

Amendment No. (for drafter's use only)

CHAMBER ACTION

Senate

House

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1 Representative(s) Galvano offered the following:

2

3 **Amendment (with title amendment)**

4 On page 2, line(s) 2,
5 remove: everything after the enacting clause

6

7 and insert:

8 Section 1. Department of Children and Family Services;
9 procurement of contractual services; contract management.--

10 (1) DEFINITIONS.--As used in this section, the term:

11 (a) "Contract manager" means the department employee who
12 is responsible for enforcing the compliance with administrative
13 and programmatic terms and conditions of a contract. The
14 contract manager is the primary point of contact through which
15 all contracting information flows between the department and the

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16 contractor. The contract manager is responsible for day-to-day
17 contract oversight, including approval of contract deliverables
18 and invoices. All actions related to the contract shall be
19 initiated by or coordinated with the contract manager. The
20 contract manager maintains the official contract files.

21 (b) "Contract monitor" means the department employee who
22 is responsible for observing, recording, and reporting to the
23 contract manager and other designated entities the information
24 necessary to assist the contract manager and program management
25 in determining whether the contractor is in compliance with the
26 administrative and programmatic terms and conditions of the
27 contract.

28 (c) "Department" means the Department of Children and
29 Family Services.

30 (2) PROCUREMENT OF COMMODITIES AND CONTRACTUAL SERVICES.--

31 (a) Notwithstanding section 287.057(5)(f)13., Florida
32 Statutes, whenever the department intends to contract with a
33 public postsecondary institution to provide a service, the
34 department must allow all public postsecondary institutions in
35 this state that are accredited by the Southern Association of
36 Colleges and Schools to bid on the contract. Thereafter,
37 notwithstanding any other provision to the contrary, if a public
38 postsecondary institution intends to subcontract for any service
39 awarded in the contract, the subcontracted service must be
40 procured by competitive procedures.

41 (b) When it is in the best interest of a defined segment
42 of its consumer population, the department may competitively

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43 procure and contract for systems of treatment or service that
44 involve multiple providers, rather than procuring and
45 contracting for treatment or services separately from each
46 participating provider. The department must ensure that all
47 providers that participate in the treatment or service system
48 meet all applicable statutory, regulatory, service-quality, and
49 cost-control requirements. If other governmental entities or
50 units of special purpose government contribute matching funds to
51 the support of a given system of treatment or service, the
52 department shall formally request information from those funding
53 entities in the procurement process and may take the information
54 received into account in the selection process. If a local
55 government contributes matching funds to support the system of
56 treatment or contracted service and if the match constitutes at
57 least 25 percent of the value of the contract, the department
58 shall afford the governmental match contributor an opportunity
59 to name an employee as one of the persons required by section
60 287.057(17), Florida Statutes, to evaluate or negotiate certain
61 contracts, unless the department sets forth in writing the
62 reason why the inclusion would be contrary to the best interest
63 of the state. Any employee so named by the governmental match
64 contributor shall qualify as one of the persons required by
65 section 287.057(17), Florida Statutes. A governmental entity or
66 unit of special purpose government may not name an employee as
67 one of the persons required by section 287.057(17), Florida
68 Statutes, if it, or any of its political subdivisions, executive
69 agencies, or special districts, intends to compete for the

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70 contract to be awarded. The governmental funding entity or
71 contributor of matching funds must comply with all procurement
72 procedures set forth in section 287.057, Florida Statutes, when
73 appropriate and required.

74 (c) The department may procure and contract for or provide
75 assessment and case-management services independently from
76 treatment services.

77 (3) CONTRACT-MANAGEMENT REQUIREMENTS AND PROCESS.-- The
78 Department of Children and Family Services shall review the time
79 period for which the department executes contracts and shall
80 execute multiyear contracts to make the most efficient use of
81 the resources devoted to contract processing and execution.
82 Whenever the department chooses not to use a multiyear contract,
83 a justification for that decision must be contained in the
84 contract. Notwithstanding section 287.057(15), Florida Statutes,
85 the department is responsible for establishing a contract-
86 management process that requires a member of the department's
87 Senior Management or Select Exempt Service to assign in writing
88 the responsibility of a contract to a contract manager. The
89 department shall maintain a set of procedures describing its
90 contract-management process which must minimally include the
91 following requirements:

92 (a) The contract manager shall maintain the official
93 contract file throughout the duration of the contract and for a
94 period not less than 6 years after the termination of the
95 contract.

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96 (b) The contract manager shall review all invoices for
97 compliance with the criteria and payment schedule provided for
98 in the contract and shall approve payment of all invoices before
99 their transmission to the Department of Financial Services for
100 payment.

101 (c) The contract manager shall maintain a schedule of
102 payments and total amounts disbursed and shall periodically
103 reconcile the records with the state's official accounting
104 records.

105 (d) For contracts involving the provision of direct client
106 services, the contract manager shall periodically visit the
107 physical location where the services are delivered and speak
108 directly to clients receiving the services and the staff
109 responsible for delivering the services.

110 (e) The contract manager shall meet at least once a month
111 directly with the contractor's representative and maintain
112 records of such meetings.

113 (f) The contract manager shall periodically document any
114 differences between the required performance measures and the
115 actual performance measures. If a contractor fails to meet and
116 comply with the performance measures established in the
117 contract, the department may allow a reasonable period for the
118 contractor to correct performance deficiencies. If performance
119 deficiencies are not resolved to the satisfaction of the
120 department within the prescribed time, and if no extenuating
121 circumstances can be documented by the contractor to the
122 department's satisfaction, the department must terminate the

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123 contract. The department may not enter into a new contract with
124 that same contractor for the services for which the contract was
125 previously terminated for a period of at least 24 months after
126 the date of termination. The contract manager shall obtain and
127 enforce corrective-action plans, if appropriate, and maintain
128 records regarding the completion or failure to complete
129 corrective-action items.

130 (g) The contract manager shall document any contract
131 modifications, which shall include recording any contract
132 amendments as provided for in this section.

133 (h) The contract manager shall be properly trained before
134 being assigned responsibility for any contract.

