

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

586-01082-18

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1                   A bill to be entitled  
2           An act relating to mental health and substance use  
3           disorders; amending s. 394.455, F.S.; defining the  
4           term "peer specialist"; amending s. 394.4572, F.S.;  
5           requiring a specific level of screening for peer  
6           specialists working in mental health programs and  
7           facilities; amending s. 394.4573, F.S.; specifying  
8           that the use of peer specialists for recovery support  
9           is an essential element of a coordinated system of  
10          behavioral health care; amending s. 397.311, F.S.;  
11          defining the term "peer specialist"; amending s.  
12          397.4073, F.S.; conforming provisions to changes made  
13          by the act; creating s. 397.417, F.S.; providing  
14          legislative findings and intent; authorizing a person  
15          to seek certification as a peer specialist if he or  
16          she meets specified qualifications; requiring a  
17          background screening, completion of a training  
18          program, and a passing score on a competency exam for  
19          a qualified person to obtain certification as a peer  
20          specialist; requiring the Department of Children and  
21          Families to develop a training program for peer  
22          specialists and give preference to trainers who are  
23          certified peer specialists; requiring the training  
24          program to coincide with a competency exam and be  
25          based on current practice standards; requiring the  
26          department to certify peer specialists directly or by  
27          designating a nonprofit certification organization;  
28          requiring that a person providing peer specialist  
29          services be certified or supervised by a licensed

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30 behavioral health care professional or a certified  
31 peer specialist; authorizing the department, a  
32 behavioral health managing entity, or the Medicaid  
33 program to reimburse a peer specialist service as a  
34 recovery service; encouraging Medicaid managed care  
35 plans to use peer specialists in providing recovery  
36 services; requiring peer specialists to meet the  
37 requirements of a background screening as a condition  
38 of employment and continued employment; authorizing  
39 the department or the Agency for Health Care  
40 Administration to require by rule that fingerprints be  
41 submitted electronically to the Department of Law  
42 Enforcement; authorizing the department or the agency  
43 to contract with certain vendors for fingerprinting;  
44 specifying requirements for vendors; specifying  
45 offenses to be considered in the background screening  
46 of a peer specialist; authorizing a person who does  
47 not meet background screening requirements to request  
48 an exemption from disqualification from the department  
49 or the agency; providing that all peer specialists  
50 certified as of the effective date of this act are  
51 recognized as having met the requirements of this act;  
52 amending ss. 212.055, 394.495, 394.496, 394.9085,  
53 397.416, 409.972, 440.102, and 744.2007, F.S.;

54 conforming cross-references; making technical changes;  
55 providing an effective date.

56  
57 Be It Enacted by the Legislature of the State of Florida:  
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59 Section 1. Present subsections (32) through (48) of section  
60 394.455, Florida Statutes, are redesignated as subsections (33)  
61 through (49), respectively, and a new subsection (32) is added  
62 to that section, to read:

63 394.455 Definitions.—As used in this part, the term:

64 (32) "Peer specialist" means a person who has been in  
65 recovery from a substance use disorder or mental illness for the  
66 past 2 years or a family member or caregiver of a person with a  
67 substance use disorder or mental illness and who is certified  
68 under s. 397.417.

69 Section 2. Paragraph (a) of subsection (1) of section  
70 394.4572, Florida Statutes, is amended to read:

71 394.4572 Screening of mental health personnel.—

72 (1)(a) The department and the Agency for Health Care  
73 Administration shall require level 2 background screening  
74 pursuant to chapter 435 for mental health personnel. "Mental  
75 health personnel" includes all program directors, professional  
76 clinicians, staff members, and volunteers working in public or  
77 private mental health programs and facilities who have direct  
78 contact with individuals held for examination or admitted for  
79 mental health treatment. For purposes of this chapter,  
80 employment screening of mental health personnel also includes,  
81 but is not limited to, employment screening as provided under  
82 chapter 435 and s. 408.809. The department and the Agency for  
83 Health Care Administration shall require a level 2 background  
84 screening pursuant to s. 397.417(5) for persons working as peer  
85 specialists in public or private mental health programs or  
86 facilities who have direct contact with individuals held for  
87 involuntary examination or admitted for mental health treatment.

