



Health & Human Services Committee

**Tuesday, April 16, 2013
9:00 AM – 12:00 PM
Morris Hall**

Action Packet

COMMITTEE MEETING REPORT
Health & Human Services Committee
4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

Summary:

Health & Human Services Committee

Tuesday April 16, 2013 09:00 am

CS/CS/HB 125	Favorable With Committee Substitute	Yeas: 14	Nays: 0
	Amendment 594835	Adopted Without Objection	
CS/HB 301	Favorable	Yeas: 14	Nays: 1
CS/CS/HB 317	Favorable	Yeas: 13	Nays: 0
CS/HB 411	Favorable With Committee Substitute	Yeas: 13	Nays: 0
	Amendment 200727	Adopted Without Objection	
CS/HB 631	Favorable	Yeas: 13	Nays: 0
CS/HB 639	Favorable	Yeas: 16	Nays: 0
CS/HB 817	Favorable With Committee Substitute	Yeas: 12	Nays: 5
	Amendment 651199	Adopted as Amended	
	Amendment 863079	Adopted	
	Amendment 433501	Adopted	
CS/HB 1071	Favorable	Yeas: 15	Nays: 0
CS/HB 1093	Favorable With Committee Substitute	Yeas: 15	Nays: 0
	Amendment 763505	Adopted Without Objection	
	Amendment 773065	Adopted Without Objection	
CS/HB 1159	Temporarily Deferred		
CS/CS/HB 1315	Favorable With Committee Substitute	Yeas: 13	Nays: 0
	Amendment 453945	Adopted Without Objection	
HB 4031	Favorable	Yeas: 14	Nays: 0
HB 7129	Favorable With Committee Substitute	Yeas: 13	Nays: 0
	Amendment 225723	Adopted Without Objection	
	Amendment	Withdrawn	
	Amendment to Strike all amendment by Rep.		
	Fasano		
HB 7139	Favorable With Committee Substitute	Yeas: 16	Nays: 0
	Amendment 673323	Adopted Without Objection	
HB 7151	Favorable	Yeas: 17	Nays: 0

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

Summary: (continued)

Health & Human Services Committee

Tuesday April 16, 2013 09:00 am

HB 7153 Favorable With Committee Substitute

Yeas: 13 Nays: 0

Amendment 236069 Adopted as Amended

Amendment 495975 Adopted Without Objection

Amendment 742705 Adopted Without Objection

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

Attendance:

	<i>Present</i>	<i>Absent</i>	<i>Excused</i>
Richard Corcoran (Chair)	X		
Larry Ahern	X		
Gwyndolen Clarke-Reed	X		
W. Travis Cummings	X		
Katie Edwards	X		
Mike Fasano	X		
Joseph Gibbons	X		
Gayle Harrell	X		
Mia Jones	X		
Shevrin Jones	X		
Mark Pafford	X		
Jimmy Patronis	X		
Cary Pigman	X		
Ronald Renuart			X
Kenneth Roberson	X		
Elaine Schwartz	X		
John Tobia	X		
John Wood	X		
Totals:	17	0	1

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/CS/HB 125 : Program of All-inclusive Care for the Elderly (PACE)

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 14		Total Nays: 0			

CS/CS/HB 125 Amendments

Amendment 594835

Adopted Without Objection

Appearances:

Barton, Terri (General Public) - Waive In Support
 PACE Partners of NE Florida
 4250 Lakeside Dr.
 Jacksonville Fl
 Phone: (904) 705-3127

Beck, Robert (Lobbyist) - Waive In Support
 Aging True
 205 S. Adams St.
 Tallahassee FL 32301
 Phone: 850) 766-1410

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM



Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER		

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee

3 Representative Smith offered the following:

4

5 **Amendment**

6 Remove lines 77-81 and insert:

7 Section 4. Notwithstanding any other provision of law, the
 8 Agency for Health Care Administration may not issue additional
 9 contracts for PACE projects until the statewide managed long-
 10 term care program is re-procured or October 1, 2018, whichever
 11 occurs first.

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 301 : Cancer Treatment

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones	X				
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia		X			
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 14		Total Nays: 1			

Appearances:

Schimpf, Nanette (General Public) - Proponent
 Community Health Charities of Florida
 3719 Sawllowtail Trace
 Tallahassee Florida 32309
 Phone: (850) 907-0959

Sheffield, Patrick (General Public) - Proponent
 1951 N. Meridian Rd.
 Tallahassee Florida 32303
 Phone: (850) 843-3778

Mahony, Rebecca - Waive In Support
 Alliance for Access to Cancer Care
 62 Greenleaf Ln
 Crawfordville FL 32327

Jacobs, Jordan (General Public) - Waive In Support
 2011 Delta Blvd.
 Tallahassee FL 32303
 Phone: (850) 224-0174

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 301 : Cancer Treatment (continued)

Appearances: (continued)

Pounders, Eric (General Public) - Waive In Support

Alliance for Access to Cancer Care
2152 Delta Way
Tallahassee Florida 32303
Phone: (727) 409-2673

Morse, Stephen (General Public) - Waive In Support

Alliance for Access to Cancer Care
1280 Kissimmee St., 101C
Tallahassee FL 32310

Francoeur, Jeri - Proponent

Susan G. Komen and Access to Cancer Care
Sharon Terrace
Ormond Beach FL 32174
Phone: (386) 295-1554

Green, Carole (Lobbyist) - Waive In Support

Florida Cancer Specialists
P.O. Box 07463
Fort Myers Florida 33919
Phone: (850) 590-2206

Martin, Merritt (Lobbyist) - Waive In Support

Moffitt Cancer Center
12902 Magnolia Dr
Tampa FL 33612
Phone: (813) 240-3454

Nuland, Chris (Lobbyist) - Waive In Support

Florida Chapter, American College of Physicians
1000 Riverside Avenue, #115
Jacksonville Florida 32204
Phone: (904) 355-1555

Mixon, Pat (Lobbyist) - Waive In Support

Florida Academy of Physician Assistants
119 East Park Avenue
Tallahassee FL 32308
Phone: (850) 528-4442

Sherer, Matt (General Public) - Proponent

Tallahassee Memorial Healthcare
1775 One Healing Place
Tallahassee FL 32308
Phone: (850) 431-5038

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COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 301 : Cancer Treatment (continued)

Appearances: (continued)

Miller, Holly (Lobbyist) - Waive In Support
Florida Medical Association
Tallahassee Florida 32308
Phone: (850) 224-6496

Winn, Stephen (Lobbyist) - Waive In Support
Florida Osteopathic Medical Association
2007 Apalachee Pky.
Tallahassee FL 32301
Phone: (850) 878-7364

Hatcher, Ann - Waive In Support
TMH Cancer Center
1775 One Healing Place
Tallahassee FL 32308
Phone: (850) 431-3203

Reid, Ryan (Lobbyist) - Waive In Support
American Cancer Society, Florida Division, Inc
3709 W Jetton Ave
Tampa FL 33629
Phone: (813) 813-4015

Quintero, Nicole - Proponent
8764 NW 110 Ln
Hialeah FL 33018
Phone: (786) 859-6979