135 (4) CONTRACT MONITORING REQUIREMENTS AND PROCESS.--The
136 department shall establish contract monitoring units staffed by
137 career service employees who report to a member of the Select
138 Exempt Service or Senior Management Service and who have been
139 properly trained to perform contract monitoring, with at least
140 one member of the contract monitoring unit possessing specific
141 knowledge and experience in the contract's program area. The
142 department shall establish a contract-monitoring process that
143 must include, but need not be limited to, the following
144 requirements:

145 (a) Performing a risk assessment at the start of each
146 fiscal year and preparing an annual contract monitoring schedule
147 that includes consideration for the level of risk assigned. The
148 department may monitor any contract at any time regardless of

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149 whether such monitoring was originally included in the annual
150 contract-monitoring schedule.

151 (b) Preparing a contract monitoring plan, including
152 sampling procedures, before performing on site monitoring at
153 external locations of a service provider. The plan must include
154 a description of the programmatic, fiscal, and administrative
155 components that will be monitored on site. If appropriate,
156 clinical and therapeutic components may be included.

157 (c) Conducting analyses of the performance and compliance
158 of an external service provider by means of desk reviews if the
159 external service provider will not be monitored on site during a
160 fiscal year.

161 (d) Unless the department sets forth in writing the need
162 for an extension, providing a written report presenting the
163 results of the monitoring within 30 days after the completion of
164 the on-site monitoring or desk review.

165 (e) Developing and maintaining a set of procedures
166 describing the contract-monitoring process.

167 Section 2. Section 402.73, Florida Statutes, is amended to
168 read:

169 402.73 Contracting and performance standards.--

170 ~~(1) The Department of Children and Family Services shall~~
171 ~~establish performance standards for all contracted client~~
172 ~~services. Notwithstanding s. 287.057(5)(f), the department must~~
173 ~~competitively procure any contract for client services when any~~
174 ~~of the following occurs:~~

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175 ~~(a) The provider fails to meet appropriate performance~~
176 ~~standards established by the department after the provider has~~
177 ~~been given a reasonable opportunity to achieve the established~~
178 ~~standards.~~

179 ~~(b) A new program or service has been authorized and~~
180 ~~funded by the Legislature and the annual value of the contract~~
181 ~~for such program or service is \$300,000 or more.~~

182 ~~(c) The department has concluded, after reviewing market~~
183 ~~prices and available treatment options, that there is evidence~~
184 ~~that the department can improve the performance outcomes~~
185 ~~produced by its contract resources. At a minimum, the department~~
186 ~~shall review market prices and available treatment options~~
187 ~~biennially. The department shall compile the results of the~~
188 ~~biennial review and include the results in its annual~~
189 ~~performance report to the Legislature pursuant to chapter 94-~~
190 ~~249, Laws of Florida. The department shall provide notice and an~~
191 ~~opportunity for public comment on its review of market prices~~
192 ~~and available treatment options.~~

193 ~~(2) The competitive requirements of subsection (1) must be~~
194 ~~initiated for each contract that meets the criteria of this~~
195 ~~subsection, unless the secretary makes a written determination~~
196 ~~that particular facts and circumstances require deferral of the~~
197 ~~competitive process. Facts and circumstances must be~~
198 ~~specifically described for each individual contract proposed for~~
199 ~~deferral and must include one or more of the following:~~

200 ~~(a) An immediate threat to the health, safety, or welfare~~
201 ~~of the department's clients.~~

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202 ~~(b) A threat to appropriate use or disposition of~~
203 ~~facilities that have been financed in whole, or in substantial~~
204 ~~part, through contracts or agreements with a state agency.~~

205 ~~(c) A threat to the service infrastructure of a community~~
206 ~~which could endanger the well-being of the department's clients.~~

207
208 ~~Competitive procurement of client services contracts that meet~~
209 ~~the criteria in subsection (1) may not be deferred for longer~~
210 ~~than 1 year.~~

211 ~~(3) The Legislature intends that the department obtain~~
212 ~~services in the manner that is most cost-effective for the~~
213 ~~state, that provides the greatest long-term benefits to the~~
214 ~~clients receiving services, and that minimizes the disruption of~~
215 ~~client services. In order to meet these legislative goals, the~~
216 ~~department may adopt rules providing procedures for the~~
217 ~~competitive procurement of contracted client services which~~
218 ~~represent an alternative to the request for proposal or~~
219 ~~invitation to bid process. The alternative competitive~~
220 ~~procedures shall permit the department to solicit professional~~
221 ~~qualifications from prospective providers and to evaluate such~~
222 ~~statements of qualification before requesting service proposals.~~
223 ~~The department may limit the firms invited to submit service~~
224 ~~proposals to only those firms that have demonstrated the highest~~
225 ~~level of professional capability to provide the services under~~
226 ~~consideration, but may not invite fewer than three firms to~~
227 ~~submit service proposals, unless fewer than three firms~~
228 ~~submitted satisfactory statements of qualification. The~~

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229 ~~alternative procedures must, at a minimum, allow the department~~
230 ~~to evaluate competing proposals and select the proposal that~~
231 ~~provides the greatest benefit to the state while considering the~~
232 ~~quality of the services, dependability, and integrity of the~~
233 ~~provider, the dependability of the provider's services, the~~
234 ~~experience of the provider in serving target populations or~~
235 ~~client groups substantially identical to members of the target~~
236 ~~population for the contract in question, and the ability of the~~
237 ~~provider to secure local funds to support the delivery of~~
238 ~~services, including, but not limited to, funds derived from~~
239 ~~local governments. These alternative procedures need not conform~~
240 ~~to the requirements of s. 287.042 or s. 287.057(1) or (2).~~

241 ~~(4) The department shall review the period for which it~~
242 ~~executes contracts and, to the greatest extent practicable,~~
243 ~~shall execute multiyear contracts to make the most efficient use~~
244 ~~of the resources devoted to contract processing and execution.~~

245 ~~(5) When it is in the best interest of a defined segment~~
246 ~~of its consumer population, the department may competitively~~
247 ~~procure and contract for systems of treatment or service that~~
248 ~~involve multiple providers, rather than procuring and~~
249 ~~contracting for treatment or services separately from each~~
250 ~~participating provider. The department must ensure that all~~
251 ~~providers that participate in the treatment or service system~~
252 ~~meet all applicable statutory, regulatory, service quality, and~~
253 ~~cost-control requirements. If other governmental entities or~~
254 ~~units of special purpose government contribute matching funds to~~
255 ~~the support of a given system of treatment or service, the~~