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88 Section 3. Paragraph (1) of subsection (2) of section  
89 394.4573, Florida Statutes, is amended to read:

90 394.4573 Coordinated system of care; annual assessment;  
91 essential elements; measures of performance; system improvement  
92 grants; reports.—On or before December 1 of each year, the  
93 department shall submit to the Governor, the President of the  
94 Senate, and the Speaker of the House of Representatives an  
95 assessment of the behavioral health services in this state. The  
96 assessment shall consider, at a minimum, the extent to which  
97 designated receiving systems function as no-wrong-door models,  
98 the availability of treatment and recovery services that use  
99 recovery-oriented and peer-involved approaches, the availability  
100 of less-restrictive services, and the use of evidence-informed  
101 practices. The department's assessment shall consider, at a  
102 minimum, the needs assessments conducted by the managing  
103 entities pursuant to s. 394.9082(5). Beginning in 2017, the  
104 department shall compile and include in the report all plans  
105 submitted by managing entities pursuant to s. 394.9082(8) and  
106 the department's evaluation of each plan.

107 (2) The essential elements of a coordinated system of care  
108 include:

109 (1) Recovery support, including, but not limited to, the  
110 use of peer specialists as described in s. 397.417 to assist in  
111 the individual's recovery from a substance use disorder or  
112 mental illness, support for competitive employment, educational  
113 attainment, independent living skills development, family  
114 support and education, wellness management and self-care, and  
115 assistance in obtaining housing that meets the individual's  
116 needs. Such housing may include mental health residential

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117 treatment facilities, limited mental health assisted living  
118 facilities, adult family care homes, and supportive housing.  
119 Housing provided using state funds must provide a safe and  
120 decent environment free from abuse and neglect.

121 Section 4. Present subsections (30) through (49) of section  
122 397.311, Florida Statutes, are redesignated as subsections (31)  
123 through (50), respectively, and a new subsection (30) is added  
124 to that section, to read:

125 397.311 Definitions.—As used in this chapter, except part  
126 VIII, the term:

127 (30) "Peer specialist" means a person who has been in  
128 recovery from a substance use disorder or mental illness for the  
129 past 2 years or a family member or caregiver of a person with a  
130 substance use disorder or mental illness and who is certified  
131 under s. 397.417.

132 Section 5. Paragraphs (b) and (c) of subsection (4) of  
133 section 397.4073, Florida Statutes, are amended to read:

134 397.4073 Background checks of service provider personnel.—

135 (4) EXEMPTIONS FROM DISQUALIFICATION.—

136 ~~(b) Since rehabilitated substance abuse impaired persons~~  
137 ~~are effective in the successful treatment and rehabilitation of~~  
138 ~~individuals with substance use disorders, for service providers~~  
139 ~~which treat adolescents 13 years of age and older, service~~  
140 ~~provider personnel whose background checks indicate crimes under~~  
141 ~~s. 817.563, s. 893.13, or s. 893.147 may be exempted from~~  
142 ~~disqualification from employment pursuant to this paragraph.~~

143 ~~(c)~~ The department may grant exemptions from  
144 disqualification which would limit service provider personnel to  
145 working with adults in substance use disorder ~~abuse~~ treatment

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146 facilities.

147 Section 6. Section 397.417, Florida Statutes, is created to  
148 read:

149 397.417 Behavioral health peer specialists.—

150 (1) LEGISLATIVE FINDINGS AND INTENT.—

151 (a) The Legislature finds that:

152 1. The ability to provide adequate behavioral health  
153 services is limited by a shortage of professionals and  
154 paraprofessionals.

155 2. The state is experiencing an increase in opioid  
156 addictions, which prove fatal to persons in many cases.

157 3. Peer specialists provide effective support services  
158 because they share common life experiences with the persons they  
159 assist.

160 4. Peer specialists promote a sense of community among  
161 those in recovery.

162 5. Research has shown that peer support facilitates  
163 recovery and reduces health care costs.

164 6. Peer specialists may have a criminal history that  
165 prevents them from meeting background screening requirements.