Cruz, Caridad - Proponent
9471 NW 114 Lane
Hialeah Gardens FL 33015

Cox, Courtney (General Public) - Waive In Support
FI Breast Cancer Foundation
11355 Turkey Roost Rd.
Tallahassee FL 32317
Phone: (850) 559-0708

Akin, Jim - Waive In Support
National Association of Social Workers - FI
1931 Dellwood Drive
Tallahassee FI 32303
Phone: (850) 224-2400

McFaddin, Logan (Lobbyist) (State Employee) - Waive In Support
Department of Financial Services
LL-26, The Capitol
Tallahassee FL 32399
Phone: (850) 413-2890

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COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 301 : Cancer Treatment (continued)

Appearances: (continued)

Rodriguez, Fernando (General Public) - Waive In Support
4025 Deer Lane Dr.
Tallahassee Florida 32312
Phone: (850) 894-8779

Read, Emily (General Public) - Waive In Support
5320 Saint Ives Lane
Tallahassee FL 32309
Phone: (850) 224-0174

Spillman, Katie (General Public) - Waive In Support
niece, friend, granddaughter of cancer survivors
2011 Delta Blvd
Tallahassee FI 32303
Phone: (850) 224-0174

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COMMITTEE MEETING REPORT
Health & Human Services Committee
4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/CS/HB 317 : Mental Health Treatment

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed			X		
W. Travis Cummings	X				
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis	X				
Cary Pigman			X		
Ronald Renuart			X		
Kenneth Roberson				X	
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 13		Total Nays: 0			

Appearances:

Speiser, Mark (State Employee) - Information Only
 Broward County Courthouse
 Ft Lauderdale Fl
 Phone: (954) 831-7805

Akin, Jim (General Public) - Waive In Support
 National Association of Social Workers - Fl
 1931 Dellwood Dr.
 Tallahassee Fl 32303
 Phone: (850) 224-2400

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COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 411 : Children's Initiatives

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford			X		
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 13		Total Nays: 0			

CS/HB 411 Amendments

Amendment 200727

Adopted Without Objection

Appearances:

Heggins, Winifred - Waive In Support
 Florida Children's Initiatives
 111 N. Gadsden St.
 Tallahassee FL 32301
 Phone: (850) 933-2846

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM



Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED _____ (Y/N)
ADOPTED AS AMENDED _____ (Y/N)
ADOPTED W/O OBJECTION (Y/N)
FAILED TO ADOPT _____ (Y/N)
WITHDRAWN _____ (Y/N)
OTHER _____

1 Committee/Subcommittee hearing bill: Health & Human Services
2 Committee

3 Representative Fullwood offered the following:

Amendment (with title amendment)

6 Remove everything after the enacting clause and insert:

7 Section 1. Present subsection (9) of section 409.147,
8 Florida Statutes, is renumbered as subsection (11) and amended,
9 and new subsections (9) and (10) are added to that section, to
10 read:

11 409.147 Children's initiatives.—

12 (9) CREATION OF THE NEW TOWN SUCCESS ZONE.—

13 (a) There is created within the City of Jacksonville
14 Council District 9 in Duval County a 10-year project that shall
15 be managed by an entity organized as a corporation not for
16 profit that is registered, incorporated, organized, and operated
17 in compliance with chapter 617. The New Town Success Zone is not
18 subject to control, supervision, or direction by any department
19 of the state in any manner. The Legislature determines, however,



Amendment No.

20 that public policy dictates that the corporation operate in the
21 most open and accessible manner consistent with its public
22 purpose. Therefore, the Legislature declares that the
23 corporation is subject to chapter 119, relating to public
24 records, chapter 286, relating to public meetings and records,
25 and chapter 287, relating to procurement of commodities or
26 contractual services.

27 (b) This initiative is designed to encompass an area that
28 is large enough to include all of the necessary components of
29 community life, including, but not limited to, schools, places
30 of worship, recreational facilities, commercial areas, and
31 common space, yet small enough to allow programs and services to
32 reach every member of the neighborhood who is willing to
33 participate in the project.

34 (10) CREATION OF THE PARRAMORE KIDZ ZONE.-

35 (a) There is created within the City of Orlando in Orange
36 County a 10-year project managed by an entity organized as a
37 corporation not for profit that is registered, incorporated,
38 organized, and operated in compliance with chapter 617. The
39 Parramore Kidz Zone program is not subject to the control,
40 supervision, or direction of any department of the state. The
41 Legislature determines, however, that public policy dictates
42 that the corporation operate in the most open and accessible
43 manner consistent with its public purpose. Therefore, the
44 Legislature specifically declares that the corporation is
45 subject to chapter 119, relating to public records, chapter 286,
46 relating to public meetings and records, and chapter 287,
47 relating to procurement of commodities or contractual services.



Amendment No.

48 (b) This initiative is designed to encompass an area that
49 is large enough to include all of the necessary components of
50 community life, including, but not limited to, schools, places
51 of worship, recreational facilities, commercial areas, and
52 common space, yet small enough to allow programs and services to
53 reach every member of the neighborhood who is willing to
54 participate in the project.

55 (11)(9) IMPLEMENTATION.-

56 (a) The Miami Children's Initiative, Inc., the New Town
57 Success Zone, and the Parramore Kidz Zone have been designated
58 as Florida Children's Initiatives consistent with the
59 legislative intent and purpose of s. 16, chapter 2009-43, Laws
60 of Florida, and as such shall each assist the disadvantaged
61 areas of the state in creating a community-based service network
62 and programming that develops, coordinates, and provides quality
63 education, accessible health care, youth development programs,
64 opportunities for employment, and safe and affordable housing
65 for children and families living within their boundaries.

66 (b) In order to implement this section, the Miami
67 Children's Initiative, Inc., and the Department of Children and
68 Families ~~Family Services~~ shall contract with a not-for-profit
69 corporation, to work in collaboration with the governing body to
70 adopt the resolution described in subsection (4), to establish
71 the planning team as provided in subsection (5), and to develop
72 and adopt the strategic community plan as provided in subsection
73 (6). The not-for-profit corporation is also responsible for the
74 development of a business plan and for the evaluation, fiscal
75 management, and oversight of the Miami Children's Initiative,



Amendment No.
Inc.

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Section 2. This act shall take effect July 1, 2013.

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

Remove everything before the enacting clause and insert:

A bill to be entitled

An act relating to children's initiatives; amending s. 409.147, F.S.; establishing the New Town Success Zone in Duval County and the Parramore Kidz Zone in Orange County; providing for the projects to be managed by corporations not for profit that are not subject to control, supervision, or direction by any department of the state; requiring the corporations to be subject to state public records and meeting requirements and procurement of commodities and contractual services requirements; requiring designated children's initiatives to assist in the creation of community-based service networks and programming that provides certain services for children and families residing in disadvantaged areas of the state; providing for evaluation, fiscal management, and oversight of the projects; providing an effective date.