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256 ~~department shall formally request information from those funding~~
257 ~~entities in the procurement process and may take the information~~
258 ~~received into account in the selection process. If a local~~
259 ~~government contributes match to support the system of treatment~~
260 ~~or contracted service and if the match constitutes at least 25~~
261 ~~percent of the value of the contract, the department shall~~
262 ~~afford the governmental match contributor an opportunity to name~~
263 ~~an employee as one of the persons required by s. 287.057(17) to~~
264 ~~evaluate or negotiate certain contracts, unless the department~~
265 ~~sets forth in writing the reason why such inclusion would be~~
266 ~~contrary to the best interest of the state. Any employee so~~
267 ~~named by the governmental match contributor shall qualify as one~~
268 ~~of the persons required by s. 287.057(17). No governmental~~
269 ~~entity or unit of special purpose government may name an~~
270 ~~employee as one of the persons required by s. 287.057(17) if it,~~
271 ~~or any of its political subdivisions, executive agencies, or~~
272 ~~special districts, intends to compete for the contract to be~~
273 ~~awarded. The governmental funding entity or match contributor~~
274 ~~shall comply with any deadlines and procurement procedures~~
275 ~~established by the department. The department may also involve~~
276 ~~nongovernmental funding entities in the procurement process when~~
277 ~~appropriate.~~

278 ~~(6) The department may contract for or provide assessment~~
279 ~~and case management services independently from treatment~~
280 ~~services.~~

281 ~~(1)(7)~~ The Department of Children and Family Services
282 shall adopt, by rule, provisions for including in its contracts

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283 incremental penalties to be imposed by its contract managers on
284 a service provider due to the provider's failure to comply with
285 a requirement for corrective action. Any financial penalty that
286 is imposed upon a provider may not be paid from funds being used
287 to provide services to clients, and the provider may not reduce
288 the amount of services being delivered to clients as a method
289 for offsetting the impact of the penalty. If a financial penalty
290 is imposed upon a provider that is a corporation, the department
291 shall notify, at a minimum, the board of directors of the
292 corporation. The department may notify, at its discretion, any
293 additional parties that the department believes may be helpful
294 in obtaining the corrective action that is being sought.
295 Further, the rules adopted by the department must include
296 provisions that permit the department to deduct the financial
297 penalties from funds that would otherwise be due to the
298 provider, not to exceed 10 percent of the amount that otherwise
299 would be due to the provider for the period of noncompliance. If
300 the department imposes a financial penalty, it shall advise the
301 provider in writing of the cause for the penalty. A failure to
302 include such deductions in a request for payment constitutes a
303 ground for the department to reject that request for payment.
304 The remedies identified in this subsection do not limit or
305 restrict the department's application of any other remedy
306 available to it in the contract or under law. The remedies
307 described in this subsection may be cumulative and may be
308 assessed upon each separate failure to comply with instructions
309 from the department to complete corrective action.

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310 ~~(8) The department shall develop standards of conduct and~~
311 ~~a range of disciplinary actions for its employees which are~~
312 ~~specifically related to carrying out contracting~~
313 ~~responsibilities.~~

314 (2)(9) The Agency for Persons with Disabilities department
315 must implement systems and controls to ensure financial
316 integrity and service provision quality in the developmental
317 services Medicaid waiver service system.

318 ~~(10) If a provider fails to meet the performance standards~~
319 ~~established in the contract, the department may allow a~~
320 ~~reasonable period for the provider to correct performance~~
321 ~~deficiencies. If performance deficiencies are not resolved to~~
322 ~~the satisfaction of the department within the prescribed time,~~
323 ~~and if no extenuating circumstances can be documented by the~~
324 ~~provider to the department's satisfaction, the department must~~
325 ~~cancel the contract with the provider. The department may not~~
326 ~~enter into a new contract with that same provider for the~~
327 ~~services for which the contract was previously canceled for a~~
328 ~~period of at least 24 months after the date of cancellation. If~~
329 ~~an adult substance abuse services provider fails to meet the~~
330 ~~performance standards established in the contract, the~~
331 ~~department may allow a reasonable period, not to exceed 6~~
332 ~~months, for the provider to correct performance deficiencies. If~~
333 ~~the performance deficiencies are not resolved to the~~
334 ~~satisfaction of the department within 6 months, the department~~
335 ~~must cancel the contract with the adult substance abuse~~

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336 ~~provider, unless there is no other qualified provider in the~~
337 ~~service district.~~

338 ~~(3)(11)~~ The department shall include in its standard
339 contract document a requirement that any state funds provided
340 for the purchase of or improvements to real property are
341 contingent upon the contractor or political subdivision granting
342 to the state a security interest in the property at least to the
343 amount of the state funds provided for at least 5 years from the
344 date of purchase or the completion of the improvements or as
345 further required by law. The contract must include a provision
346 that, as a condition of receipt of state funding for this
347 purpose, the provider agrees that, if it disposes of the
348 property before the department's interest is vacated, the
349 provider will refund the proportionate share of the state's
350 initial investment, as adjusted by depreciation.

351 ~~(12) The department shall develop and refine contracting~~
352 ~~and accountability methods that are administratively efficient~~
353 ~~and that provide for optimal provider performance.~~

354 ~~(13) The department may competitively procure any contract~~
355 ~~when it deems it is in the best interest of the state to do so.~~
356 ~~The requirements described in subsection (1) do not, and may not~~
357 ~~be construed to, limit in any way the department's ability to~~
358 ~~competitively procure any contract it executes, and the absence~~
359 ~~of any or all of the criteria described in subsection (1) may~~
360 ~~not be used as the basis for an administrative or judicial~~
361 ~~protest of the department's determination to conduct~~
362 ~~competition, make an award, or execute any contract.~~

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363 ~~(14) A contract may include cost-neutral, performance-~~
364 ~~based incentives that may vary according to the extent a~~
365 ~~provider achieves or surpasses the performance standards set~~
366 ~~forth in the contract. Such incentives may be weighted~~
367 ~~proportionally to reflect the extent to which the provider has~~
368 ~~demonstrated that it has consistently met or exceeded the~~
369 ~~contractual requirements and the department's performance~~
370 ~~standards.~~

371 ~~(4)(15)~~ Nothing contained in chapter 287 shall require
372 competitive bids for health services involving examination,
373 diagnosis, or treatment.

