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A bill to be entitled An act relating to behavioral health; providing legislative intent with respect to the provision of mental health and substance abuse services through the creation of an Agency for Mental Health and Substance Abuse Services within the Department of Children and Family Services; defining "mental health and substance abuse services" for purposes of the act; creating part VI of ch. 394, F.S., entitled "Agency for Mental Health and Substance Abuse Services"; creating s. 394.95, F.S.; creating the Agency for Mental Health and Substance Abuse Services; providing the mission of the agency; requiring the agency to develop a strategic plan and collaborative agreements with state agencies; providing for responsibilities of the agency; providing that the head of the agency shall be the director of the Agency for Mental Health and Substance Abuse Services; providing duties and responsibilities of the director; providing for a Division Director for Mental Health and a Division Director for Substance Abuse; providing duties and responsibilities of the division directors; providing service structure of the agency; providing for the appointment of a statewide policy board by the Governor for the purpose of making recommendations to the director regarding policy, budget, and other matters relating to the management of the mental health and substance abuse systems developed by the agency; providing for a transition team to plan the transition of responsibility for the provision of mental health and substance abuse services from the existing mental health and substance abuse programs of the



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Department of Children and Family Services to the Agency for Mental Health and Substance Abuse Services; providing membership of the transition team; requiring the development of a transition plan; prescribing plan components; providing for a type two transfer of all powers, duties, records, personnel, property, and unexpended balances of appropriations, allocations, or other funds of the mental health and substance abuse programs of the Department of Children and Family Services to the Agency for Mental Health and Substance Abuse Services by a specified date; providing for continuation of administrative rules; providing for continuation of judicial or administrative proceedings; amending s. 394.741, F.S.; revising and providing additional accreditation requirements for providers of behavioral health care services; amending s. 409.912, F.S.; requiring the Agency for Health Care Administration to seek federal approval to contract with a single entity to provide comprehensive behavioral health care services to Medicaid recipients; requiring the agency to contract with a single managed entity to provide comprehensive inpatient and outpatient mental health and substance abuse services through capitated prepaid arrangements to Medicaid recipients by a specified date; requiring the agency to submit a plan for full implementation of capitated prepaid behavioral health care by a specified date; providing implementation plan requirements and procedures; reenacting s. 394.9082(4)(a), (b), and (d), F.S., relating to the authority of the Department of Children and Family Services and the Agency for Health Care Administration to



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contract for the provision or management of behavioral health services with a managing entity in specified geographic areas, to incorporate the amendments to s. 409.912, F.S., in references thereto; reenacting s. 641.225(3)(b), F.S., relating to minimum surplus requirements of specified health maintenance organizations providing prepaid capitated services, to incorporate the amendments to s. 409.912, F.S., in references thereto; reenacting s. 636.0145, F.S., relating to license requirements for specified prepaid limited health service organizations providing comprehensive inpatient and outpatient mental health care services to certain Medicaid recipients through a capitated prepaid arrangement pursuant to federal waiver, to incorporate the amendments to s. 409.912, F.S., in references thereto; providing effective dates.

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88 89 WHEREAS, mental health and substance abuse services are delivered in many settings outside of the jurisdiction of the Department of Children and Family Services, including hospitals, clinics, jails, prisons, juvenile justice programs, assisted living facilities, nursing homes, and other settings, and

WHEREAS, each state agency that serves people with mental health and substance abuse disorders has a planning, quality assurance, and accountability function related to its primary mission, and

WHEREAS, there is no single governmental agency responsible for state strategy, policy, and leadership across the state's combined behavioral health care system, and



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WHEREAS, the Commission on Mental Health and Substance Abuse reported in 2001 that the current system is complex, fragmented, uncoordinated, and often ineffective, and

WHEREAS, the Commission on Mental Health and Substance
Abuse found that although significant cost associated with the
state's current approach to mental health and substance abuse
problems can be documented, programs are not organized
effectively at the state level, and

WHEREAS, multiple mental health and substance abuse programs across agencies and departments present bureaucratic barriers and often conflicting funding streams and regulations that frustrate access for many Floridians needing care, and