COMMITTEE MEETING REPORT
Health & Human Services Committee
4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 631 : Transactions in Fresh Produce Markets

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford			X		
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 13		Total Nays: 0			

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COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 639 : Practitioners

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings	X				
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis	X				
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 16		Total Nays: 0			

Appearances:

Miller, Holly (Lobbyist) - Waive In Support
 Florida Medical Association
 1430 E. Piedmont Drive
 Tallahassee Florida 32308
 Phone: (850) 224-6496

Farrar, Matthew (Lobbyist) - Waive In Support
 Intervention Project for Nurses
 2910 Kerry Forest Pkwy D4-368
 Tallahassee FL 32309
 Phone: (850) 832-1763

Winn, Stephen (Lobbyist) - Waive In Support
 Florida Osteopathic Medical Association
 2007 Apalachee Pky
 Tallahassee FL 32301
 Phone: (850) 878-7463

Rivenbark, M.D., Judy (General Public) - Waive In Support
 PRN of FL
 P.O. Box 1020
 Fernandina Beach FL 32035
 Phone: (800) 888-8776

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COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 817 : Health Care

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern		X			
Gwyndolen Clarke-Reed		X			
W. Travis Cummings	X				
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell		X			
Mia Jones	X				
Shevrin Jones	X				
Mark Pafford		X			
Jimmy Patronis	X				
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz		X			
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 12	Total Nays: 5				

CS/HB 817 Amendments

Amendment 651199

Adopted as Amended

Amendment 863079

Adopted

Amendment 433501

Adopted

Appearances:

Shoupe, Clinton (Lobbyist) - Waive In Opposition
 BayCare Health Systems
 16255 Bay Vista Dr.
 Clearwater FL 33760
 Phone: (727)519-1885

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COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 817 : Health Care (continued)

Appearances: (continued)

Gorrie, Jan (Lobbyist) - Opponent
Safety Net Hospital Alliance of Florida
403 E. Park Ave.
Tallahassee FL 32301
Phone: (813) 334-5288

Opponent of Strike-All (barcode 651199)
Cole, Melissa D. - Opponent
Tampa General Hospital
Tampa FL
Phone: (813) 844-4395

Proponent of Strike-All (barcode 651199)
Bain, Carlos (General Public) - Proponent
14265 SW 62nd Street
Miami FL 33183
Phone: (786) 800-6238

Opponent of Strike-All (barcoded 651199)
Gill, MD, Karan (General Public) - Opponent
Florida Committee on Trauma
1000 Riverside Ave., #115
Jacksonville FL 32204
Phone: (904) 355-1555

Opponent of Strike-All (barcode 651199)
Nuland, Chris (Lobbyist) - Opponent
Florida Chapter, American College of Physicians
1000 Riverside Avenue, #115
Jacksonville Florida 32204
Phone: (904) 355-1555

Opponent of Strike-All (barcode 651199)
Bell, Bill (Lobbyist) - Opponent
Florida Hospital Association
306 E. College Ave.
Tallahassee FL 32301
Phone: (850) 222-9800

Opponent of Strike-All (barcode 651199)
Tepas, MD, JJ - Opponent
University of Florida
653 West 8th Street
Jacksonville FL 32209
Phone: (904) 244-3915

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COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 817 : Health Care (continued)

Appearances: (continued)

Proponent of Strike-All (barcode 651199)

Barquist, MD, Erik (State Employee) - Proponent

Osceola Regional MC

52 Riley Road, #310

Celebration Fl 34747

Phone: (407) 518-3240

Proponent of Strike-All (barcode 651199)

Ecenia, Steve (Lobbyist) - Proponent

HCA

P.O. Box 551

Tallahassee FL 32301

Phone: (850) 681-6788

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM



Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input checked="" type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input checked="" type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER		

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee
 3 Representative Gaetz offered the following:

Amendment (with title amendment)

6 Remove everything after the enacting clause and insert:
 7 Section 1. Paragraphs (f) and (p) of subsection (1) of
 8 section 154.11, Florida Statutes, are amended to read:

9 154.11 Powers of board of trustees.—

10 (1) The board of trustees of each public health trust
 11 shall be deemed to exercise a public and essential governmental
 12 function of both the state and the county and in furtherance
 13 thereof it shall, subject to limitation by the governing body of
 14 the county in which such board is located, have all of the
 15 powers necessary or convenient to carry out the operation and
 16 governance of designated health care facilities, including, but
 17 without limiting the generality of, the foregoing:

18 (f) To lease, either as lessee or lessor, or rent for any
 19 number of years and upon any terms and conditions real property,



Amendment No.

20 except that the board shall not lease or rent, as lessor, any
21 real property except in accordance with the requirements of s.
22 125.35 [F. S. 1973] or unless for the lease of office space
23 controlled by the public health trust.

24 (p) To employ legal counsel, as the trust may see fit, and
25 in its sole discretion.

26 Section 2. Section 395.40, Florida Statutes, is repealed.

27 Section 3. Subsections (7), (10), and (14) of section
28 395.4001, Florida Statutes, are amended to read:

29 395.4001 Definitions.—As used in this part, the term:

30 (7) "Level II trauma center" means a trauma center that:

31 (a) ~~Is verified by the department to be in substantial~~
32 ~~compliance with Level II trauma center standards and has been~~
33 ~~approved by the department to operate as a Level II trauma~~
34 ~~center~~ Holds a valid certificate of trauma center verification
35 from the American College of Surgeons except as otherwise
36 provided in s. 395.4025.

37 (b) Serves as a resource facility to general hospitals
38 through shared outreach, education, and quality improvement
39 activities.

40 (c) Participates in an inclusive system of trauma care.

41 (10) "Provisional trauma center" means a hospital that has
42 been verified by the department to be in substantial compliance
43 with the requirements in s. 395.4025 and has been approved by
44 the department to operate as a provisional Level I trauma
45 center, ~~Level II trauma center,~~ or pediatric trauma center or
46 for a provisional Level II trauma center verified and approved
47 prior to July 1, 2013.



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48 (14) "Trauma center" means a hospital that has been
49 verified by the department to be in substantial compliance with
50 the requirements in s. 395.4025 and has been approved by the
51 department to operate as a Level I trauma center, ~~Level II~~
52 ~~trauma center~~, or pediatric trauma center, or is designated as a
53 Level II trauma center based on documentation of a valid
54 certificate of trauma center verification from the American
55 College of Surgeons or as otherwise provided in s. 395.4025.

56 Section 4. Paragraph (b) of subsection (1) and (2) of
57 section 395.401, Florida Statutes, are amended to read:

58 395.401 Trauma services system plans; approval of trauma
59 centers and pediatric trauma centers; procedures; renewal.—

60 (1)

61 (b) The local and regional trauma agencies shall develop
62 and submit to the department plans for local and regional trauma
63 services systems. The plans must include, at a minimum, the
64 following components:

65 1. The organizational structure of the trauma system.

66 2. Prehospital care management guidelines for triage and
67 transportation of trauma cases.

68 3. Flow patterns of trauma cases and transportation system
69 design and resources, including air transportation services,
70 provision for interfacility trauma transfer, and the prehospital
71 transportation of trauma victims. The trauma agency shall plan
72 for the development of a system of transportation of trauma
73 alert victims to trauma centers where the distance or time to a
74 trauma center or transportation resources diminish access by
75 trauma alert victims.