374 Section 3. Section 409.1671, Florida Statutes, is amended
375 to read:

376 409.1671 Foster care and related services; outsourcing
377 privatization.--

378 (1)(a) It is the intent of the Legislature that the
379 Department of Children and Family Services shall outsource
380 privatize the provision of foster care and related services
381 statewide. It is further the Legislature's intent to encourage
382 communities and other stakeholders in the well-being of children
383 to participate in assuring that children are safe and well-
384 nurtured. However, while recognizing that some local governments
385 are presently funding portions of certain foster care and
386 related services programs and may choose to expand such funding
387 in the future, the Legislature does not intend by its
388 outsourcing privatization of foster care and related services
389 that any county, municipality, or special district be required

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390 to assist in funding programs that previously have been funded
391 by the state. Counties that provide children and family services
392 with at least 40 licensed residential group care beds by July 1,
393 2003, and provide at least \$2 million annually in county general
394 revenue funds to supplement foster and family care services
395 shall continue to contract directly with the state and shall be
396 exempt from the provisions of this section. Nothing in this
397 paragraph prohibits any county, municipality, or special
398 district from future voluntary funding participation in foster
399 care and related services. As used in this section, the term
400 "outsource" ~~"privatize"~~ means to contract with competent,
401 community-based agencies. The department shall submit a plan to
402 accomplish outsourcing ~~privatization~~ statewide, through a
403 competitive process, phased in over a 3-year period beginning
404 January 1, 2000. This plan must be developed with local
405 community participation, including, but not limited to, input
406 from community-based providers that are currently under contract
407 with the department to furnish community-based foster care and
408 related services, and must include a methodology for determining
409 and transferring all available funds, including federal funds
410 that the provider is eligible for and agrees to earn and that
411 portion of general revenue funds which is currently associated
412 with the services that are being furnished under contract. The
413 methodology must provide for the transfer of funds appropriated
414 and budgeted for all services and programs that have been
415 incorporated into the project, including all management, capital
416 (including current furniture and equipment), and administrative

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417 funds to accomplish the transfer of these programs. This
418 methodology must address expected workload and at least the 3
419 previous years' experience in expenses and workload. With
420 respect to any district or portion of a district in which
421 outsourcing ~~privatization~~ cannot be accomplished within the 3-
422 year timeframe, the department must clearly state in its plan
423 the reasons the timeframe cannot be met and the efforts that
424 should be made to remediate the obstacles, which may include
425 alternatives to total outsourcing ~~privatization~~, such as public-
426 private partnerships. As used in this section, the term "related
427 services" includes, but is not limited to, family preservation,
428 independent living, emergency shelter, residential group care,
429 foster care, therapeutic foster care, intensive residential
430 treatment, foster care supervision, case management,
431 postplacement supervision, permanent foster care, and family
432 reunification. Unless otherwise provided for, the state attorney
433 shall provide child welfare legal services, pursuant to chapter
434 39 and other relevant provisions, in Pinellas and Pasco
435 Counties. When a private nonprofit agency has received case
436 management responsibilities, transferred from the state under
437 this section, for a child who is sheltered or found to be
438 dependent and who is assigned to the care of the outsourcing
439 ~~privatization~~ project, the agency may act as the child's
440 guardian for the purpose of registering the child in school if a
441 parent or guardian of the child is unavailable and his or her
442 whereabouts cannot reasonably be ascertained. The private
443 nonprofit agency may also seek emergency medical attention for

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444 such a child, but only if a parent or guardian of the child is
445 unavailable, his or her whereabouts cannot reasonably be
446 ascertained, and a court order for such emergency medical
447 services cannot be obtained because of the severity of the
448 emergency or because it is after normal working hours. However,
449 the provider may not consent to sterilization, abortion, or
450 termination of life support. If a child's parents' rights have
451 been terminated, the nonprofit agency shall act as guardian of
452 the child in all circumstances.

453 (b) It is the intent of the Legislature that the
454 department will continue to work towards full outsourcing
455 ~~privatization~~ in a manner that assures the viability of the
456 community-based system of care and best provides for the safety
457 of children in the child protection system. To this end, the
458 department is directed to continue the process of outsourcing
459 ~~privatizing~~ services in those counties in which signed startup
460 contracts have been executed. The department may also continue
461 to enter into startup contracts with additional counties.
462 However, no services shall be transferred to a community-based
463 care lead agency until the department, in consultation with the
464 local community alliance, has determined and certified in
465 writing to the Governor and the Legislature that the district is
466 prepared to transition the provision of services to the lead
467 agency and that the lead agency is ready to deliver and be
468 accountable for such service provision. In making this
469 determination, the department shall conduct a readiness
470 assessment of the district and the lead agency.

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471 1. The assessment shall evaluate the operational readiness
472 of the district and the lead agency based on:

473 a. A set of uniform criteria, developed in consultation
474 with currently operating community-based care lead agencies and
475 reflecting national accreditation standards, that evaluate
476 programmatic, financial, technical assistance, training and
477 organizational competencies; and

478 b. Local criteria reflective of the local community-based
479 care design and the community alliance priorities.

480 2. The readiness assessment shall be conducted by a joint
481 team of district and lead agency staff with direct experience
482 with the start up and operation of a community-based care
483 service program and representatives from the appropriate
484 community alliance. Within resources available for this purpose,
485 the department may secure outside audit expertise when necessary
486 to assist a readiness assessment team.

487 3. Upon completion of a readiness assessment, the
488 assessment team shall conduct an exit conference with the
489 district and lead agency staff responsible for the transition.

490 4. Within 30 days following the exit conference with staff
491 of each district and lead agency, the secretary shall certify in
492 writing to the Governor and the Legislature that both the
493 district and the lead agency are prepared to begin the
494 transition of service provision based on the results of the
495 readiness assessment and the exit conference. The document of
496 certification must include specific evidence of readiness on
497 each element of the readiness instrument utilized by the

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498 assessment team as well as a description of each element of
499 readiness needing improvement and strategies being implemented
500 to address each one.

501 (c) The Auditor General and the Office of Program Policy
502 Analysis and Government Accountability (OPPAGA), in consultation
503 with The Child Welfare League of America and the Louis de la
504 Parte Florida Mental Health Institute, shall jointly review and
505 assess the department's process for determining district and
506 lead agency readiness.

507 1. The review must, at a minimum, address the
508 appropriateness of the readiness criteria and instruments
509 applied, the appropriateness of the qualifications of
510 participants on each readiness assessment team, the degree to
511 which the department accurately determined each district and
512 lead agency's compliance with the readiness criteria, the
513 quality of the technical assistance provided by the department
514 to a lead agency in correcting any weaknesses identified in the
515 readiness assessment, and the degree to which each lead agency
516 overcame any identified weaknesses.

