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Proposed Committee Substitute by the Committee on Appropriations (Appropriations Subcommittee on Health and Human Services)

A bill to be entitled

An act relating to mental health and substance use disorders; amending s. 394.4573, F.S.; providing that the use of peer specialists is an essential element of a coordinated system of care in recovery from a substance use disorder or mental illness; making a technical change; amending s. 397.4073, F.S.; revising background screening requirements for certain peer specialists; revising authorizations relating to work by applicants who have committed disqualifying offenses; amending s. 397.417, F.S.; providing legislative findings and intent; revising requirements for certification as a peer specialist; requiring the Department of Children and Families to develop a training program for peer specialists and to give preference to trainers who are certified peer specialists; requiring the training program to coincide with a competency exam and to be based on current practice standards; requiring the department to certify peer specialists, either directly or by approving a third-party credentialing entity; prohibiting third-party credentialing entities from conducting background screenings for peer specialists; requiring that a person providing recovery support services be certified or be supervised by a licensed behavioral health care professional or a certified peer specialist; authorizing the department, a

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28 behavioral health managing entity, or the Medicaid 29 program to reimburse a peer specialist service as a 30 recovery service; encouraging Medicaid managed care plans to use peer specialists in providing recovery 31 32 services; requiring peer specialists and certain 33 persons to meet the requirements of a background 34 screening as a condition of employment and continued 35 employment; requiring certain entities to forward 36 fingerprints to specified entities; requiring the 37 department to screen results to determine if the peer 38 specialist meets the certification requirements; 39 requiring that fees for state and federal fingerprint 40 processing be borne by the peer specialist applying for employment; requiring that any arrest record 41 42 identified through background screening be reported to 43 the department; authorizing the department or certain 44 other agencies to contract with certain vendors for 45 fingerprinting; specifying requirements for vendors; specifying disgualifying offenses for a peer 46 47 specialist who applies for certification; authorizing 48 a person who does not meet background screening 49 requirements to request an exemption from 50 disqualification from the department or the agency; 51 providing that a peer specialist certified as of the 52 effective date of this act is deemed to satisfy the 53 requirements of this act; providing an effective date. 54

55 Be It Enacted by the Legislature of the State of Florida: 56

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57 Section 1. Paragraph (1) of subsection (2) and subsection
58 (3) of section 394.4573, Florida Statutes, are amended to read:
59 394.4573 Coordinated system of care; annual assessment;

60 essential elements; measures of performance; system improvement 61 grants; reports.-On or before December 1 of each year, the 62 department shall submit to the Governor, the President of the 63 Senate, and the Speaker of the House of Representatives an assessment of the behavioral health services in this state. The 64 assessment shall consider, at a minimum, the extent to which 65 66 designated receiving systems function as no-wrong-door models, 67 the availability of treatment and recovery services that use 68 recovery-oriented and peer-involved approaches, the availability of less-restrictive services, and the use of evidence-informed 69 70 practices. The assessment shall also consider the availability 71 of and access to coordinated specialty care programs and identify any gaps in the availability of and access to such 72 73 programs in the state. The department's assessment shall 74 consider, at a minimum, the needs assessments conducted by the 75 managing entities pursuant to s. 394.9082(5). Beginning in 2017, the department shall compile and include in the report all plans 76 77 submitted by managing entities pursuant to s. 394.9082(8) and 78 the department's evaluation of each plan.

79 (2) The essential elements of a coordinated system of care 80 include:

81 (1) Recovery support, including, but not limited to, <u>the</u> 82 <u>use of peer specialists to assist in the individual's recovery</u> 83 <u>from a substance use disorder or mental illness;</u> support for 84 competitive employment, educational attainment, independent 85 living skills development, family support and education,

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86 wellness management, and self-care; and assistance in obtaining 87 housing that meets the individual's needs. Such housing may 88 include mental health residential treatment facilities, limited 89 mental health assisted living facilities, adult family care 90 homes, and supportive housing. Housing provided using state 91 funds must provide a safe and decent environment free from abuse 92 and neglect.