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76 ~~4. The number and location of needed trauma centers based~~
77 ~~on local needs, population, and location and distribution of~~
78 ~~resources.~~

79 4.5. Data collection regarding system operation and
80 patient outcome.

81 5.6. Periodic performance evaluation of the trauma system
82 and its components.

83 6.7. The use of air transport services within the
84 jurisdiction of the local trauma agency.

85 7.8. Public information and education about the trauma
86 system.

87 8.9. Emergency medical services communication system usage
88 and dispatching.

89 9.10. The coordination and integration between the trauma
90 center and other acute care hospitals.

91 10.11. Medical control and accountability.

92 11.12. Quality control and system evaluation.

93 (2) The department shall adopt, by rule, standards for
94 verification of Level I and pediatric trauma centers based on
95 national guidelines, including those established by the American
96 College of Surgeons entitled "Hospital and Prehospital Resources
97 for Optimal Care of the Injured Patient" and published
98 appendices thereto. Standards specific to pediatric trauma
99 referral centers shall be developed in conjunction with
100 Children's Medical Services and adopted by rule of the
101 department.

102 Section 5. Subsection (1) of section 395.4015, Florida
103 Statutes, is amended to read:



Amendment No.

104 395.4015 State regional trauma planning; trauma regions.—
105 (1) The department shall establish a state trauma system
106 plan. As part of the state trauma system plan, the department
107 shall establish trauma regions that cover all geographical areas
108 of the state and have boundaries that are coterminous with the
109 boundaries of the regional domestic security task forces
110 established under s. 943.0312. These regions may serve as the
111 basis for the development of department-approved local or
112 regional trauma plans for the transportation of trauma patients
113 and the coordination of activities between trauma centers, acute
114 care hospitals, emergency service providers, law enforcement
115 agencies, and local governments. However, Such regional plans
116 shall recognize trauma service areas that reflect well
117 established patient flow patterns. the The delivery of trauma
18 services by or in coordination with a trauma agency established
119 before July 1, 2004, may continue in accordance with public and
120 private agreements and operational procedures entered into as
121 provided in s. 395.401.

122 Section 6. Section 395.402, Florida Statutes, is repealed.

123 Section 7. Section 395.4025, Florida Statutes, is amended
124 to read:

125 395.4025 Trauma centers; ~~selection~~ designation; quality
126 assurance; records.—

127 (1) ~~For purposes of developing a system of trauma centers,~~
128 ~~the department shall use the 19 trauma service areas established~~
129 ~~in s. 395.402. Within each service area and based on the state~~
130 ~~trauma system plan, the local or regional trauma services system~~
131 ~~plan, and recommendations of the local or regional trauma~~



Amendment No.

132 | ~~agency, the department shall establish the approximate number of~~
133 | ~~trauma centers needed to ensure reasonable access to high-~~
134 | ~~quality trauma services. The department shall select those~~
135 | ~~hospitals that are to be recognized as trauma centers.~~

136 | ~~(2) (a) The department shall annually notify each acute~~
137 | ~~care general hospital and each local and each regional trauma~~
138 | ~~agency in the state that the department is accepting letters of~~
139 | ~~intent from hospitals that are interested in becoming trauma~~
140 | ~~centers. In order to be considered by the department, a hospital~~
141 | ~~that operates within the geographic area of a local or regional~~
142 | ~~trauma agency must certify that its intent to operate as a~~
143 | ~~trauma center is consistent with the trauma services plan of the~~
144 | ~~local or regional trauma agency, as approved by the department,~~
145 | ~~if such agency exists. Letters of intent must be postmarked no~~
146 | ~~later than midnight October 1.~~

147 | ~~(b) By October 15, the department shall send to all~~
148 | ~~hospitals that submitted a letter of intent an application~~
149 | ~~package that will provide the hospitals with instructions for~~
150 | ~~submitting information to the department for selection as a~~
151 | ~~trauma center. The standards for trauma centers provided for in~~
152 | ~~s. 395.401(2), as adopted by rule of the department, shall serve~~
153 | ~~as the basis for these instructions. Applicants for a Level I or~~
154 | ~~pediatric trauma center designation shall submit an application~~
155 | ~~developed by the department and documentation sufficient to~~
156 | ~~demonstrate compliance with the standards adopted by the~~
157 | ~~department pursuant to s. 395.401(2) and subsection (2).~~

158 | ~~(c) (b) In order to be considered by the department,~~
159 | ~~applications from those hospitals seeking selection as trauma~~



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160 ~~centers, including those current verified trauma centers that~~
161 ~~seek a change or redesignation in approval status as a trauma~~
162 ~~center, must be received by the department no later than the~~
163 ~~close of business on April 1. The department shall conduct a~~
164 ~~provisional review of each application for the purpose of~~
165 ~~determining that the hospital's application is complete and that~~
166 ~~the hospital has the critical elements required for a trauma~~
167 ~~center. This critical review will be based on trauma center~~
168 ~~standards and shall include, but not be limited to, a review of~~
169 ~~whether the hospital has:~~

170 ~~1. Equipment and physical facilities necessary to provide~~
171 ~~trauma services.~~

172 ~~2. Personnel in sufficient numbers and with proper~~
173 ~~qualifications to provide trauma services.~~

74 ~~3. An effective quality assurance process.~~

175 ~~4. Submitted written confirmation by the local or regional~~
176 ~~trauma agency that the hospital applying to become a trauma~~
177 ~~center is consistent with the plan of the local or regional~~
178 ~~trauma agency, as approved by the department, if such agency~~
179 ~~exists.~~

180 ~~(d)1. Notwithstanding other provisions in this section,~~
181 ~~the department may grant up to an additional 18 months to a~~
182 ~~hospital applicant that is unable to meet all requirements as~~
183 ~~provided in paragraph (c) at the time of application if the~~
184 ~~number of applicants in the service area in which the applicant~~
185 ~~is located is equal to or less than the service area allocation,~~
186 ~~as provided by rule of the department. An applicant that is~~
187 ~~granted additional time pursuant to this paragraph shall submit~~



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188 ~~a plan for departmental approval which includes timelines and~~
189 ~~activities that the applicant proposes to complete in order to~~
190 ~~meet application requirements. Any applicant that demonstrates~~
191 ~~an ongoing effort to complete the activities within the~~
192 ~~timelines outlined in the plan shall be included in the number~~
193 ~~of trauma centers at such time that the department has conducted~~
194 ~~a provisional review of the application and has determined that~~
195 ~~the application is complete and that the hospital has the~~
196 ~~critical elements required for a trauma center.~~

197 ~~2. Timeframes provided in subsections (1) (8) shall be~~
198 ~~stayed until the department determines that the application is~~
199 ~~complete and that the hospital has the critical elements~~
200 ~~required for a trauma center.~~

201 ~~(3) After April 30, Any hospital that submitted an~~
202 ~~application found acceptable by the department based on~~
203 ~~provisional review shall be eligible to operate as a provisional~~
204 ~~trauma center. A trauma center designated as a Level II trauma~~
205 ~~center by the department as of July 1, 2013, shall retain such~~
206 ~~designation unless the department determines the hospital is no~~
207 ~~longer able to comply with the clinical standards and~~
208 ~~capabilities for such centers or the designation expires. After~~
209 ~~the designation pursuant to s. 395.401(2) and subsection (2)~~
210 ~~expires, the Level II trauma center shall be re-designated when~~
211 ~~the department receives documentation of the hospital holding a~~
212 ~~valid certificate of trauma center verification from the~~
213 ~~American College of Surgeons.~~

214 ~~(c) A Level II trauma center holding a provisional license~~
215 ~~as of July 1, 2013, may complete the application process to~~



Amendment No.