517 2. Reports of these reviews must be submitted to the
518 appropriate substantive and appropriations committees in the
519 Senate and the House of Representatives on March 1 and September
520 1 of each year until full transition to community-based care has
521 been accomplished statewide, except that the first report must
522 be submitted by February 1, 2004, and must address all readiness
523 activities undertaken through June 30, 2003. The perspectives of

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524 all participants in this review process must be included in each
525 report.

526 (d) In communities where economic or demographic
527 constraints make it impossible or not feasible to competitively
528 contract with a lead agency, the department shall develop an
529 alternative plan in collaboration with the local community
530 alliance, which may include establishing innovative geographical
531 configurations or consortia of agencies. The plan must detail
532 how the community will continue to implement community-based
533 care through competitively procuring either the specific
534 components of foster care and related services or comprehensive
535 services for defined eligible populations of children and
536 families from qualified licensed agencies as part of its efforts
537 to develop the local capacity for a community-based system of
538 coordinated care. The plan must ensure local control over the
539 management and administration of the service provision in
540 accordance with the intent of this section and may include
541 recognized best business practices, including some form of
542 public or private partnerships.

543 (e) As used in this section, the term "eligible lead
544 community-based provider" means a single agency with which the
545 department shall contract for the provision of child protective
546 services in a community that is no smaller than a county. The
547 secretary of the department may authorize more than one eligible
548 lead community-based provider within a single county when to do
549 so will result in more effective delivery of foster care and

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550 related services. To compete for an outsourcing ~~a privatization~~
551 project, such agency must have:

552 1. The ability to coordinate, integrate, and manage all
553 child protective services in the designated community in
554 cooperation with child protective investigations.

555 2. The ability to ensure continuity of care from entry to
556 exit for all children referred from the protective investigation
557 and court systems.

558 3. The ability to provide directly, or contract for
559 through a local network of providers, all necessary child
560 protective services. Such agencies should directly provide no
561 more than 35 percent of all child protective services provided.

562 4. The willingness to accept accountability for meeting
563 the outcomes and performance standards related to child
564 protective services established by the Legislature and the
565 Federal Government.

566 5. The capability and the willingness to serve all
567 children referred to it from the protective investigation and
568 court systems, regardless of the level of funding allocated to
569 the community by the state, provided all related funding is
570 transferred.

571 6. The willingness to ensure that each individual who
572 provides child protective services completes the training
573 required of child protective service workers by the Department
574 of Children and Family Services.

575 7. The ability to maintain eligibility to receive all
576 federal child welfare funds, including Title IV-E and IV-A

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577 funds, currently being used by the Department of Children and
578 Family Services.

579 8. Written agreements with Healthy Families Florida lead
580 entities in their community, pursuant to s. 409.153, to promote
581 cooperative planning for the provision of prevention and
582 intervention services.

583 9. A board of directors, of which at least 51 percent of
584 the membership is comprised of persons residing in this state.
585 Of the state residents, at least 51 percent must also reside
586 within the service area of the lead community-based provider.

587 (f)1. The Legislature finds that the state has
588 traditionally provided foster care services to children who have
589 been the responsibility of the state. As such, foster children
590 have not had the right to recover for injuries beyond the
591 limitations specified in s. 768.28. The Legislature has
592 determined that foster care and related services need to be
593 outsourced ~~privatized~~ pursuant to this section and that the
594 provision of such services is of paramount importance to the
595 state. The purpose for such outsourcing ~~privatization~~ is to
596 increase the level of safety, security, and stability of
597 children who are or become the responsibility of the state. One
598 of the components necessary to secure a safe and stable
599 environment for such children is that private providers maintain
600 liability insurance. As such, insurance needs to be available
601 and remain available to nongovernmental foster care and related
602 services providers without the resources of such providers being
603 significantly reduced by the cost of maintaining such insurance.

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604 2. The Legislature further finds that, by requiring the
605 following minimum levels of insurance, children in outsourced
606 ~~privatized~~ foster care and related services will gain increased
607 protection and rights of recovery in the event of injury than
608 provided for in s. 768.28.

609 (g) In any county in which a service contract has not been
610 executed by December 31, 2004, the department shall ensure
611 access to a model comprehensive residential services program as
612 described in s. 409.1677 which, without imposing undue
613 financial, geographic, or other barriers, ensures reasonable and
614 appropriate participation by the family in the child's program.

615 1. In order to ensure that the program is operational by
616 December 31, 2004, the department must, by December 31, 2003,
617 begin the process of establishing access to a program in any
618 county in which the department has not either entered into a
619 transition contract or approved a community plan, as described
620 in paragraph (d), which ensures full outsourcing privatization
621 by the statutory deadline.

622 2. The program must be procured through a competitive
623 process.

624 3. The Legislature does not intend for the provisions of
625 this paragraph to substitute for the requirement that full
626 conversion to community-based care be accomplished.

627 (h) Other than an entity to which s. 768.28 applies, any
628 eligible lead community-based provider, as defined in paragraph
629 (e), or its employees or officers, except as otherwise provided
630 in paragraph (i), must, as a part of its contract, obtain a

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631 minimum of \$1 million per claim/\$3 million per incident in
632 general liability insurance coverage. The eligible lead
633 community-based provider must also require that staff who
634 transport client children and families in their personal
635 automobiles in order to carry out their job responsibilities
636 obtain minimum bodily injury liability insurance in the amount
637 of \$100,000 per claim, \$300,000 per incident, on their personal
638 automobiles. In any tort action brought against such an eligible
639 lead community-based provider or employee, net economic damages
640 shall be limited to \$1 million per liability claim and \$100,000
641 per automobile claim, including, but not limited to, past and
642 future medical expenses, wage loss, and loss of earning
643 capacity, offset by any collateral source payment paid or
644 payable. In any tort action brought against such an eligible
645 lead community-based provider, noneconomic damages shall be
646 limited to \$200,000 per claim. A claims bill may be brought on
647 behalf of a claimant pursuant to s. 768.28 for any amount
648 exceeding the limits specified in this paragraph. Any offset of
649 collateral source payments made as of the date of the settlement
650 or judgment shall be in accordance with s. 768.76. The lead
651 community-based provider shall not be liable in tort for the
652 acts or omissions of its subcontractors or the officers, agents,
653 or employees of its subcontractors.