93 (3) SYSTEM IMPROVEMENT GRANTS .- Subject to a specific 94 appropriation by the Legislature, the department may award 95 system improvement grants to managing entities based on a 96 detailed plan to enhance services in accordance with the no-97 wrong-door model as defined in subsection (1) and to address 98 specific needs identified in the assessment prepared by the 99 department pursuant to this section. Such a grant must be 100 awarded through a performance-based contract that links payments 101 to the documented and measurable achievement of system 102 improvements.

103Section 2. Paragraphs (a) and (g) of subsection (1) of104section 397.4073, Florida Statutes, are amended to read:

397.4073 Background checks of service provider personnel.-

106 (1) PERSONNEL BACKGROUND CHECKS; REQUIREMENTS AND107 EXCEPTIONS.—

(a) For all individuals screened on or after July 1, <u>2021</u>
 <del>2019</del>, background checks shall apply as follows:

110 1. All owners, directors, chief financial officers, and 111 clinical supervisors of service providers are subject to level 2 112 background screening as provided under s. 408.809 and chapter 113 435. Inmate substance abuse programs operated directly or under 114 contract with the Department of Corrections are exempt from this

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115 requirement.

116 2. All service provider personnel who have direct contact 117 with children receiving services or with adults who are 118 developmentally disabled receiving services are subject to level 119 2 background screening as provided under s. 408.809 and chapter 120 435.

3. All peer specialists who have direct contact with
 individuals receiving services are subject to <u>a background</u>
 <u>screening as provided in s. 397.417(5)</u> <del>level 2 background</del>
 screening as provided under s. 408.809 and chapter 435.

125 (g) If 5 years or more, or 3 years or more in the case of a 126 certified peer specialist or an individual seeking certification 127 as a peer specialist pursuant to s. 397.417, have elapsed since 128 an applicant for an exemption from disqualification has 129 completed or has been lawfully released from confinement, 130 supervision, or a nonmonetary condition imposed by a court for 131 the applicant's most recent disqualifying offense, the applicant may work with adults with substance use disorders, mental health 132 133 disorders, or co-occurring disorders under the supervision of 134 persons who meet all personnel requirements of this chapter for 135 up to 180 90 days after being notified of his or her 136 disqualification or until the department makes a final 137 determination regarding his or her request for an exemption from disgualification, whichever is earlier. 138

Section 3. Section 397.417, Florida Statutes, is amended to read:

141 397.417 Peer specialists.142 (1) LEGISLATIVE FINDINGS AND INTENT.143 (a) The Legislature finds that:

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144	1. The ability to provide adequate behavioral health
145	services is limited by a shortage of professionals and
146	paraprofessionals.
147	2. The state is experiencing an increase in opioid
148	addictions, many of which prove fatal.
149	3. Peer specialists provide effective support services
150	because they share common life experiences with the persons they
151	assist.
152	4. Peer specialists promote a sense of community among
153	those in recovery.
154	5. Research has shown that peer support facilitates
155	recovery and reduces health care costs.
156	6. Persons who are otherwise qualified to serve as peer
157	specialists may have a criminal history that prevents them from
158	meeting background screening requirements.
159	(b) The Legislature intends to expand the use of peer
160	specialists as a cost-effective means of providing services. The
161	Legislature also intends to ensure that peer specialists meet
162	specified qualifications and modified background screening
163	requirements and are adequately reimbursed for their services.
164	(2) QUALIFICATIONS.—
165	(a) A person may seek certification as a peer specialist if
166	he or she has been in recovery from a substance use disorder or
167	mental illness for the past 2 years or if he or she is a family
168	member or caregiver of a person with a substance use disorder or
169	mental illness.
170	(b) To obtain certification as a peer specialist, a person
171	must complete the training program developed under subsection
172	(3), achieve a passing score on the competency exam described in

