provider is not the treatment of unmarried minors or 31 14

of persons who are developmentally disabled, are exempt from 1 the fingerprinting and background check requirements. 2 3 (c) Personnel working in a service provider licensed 4 under chapter 395 who have less than 15 hours per week of 5 direct contact with unmarried minors or with persons who are developmentally disabled, or personnel who are health care б 7 professionals licensed by the Department of Business and 8 Professional Regulation or a board thereunder who are not 9 employed in a service provider where the primary purpose is 10 the treatment of unmarried minors or of persons who are developmentally disabled are exempt from the fingerprinting 11 12 and background check requirements. (b)(d) Members of a foster family and persons residing 13 14 with the foster family who are between 12 and 18 years of age are not required to be fingerprinted but must have their 15 backgrounds checked for delinguency records. Members of the 16 17 foster family and persons residing with the foster family over 18 years of age are subject to full background checks. 18 19 (c)<del>(e)</del> A volunteer who assists on an intermittent 20 basis for fewer than 40 hours per month and is under direct and constant supervision by persons who meet all personnel 21 requirements of this chapter is exempt from fingerprinting and 22 23 background check requirements. (d) (f) Service providers that are exempt from 24 25 licensing provisions of this chapter are exempt from personnel 26 fingerprinting and background check requirements, except as otherwise provided in this section. A church or nonprofit 27 religious organization exempt from licensure under this 28 29 chapter is required to comply with personnel fingerprinting and background check requirements. 30 31 15 CODING: Words stricken are deletions; words underlined are additions.

1	<u>(e)</u> Personnel employed by the Department of
2	Corrections in a substance abuse service component who have
3	direct contact with unmarried inmates under the age of 18 or
4	with inmates who are developmentally disabled are exempt from
5	the fingerprinting and background check requirements of this
6	section.
7	(f) Service provider personnel who request an
8	exemption from disqualification must submit the request within
9	30 days after being notified of a pending disqualification.
10	The employment of service provider personnel shall not be
11	adversely affected pending disposition of the request for an
12	exemption. Disapproval of a request for an exemption shall
13	result in the immediate dismissal of the service provider
14	personnel from employment with the provider.
15	(2) EMPLOYMENT HISTORY CHECKS; CHECKS OF
16	REFERENCESThe department shall assess employment history
17	checks and checks of references for all <u>owners,</u> directors, <u>and</u>
18	chief financial officers, and the directors shall assess
19	employment history checks and checks of references for each
20	employee who has direct contact with children receiving
21	services or adults who are developmentally disabled receiving
22	services unmarried clients under the age of 18 years or with
23	<del>clients who are developmentally disabled</del> .
24	(3) MINIMUM BACKGROUND CHECK STANDARDSThe
25	department shall require employment screening pursuant to
26	chapter 435, using level 2 standards for screening set forth
27	in that chapter, of service provider personnel who have direct
28	<del>contact with unmarried clients under the age of 18 years or</del>
29	with clients who are developmentally disabled.
30	(3)(4) PERSONNEL EXEMPT FROM BEING REFINGERPRINTED OR
31	RECHECKED
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(a) Service provider personnel who have been 1 2 fingerprinted or had their backgrounds checked pursuant to 3 chapter 393, chapter 394, chapter 402, or chapter 409, or this 4 section, and teachers who have been fingerprinted pursuant to 5 chapter 231, who have not been unemployed for more than 90 days thereafter and who, under the penalty of perjury, attest 6 7 to the completion of such fingerprinting or background checks and to compliance with the provisions of this section and the 8 9 standards contained in chapter 435 and this section, are not 10 required to be refingerprinted or rechecked in order to comply with service provider personnel fingerprinting or background 11 12 check requirements. 13 (b) Service provider owners, directors, or chief 14 financial officers who are not covered by paragraph (a) who 15 provide proof of compliance with the level-2 background 16 screening requirements which has been submitted within the 17 previous 5 years in compliance with any other state health care licensure requirements are not required to be 18 19 refingerprinted or rechecked. 20 (4)(5) EXEMPTIONS FROM DISQUALIFICATION. --(a) The department may grant to any service provider 21 22 personnel an exemption from disqualification from working with 23 children or the developmentally disabled as provided in s. 435.07. 24 (b) Since rehabilitated substance abuse impaired 25 26 persons are effective in the successful treatment and 27 rehabilitation of substance abuse impaired adolescents, for service providers which treat adolescents 13 years of age and 28 29 older, service provider personnel whose background checks indicate crimes under s. 817.563, s. 893.13, or s. 893.147 30 31 17