654 (i) The liability of an eligible lead community-based
655 provider described in this section shall be exclusive and in
656 place of all other liability of such provider. The same
657 immunities from liability enjoyed by such providers shall extend

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658 as well to each employee of the provider when such employee is
659 acting in furtherance of the provider's business, including the
660 transportation of clients served, as described in this
661 subsection, in privately owned vehicles. Such immunities shall
662 not be applicable to a provider or an employee who acts in a
663 culpably negligent manner or with willful and wanton disregard
664 or unprovoked physical aggression when such acts result in
665 injury or death or such acts proximately cause such injury or
666 death; nor shall such immunities be applicable to employees of
667 the same provider when each is operating in the furtherance of
668 the provider's business, but they are assigned primarily to
669 unrelated works within private or public employment. The same
670 immunity provisions enjoyed by a provider shall also apply to
671 any sole proprietor, partner, corporate officer or director,
672 supervisor, or other person who in the course and scope of his
673 or her duties acts in a managerial or policymaking capacity and
674 the conduct that caused the alleged injury arose within the
675 course and scope of those managerial or policymaking duties.
676 Culpable negligence is defined as reckless indifference or
677 grossly careless disregard of human life.

678 (j) Any subcontractor of an eligible lead community-based
679 provider, as defined in paragraph (e), which is a direct
680 provider of foster care and related services to children and
681 families, and its employees or officers, except as otherwise
682 provided in paragraph (i), must, as a part of its contract,
683 obtain a minimum of \$1 million per claim/\$3 million per incident
684 in general liability insurance coverage. The subcontractor of an

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685 eligible lead community-based provider must also require that
686 staff who transport client children and families in their
687 personal automobiles in order to carry out their job
688 responsibilities obtain minimum bodily injury liability
689 insurance in the amount of \$100,000 per claim, \$300,000 per
690 incident, on their personal automobiles. In any tort action
691 brought against such subcontractor or employee, net economic
692 damages shall be limited to \$1 million per liability claim and
693 \$100,000 per automobile claim, including, but not limited to,
694 past and future medical expenses, wage loss, and loss of earning
695 capacity, offset by any collateral source payment paid or
696 payable. In any tort action brought against such subcontractor,
697 noneconomic damages shall be limited to \$200,000 per claim. A
698 claims bill may be brought on behalf of a claimant pursuant to
699 s. 768.28 for any amount exceeding the limits specified in this
700 paragraph. Any offset of collateral source payments made as of
701 the date of the settlement or judgment shall be in accordance
702 with s. 768.76.

703 (k) The liability of a subcontractor of an eligible lead
704 community-based provider that is a direct provider of foster
705 care and related services as described in this section shall be
706 exclusive and in place of all other liability of such provider.
707 The same immunities from liability enjoyed by such subcontractor
708 provider shall extend as well to each employee of the
709 subcontractor when such employee is acting in furtherance of the
710 subcontractor's business, including the transportation of
711 clients served, as described in this subsection, in privately

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712 owned vehicles. Such immunities shall not be applicable to a
713 subcontractor or an employee who acts in a culpably negligent
714 manner or with willful and wanton disregard or unprovoked
715 physical aggression when such acts result in injury or death or
716 such acts proximately cause such injury or death; nor shall such
717 immunities be applicable to employees of the same subcontractor
718 when each is operating in the furtherance of the subcontractor's
719 business, but they are assigned primarily to unrelated works
720 within private or public employment. The same immunity
721 provisions enjoyed by a subcontractor shall also apply to any
722 sole proprietor, partner, corporate officer or director,
723 supervisor, or other person who in the course and scope of his
724 or her duties acts in a managerial or policymaking capacity and
725 the conduct that caused the alleged injury arose within the
726 course and scope of those managerial or policymaking duties.
727 Culpable negligence is defined as reckless indifference or
728 grossly careless disregard of human life.

729 (1) The Legislature is cognizant of the increasing costs
730 of goods and services each year and recognizes that fixing a set
731 amount of compensation actually has the effect of a reduction in
732 compensation each year. Accordingly, the conditional limitations
733 on damages in this section shall be increased at the rate of 5
734 percent each year, prorated from the effective date of this
735 paragraph to the date at which damages subject to such
736 limitations are awarded by final judgment or settlement.

737 (2)(a) The department may contract for the delivery,
738 administration, or management of protective services, the

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739 services specified in subsection (1) relating to foster care,
740 and other related services or programs, as appropriate. The
741 department shall retain responsibility for the quality of
742 contracted services and programs and shall ensure that services
743 are delivered in accordance with applicable federal and state
744 statutes and regulations. The department must adopt written
745 policies and procedures for monitoring the contract for delivery
746 of services by lead community-based providers. These policies
747 and procedures must, at a minimum, address the evaluation of
748 fiscal accountability and program operations, including provider
749 achievement of performance standards, provider monitoring of
750 subcontractors, and timely followup of corrective actions for
751 significant monitoring findings related to providers and
752 subcontractors. These policies and procedures must also include
753 provisions for reducing the duplication of the department's
754 program monitoring activities both internally and with other
755 agencies, to the extent possible. The department's written
756 procedures must ensure that the written findings, conclusions,
757 and recommendations from monitoring the contract for services of
758 lead community-based providers are communicated to the director
759 of the provider agency as expeditiously as possible.

760 (b) Persons employed by the department in the provision of
761 foster care and related services whose positions are being
762 outsourced under privatized ~~outsourced pursuant to~~ this statute shall be
763 given hiring preference by the provider, if provider
764 qualifications are met.

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765 (3)(a) In order to help ensure a seamless child protection
766 system, the department shall ensure that contracts entered into
767 with community-based agencies pursuant to this section include
768 provisions for a case-transfer process to determine the date
769 that the community-based agency will initiate the appropriate
770 services for a child and family. This case-transfer process must
771 clearly identify the closure of the protective investigation and
772 the initiation of service provision. At the point of case
773 transfer, and at the conclusion of an investigation, the
774 department must provide a complete summary of the findings of
775 the investigation to the community-based agency.

776 (b) The contracts must also ensure that each community-
777 based agency shall furnish information on its activities in all
778 cases in client case records.

779 (c) The contract between the department and community-
780 based agencies must include provisions that specify the
781 procedures to be used by the parties to resolve differences in
782 interpreting the contract or to resolve disputes as to the
783 adequacy of the parties' compliance with their respective
784 obligations under the contract.

785 (d) Each contract with an eligible lead community-based
786 provider shall provide for the payment by the department to the
787 provider of a reasonable administrative cost in addition to
788 funding for the provision of services.