WHEREAS, many states have combined mental health and substance abuse services in a single unique agency because of their common behavioral health-related treatment and service orientation to individuals needing care, and

WHEREAS, the scope and complexity of the state's behavioral health care system requires strong leadership to be effective and efficient, NOW, THEREFORE,

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

Legislature to provide mental health and substance abuse services that are coordinated and consistent and reflect the current state of knowledge regarding quality and effectiveness by creating an agency dedicated to mental health and substance abuse services. For purposes of this act, the term "mental health and substance abuse services" means substance abuse programs and functions under chapter 397, Florida Statutes,



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HB 0433 2003 120 mental health programs and functions under chapter 394, Florida Statutes, and other related programs and functions designated by 121 122 statute. Section 2. Effective October 1, 2004, part VI of chapter 123 394, Florida Statutes, consisting of section 394.95, is created 124 to read: 125 126 PART VI 127 AGENCY FOR MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES 128 394.95 Agency for Mental Health and Substance Abuse 129 130 Services. -- There is created an Agency for Mental Health and Substance Abuse Services within the Department of Children and 131 132 Family Services. The agency shall be a separate budget entity 133 and the director of the Agency for Mental Health and Substance 134 Abuse Services shall be the agency head for all purposes. (1)MISSION. --135 The mission of the Agency for Mental Health and 136 (a) Substance Abuse Services shall be to: 137 1. Provide overall policy and programmatic leadership for 138 all mental health and substance abuse services funded by or 139 through the state. 140 Initiate and organize partnerships with local 141 communities to develop effective strategies for preventing or 142 reducing the negative consequences of mental illness and 143 substance abuse problems. 144 145

3. Provide a comprehensive and coordinated continuum of effective mental health and substance abuse services to help individuals suffering from these illnesses to achieve their greatest potential for independent and productive living.



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(b) The agency shall develop a strategic plan for fulfilling its mission and establish a set of measurable goals, objectives, performance standards, and quality assurance requirements to ensure that the agency is accountable to the people of Florida.

- (c) The agency shall develop effective collaborative agreements with other state agencies to fulfill the intent of this act and the mission of the agency.
 - (2) RESPONSIBILITIES. -- The agency is responsible for:
- (a) Establishing statewide policy for the provision of mental health and substance abuse services to the citizens of the state and developing strategies for the implementation of such policy.
- (b) Directing and managing the use of mental health and substance abuse appropriations made pursuant to this chapter and chapter 397, including those services funded through the Medicaid program.
- (c) Ensuring the provision of all information required by the Agency for Health Care Administration for the accountability of Medicaid mental health and substance abuse funding.
- (d) Creating and contracting with comprehensive service provider networks pursuant to s. 394.9082 using single and uniform contracts, standards, and data-reporting requirements to the maximum extent possible.
- (e) Working with community-based provider networks on the establishment of local service priorities and service strategies.
- (f) Developing and implementing uniform contracting and payment systems which are consistent with s. 394.9082 for all mental health and substance abuse funds under agency control.



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(g) Developing standards and performance expectations for contractors.

- (h) Utilizing efficient accountability mechanisms which are data-based and which reflect state-of-the-art industry practices.
- (i) Delegating to the maximum extent possible on-site monitoring to the community-based provider networks.
- (j) Maintaining knowledge of emerging research regarding effective and efficient prevention and treatment approaches and systematically incorporating this research into practice.
- (k) Working with other state and local agencies involved in the delivery of mental health and substance abuse services to facilitate the use of the most current approaches to prevention and treatment.
- (1) Collecting data and monitoring the status of the entire publicly funded mental health and substance abuse system.
- (m) Monitoring and forecasting mental health and substance abuse manpower needs and working with the educational systems in the state to ensure that the state has the personnel needed to continuously implement and improve its services.
- (n) Providing or arranging for administrative services and information systems necessary to support the mission of the agency.
- (o) Developing and maintaining effective interagency collaboration.
- (p) Ensuring access of children and families in the child protection system to needed and appropriate mental health and substance abuse services.
 - (q) Operating a consumer advocacy function.