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may be exempted from disqualification from employment pursuant 1 2 to this paragraph. 3 (c) The department may grant exemptions from 4 disqualification which would limit service provider personnel 5 to working with adults in substance-abuse-treatment 6 facilities. 7 (5)<del>(6)</del> PAYMENT FOR PROCESSING OF FINGERPRINTS AND 8 STATE CRIMINAL RECORDS CHECKS. -- The employing service provider 9 or the personnel who are having their backgrounds checked are responsible for paying the costs of processing fingerprints 10 and criminal records checks. 11 12 (6)(7) DISQUALIFICATION FROM RECEIVING STATE FUNDS.--State funds may not be disseminated to any service 13 14 provider owned or operated by an owner, or director, or chief financial officer who has been convicted of, has entered a 15 plea of guilty or nolo contendere to, or has had adjudication 16 17 withheld for, a violation of s. 893.135 pertaining to trafficking in controlled substances, or a violation of the 18 19 law of another state, the District of Columbia, the United States or any possession or territory thereof, or any foreign 20 jurisdiction which is substantially similar in elements and 21 penalties to a trafficking offense in this state, unless the 22 owner's or director's civil rights have been restored. 23 Section 7. Paragraph (e) of subsection (5) of section 24 212.055, Florida Statutes, is amended to read: 25 26 212.055 Discretionary sales surtaxes; legislative intent; authorization and use of proceeds.--It is the 27 legislative intent that any authorization for imposition of a 28 29 discretionary sales surtax shall be published in the Florida Statutes as a subsection of this section, irrespective of the 30 duration of the levy. Each enactment shall specify the types 31 18 CODING: Words stricken are deletions; words underlined are additions.

of counties authorized to levy; the rate or rates which may be imposed; the maximum length of time the surtax may be imposed, if any; the procedure which must be followed to secure voter approval, if required; the purpose for which the proceeds may be expended; and such other requirements as the Legislature may provide. Taxable transactions and administrative procedures shall be as provided in s. 212.054.

8 (5) COUNTY PUBLIC HOSPITAL SURTAX. -- Any county as 9 defined in s. 125.011(1) may levy the surtax authorized in this subsection pursuant to an ordinance either approved by 10 extraordinary vote of the county commission or conditioned to 11 12 take effect only upon approval by a majority vote of the electors of the county voting in a referendum. 13 In a county as 14 defined in s. 125.011(1), for the purposes of this subsection, 15 "county public general hospital" means a general hospital as 16 defined in s. 395.002 which is owned, operated, maintained, or 17 governed by the county or its agency, authority, or public 18 health trust.

19 (e) A governing board, agency, or authority shall be 20 chartered by the county commission upon this act becoming law. The governing board, agency, or authority shall adopt and 21 22 implement a health care plan for indigent health care 23 services. The governing board, agency, or authority shall consist of no more than seven and no fewer than five members 24 appointed by the county commission. The members of the 25 26 governing board, agency, or authority shall be at least 18 27 years of age and residents of the county. No member may be employed by or affiliated with a health care provider or the 28 29 public health trust, agency, or authority responsible for the county public general hospital. The following community 30 organizations shall each appoint a representative to a 31

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nominating committee: the South Florida Hospital and 1 Healthcare Association, the Miami-Dade County Public Health 2 3 Trust, the Dade County Medical Association, the Miami-Dade 4 County Homeless Trust, and the Mayor of Miami-Dade County. 5 This committee shall nominate between 10 and 14 county citizens for the governing board, agency, or authority. б The 7 slate shall be presented to the county commission and the 8 county commission shall confirm the top five to seven 9 nominees, depending on the size of the governing board. Until 10 such time as the governing board, agency, or authority is created, the funds provided for in subparagraph (d)2. shall be 11 12 placed in a restricted account set aside from other county 13 funds and not disbursed by the county for any other purpose. 14 The plan shall divide the county into a minimum of 1. four and maximum of six service areas, with no more than one 15 16 participant hospital per service area. The county public 17 general hospital shall be designated as the provider for one 18 of the service areas. Services shall be provided through 19 participants' primary acute care facilities. 20 The plan and subsequent amendments to it shall fund 2. a defined range of health care services for both indigent 21 22 persons and the medically poor, including primary care, 23 preventive care, hospital emergency room care, and hospital care necessary to stabilize the patient. For the purposes of 24 this section, "stabilization" means stabilization as defined 25 26 in s. 397.311(29) s. 397.311(30). Where consistent with these 27 objectives, the plan may include services rendered by physicians, clinics, community hospitals, and alternative 28 29 delivery sites, as well as at least one regional referral hospital per service area. The plan shall provide that 30 agreements negotiated between the governing board, agency, or 31