789 (e) Each contract with an eligible lead community-based
790 provider must include all performance outcome measures
791 established by the Legislature and that are under the control of

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792 the lead agency. The standards must be adjusted annually by
793 contract amendment to enable the department to meet the
794 legislatively established statewide standards.

795 (4)(a) The department, in consultation with the community-
796 based agencies that are undertaking the outsourced ~~privatized~~
797 projects, shall establish a quality assurance program for
798 privatized services. The quality assurance program shall be
799 based on standards established by the Adoption and Safe Families
800 Act as well as by a national accrediting organization such as
801 the Council on Accreditation of Services for Families and
802 Children, Inc. (COA) or CARF--the Rehabilitation Accreditation
803 Commission. Each program operated under contract with a
804 community-based agency must be evaluated annually by the
805 department. The department shall, to the extent possible, use
806 independent financial audits provided by the community-based
807 care agency to eliminate or reduce the ongoing contract and
808 administrative reviews conducted by the department. The
809 department may suggest additional items to be included in such
810 independent financial audits to meet the department's needs.
811 Should the department determine that such independent financial
812 audits are inadequate, then other audits, as necessary, may be
813 conducted by the department. Nothing herein shall abrogate the
814 requirements of s. 215.97. The department shall submit an annual
815 report regarding quality performance, outcome measure
816 attainment, and cost efficiency to the President of the Senate,
817 the Speaker of the House of Representatives, the minority leader
818 of each house of the Legislature, and the Governor no later than

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819 January 31 of each year for each project in operation during the
820 preceding fiscal year.

821 (b) The department shall use these findings in making
822 recommendations to the Governor and the Legislature for future
823 program and funding priorities in the child welfare system.

824 (5)(a) The community-based agency must comply with
825 statutory requirements and agency rules in the provision of
826 contractual services. Each foster home, therapeutic foster home,
827 emergency shelter, or other placement facility operated by the
828 community-based agency or agencies must be licensed by the
829 Department of Children and Family Services under chapter 402 or
830 this chapter. Each community-based agency must be licensed as a
831 child-caring or child-placing agency by the department under
832 this chapter. The department, in order to eliminate or reduce
833 the number of duplicate inspections by various program offices,
834 shall coordinate inspections required pursuant to licensure of
835 agencies under this section.

836 (b) Substitute care providers who are licensed under s.
837 409.175 and have contracted with a lead agency authorized under
838 this section shall also be authorized to provide registered or
839 licensed family day care under s. 402.313, if consistent with
840 federal law and if the home has met the requirements of s.
841 402.313.

842 (c) A dually licensed home under this section shall be
843 eligible to receive both an out-of-home care payment and a
844 subsidized child care payment for the same child pursuant to

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845 federal law. The department may adopt administrative rules
846 necessary to administer this paragraph.

847 (6) Beginning January 1, 1999, and continuing at least
848 through June 30, 2000, the Department of Children and Family
849 Services shall outsource ~~privatize~~ all foster care and related
850 services in district 5 while continuing to contract with the
851 current model programs in districts 1, 4, and 13, and in
852 subdistrict 8A, and shall expand the subdistrict 8A pilot
853 program to incorporate Manatee County. Planning for the district
854 5 outsourcing ~~privatization~~ shall be done by providers that are
855 currently under contract with the department for foster care and
856 related services and shall be done in consultation with the
857 department. A lead provider of the district 5 program shall be
858 competitively selected, must demonstrate the ability to provide
859 necessary comprehensive services through a local network of
860 providers, and must meet criteria established in this section.
861 Contracts with organizations responsible for the model programs
862 must include the management and administration of all outsourced
863 ~~privatized~~ services specified in subsection (1). However, the
864 department may use funds for contract management only after
865 obtaining written approval from the Executive Office of the
866 Governor. The request for such approval must include, but is not
867 limited to, a statement of the proposed amount of such funds and
868 a description of the manner in which such funds will be used. If
869 the community-based organization selected for a model program
870 under this subsection is not a Medicaid provider, the
871 organization shall be issued a Medicaid provider number pursuant

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872 | to s. 409.907 for the provision of services currently authorized
873 | under the state Medicaid plan to those children encompassed in
874 | this model and in a manner not to exceed the current level of
875 | state expenditure.

876 | (7) The Florida Coalition for Children, Inc., in
877 | consultation with the department, shall develop a plan based on
878 | an independent actuarial study regarding the long-term use and
879 | structure of a statewide community-based care risk pool for the
880 | protection of eligible lead community-based providers, their
881 | subcontractors, and providers of other social services who
882 | contract directly with the department. The plan must also
883 | outline strategies to maximize federal earnings as they relate
884 | to the community-based care risk pool. At a minimum, the plan
885 | must allow for the use of federal earnings received from child
886 | welfare programs to be allocated to the community-based care
887 | risk pool by the department, which earnings are determined by
888 | the department to be in excess of the amount appropriated in the
889 | General Appropriations Act. The plan must specify the necessary
890 | steps to ensure the financial integrity and industry-standard
891 | risk management practices of the community-based care risk pool
892 | and the continued availability of funding from federal, state,
893 | and local sources. The plan must also include recommendations
894 | that permit the program to be available to entities of the
895 | department providing child welfare services until full
896 | conversion to community-based care takes place. The final plan
897 | shall be submitted to the department and then to the Executive
898 | Office of the Governor and the Legislative Budget Commission for

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899 formal adoption before January 1, 2005. Upon approval of the
900 plan by all parties, the department shall issue an interest-free
901 loan that is secured by the cumulative contractual revenue of
902 the community-based care risk pool membership, and the amount of
903 the loan shall equal the amount appropriated by the Legislature
904 for this purpose. The plan shall provide for a governance
905 structure that assures the department the ability to oversee the
906 operation of the community-based care risk pool at least until
907 this loan is repaid in full.

908 (a) The purposes for which the community-based care risk
909 pool shall be used include, but are not limited to:

910 1. Significant changes in the number or composition of
911 clients eligible to receive services.

912 2. Significant changes in the services that are eligible
913 for reimbursement.

914 3. Scheduled or unanticipated, but necessary, advances to
915 providers or other cash-flow issues.

916 4. Proposals to participate in optional Medicaid services
917 or other federal grant opportunities.

918 5. Appropriate incentive structures.

919 6. Continuity of care in the event of failure,
920 discontinuance of service, or financial misconduct by a lead
921 agency.