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(r) Ensuring that all federal and state laws and reporting requirements are met.

- (s) Maximizing the use of federal and other nonstate funds in the accomplishment of the agency's mission.
- (3) DIRECTOR OF THE AGENCY FOR MENTAL HEALTH AND SUBSTANCE ABUSE SERVICES.--
- (a) The head of the agency is the director of the Agency for Mental Health and Substance Abuse Services, who shall be appointed by the Governor, with the concurrence of the secretary of the Department of Children and Family Services. The director shall serve at the pleasure of and report to the Governor and shall have a responsibility to coordinate activities with the secretary of the Department of Children and Family Services.
- (b) The director shall ensure that mental health and substance abuse services are implemented according to legislative intent, state and federal laws, rules, regulations, statewide program standards, and performance objectives.
- (c) The director shall negotiate an agreement with the secretary of the Agency for Health Care Administration that delegates responsibility for managing Medicaid mental health and substance abuse services to the Agency for Mental Health and Substance Services.
- (d) The director shall have formal relationships with the State University System and shall, to the extent practicable, utilize the resources and expertise of the State University System in pursuing its responsibilities.
 - (4) DIVISION DIRECTORS; MANAGEMENT STAFF.--
- (a) The director shall appoint a Division Director for Mental Health and a Division Director for Substance Abuse. The



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division directors are directly responsible to the director and serve at the pleasure of the director.

- (b) The Division Director for Mental Health is responsible for all mental health institutional programs and for community mental health programs and services, including those funded by Medicaid, and shall have line authority over regional mental health agency staff.
- (c) The Division Director for Substance Abuse shall be responsible for all substance abuse prevention and treatment services and shall have line authority over all regional substance abuse agency staff.
- (d) In order to facilitate the accomplishment of agency service goals, the director shall, to the maximum extent possible, assign administrative services staff to the division directors.
- (e) The director shall appoint a Director of Consumer

 Affairs who shall have input into the policy, program, and

 training and research priorities of the agency in addition to

 handling consumer and other complaints.
- (f) The director shall appoint a Director of Services
 Integration who shall advocate for services integration and who
 shall be responsible for monitoring and reporting on the
 agency's performance in integrating mental health and substance
 abuse services in its own operations and integrating mental
 health and substance abuse services in the operations of other
 departments that deliver mental health and substance abuse
 services.
- (g) The director may appoint additional managers and administrators that he or she determines are necessary for the effective management of the agency.



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- (5) SERVICE STRUCTURE.--
- (a) The agency is authorized to establish regional offices which, if established, will be aligned with one or more regions of the Agency for Health Care Administration.
- (b) The agency is authorized to contract for mental health and substance abuse services with comprehensive community-based provider networks and shall use contracting mechanisms to the maximum extent possible in accomplishing its mission.
- (6) STATEWIDE POLICY BOARD. -- The Governor shall appoint a statewide policy board composed of business and community leaders who have an interest in mental health and substance abuse services. The board shall make recommendations to the director regarding organization, policy, budget, and other matters relating to the management of the mental health and substance abuse system.
- Section 3. <u>Transition team; Agency for Mental Health and</u>
 Substance Abuse Services creation plan.--
- (1) By July 1, 2003, the secretary of the Department of Children and Family Services shall convene a transition team to plan the transition of responsibility for the provision of mental health and substance abuse services in the state from the existing mental health and substance abuse programs of the Department of Children and Family Services to the Agency for Mental Health and Substance Abuse Services.
- (2) The transition team shall be composed of the following members:
- (a) A member of the House of Representatives to be appointed by the Speaker of the House of Representatives.
- (b) A member of the Senate to be appointed by the President of the Senate.