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authority and providers shall recognize hospitals that render 1 a disproportionate share of indigent care, provide other 2 3 incentives to promote the delivery of charity care to draw 4 down federal funds where appropriate, and require cost 5 containment, including, but not limited to, case management. From the funds specified in subparagraphs (d)1. and 2. for 6 7 indigent health care services, service providers shall receive 8 reimbursement at a Medicaid rate to be determined by the 9 governing board, agency, or authority created pursuant to this 10 paragraph for the initial emergency room visit, and a per-member per-month fee or capitation for those members 11 12 enrolled in their service area, as compensation for the services rendered following the initial emergency visit. 13 14 Except for provisions of emergency services, upon determination of eligibility, enrollment shall be deemed to 15 have occurred at the time services were rendered. The 16 17 provisions for specific reimbursement of emergency services shall be repealed on July 1, 2001, unless otherwise reenacted 18 19 by the Legislature. The capitation amount or rate shall be determined prior to program implementation by an independent 20 actuarial consultant. In no event shall such reimbursement 21 rates exceed the Medicaid rate. The plan must also provide 22 23 that any hospitals owned and operated by government entities on or after the effective date of this act must, as a 24 condition of receiving funds under this subsection, afford 25 26 public access equal to that provided under s. 286.011 as to 27 any meeting of the governing board, agency, or authority the subject of which is budgeting resources for the retention of 28 29 charity care, as that term is defined in the rules of the Agency for Health Care Administration. The plan shall also 30 include innovative health care programs that provide 31

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cost-effective alternatives to traditional methods of service
 and delivery funding.

3 3. The plan's benefits shall be made available to all
4 county residents currently eligible to receive health care
5 services as indigents or medically poor as defined in
6 paragraph (4)(d).

4. Eligible residents who participate in the health
care plan shall receive coverage for a period of 12 months or
the period extending from the time of enrollment to the end of
the current fiscal year, per enrollment period, whichever is
less.

12 5. At the end of each fiscal year, the governing 13 board, agency, or authority shall prepare an audit that 14 reviews the budget of the plan, delivery of services, and 15 quality of services, and makes recommendations to increase the 16 plan's efficiency. The audit shall take into account 17 participant hospital satisfaction with the plan and assess the amount of poststabilization patient transfers requested, and 18 19 accepted or denied, by the county public general hospital.

20 Section 8. Paragraphs (d) and (g) of subsection (1) of 21 section 440.102, Florida Statutes, are amended to read:

440.102 Drug-free workplace program requirements.--The following provisions apply to a drug-free workplace program implemented pursuant to law or to rules adopted by the Agency for Health Care Administration:

26 (1) DEFINITIONS.--Except where the context otherwise 27 requires, as used in this act:

(d) "Drug rehabilitation program" means a service
provider, established pursuant to <u>s. 397.311(27)</u>
20 <del>207.311(28)</del> that provides confidential timely and expert

30 397.311(28), that provides confidential, timely, and expert 31

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identification, assessment, and resolution of employee drug abuse. (g) "Employee assistance program" means an established program capable of providing expert assessment of employee personal concerns; confidential and timely identification services with regard to employee drug abuse; referrals of employees for appropriate diagnosis, treatment, and assistance; and followup services for employees who participate in the program or require monitoring after returning to work. If, in addition to the above activities, an employee assistance program provides diagnostic and treatment services, these services shall in all cases be provided by service providers pursuant to s. 397.311(27)<del>s. 397.311(28)</del>. Section 9. This act shall take effect July 1, 2002. CODING: Words stricken are deletions; words underlined are additions.