166 (b) The Legislature intends to expand the use of peer  
167 specialists as a cost-effective means of providing services by  
168 ensuring that peer specialists meet specified qualifications,  
169 meet modified background screening requirements, and are  
170 adequately reimbursed for their services.

171 (2) QUALIFICATIONS.—

172 (a) A person may seek certification as a peer specialist if  
173 he or she has been in recovery from a substance use disorder or  
174 mental illness for the past 2 years or if he or she is a family

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175 member or caregiver of a person with a substance use disorder or  
176 mental illness.

177 (b) To obtain certification as a peer specialist, a person  
178 must meet the background screening requirements of subsection  
179 (5), complete the training program, and achieve a passing score  
180 on the competency exam described in paragraph (3) (a).

181 (3) DUTIES OF THE DEPARTMENT.—

182 (a) The department must develop a training program for  
183 persons seeking certification as peer specialists. The  
184 department must give preference to trainers who are certified  
185 peer specialists. The training program must coincide with a  
186 competency exam and be based on current practice standards.

187 (b) The department shall certify peer specialists. The  
188 department may certify peer specialists directly or may  
189 designate a private, nonprofit certification organization to  
190 certify peer specialists, implement the training program, and  
191 administer the competency exam.

192 (c) The department must require that a person providing  
193 peer specialist services be certified or be supervised by a  
194 licensed behavioral health care professional or a certified peer  
195 specialist.

196 (4) PAYMENT.—Peer specialist services may be reimbursed as  
197 a recovery service through the department, a behavioral health  
198 managing entity, or the Medicaid program. Medicaid managed care  
199 plans are encouraged to use peer specialists in providing  
200 recovery services.

201 (5) BACKGROUND SCREENING.—

202 (a) All peer specialists must have completed or been  
203 lawfully released from confinement, supervision, or any

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204 nonmonetary condition imposed by the court for any felony and  
205 must undergo a background screening as a condition of employment  
206 and continued employment. The background screening must include  
207 fingerprinting for statewide criminal history records checks  
208 through the Department of Law Enforcement and national criminal  
209 history records checks through the Federal Bureau of  
210 Investigation. The background screening may include local  
211 criminal records checks through local law enforcement agencies.

212 (b) The department or the Agency for Health Care  
213 Administration, as applicable, may require by rule that  
214 fingerprints submitted pursuant to this section be submitted  
215 electronically to the Department of Law Enforcement.

216 (c) The department or the Agency for Health Care  
217 Administration, as applicable, may contract with one or more  
218 vendors to perform all or part of the electronic fingerprinting  
219 pursuant to this section. Such contracts must ensure that the  
220 owners and personnel of the vendor performing the electronic  
221 fingerprinting are qualified and will ensure the integrity and  
222 security of all personal identifying information.

223 (d) Vendors who submit fingerprints on behalf of employers  
224 must:

- 225 1. Meet the requirements of s. 943.053; and
- 226 2. Have the ability to communicate electronically with the  
227 department or the Agency for Health Care Administration, as  
228 applicable, accept screening results from the Department of Law  
229 Enforcement and provide the applicant's full first name, middle  
230 initial, and last name; social security number or individual  
231 taxpayer identification number; date of birth; mailing address;  
232 sex; and race.

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233 (e) The background screening under this section must ensure  
234 that a peer specialist has not, during the previous 3 years,  
235 been arrested for and is awaiting final disposition of, been  
236 found guilty of, regardless of adjudication, or entered a plea  
237 of nolo contendere or guilty to, or been adjudicated delinquent  
238 and the record has not been sealed or expunged for, any felony.

239 (f) The background screening under this section must ensure  
240 that a peer specialist has not been found guilty of, regardless  
241 of adjudication, or entered a plea of nolo contendere or guilty  
242 to, or been adjudicated delinquent and the record has not been  
243 sealed or expunged for, any offense prohibited under any of the  
244 following state laws or similar laws of another jurisdiction:

245 1. Section 393.135, relating to sexual misconduct with  
246 certain developmentally disabled clients and reporting of such  
247 sexual misconduct.

248 2. Section 394.4593, relating to sexual misconduct with  
249 certain mental health patients and reporting of such sexual  
250 misconduct.

251 3. Section 409.9201, relating to Medicaid fraud.