216 become a verified Level II trauma center pursuant to subsection
217 (2), and if designated as such, may maintain the designation of
218 a Level II trauma center for 7 years from the date of approval
219 and verification by the department. Thereafter, the trauma
220 center must hold a valid certificate of trauma center
221 verification from the American College of Surgeons.

222 (d) Any hospital seeking a Level II trauma center
223 designation after July 1, 2013, shall be designated by the
224 department when the department receives documentation of the
225 hospital holding a valid certificate of trauma center
226 verification from the American College of Surgeons.

227 ~~(4)~~(2) The department shall approve applications from
228 hospitals seeking designation as trauma centers, including
229 current verified trauma centers that seek a change or
30 redesignation in approval status as a trauma center. The
231 department shall conduct a provisional review of each
232 application for the purpose of determining that the hospital's
233 application is complete and that the hospital has the critical
234 elements required for a trauma center. This critical review will
235 be based on trauma center standards pursuant to s. 395.401(2)
236 and shall include, but not be limited to, a review of whether
237 the hospital has:

238 1. Equipment and physical facilities necessary to provide
239 trauma services.

240 2. Personnel in sufficient numbers and with proper
241 qualifications to provide trauma services.

242 3. An effective quality assurance process.



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243 4. Submitted written confirmation by the local or regional
244 trauma agency that the hospital applying to become a trauma
245 center is consistent with the plan of the local or regional
246 trauma agency, as approved by the department, if such agency
247 exists.

248 (3) Any hospital that submitted an application found
249 acceptable by the department based on provisional review shall
250 be eligible to operate as a provisional trauma center.

251 (4) Between May 1 and October 1 of each year, The
252 department shall conduct an in-depth evaluation of all
253 applications found acceptable in the provisional review. The
254 applications shall be evaluated against clinical criteria
255 enumerated in the application packages as provided to the
256 hospitals by the department.

257 (5) Beginning October 1 of each year and ending no later
258 than June 1 of the following year, A review team of out-of-state
259 experts assembled by the department shall make onsite visits to
260 all provisional trauma centers. The department shall develop a
261 survey instrument to be used by the expert team of reviewers.
262 The instrument shall include objective criteria and guidelines
263 for reviewers based on existing trauma center standards pursuant
264 to s. 395.401(2) and subsection (2) such that all trauma centers
265 are assessed equally. The survey instrument shall also include a
266 uniform rating system that will be used by reviewers to indicate
267 the degree of compliance of each trauma center with specific
268 standards, and to indicate the quality of care provided by each
269 trauma center as determined through an audit of patient charts.
270 ~~In addition,~~ Hospitals being considered as provisional trauma



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271 centers shall meet all the requirements of a trauma center and
272 ~~shall be located in a trauma service area that has a need for~~
273 ~~such a trauma center.~~

274 (6) Based on recommendations from the review team, the
275 department shall approve hospitals for designation as select
276 ~~trauma centers by July 1. An applicant for designation as a~~
277 ~~trauma center may request an extension of its provisional status~~
278 ~~if it submits a corrective action plan to the department. The~~
279 ~~corrective action plan must demonstrate the ability of the~~
280 ~~applicant to correct deficiencies noted during the applicant's~~
281 ~~onsite review conducted by the department between the previous~~
282 ~~October 1 and June 1. The department may extend the provisional~~
283 ~~status of an applicant for designation as a trauma center~~
284 ~~through December 31 if the applicant provides a corrective~~
285 ~~action plan acceptable to the department. The department or a~~
286 ~~team of out of state experts assembled by the department shall~~
287 ~~conduct an onsite visit on or before November 1 to confirm that~~
288 ~~the deficiencies have been corrected. The provisional trauma~~
289 ~~center is responsible for all costs associated with the onsite~~
290 ~~visit in a manner prescribed by rule of the department. By~~
291 ~~January 1, the department must approve or deny the application~~
292 ~~of any provisional applicant granted an extension. Each Level I~~
293 ~~or pediatric trauma center shall be granted a 7-year approval~~
294 ~~period during which time it must continue to maintain trauma~~
295 ~~center standards and acceptable patient outcomes as determined~~
296 ~~by department rule. An approval for a Level I or pediatric~~
297 ~~trauma center designation, unless sooner suspended or revoked,~~
298 ~~automatically expires 7 years after the date of issuance and is~~



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299 renewable upon application for renewal as prescribed by rule of
300 the department. Renewals for Level II designations are
301 dependent upon the American College of Surgeons renewal cycle.

302 (7) Any hospital that wishes to protest a decision made by
303 the department based on the department's preliminary or in-depth
304 review of applications or on the recommendations of the site
305 visit review team pursuant to this section shall proceed as
306 provided in chapter 120. Hearings held under this subsection
307 shall be conducted in the same manner as provided in ss. 120.569
308 and 120.57. Cases filed under chapter 120 may combine all
309 disputes between parties.

310 (8) Notwithstanding any provision of chapter 381, a
311 hospital licensed under ss. 395.001-395.3025 that operates a
312 trauma center may not terminate or substantially reduce the
313 availability of trauma service without providing at least 180
314 days' notice of its intent to terminate such service. Such
315 notice shall be given to the department, to all affected local
316 or regional trauma agencies, and to all trauma centers,
317 hospitals, and emergency medical service providers in the trauma
318 service area. The department shall adopt by rule the procedures
319 and process for notification, duration, and explanation of the
320 termination of trauma services.

321 (9) Except as otherwise provided in this subsection, the
322 department or its agent may collect trauma care and registry
323 data, as prescribed by rule of the department, from trauma
324 centers, hospitals, emergency medical service providers, local
325 or regional trauma agencies, or medical examiners for the
326 purposes of evaluating trauma system effectiveness, ensuring



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327 compliance with the standards, and monitoring patient outcomes.
328 A trauma center, hospital, emergency medical service provider,
329 medical examiner, or local trauma agency or regional trauma
330 agency, or a panel or committee assembled by such an agency
331 under s. 395.50(1) may, but is not required to, disclose to the
332 department patient care quality assurance proceedings, records,
333 or reports. However, the department may require a local trauma
334 agency or a regional trauma agency, or a panel or committee
335 assembled by such an agency to disclose to the department
336 patient care quality assurance proceedings, records, or reports
337 that the department needs solely to conduct quality assurance
338 activities under s. 395.4015, or to ensure compliance with the
339 quality assurance component of the trauma agency's plan approved
340 under s. 395.401. The patient care quality assurance
341 proceedings, records, or reports that the department may require
342 for these purposes include, but are not limited to, the
343 structure, processes, and procedures of the agency's quality
344 assurance activities, and any recommendation for improving or
345 modifying the overall trauma system, if the identity of a trauma
346 center, hospital, emergency medical service provider, medical
347 examiner, or an individual who provides trauma services is not
348 disclosed.