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- (c) The director of the Medicaid program for the Agency for Health Care Administration.
 - (c) The secretary of the Department of Health.
- (d) The Department of Children and Family Services program office directors for mental health and substance abuse.
- (e) The Department of Children and Family Services assistant secretary for programs.
- (f) A representative of the Executive Office of the Governor to be appointed by the Governor.
- (g) A representative of the Statewide Drug Policy Advisory Council to be appointed by the Governor.
- (h) A representative of the Florida Council for Behavioral Healthcare to be appointed by the Governor.
- (i) A representative of the Florida Alcohol and Drug Abuse Association to be appointed by the Governor.
- (j) Representatives of the State University System to be appointed by the Governor.
- (k) Representatives of other appropriate mental health and substance abuse advocacy groups, including consumers and family members, to be appointed by the Governor.
- (3) The transition team shall develop a plan of transition activities and functions with respect to the creation of the Agency for Mental Health and Substance Abuse Services. The transition plan shall be formulated anticipating the use of Department of Children and Family Services and Agency for Health Care Administration program and administrative resources currently directly or indirectly involved in managing and accounting for Department of Children and Family Services and Medicaid mental health and substance abuse services. The final



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326	plan shall anticipate a 10-percent reduction in total
327	administrative costs. The plan shall address, at a minimum:
328	(a) Organizational structure.
329	(b) The transfer of responsibility for Medicaid mental
330	health and substance abuse services to the new agency and the
331	associated children's mental health and substance abuse services
332	requirements regarding integration with the child protection
333	system.
334	(c) Information and support systems.
335	(d) Policy and rules transfer.
336	(e) Necessary changes in statutes and rules.
337	(f) Administrative support functions.
338	(g) Standards and licensing requirements.
339	(h) Budget authority and positions.
340	(i) Applicable federal requirements.
341	(j) Inventory and transfers of equipment and structures.
342	(k) Building leases.
343	(1) Contracts and contract management.
344	(m) Other areas identified by the transition team as
345	relevant to the creation and function of the Agency for Mental
346	Health and Substance Abuse Services and the transfer of powers,
347	duties, records, personnel, property, and funds of the mental
348	health and substance abuse programs of the Department of
349	Children and Family Services to the agency.
350	(4) The transition plan shall be submitted to the
351	Governor, the President of the Senate, the Speaker of the House
352	of Representatives, the chairs of the Senate and House of
353	Representatives appropriations committees, and the chairs of
354	appropriate substantive committees of the Senate and the House
2	of Poprogentatives by Nevember 1 2002

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CODING: Words $\underline{\text{stricken}}$ are deletions; words $\underline{\text{underlined}}$ are additions.



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(5) Members of the transition team shall serve without compensation, but are entitled to receive reimbursement for per diem and travel expenses as provided in s. 112.061, Florida Statutes.

Section 4. Transfer of programs. --

- (1) (a) Effective October 1, 2004, all powers, duties, records, personnel, property, and unexpended balances of appropriations, allocations, or other funds of the mental health and substance abuse programs of the Department of Children and Family Services or its successor as designated by law are transferred by a type two transfer, as defined in s. 20.06, Florida Statutes, to the Agency for Mental Health and Substance Abuse Services within the Department of Children and Family Services, as created by this act, including:
- 1. The unexpended, indirect cost balances from the General Revenue Fund and from applicable trust funds from appropriate budget entities supporting administrative infrastructure and positions for mental health and substance abuse programs and functions within the Department of Children and Family Services.
- 2. Mental health and substance abuse program positions within the Department of Children and Family Services and the Agency for Health Care Administration or their successors as designated by law.
- (b) The Department of Children and Family Services and the Agency for Health Care Administration or their successors as designated by law shall transfer all tangible property, office furnishings and supplies, pro rata shares of fixed capital funds for centrally managed projects, acquisition of motor vehicles, and operating capital outlay for the 2004-2005 fiscal year to the Agency for Mental Health and Substance Abuse Services.



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(c) Pursuant to s. 216.181, Florida Statutes, the Executive Office of the Governor may provide for flexibility in salary rates which is necessary to support the Agency for Mental Health and Substance Abuse Services, and may establish positions at a rate in excess of 10 percent above the minimum, to the extent that annualized moneys for salaries are available.