252 4. Section 415.111, relating to adult abuse, neglect, or  
253 exploitation of aged persons or disabled adults.

254 5. Section 741.28, relating to domestic violence.

255 6. Section 777.04, relating to attempts, solicitation, and  
256 conspiracy to commit an offense listed in this section.

257 7. Section 782.04, relating to murder.

258 8. Section 782.07, relating to manslaughter, aggravated  
259 manslaughter of an elderly person or disabled adult, aggravated  
260 manslaughter of a child, or aggravated manslaughter of an  
261 officer, a firefighter, an emergency medical technician, or a

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- 262 paramedic.
- 263 9. Section 782.071, relating to vehicular homicide.
- 264 10. Section 782.09, relating to killing of an unborn child  
265 by injury to the mother.
- 266 11. Chapter 784, relating to assault, battery, and culpable  
267 negligence, if the offense was a felony.
- 268 12. Section 787.01, relating to kidnapping.
- 269 13. Section 787.02, relating to false imprisonment.
- 270 14. Section 787.025, relating to luring or enticing a  
271 child.
- 272 15. Section 787.04(2), relating to leading, taking,  
273 enticing, or removing a minor beyond the state limits, or  
274 concealing the location of a minor, with criminal intent pending  
275 custody proceedings.
- 276 16. Section 787.04(3), relating to leading, taking,  
277 enticing, or removing a minor beyond the state limits, or  
278 concealing the location of a minor, with criminal intent pending  
279 dependency proceedings or proceedings concerning alleged abuse  
280 or neglect of a minor.
- 281 17. Section 790.115(1), relating to exhibiting firearms or  
282 weapons within 1,000 feet of a school.
- 283 18. Section 790.115(2)(b), relating to possessing an  
284 electric weapon or device, destructive device, or other weapon  
285 on school property.
- 286 19. Section 794.011, relating to sexual battery.
- 287 20. Former s. 794.041, relating to prohibited acts of  
288 persons in familial or custodial authority.
- 289 21. Section 794.05, relating to unlawful sexual activity  
290 with certain minors.

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- 291       22. Section 794.08, relating to female genital mutilation.
- 292       23. Section 798.02, relating to lewd and lascivious  
293 behavior.
- 294       24. Chapter 800, relating to lewdness and indecent  
295 exposure.
- 296       25. Section 806.01, relating to arson.
- 297       26. Section 810.02, relating to burglary, if the offense  
298 was a felony of the first degree.
- 299       27. Section 810.14, relating to voyeurism, if the offense  
300 was a felony.
- 301       28. Section 810.145, relating to video voyeurism, if the  
302 offense was a felony.
- 303       29. Section 812.13, relating to robbery.
- 304       30. Section 812.131, relating to robbery by sudden  
305 snatching.
- 306       31. Section 812.133, relating to carjacking.
- 307       32. Section 812.135, relating to home-invasion robbery.
- 308       33. Section 817.50, relating to fraudulently obtaining  
309 goods or services from a health care provider and false reports  
310 of a communicable disease.
- 311       34. Section 817.505, relating to patient brokering.
- 312       35. Section 825.102, relating to abuse, aggravated abuse,  
313 or neglect of an elderly person or disabled adult.
- 314       36. Section 825.1025, relating to lewd or lascivious  
315 offenses committed upon or in the presence of an elderly person  
316 or disabled person.
- 317       37. Section 825.103, relating to exploitation of an elderly  
318 person or disabled adult, if the offense was a felony.
- 319       38. Section 826.04, relating to incest.