349 (10) Out-of-state experts assembled by the department to
350 conduct onsite visits are agents of the department for the
351 purposes of s. 395.3025. An out-of-state expert who acts as an
352 agent of the department under this subsection is not liable for
353 any civil damages as a result of actions taken by him or her,



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354 unless he or she is found to be operating outside the scope of
355 the authority and responsibility assigned by the department.

356 (11) Onsite visits by the department or its agent may be
357 conducted at any reasonable time and may include but not be
358 limited to a review of records in the possession of trauma
359 centers, hospitals, emergency medical service providers, local
360 or regional trauma agencies, or medical examiners regarding the
361 care, transport, treatment, or examination of trauma patients.

362 (12) Patient care, transport, or treatment records or
363 reports, or patient care quality assurance proceedings, records,
364 or reports obtained or made pursuant to this section, s.
365 395.3025(4)(f), s. 395.401, s. 395.4015, s. 395.402, s. 395.403,
366 s. 395.404, s. 395.4045, s. 395.405, s. 395.50, or s. 395.51
367 must be held confidential by the department or its agent and are
368 exempt from the provisions of s. 119.07(1). Patient care quality
369 assurance proceedings, records, or reports obtained or made
370 pursuant to these sections are not subject to discovery or
371 introduction into evidence in any civil or administrative
372 action.

373 (13) The department may adopt, by rule, the ~~procedures and~~
374 ~~process by which it will select~~ designate Level I and pediatric
375 trauma centers. Such procedures and process must be used in
376 ~~annually selecting~~ designating trauma centers and must be
377 consistent with subsections (1)-(8) ~~except in those situations~~
378 ~~in which it is in the best interest of, and mutually agreed to~~
379 ~~by, all applicants within a service area and the department to~~
380 ~~reduce the timeframes.~~



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381 ~~(14) Notwithstanding any other provisions of this section~~
382 ~~and rules adopted pursuant to this section, until the department~~
383 ~~has conducted the review provided under s. 395.402, only~~
384 ~~hospitals located in trauma services areas where there is no~~
385 ~~existing trauma center may apply.~~

386 Section 8. This act shall take effect July 1, 2013.

387 -----
388 **T I T L E A M E N D M E N T**

389 Remove everything before the enacting clause and insert:
390 Act relating to healthcare; amending s. 154.11, F.S.;
391 providing an exception for leases of office space
392 controlled by the public health trust; providing an
393 discretion to the trust to employ legal counsel; repealing
394 s. 395.40, F.S.; relating to legislative findings and
95 intent; amending s. 395.4001; F.S., revising definitions;
396 amending s. 395.401, F.S.; deleting requirements for trauma
397 plan components; limiting the department's rule-making
398 authority to Level I and pediatric trauma centers; amending
399 s. 395.4015, F.S.; revising the criteria for state regional
400 trauma plans; repealing s. 395.402; F.S.; amending s.
401 395.4025, F.S.; deleting the trauma center selection
402 requirements; clarifying duties of the department to
403 approve trauma centers; specifying designation requirements
404 for Level II trauma centers; deleting specific dates;
405 specifying documentation requirements for designation;
406 deleting extensions for applicants with provisional status;
407 providing an exemption for trauma centers granted
408 provisional Level II status; revising the renewal process



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409 | for Level I, Level II, pediatric and provisional trauma
410 | centers; providing the department authority to adopt rules
411 | to designate Level I and pediatric trauma centers;
412 | providing an effective date.



Amendment No. a1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input checked="" type="checkbox"/> (Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/> (Y/N)
ADOPTED W/O OBJECTION	<input type="checkbox"/> (Y/N)
FAILED TO ADOPT	<input type="checkbox"/> (Y/N)
WITHDRAWN	<input type="checkbox"/> (Y/N)
OTHER	<input type="checkbox"/>

1 Committee/Subcommittee hearing bill: Health & Human Services
2 Committee

3 Representative Jones, M. offered the following:

4
5 **Amendment to Amendment (651199) by Representative (with**
6 **directory amendment)**

7 Between lines 121 and 122 of the amendment, insert:

8 (4) A hospital is only eligible for Level II trauma center
9 review and verification if the hospital is located in a rural
10 county. For the purposes of this this subsection, a "rural
11 county" means a county with boundaries that encompass a
12 population of 300 persons or fewer per square mile. Population
13 densities used in this subsection must be based upon the most
14 recent United States census.

15 (5) After July 1, 2013, a hospital seeking Level II trauma
16 center approval and verification may not receive such approval
17 and verification if the hospital is located within 75 miles of
18 an existing Level I trauma center.



Amendment No. a1

21
22
23
24
25
26
27
28

D I R E C T O R Y A M E N D M E N T

Remove lines 102-103 of the amendment and insert:

Section 5. Subsection (1) of section 395.4015, Florida Statutes, is amended and subsections (4) and (5) of that section are created to read:



Amendment No. b1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input checked="" type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
2 Committee
3 Representative Jones, M. offered the following:

Amendment to Amendment (651199) by Representative

6 Remove lines 204-213 of the amendment and insert:
7 ~~trauma center.~~

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 1071 : Health Care Accrediting Organizations

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings	X				
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones			X		
Mark Pafford	X				
Jimmy Patronis	X				
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 15		Total Nays: 0			

Appearances:

Winn, Stephen (Lobbyist) - Waive In Support
 Florida Osteopathic Medical Association
 2007 Apalachee Pky
 Tallahassee FL 32301
 Phone: (850) 878-7364

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 1093 : Volunteer Health Services

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones	X				
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 15		Total Nays: 0			

CS/HB 1093 Amendments

Amendment 763505

Adopted Without Objection

Amendment 773065

Adopted Without Objection

Appearances:

Winn, Stephen (Lobbyist) - Waive In Support
 Florida Osteopathic Medical Association
 2007 Apalachee Pky.
 Tallahassee FL 32301
 Phone: (850) 878-7364

Nuland, Chris (Lobbyist) - Waive In Support
 Florida Chapter, American College of Physicians
 1000 Riverside Avenue, #115
 Jacksonville Florida 32204
 Phone: (904) 355-1555

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 1093 : Volunteer Health Services (continued)

Appearances: (continued)

Miller, Holly (Lobbyist) - Waive In Support

Florida Medical Association

PO Box 10269

Tallahassee FL 32302

Phone: (850) 224-6496

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM



Amendment No. 1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	___	(Y/N)
ADOPTED AS AMENDED	___	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	___	(Y/N)
WITHDRAWN	___	(Y/N)
OTHER	_____	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee

3 Representative Hudson offered the following:

4

5 **Amendment (with title amendment)**

6 Remove line 18 and insert:

7 Section 1. Paragraphs (a) and (b) of subsection (1) of
 8 section 458.317, Florida Statutes, are amended to read:

9 458.317 Limited licenses.—

10 (1)(a) Any person desiring to obtain a limited license
 11 shall—

12 ~~1-~~ Submit to the board, ~~with~~ an application and fee not to
 13 exceed \$300, and demonstrate an affidavit stating that he or she
 14 has been licensed to practice medicine in any jurisdiction in
 15 the United States for at least 10 years and intends to practice
 16 only pursuant to the restrictions of a limited license granted
 17 pursuant to this section. However, a physician who is not fully
 18 retired in all jurisdictions may use a limited license only for
 19 noncompensated practice. If the person applying for a limited
 20 license submits a ~~notarized~~ statement from the employing agency



Amendment No. 1

21 or institution stating that he or she will not receive
22 compensation for any service involving the practice of medicine,
23 the application fee and all licensure fees shall be waived.
24 However, any person who receives a waiver of fees for a limited
25 license shall pay such fees if the person receives compensation
26 for the practice of medicine.