- (d) The Department of Children and Family Services and the Agency for Health Care Administration or their successors as designated by law shall provide administrative support and staff for the Agency for Mental Health and Substance Abuse Services until December 31, 2005.
- (2) All applicable administrative rules of the Department of Children and Family Services and the Agency for Health Care Administration or their successors as designated by law which are in effect on October 1, 2004, shall remain in effect as rules of the Agency for Mental Health and Substance Abuse Services until they are specifically changed in the manner provided by law.
- or administrative proceeding pending on October 1, 2004, and the Agency for Mental Health and Substance Abuse Services within the Department of Children and Family Services is substituted as a real party in interest with respect to any proceeding pending on that date which involves the mental health or substance abuse programs of the Department of Children and Family Services or its successor as designated by law.
- Section 5. Subsection (6) of section 394.741, Florida Statutes, is amended, present subsection (7) is renumbered as subsection (9), and new subsections (7) and (8) are added to said section, to read:



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394.741 Accreditation requirements for providers of behavioral health care services.--

- (6) The department or agency, by accepting the survey or inspection of an accrediting organization, does not forfeit its rights to perform inspections at any time, including contract monitoring to ensure that services that have been billed deliverables are provided in accordance with the contract.
- (7) The department or agency shall not monitor organizations under contract with the department or find such organizations out of compliance with requirements for which there are no specific federal or state regulations.
- Supplement for behavioral health care services pursuant to s.

 215.97. If monitoring the financial operations of its

 contractors, the department shall perform an off-site desk

 review of its contractors' most recent independent CPA audit and only conduct on-site monitoring of problems identified by such audit.
- (9)(7) The department and the agency shall report to the Legislature by January 1, 2003, on the viability of mandating all organizations under contract with the department for the provision of behavioral health care services, or licensed by the agency or department to be accredited. The department and the agency shall also report to the Legislature by January 1, 2003, on the viability of privatizing all licensure and monitoring functions through an accrediting organization.
- Section 6. Paragraph (b) of subsection (3) of section 409.912, Florida Statutes, is amended to read:
- 409.912 Cost-effective purchasing of health care.--The agency shall purchase goods and services for Medicaid recipients



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in the most cost-effective manner consistent with the delivery of quality medical care. The agency shall maximize the use of prepaid per capita and prepaid aggregate fixed-sum basis services when appropriate and other alternative service delivery and reimbursement methodologies, including competitive bidding pursuant to s. 287.057, designed to facilitate the costeffective purchase of a case-managed continuum of care. The agency shall also require providers to minimize the exposure of recipients to the need for acute inpatient, custodial, and other institutional care and the inappropriate or unnecessary use of high-cost services. The agency may establish prior authorization requirements for certain populations of Medicaid beneficiaries, certain drug classes, or particular drugs to prevent fraud, abuse, overuse, and possible dangerous drug interactions. The Pharmaceutical and Therapeutics Committee shall make recommendations to the agency on drugs for which prior authorization is required. The agency shall inform the Pharmaceutical and Therapeutics Committee of its decisions regarding drugs subject to prior authorization.

- (3) The agency may contract with:
- (b) An entity that is providing comprehensive behavioral health care services to certain Medicaid recipients through a capitated, prepaid arrangement pursuant to the federal waiver provided for by s. 409.905(5). Such an entity must be licensed under chapter 624, chapter 636, or chapter 641 and must possess the clinical systems and operational competence to manage risk and provide comprehensive behavioral health care to Medicaid recipients. As used in this paragraph, the term "comprehensive behavioral health care services" means covered mental health and substance abuse treatment services that are available to



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HB 0433 2003 Medicaid recipients. The secretary of the Department of Children and Family Services shall approve provisions of procurements related to children in the department's care or custody prior to enrolling such children in a prepaid behavioral health plan. Any contract awarded under this paragraph must be competitively procured. In developing the behavioral health care prepaid plan procurement document, the agency shall ensure that the procurement document requires the contractor to develop and implement a plan to ensure compliance with s. 394.4574 related to services provided to residents of licensed assisted living facilities that hold a limited mental health license. The agency shall seek federal approval to contract with a single entity meeting these requirements in each region or combination of regions to provide comprehensive behavioral health care services to all Medicaid recipients residing in the region. These entities must offer sufficient choice of providers to ensure recipient access and satisfaction. The agency must ensure that Medicaid recipients have available the choice of at least two managed care plans for their behavioral health care services. To ensure unimpaired access to behavioral health care services by Medicaid recipients, all contracts issued pursuant to this paragraph shall require 80 percent of the capitation paid to the managed care plan, including health maintenance organizations, to be expended for the provision of behavioral health care services. In the event the managed care plan expends less than 80 percent of the capitation paid pursuant to this paragraph for the provision of behavioral health care services, the difference shall be returned to the agency. The agency shall provide the managed care plan with a certification letter indicating the amount of capitation paid during each calendar year for the