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#### 173 paragraph (3)(a), and meet the background screening requirements 174 specified in subsection (5). 175 (3) DUTIES OF THE DEPARTMENT.-176 (a) The department shall develop a training program for 177 persons seeking certification as peer specialists. The 178 department must give preference to trainers who are certified 179 peer specialists. The training program must coincide with a 180 competency exam and be based on current practice standards. 181 (b) The department may certify peer specialists directly or 182 may approve one or more third-party credentialing entities for 183 the purposes of certifying peer specialists, approving training 184 programs for individuals seeking certification as peer 185 specialists, approving continuing education programs, and 186 establishing the minimum requirements and standards applicants 187 must meet to maintain certification. Background screening 188 required for achieving certification must be conducted as 189 provided in subsection (5) and may not be conducted by third-190 party credentialing entities. 191 (c) The department shall require that a person providing 192 recovery support services be certified; however, an individual 193 who is not certified may provide recovery support services as a 194 peer specialist for up to 1 year if he or she is working toward 195 certification and is supervised by a qualified professional or 196 by a certified peer specialist who has at least 2 years of full-197 time experience as a peer specialist at a licensed behavioral 198 health organization. 199 (4) PAYMENT.-Recovery support services may be reimbursed as 200 a recovery service through the department, a behavioral health 201 managing entity, or the Medicaid program. Medicaid managed care

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576-03000-21 202 plans are encouraged to use peer specialists in providing 203 recovery services. 204 (5) BACKGROUND SCREENING.-205 (a) A peer specialist, or an individual who is working 206 toward certification and providing recovery support services as 207 provided in subsection (3), must have completed or have been 208 lawfully released from confinement, supervision, or any 209 nonmonetary condition imposed by the court for any felony and 210 must undergo a background screening as a condition of initial 211 and continued employment. The applicant must submit a full set 212 of fingerprints to the department or to a vendor, an entity, or 213 an agency that enters into an agreement with the Department of 214 Law Enforcement as provided in s. 943.053(13). The department, 215 vendor, entity, or agency shall forward the fingerprints to the 216 Department of Law Enforcement for state processing and the 217 Department of Law Enforcement shall forward the fingerprints to 218 the Federal Bureau of Investigation for national processing. The 219 department shall screen the results to determine if a peer 220 specialist meets certification requirements. The applicant is 221 responsible for all fees charged in connection with state and 222 federal fingerprint processing and retention. The state cost for 223 fingerprint processing shall be as provided in s. 943.053(3)(e) 224 for records provided to persons or entities other than those 225 specified as exceptions therein. Fingerprints submitted to the 226 Department of Law Enforcement pursuant to this paragraph shall 227 be retained as provided in s. 435.12 and, when the Department of 228 Law Enforcement begins participation in the program, enrolled in 229 the Federal Bureau of Investigation's national retained fingerprint arrest notification program, as provided in s. 230

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231 <u>943.05(4). Any arrest record identified must be reported to the</u> 232 <u>department.</u> 233 <u>(b) The department or the Agency for Health Care</u> 234 <u>Administration, as applicable, may contract with one or more</u> 235 <u>vendors to perform all or part of the electronic fingerprinting</u> 236 <u>pursuant to this section. Such contracts must ensure that the</u>

237 <u>owners and personnel of the vendor performing the electronic</u> 238 <u>fingerprinting are qualified and will ensure the integrity and</u> 239 security of all personal identifying information.

240 (c) Vendors who submit fingerprints on behalf of employers
241 must:

1. Meet the requirements of s. 943.053; and

243 <u>2. Have the ability to communicate electronically with the</u> 244 <u>state agency accepting screening results from the Department of</u> 245 <u>Law Enforcement and provide the applicant's full first name,</u> 246 <u>middle initial, and last name; social security number or</u> 247 <u>individual taxpayer identification number; date of birth;</u> 248 mailing address; sex; and race.