922 7. Payment for time-limited technical assistance and
923 consultation to lead agencies in the event of serious
924 performance or management problems.

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925 8. Payment for meeting all traditional and nontraditional
926 insurance needs of eligible members.

927 9. Significant changes in the mix of available funds.

928 (b) After approval of the plan in the 2004-2005 fiscal
929 year and annually thereafter, the department may also request in
930 its annual legislative budget request, and the Governor may
931 recommend, that the funding necessary to carry out paragraph (a)
932 be appropriated to the department. Subsequent funding of the
933 community-based care risk pool shall be supported by premiums
934 assessed to members of the community-based care risk pool on a
935 recurring basis. The community-based care risk pool may invest
936 and retain interest earned on these funds. In addition, the
937 department may transfer funds to the community-based care risk
938 pool as available in order to ensure an adequate funding level
939 if the fund is declared to be insolvent and approval is granted
940 by the Legislative Budget Commission. Such payments for
941 insolvency shall be made only after a determination is made by
942 the department or its actuary that all participants in the
943 community-based care risk pool are current in their payments of
944 premiums and that assessments have been made at an actuarially
945 sound level. Such payments by participants in the community-
946 based care risk pool may not exceed reasonable industry
947 standards, as determined by the actuary. Money from this fund
948 may be used to match available federal dollars. Dividends or
949 other payments, with the exception of legitimate claims, may not
950 be paid to members of the community-based care risk pool until
951 the loan issued by the department is repaid in full. Dividends

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952 or other payments, with the exception of legitimate claims and
953 other purposes contained in the approved plan, may not be paid
954 to members of the community-based care risk pool unless, at the
955 time of distribution, the community-based care risk pool is
956 deemed actuarially sound and solvent. Solvency shall be
957 determined by an independent actuary contracted by the
958 department. The plan shall be developed in consultation with the
959 Office of Insurance Regulation.

960 1. Such funds shall constitute partial security for
961 contract performance by lead agencies and shall be used to
962 offset the need for a performance bond. Subject to the approval
963 of the plan, the community-based care risk pool shall be managed
964 by the Florida Coalition for Children, Inc., or the designated
965 contractors of the Florida Coalition for Children, Inc.
966 Nonmembers of the community-based care risk pool may continue to
967 contract with the department but must provide a letter of credit
968 equal to one-twelfth of the annual contract amount in lieu of
969 membership in the community-based care risk pool.

970 2. The department may separately require a bond to
971 mitigate the financial consequences of potential acts of
972 malfeasance, misfeasance, or criminal violations by the
973 provider.

974 (8) Notwithstanding the provisions of s. 215.425, all
975 documented federal funds earned for the current fiscal year by
976 the department and community-based agencies which exceed the
977 amount appropriated by the Legislature shall be distributed to
978 all entities that contributed to the excess earnings based on a

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979 schedule and methodology developed by the department and
980 approved by the Executive Office of the Governor. Distribution
981 shall be pro rata based on total earnings and shall be made only
982 to those entities that contributed to excess earnings. Excess
983 earnings of community-based agencies shall be used only in the
984 service district in which they were earned. Additional state
985 funds appropriated by the Legislature for community-based
986 agencies or made available pursuant to the budgetary amendment
987 process described in s. 216.177 shall be transferred to the
988 community-based agencies. The department shall amend a
989 community-based agency's contract to permit expenditure of the
990 funds.

991 (9) Each district and subdistrict that participates in the
992 model program effort or any future outsourcing privatization
993 effort as described in this section must thoroughly analyze and
994 report the complete direct and indirect costs of delivering
995 these services through the department and the full cost of
996 outsourcing privatization, including the cost of monitoring and
997 evaluating the contracted services.

998 (10) The lead community-based providers and their
999 subcontractors shall be exempt from state travel policies as set
1000 forth in s. 112.061(3)(a) for their travel expenses incurred in
1001 order to comply with the requirements of this section.

1002 Section 4. The Office of Program Policy Analysis and
1003 Government Accountability shall conduct two reviews of the
1004 contract-management and accountability structures of the
1005 Department of Children and Family Services, including, but not

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1006 limited to, whether the department is adequately monitoring and
1007 managing its outsourced or privatized functions and services.
1008 The office shall report its findings and recommendations to the
1009 President of the Senate, the Speaker of the House of
1010 Representatives, and the Auditor General by February 1 of 2006
1011 and 2007, respectively.

1012 Section 5. Section 402.72, Florida Statutes, is repealed.

1013 Section 6. This act shall take effect July 1, 2005.

1014

1015

1016 ===== T I T L E A M E N D M E N T =====

1017 On page 1, line(s) 1,

1018 remove: the entire title, and insert:

1019

1020

A bill to be entitled

1021 An act relating to the Department of Children and Family;
1022 providing definitions; requiring the department to allow
1023 all public postsecondary institutions to bid on contracts
1024 intended for any public postsecondary institution;
1025 authorizing the department to competitively procure and
1026 contract for systems of treatment or service that involve
1027 multiple providers; providing requirements if other
1028 governmental entities contribute matching funds; requiring
1029 that an entity providing matching funds must comply with
1030 certain procurement procedures; authorizing the department
1031 to independently procure and contract for treatment
1032 services; requiring multiyear contracts unless

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1033 justification is provided; requiring that the department
1034 establish a contract management process; specifying the
1035 requirements for and components of the contract management
1036 process; providing requirements for resolving performance
1037 deficiencies and terminating a contract; requiring a
1038 corrective action plan under certain circumstances;
1039 requiring that the department establish contract monitoring
1040 units and a contract monitoring process; requiring written
1041 reports; requiring on site visits for contracts involving
1042 the provision of direct client services; amending s.
1043 402.73, F.S.; authorizing the department to adopt
1044 incremental penalties by rule; requiring the Agency for
1045 Persons with Disabilities to implement systems to ensure
1046 quality and fiscal integrity of programs in the
1047 developmental services Medicaid waiver system; providing an
1048 exemption for health services from competitive bidding
1049 requirements; amending s. 409.1671, F.S.; conforming
1050 provisions to changes made by the act; requiring that the
1051 Office of Program Policy Analysis and Government
1052 Accountability conduct two reviews of the contract-
1053 management and accountability structures of the department
1054 and report to the Legislature and the Auditor General;
1055 repealing s. 402.72, F.S., relating to contract management
1056 requirements for the Department of Children and Family
1057 Services; providing an effective date.

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