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provision of behavioral health care services pursuant to this section. The agency may reimburse for substance-abuse-treatment services on a fee-for-service basis until the agency finds that adequate funds are available for capitated, prepaid arrangements.

- 1. By January 1, 2001, the agency shall modify the contracts with the entities providing comprehensive inpatient and outpatient mental health care services to Medicaid recipients in Hillsborough, Highlands, Hardee, Manatee, and Polk Counties, to include substance-abuse-treatment services.
- 2. The agency shall contract by July 1, 2007, with a single managed care entity in each region, or combination of regions, to provide comprehensive inpatient and outpatient mental health and substance abuse services through capitated prepaid arrangements to all Medicaid recipients for whom such plans are allowable under federal law and regulations.
- 3. By March 1, 2004, the agency shall submit a plan for fully implementing capitated prepaid behavioral health care in all regions of the state.
- a. Implementation shall be targeted for fiscal years 2003-2004 and 2004-2005 in each region or combination of regions

 where historical expenditures for mental health and substance abuse services are actuarially sound and adequate to sustain a managed care plan, and where communities are prepared.
- b. The agency shall work with the Department of Children and Family Services to implement strategies to maximize the utilization of Medicaid behavioral health care services delivered to Medicaid recipients. Alcohol, drug abuse, and mental health funds appropriated to the Department of Children and Family Services and other state or county funds shall, to



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the extent possible, be used to match additional federal

Medicaid funds, provided that no transfer of funds to the Agency
for Health Care Administration is required.

- The agency shall establish capitation rates based on actuarial methods for each region or combination of regions where historical fee-for-service expenditures do not produce actuarially sound capitation rates. The rate-setting methodology shall consider the impact of a lack of a health care infrastructure in these areas of the state and the variations in access to services produced by these and other factors. Contracts shall not be finalized in these areas until adequate capitation rates are established and approved by the agency. By December 31, 2001, the agency shall contract with entities providing comprehensive behavioral health care services to Medicaid recipients through capitated, prepaid arrangements in Charlotte, Collier, DeSoto, Escambia, Glades, Hendry, Lee, Okaloosa, Pasco, Pinellas, Santa Rosa, Sarasota, and Walton Counties. The agency may contract with entities providing comprehensive behavioral health care services to Medicaid recipients through capitated, prepaid arrangements in Alachua County. The agency may determine if Sarasota County shall be included as a separate catchment area or included in any other agency geographic area.
- $\underline{4.3.}$ Children residing in a Department of Juvenile Justice residential program approved as a Medicaid behavioral health overlay services provider shall not be included in a behavioral health care prepaid health plan pursuant to this paragraph.
- 5.4. In converting to a prepaid system of delivery, the agency shall in its procurement document require an entity providing comprehensive behavioral health care services to



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prevent the displacement of indigent care patients by enrollees in the Medicaid prepaid health plan providing behavioral health care services from facilities receiving state funding to provide indigent behavioral health care, to facilities licensed under chapter 395 which do not receive state funding for indigent behavioral health care, or reimburse the unsubsidized facility for the cost of behavioral health care provided to the displaced indigent care patient.

6.5. Traditional community mental health providers under contract with the Department of Children and Family Services pursuant to part IV of chapter 394 and inpatient mental health providers licensed pursuant to chapter 395 must be offered an opportunity to accept or decline a contract to participate in any provider network for prepaid behavioral health services.