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

(e) The background screening conducted under this subsection must ensure that a peer specialist has not been found guilty of, regardless of adjudication, or entered a plea of nolo contendere or guilty to, or been adjudicated delinquent and the

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260	record has not been sealed or expunged for, any offense
261	prohibited under any of the following state laws or similar laws
262	of another jurisdiction:
263	1. Section 393.135, relating to sexual misconduct with
264	certain developmentally disabled clients and reporting of such
265	sexual misconduct.
266	2. Section 394.4593, relating to sexual misconduct with
267	certain mental health patients and reporting of such sexual
268	misconduct.
269	3. Section 409.920, relating to Medicaid provider fraud, if
270	the offense was a felony of the first or second degree.
271	4. Section 415.111, relating to abuse, neglect, or
272	exploitation of vulnerable adults.
273	5. Any offense that constitutes domestic violence as
274	defined in s. 741.28.
275	6. Section 777.04, relating to attempts, solicitation, and
276	conspiracy to commit an offense listed in this paragraph.
277	7. Section 782.04, relating to murder.
278	8. Section 782.07, relating to manslaughter, aggravated
279	manslaughter of an elderly person or a disabled adult,
280	aggravated manslaughter of a child, or aggravated manslaughter
281	of an officer, a firefighter, an emergency medical technician,
282	or a paramedic.
283	9. Section 782.071, relating to vehicular homicide.
284	10. Section 782.09, relating to killing an unborn child by
285	injury to the mother.
286	11. Chapter 784, relating to assault, battery, and culpable
287	negligence, if the offense was a felony.
288	12. Section 787.01, relating to kidnapping.

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289	13. Section 787.02, relating to false imprisonment.
290	14. Section 787.025, relating to luring or enticing a
291	child.
292	15. Section 787.04(2), relating to leading, taking,
293	enticing, or removing a minor beyond state limits, or concealing
294	the location of a minor, with criminal intent pending custody
295	proceedings.
296	16. Section 787.04(3), relating to leading, taking,
297	enticing, or removing a minor beyond state limits, or concealing
298	the location of a minor, with criminal intent pending dependency
299	proceedings or proceedings concerning alleged abuse or neglect
300	<u>of a minor.</u>
301	17. Section 790.115(1), relating to exhibiting firearms or
302	weapons within 1,000 feet of a school.
303	18. Section 790.115(2)(b), relating to possessing an
304	electric weapon or device, a destructive device, or any other
305	weapon on school property.
306	19. Section 794.011, relating to sexual battery.
307	20. Former s. 794.041, relating to prohibited acts of
308	persons in familial or custodial authority.
309	21. Section 794.05, relating to unlawful sexual activity
310	with certain minors.
311	22. Section 794.08, relating to female genital mutilation.
312	23. Section 796.07, relating to procuring another to commit
313	prostitution, except for those offenses expunged pursuant to s.
314	943.0583.
315	24. Section 798.02, relating to lewd and lascivious
316	behavior.
317	25. Chapter 800, relating to lewdness and indecent