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- 320       39. Section 827.03, relating to child abuse, aggravated  
321 child abuse, or neglect of a child.
- 322       40. Section 827.04, relating to contributing to the  
323 delinquency or dependency of a child.
- 324       41. Former s. 827.05, relating to negligent treatment of  
325 children.
- 326       42. Section 827.071, relating to sexual performance by a  
327 child.
- 328       43. Section 831.30, relating to fraud in obtaining  
329 medicinal drugs.
- 330       44. Section 831.31, relating to sale, manufacture,  
331 delivery, possession with intent to sell, manufacture, or  
332 deliver any counterfeit controlled substance if the offense was  
333 a felony.
- 334       45. Section 843.01, relating to resisting arrest with  
335 violence.
- 336       46. Section 843.025, relating to depriving a law  
337 enforcement, correctional, or correctional probation officer  
338 means of protection or communication.
- 339       47. Section 843.12, relating to aiding in an escape.
- 340       48. Section 843.13, relating to aiding in the escape of  
341 juvenile inmates of correctional institutions.
- 342       49. Chapter 847, relating to obscene literature.
- 343       50. Section 874.05, relating to encouraging or recruiting  
344 another to join a criminal gang.
- 345       51. Chapter 893, relating to drug abuse prevention and  
346 control, if the offense was a felony of the second degree or  
347 greater severity.
- 348       52. Section 895.03, relating to racketeering and collection

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349 of unlawful debts.

350 53. Section 896.101, relating to the Florida Money  
351 Laundering Act.

352 54. Section 916.1075, relating to sexual misconduct with  
353 certain forensic clients and reporting of such sexual  
354 misconduct.

355 55. Section 944.35(3), relating to inflicting cruel or  
356 inhuman treatment on an inmate resulting in great bodily harm.

357 56. Section 944.40, relating to escape.

358 57. Section 944.46, relating to harboring, concealing, or  
359 aiding an escaped prisoner.

360 58. Section 944.47, relating to introduction of contraband  
361 into a correctional facility.

362 59. Section 985.701, relating to sexual misconduct in  
363 juvenile justice programs.

364 60. Section 985.711, relating to contraband introduced into  
365 detention facilities.

366 (6) EXEMPTION REQUESTS.—Persons who wish to become a peer  
367 specialist and are disqualified under subsection (5) may request  
368 an exemption from disqualification pursuant to s. 435.07 from  
369 the department or the Agency for Health Care Administration, as  
370 applicable.

371 (7) GRANDFATHER CLAUSE.—All peer specialists certified as  
372 of the effective date of this act are recognized as having met  
373 the requirements of this act.

374 Section 7. Paragraph (e) of subsection (5) of section  
375 212.055, Florida Statutes, is amended to read:

376 212.055 Discretionary sales surtaxes; legislative intent;  
377 authorization and use of proceeds.—It is the legislative intent

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378 that any authorization for imposition of a discretionary sales  
379 surtax shall be published in the Florida Statutes as a  
380 subsection of this section, irrespective of the duration of the  
381 levy. Each enactment shall specify the types of counties  
382 authorized to levy; the rate or rates which may be imposed; the  
383 maximum length of time the surtax may be imposed, if any; the  
384 procedure which must be followed to secure voter approval, if  
385 required; the purpose for which the proceeds may be expended;  
386 and such other requirements as the Legislature may provide.  
387 Taxable transactions and administrative procedures shall be as  
388 provided in s. 212.054.

389 (5) COUNTY PUBLIC HOSPITAL SURTAX.—Any county as defined in  
390 s. 125.011(1) may levy the surtax authorized in this subsection  
391 pursuant to an ordinance either approved by extraordinary vote  
392 of the county commission or conditioned to take effect only upon  
393 approval by a majority vote of the electors of the county voting  
394 in a referendum. In a county as defined in s. 125.011(1), for  
395 the purposes of this subsection, "county public general  
396 hospital" means a general hospital as defined in s. 395.002  
397 which is owned, operated, maintained, or governed by the county  
398 or its agency, authority, or public health trust.

399 (e) A governing board, agency, or authority shall be  
400 chartered by the county commission upon this act becoming law.  
401 The governing board, agency, or authority shall adopt and  
402 implement a health care plan for indigent health care services.  
403 The governing board, agency, or authority shall consist of no  
404 more than seven and no fewer than five members appointed by the  
405 county commission. The members of the governing board, agency,  
406 or authority shall be at least 18 years of age and residents of

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407 the county. ~~A No~~ member may not be employed by or affiliated  
408 with a health care provider or the public health trust, agency,  
409 or authority responsible for the county public general hospital.  
410 The following community organizations shall each appoint a  
411 representative to a nominating committee: the South Florida  
412 Hospital and Healthcare Association, the Miami-Dade County  
413 Public Health Trust, the Dade County Medical Association, the  
414 Miami-Dade County Homeless Trust, and the Mayor of Miami-Dade  
415 County. This committee shall nominate between 10 and 14 county  
416 citizens for the governing board, agency, or authority. The  
417 slate shall be presented to the county commission and the county  
418 commission shall confirm the top five to seven nominees,  
419 depending on the size of the governing board. Until such time as  
420 the governing board, agency, or authority is created, the funds  
421 provided for in subparagraph (d)2. shall be placed in a  
422 restricted account set aside from other county funds and not  
423 disbursed by the county for any other purpose.