Section 7. For the purpose of incorporating the amendments to section 409.912, Florida Statutes, in references thereto, the sections or subdivisions of Florida Statutes set forth below are reenacted to read:

394.9082 Behavioral health service delivery strategies. --

- (4) CONTRACT FOR SERVICES.--
- (a) The Department of Children and Family Services and the Agency for Health Care Administration may contract for the provision or management of behavioral health services with a managing entity in at least two geographic areas. Both the Department of Children and Family Services and the Agency for Health Care Administration must contract with the same managing entity in any distinct geographic area where the strategy operates. This managing entity shall be accountable for the delivery of behavioral health services specified by the department and the agency for children, adolescents, and adults.



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The geographic area must be of sufficient size in population and have enough public funds for behavioral health services to allow for flexibility and maximum efficiency. Notwithstanding the provisions of s. 409.912(3)(b)1. and 2., at least one service delivery strategy must be in one of the service districts in the catchment area of G. Pierce Wood Memorial Hospital.

Under one of the service delivery strategies, the Department of Children and Family Services may contract with a prepaid mental health plan that operates under s. 409.912 to be the managing entity. Under this strategy, the Department of Children and Family Services is not required to competitively procure those services and, notwithstanding other provisions of law, may employ prospective payment methodologies that the department finds are necessary to improve client care or institute more efficient practices. The Department of Children and Family Services may employ in its contract any provision of the current prepaid behavioral health care plan authorized under s. 409.912(3)(a) and (b), or any other provision necessary to improve quality, access, continuity, and price. Any contracts under this strategy in Area 6 of the Agency for Health Care Administration or in the prototype region under s. 20.19(7) of the Department of Children and Family Services may be entered with the existing substance abuse treatment provider network if an administrative services organization is part of its network. In Area 6 of the Agency for Health Care Administration or in the prototype region of the Department of Children and Family Services, the Department of Children and Family Services and the Agency for Health Care Administration may employ alternative service delivery and financing methodologies, which may include prospective payment for certain population groups. The



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population groups that are to be provided these substance abuse services would include at a minimum: individuals and families receiving family safety services; Medicaid-eligible children, adolescents, and adults who are substance-abuse-impaired; or current recipients and persons at risk of needing cash assistance under Florida's welfare reform initiatives.

- (d) Under both strategies, the Department of Children and Family Services and the Agency for Health Care Administration may:
- 1. Establish benefit packages based on the level of severity of illness and level of client functioning;
- 2. Align and integrate procedure codes, standards, or other requirements if it is jointly determined that these actions will simplify or improve client services and efficiencies in service delivery;
- 3. Use prepaid per capita and prepaid aggregate fixed-sum payment methodologies; and
- 4. Modify their current procedure codes to increase clinical flexibility, encourage the use of the most effective interventions, and support rehabilitative activities.
- Section 8. For the purpose of incorporating the amendments to section 409.912, Florida Statutes, in references thereto, the sections or subdivisions of Florida Statutes set forth below are reenacted to read:
 - 641.225 Surplus requirements.--
- (3)
- (b) An entity providing prepaid capitated services which is authorized under s. 409.912(3)(b) or (c), and which applies for a certificate of authority is subject to the minimum surplus requirements set forth in s. 409.912.



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Section 9. For the purpose of incorporating the amendments to section 409.912, Florida Statutes, in references thereto, the sections or subdivisions of Florida Statutes set forth below are reenacted to read:

636.0145 Certain entities contracting with Medicaid.—Notwithstanding the requirements of s. 409.912(3)(b), an entity that is providing comprehensive inpatient and outpatient mental health care services to certain Medicaid recipients in Hillsborough, Highlands, Hardee, Manatee, and Polk Counties through a capitated, prepaid arrangement pursuant to the federal waiver provided for in s. 409.905(5) must become licensed under chapter 636 by December 31, 1998. Any entity licensed under this chapter which provides services solely to Medicaid recipients under a contract with Medicaid shall be exempt from ss. 636.017, 636.018, 636.022, 636.028, and 636.034.

Section 10. Except as otherwise provided herein, this act shall take effect upon becoming a law.