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219	20. Section 600.01, relating to arson.
320	27. Section 810.02, relating to burglary, if the offense
321	was a felony of the first degree.
322	28. Section 810.14, relating to voyeurism, if the offense
323	was a felony.
324	29. Section 810.145, relating to video voyeurism, if the
325	offense was a felony.
326	30. Section 812.13, relating to robbery.
327	31. Section 812.131, relating to robbery by sudden
328	snatching.
329	32. Section 812.133, relating to carjacking.
330	33. Section 812.135, relating to home-invasion robbery.
331	34. Section 817.034, relating to communications fraud, if
332	the offense was a felony of the first degree.
333	35. Section 817.234, relating to false and fraudulent
334	insurance claims, if the offense was a felony of the first or
335	second degree.
336	36. Section 817.50, relating to fraudulently obtaining
337	goods or services from a health care provider and false reports
338	of a communicable disease.
339	37. Section 817.505, relating to patient brokering.
340	38. Section 817.568, relating to fraudulent use of personal
341	identification, if the offense was a felony of the first or
342	second degree.
343	39. Section 825.102, relating to abuse, aggravated abuse,
344	or neglect of an elderly person or a disabled adult.
345	40. Section 825.1025, relating to lewd or lascivious
346	offenses committed upon or in the presence of an elderly person
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347	or a disabled person.
348	41. Section 825.103, relating to exploitation of an elderly
349	person or a disabled adult, if the offense was a felony.
350	42. Section 826.04, relating to incest.
351	43. Section 827.03, relating to child abuse, aggravated
352	child abuse, or neglect of a child.
353	44. Section 827.04, relating to contributing to the
354	delinquency or dependency of a child.
355	45. Former s. 827.05, relating to negligent treatment of
356	children.
357	46. Section 827.071, relating to sexual performance by a
358	child.
359	47. Section 831.30, relating to fraud in obtaining
360	medicinal drugs.
361	48. Section 831.31, relating to sale, manufacture,
362	delivery, possession with intent to sell, manufacture, or
363	deliver of any counterfeit controlled substance, if the offense
364	was a felony.
365	49. Section 843.01, relating to resisting arrest with
366	violence.
367	50. Section 843.025, relating to depriving a law
368	enforcement, correctional, or correctional probation officer of
369	the means of protection or communication.
370	51. Section 843.12, relating to aiding in an escape.
371	52. Section 843.13, relating to aiding in the escape of
372	juvenile inmates of correctional institutions.
373	53. Chapter 847, relating to obscenity.
374	54. Section 874.05, relating to encouraging or recruiting
375	another to join a criminal gang.

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376	55. Chapter 893, relating to drug abuse prevention and
377	control, if the offense was a felony of the second degree or
378	greater severity.
379	56. Section 895.03, relating to racketeering and collection
380	of unlawful debts.
381	57. Section 896.101, relating to the Florida Money
382	Laundering Act.
383	58. Section 916.1075, relating to sexual misconduct with
384	certain forensic clients and reporting of such sexual
385	misconduct.
386	59. Section 944.35(3), relating to inflicting cruel or
387	inhuman treatment on an inmate resulting in great bodily harm.
388	60. Section 944.40, relating to escape.
389	61. Section 944.46, relating to harboring, concealing, or
390	aiding an escaped prisoner.
391	62. Section 944.47, relating to introduction of contraband
392	into a correctional institution.
393	63. Section 985.701, relating to sexual misconduct in
394	juvenile justice programs.
395	64. Section 985.711, relating to introduction of contraband
396	into a detention facility.
397	(6) EXEMPTION REQUESTSA person who wishes to become a
398	peer specialist and is disqualified under subsection (5) may
399	request an exemption from disqualification pursuant to s. 435.07
400	from the department or the Agency for Health Care
401	Administration, as applicable.
402	(7) GRANDFATHER CLAUSEA peer specialist certified as of
403	the effective date of this act is deemed to satisfy the
404	requirements of this act

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405 (1) An individual may seek certification as a peer 406 specialist if he or she has been in recovery from a substance use disorder or mental illness for at least 2 years, or if he or 407 408 she has at least 2 years of experience as a family member or 409 caregiver of a person with a substance use disorder or mental 410 illness. 411 (2) The department shall approve one or more third-party credentialing entities for the purposes of certifying peer 412 specialists, approving training programs for individuals seeking 413 414 certification as peer specialists, approving continuing 415 education programs, and establishing the minimum requirements 416 and standards that applicants must achieve to maintain 417 certification. To obtain approval, the third-party credentialing 418 entity must demonstrate compliance with nationally recognized 419 standards for developing and administering professional 420 certification programs to certify peer specialists. 421 (3) An individual providing department-funded recovery 422 support services as a peer specialist shall be certified pursuant to subsection (2). An individual who is not certified 423 424 may provide recovery support services as a peer specialist for up to 1 year if he or she is working toward certification and is 425 426 supervised by a qualified professional or by a certified peer 427 specialist who has at least 3 years of full-time experience as a 428 peer specialist at a licensed behavioral health organization. 429 Section 4. This act shall take effect July 1, 2021.