424 1. The plan shall divide the county into a minimum of four  
425 and maximum of six service areas, with no more than one  
426 participant hospital per service area. The county public general  
427 hospital shall be designated as the provider for one of the  
428 service areas. Services shall be provided through participants'  
429 primary acute care facilities.

430 2. The plan and subsequent amendments to it shall fund a  
431 defined range of health care services for both indigent persons  
432 and the medically poor, including primary care, preventive care,  
433 hospital emergency room care, and hospital care necessary to  
434 stabilize the patient. For the purposes of this section,  
435 "stabilization" means stabilization as defined in s. 397.311 ~~s.~~

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436 ~~397.311(45)~~. Where consistent with these objectives, the plan  
437 may include services rendered by physicians, clinics, community  
438 hospitals, and alternative delivery sites, as well as at least  
439 one regional referral hospital per service area. The plan shall  
440 provide that agreements negotiated between the governing board,  
441 agency, or authority and providers shall recognize hospitals  
442 that render a disproportionate share of indigent care, provide  
443 other incentives to promote the delivery of charity care to draw  
444 down federal funds where appropriate, and require cost  
445 containment, including, but not limited to, case management.  
446 From the funds specified in subparagraphs (d)1. and 2. for  
447 indigent health care services, service providers shall receive  
448 reimbursement at a Medicaid rate to be determined by the  
449 governing board, agency, or authority created pursuant to this  
450 paragraph for the initial emergency room visit, and a per-member  
451 per-month fee or capitation for those members enrolled in their  
452 service area, as compensation for the services rendered  
453 following the initial emergency visit. Except for provisions of  
454 emergency services, upon determination of eligibility,  
455 enrollment shall be deemed to have occurred at the time services  
456 were rendered. The provisions for specific reimbursement of  
457 emergency services shall be repealed on July 1, 2001, unless  
458 otherwise reenacted by the Legislature. The capitation amount or  
459 rate shall be determined before program implementation by an  
460 independent actuarial consultant. In no event shall such  
461 reimbursement rates exceed the Medicaid rate. The plan must also  
462 provide that any hospitals owned and operated by government  
463 entities on or after the effective date of this act must, as a  
464 condition of receiving funds under this subsection, afford

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465 public access equal to that provided under s. 286.011 as to any  
466 meeting of the governing board, agency, or authority the subject  
467 of which is budgeting resources for the retention of charity  
468 care, as that term is defined in the rules of the Agency for  
469 Health Care Administration. The plan shall also include  
470 innovative health care programs that provide cost-effective  
471 alternatives to traditional methods of service and delivery  
472 funding.

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

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

481 5. At the end of each fiscal year, the governing board,  
482 agency, or authority shall prepare an audit that reviews the  
483 budget of the plan, delivery of services, and quality of  
484 services, and makes recommendations to increase the plan's  
485 efficiency. The audit shall take into account participant  
486 hospital satisfaction with the plan and assess the amount of  
487 poststabilization patient transfers requested, and accepted or  
488 denied, by the county public general hospital.

489 Section 8. Subsection (3) of section 394.495, Florida  
490 Statutes, is amended to read:

491 394.495 Child and adolescent mental health system of care;  
492 programs and services.-

493 (3) Assessments must be performed by:

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494 (a) A professional as defined in s. 394.455(5), (7), (33)  
 495 ~~(32)~~, (36) ~~(35)~~, or (37) ~~(36)~~;

496 (b) A professional licensed under chapter 491; or

497 (c) A person who is under the direct supervision of a  
 498 qualified professional as defined in s. 394.455(5), (7), (33)  
 499 ~~(32)~~, (36) ~~(35)~~, or (37) ~~(36)~~ or a professional licensed under  
 500 chapter 491.