27 ~~2. Meet the requirements in s. 458.311(1)(b)(g) and (5).~~
28 ~~If the applicant graduated from medical school prior to 1946,~~
29 ~~the board or its appropriate committee may accept military~~
30 ~~medical training or medical experience as a substitute for the~~
31 ~~approved 1 year residency requirement in s. 458.311(1)(f).~~

32 ~~(b) After approval of an application under this section, no~~
33 ~~license shall be issued until the applicant provides to the~~
34 ~~board an affidavit that there have been no substantial changes~~
35 ~~in status since initial application.~~

36
37 Nothing herein limits in any way any policy by the board,
38 otherwise authorized by law, to grant licenses to physicians
39 duly licensed in other states under conditions less restrictive
40 than the requirements of this section. Notwithstanding the other
41 provisions of this section, the board may refuse to authorize a
42 physician otherwise qualified to practice in the employ of any
43 agency or institution otherwise qualified if the agency or
44 institution has caused or permitted violations of the provisions
45 of this chapter which it knew or should have known were
46 occurring.

47 Section 2. Subsections (1) and (6) of section 459.0075,
48 Florida Statutes, are amended to read:



Amendment No. 1

49 459.0075 Limited licenses.—

50 (1) Any person desiring to obtain a limited license shall:

51 (a) Submit to the board a licensure application and fee
52 required by this chapter. However, an osteopathic physician who
53 is not fully retired in all jurisdictions may use a limited
54 license only for noncompensated practice. If the person applying
55 for a limited license submits a notarized statement from the
56 employing agency or institution stating that she or he will not
57 receive monetary compensation for any service involving the
58 practice of osteopathic medicine, the application fee and all
59 licensure fees shall be waived. However, any person who receives
60 a waiver of fees for a limited license shall pay such fees if
61 the person receives compensation for the practice of osteopathic
62 medicine.

63 (b) Submit proof ~~an affidavit~~ that such osteopathic
64 physician has been licensed to practice osteopathic medicine in
65 any jurisdiction in the United States in good standing and
66 pursuant to law for at least 10 years.

67 (c) Complete an amount of continuing education established
68 by the board.

69 ~~(d) Within 60 days after receipt of an application for a~~
70 ~~limited license, the board shall review the application and~~
71 ~~issue the limited license or notify the applicant of denial.~~

72 ~~(6) Any person desiring a limited license shall meet all~~
73 ~~the requirements of s. 459.0055, except s. 459.0055(1)(d).~~

74 Section 3. Subsections (10) and (11) of section 766.1115,
75
76



Amendment No. 1

77
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82
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84

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

Remove line 2 and insert:

An act relating to volunteer health services; amending ss.
458.317 and 459.0075, F.S.; revising criteria required for
limited licensure for physicians; amending



Amendment No. 2

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
2 Committee

3 Representative Hudson offered the following:

4
5 **Amendment**

6 Remove lines 37-67 and insert:

7 (d) Patient selection and initial referral must be made
8 ~~solely~~ by the governmental contractor or the provider, ~~and the~~
9 ~~provider must accept all referred patients. However, the number~~
10 ~~of patients that must be accepted may be limited by the~~
11 ~~contract, and~~ Patients may not be transferred to the provider
12 based on a violation of the antidumping provisions of the
13 Omnibus Budget Reconciliation Act of 1989, the Omnibus Budget
14 Reconciliation Act of 1990, or chapter 395.

15 ~~(f) Patient care, including any followup or hospital care,~~
16 ~~is subject to approval by the governmental contractor.~~

17 ~~(f)(g)~~ The provider is subject to supervision and regular
18 inspection by the governmental contractor.
19



Amendment No. 2

20 A governmental contractor that is also a health care provider is
21 not required to enter into a contract under this section with
22 respect to the health care services delivered by its employees.

23 (8) REPORTING REPORT TO THE LEGISLATURE.—

24 (a) Annually, the department shall report to the President
25 of the Senate, the Speaker of the House of Representatives, and
26 the minority leaders and relevant substantive committee
27 chairpersons of both houses, summarizing the efficacy of access
28 and treatment outcomes with respect to providing health care
29 services for low-income persons pursuant to this section.

30 (b) The department shall provide an online listing of all
31 providers participating in this program and the number of
32 volunteer service hours and patient visits each provided. A
33 provider may request in writing to the department to be excluded
34 from the online listing.

35 (10) CONTINUING EDUCATION CREDIT.— Notwithstanding the
36 maximum allowable credit of 25 percent of continuing education
37 hours pursuant to s. 456.013(9), a provider may fulfill 1 hour
38 of continuing education credit by performing 1 hour of volunteer
39 services to the indigent as provided in this section, up to a
40 maximum of eight credit hours per licensure renewal period.

41

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/HB 1159 : Skilled Nursing Facilities

Temporarily Deferred

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/CS/HB 1315 : Independent Living

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford				X	
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 13	Total Nays: 0				

CS/CS/HB 1315 Amendments

Amendment 453945

Adopted Without Objection

Appearances:

Gordon, Martin (General Public) - Proponent
 Florida Youth Shine
 2424 W. Tharpe St.
 Tallahassee FL 32303
 Phone: (850) 489-4281

Carritz, Cole - Proponent
 7818 Centerville Rd
 Tallahassee FL 32309
 Phone: (850) 544-0009

Spudeas, Christina (Lobbyist) - Waive In Support
 Executive Director, Florida's Children First, Inc
 1801 University Dr, Ste 3B
 Coral Springs FL 33071
 Phone: (954) 326-8923

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

CS/CS/HB 1315 : Independent Living (continued)

Appearances: (continued)

Guinan, Amy (Lobbyist) - Waive In Support
Florida Legal Services, Inc
2425 Torreya Drive
Tallahassee Florida 32303
Phone: (850) 385-7900

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM



Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee
 3 Representative Perry offered the following:

Amendment (with title amendment)

Remove everything after the enacting clause and insert:

Section 1. Subsection (2) of section 39.013, Florida Statutes, is amended to read:

39.013 Procedures and jurisdiction; right to counsel.—

(2) The circuit court has exclusive original jurisdiction of all proceedings under this chapter, of a child voluntarily placed with a licensed child-caring agency, a licensed child-placing agency, or the department, and of the adoption of children whose parental rights have been terminated under this chapter. Jurisdiction attaches when the initial shelter petition, dependency petition, or termination of parental rights petition, or a petition for an injunction to prevent child abuse issued pursuant to s. 39.504, is filed or when a child is taken into the custody of the department. The circuit court may assume jurisdiction over any such proceeding regardless of whether the



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21 child was in the physical custody of both parents, was in the
22 sole legal or physical custody of only one parent, caregiver, or
23 some other person, or was not in the physical or legal custody
24 of any person when the event or condition occurred that brought
25 the child to the attention of the court. When the court obtains
26 jurisdiction of any child who has been found to be dependent,
27 the court shall retain jurisdiction, unless relinquished by its
28 order, until the child reaches 21 ~~18~~ years of age, with the
29 following exceptions:

30 (a) If a young adult chooses to leave foster care upon
31 reaching 18 years of age, the court shall relinquish
32 jurisdiction.