501 Section 9. Subsection (5) of section 394.496, Florida  
 502 Statutes, is amended to read:

503 394.496 Service planning.—

504 (5) A professional as defined in s. 394.455(5), (7), (33)  
 505 ~~(32)~~, (36) ~~(35)~~, or (37) ~~(36)~~ or a professional licensed under  
 506 chapter 491 must be included among those persons developing the  
 507 services plan.

508 Section 10. Subsection (6) of section 394.9085, Florida  
 509 Statutes, is amended to read:

510 394.9085 Behavioral provider liability.—

511 (6) For purposes of this section, the term ~~terms~~  
 512 “detoxification services,” has the same meaning as  
 513 detoxification in s. 397.311(26) (a), “addictions receiving  
 514 facility,” has the same meaning as provided in s.  
 515 397.311(26) (a), and “receiving facility” has ~~have~~ the same  
 516 meaning ~~meanings~~ as ~~those~~ provided in s. 394.455 ~~ss.~~  
 517 ~~397.311(26) (a) 4., 397.311(26) (a) 1., and 394.455(39)~~,  
 518 respectively.

519 Section 11. Section 397.416, Florida Statutes, is amended  
 520 to read:

521 397.416 Substance use disorder ~~abuse~~ treatment services;  
 522 qualified professional.—Notwithstanding any other provision of

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523 law, a person who was certified through a certification process  
 524 recognized by the former Department of Health and Rehabilitative  
 525 Services before January 1, 1995, may perform the duties of a  
 526 qualified professional with respect to substance use ~~abuse~~  
 527 treatment services as defined in this chapter, and need not meet  
 528 the certification requirements contained in s. 397.311(35) ~~s.~~  
 529 ~~397.311(34)~~.

530 Section 12. Paragraph (b) of subsection (1) of section  
 531 409.972, Florida Statutes, is amended to read:

532 409.972 Mandatory and voluntary enrollment.—

533 (1) The following Medicaid-eligible persons are exempt from  
 534 mandatory managed care enrollment required by s. 409.965, and  
 535 may voluntarily choose to participate in the managed medical  
 536 assistance program:

537 (b) Medicaid recipients residing in residential commitment  
 538 facilities operated through the Department of Juvenile Justice  
 539 or in a treatment facility as defined in s. 394.455 ~~s.~~  
 540 ~~394.455(47)~~.

541 Section 13. Paragraphs (d) and (g) of subsection (1) of  
 542 section 440.102, Florida Statutes, are amended to read:

543 440.102 Drug-free workplace program requirements.—The  
 544 following provisions apply to a drug-free workplace program  
 545 implemented pursuant to law or to rules adopted by the Agency  
 546 for Health Care Administration:

547 (1) DEFINITIONS.—Except where the context otherwise  
 548 requires, as used in this act:

549 (d) "Drug rehabilitation program" means a service provider  
 550 as defined in s. 397.311 which, ~~established pursuant to s.~~  
 551 ~~397.311(43), that~~ provides confidential, timely, and expert

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552 identification, assessment, and resolution of employee drug  
553 abuse.

554 (g) "Employee assistance program" means an established  
555 program capable of providing expert assessment of employee  
556 personal concerns; confidential and timely identification  
557 services with regard to employee drug abuse; referrals of  
558 employees for appropriate diagnosis, treatment, and assistance;  
559 and followup services for employees who participate in the  
560 program or require monitoring after returning to work. If, in  
561 addition to the above activities, an employee assistance program  
562 provides diagnostic and treatment services, these services shall  
563 in all cases be provided by service providers as defined in s.  
564 397.311 ~~pursuant to s. 397.311(43)~~.

565 Section 14. Subsection (7) of section 744.2007, Florida  
566 Statutes, is amended to read:

567 744.2007 Powers and duties.—

568 (7) A public guardian may not commit a ward to a treatment  
569 facility, as defined in s. 394.455 ~~s. 394.455(47)~~, without an  
570 involuntary placement proceeding as provided by law.

571 Section 15. This act shall take effect July 1, 2018.