33 (b) If a young adult does not meet the eligibility
34 requirements to remain in foster care under s. 39.6251, the
35 court shall relinquish jurisdiction.

36 (c) ~~However,~~ If a young adult ~~youth~~ petitions the court at
37 any time before his or her 19th birthday requesting the court's
38 continued jurisdiction, the juvenile court may retain
39 jurisdiction under this chapter for a period not to exceed 1
40 year following the ~~young adult's youth's~~ 18th birthday for the
41 purpose of determining whether appropriate ~~aftercare support,~~
42 ~~Road to Independence Program, transitional support, mental~~
43 ~~health, and developmental disability~~ services that were required
44 to be provided to the young adult, ~~to the extent otherwise~~
45 ~~authorized by law, have been provided to the formerly dependent~~
46 ~~child who was in the legal custody of the department immediately~~
47 before his or her 18th birthday were provided.



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48 (d) If a petition for special immigrant juvenile status
49 and an application for adjustment of status have been filed on
50 behalf of a foster child and the petition and application have
51 not been granted by the time the child reaches 18 years of age,
52 the court may retain jurisdiction over the dependency case
53 solely for the purpose of allowing the continued consideration
54 of the petition and application by federal authorities. Review
55 hearings for the child shall be set solely for the purpose of
56 determining the status of the petition and application. The
57 court's jurisdiction terminates upon the final decision of the
58 federal authorities. Retention of jurisdiction in this instance
59 does not affect the services available to a young adult under s.
60 409.1451. The court may not retain jurisdiction of the case
61 after the immigrant child's 22nd birthday.

62 Section 2. Subsection (6) of section 39.6013, Florida
63 Statutes, is amended to read:

64 39.6013 Case plan amendments.—

65 (6) The case plan is deemed amended as to the child's
66 health, mental health, and education records required by s.
67 39.6012 when the child's updated health and education records
68 are filed by the department under s. 39.701(2)(a) ~~39.701(8)(a)~~.

69 Section 3. Section 39.6035, Florida Statutes, is created
70 to read:

71 39.6035 Transition plan.—

72 (1) During the 180-day period after a child reaches 17
73 years of age, the department and the community-based care
74 provider, in collaboration with the caregiver and any other
75 individual who the child would like to include, shall assist the



Amendment No.

76 child in developing a transition plan. The required transition
77 plan is in addition to standard case management requirements.
78 The transition plan must address specific options for the child
79 to use in obtaining services, including housing, health
80 insurance, education, and workforce support and employment
81 services. The plan must also consider establishing and
82 maintaining naturally occurring mentoring relationships and
83 other personal support services. The transition plan may be as
84 detailed as the child chooses. In developing the transition
85 plan, the department and the community-based provider shall:

86 (a) Provide the child with the documentation required
87 pursuant to s. 39.701(3).

88 (b) Coordinate the transition plan with the independent
89 living provisions in the case plan and, for a child with a
90 disability, the Individuals with Disabilities Education Act
91 transition plan.

92 (2) The department and the child shall schedule a time,
93 date, and place for a meeting to assist the child in drafting
94 the transition plan. The time, date, and place must be
95 convenient for the child and any individual who the child would
96 like to include. This meeting shall be conducted in the child's
97 primary language.

98 (3) The transition plan shall be reviewed periodically
99 with the child, the department, and other individuals of the
100 child's choice and updated when necessary before each judicial
101 review so long as the child or young adult remains in care.

102 (4) If a child is planning to leave care upon reaching 18
103 years of age, the transition plan must be approved by the court



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104 before the child leaves care and the court terminates
105 jurisdiction.

106 Section 4. Section 39.6251, Florida Statutes, is created
107 to read:

108 39.6251 Continuing care for young adults.-

109 (1) As used in this section, the term "child" means an
110 individual who has not attained 21 years of age and the term
111 "young adult" means an individual who has attained 18 years of
112 age but who has not attained 21 years of age.

113 (2) The primary goal for a child in care is permanency. A
114 child who is living in licensed care on his or her 18th birthday
115 and who has not achieved permanency under s. 39.621 is eligible
116 to remain in licensed care under the jurisdiction of the court
117 and in the care of the department. A child is eligible to remain
118 in licensed care if he or she is:

119 (a) Completing secondary education or a program leading to
120 an equivalent credential;

121 (b) Enrolled in an institution that provides postsecondary
122 or vocational education;

123 (c) Participating in a program or activity designed to
124 promote or eliminate barriers to employment;

125 (d) Employed for at least 80 hours per month; or

126 (e) Unable to participate in programs or activities listed
127 in paragraphs (a)-(d) full time due to a physical, intellectual,
128 emotional, or psychiatric condition that limits participation.

129 Any such barrier to participation must be supported by
130 documentation in the child's case file or school or medical
131 records of a physical, intellectual, or psychiatric condition



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132 that impairs the child's ability to perform one or more life
133 activities. This decision is to be made by the department, and
134 is subject to judicial review.

135 (3) The permanency goal for a young adult who chooses to
136 remain in care is transition from licensed care to independent
137 living.

138 (4) (a) The young adult must reside in a supervised living
139 environment that is approved by the department or a community-
140 based care lead agency. The young adult shall live independently
141 but in an environment in which he or she is provided
142 supervision, case management, and supportive services by the
143 department or lead agency. Such an environment must offer
144 developmentally appropriate freedom and responsibility to
145 prepare the young adult for adulthood. For the purposes of this
146 subsection, a supervised living arrangement may include a
147 licensed foster home, licensed group home, college dormitory,
148 shared housing, apartment, or another housing arrangement if the
149 arrangement is approved by the community-based care lead agency
150 and is acceptable to the young adult, with first choice being a
151 licensed foster home. A young adult may continue to reside with
152 the same licensed foster family or group care provider with whom
153 he or she was residing at the time he or she reached the age of
154 18 years.

155 (b) Before approving the residential setting in which the
156 young adult will live, the department or community-based care
157 lead agency must ensure that:

158 1. The young adult will be provided with a level of
159 supervision consistent with his or her individual education,



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160 health care needs, permanency plan, and independent living goals
161 as assessed by the department or lead agency with input from the
162 young adult. Twenty-four hour onsite supervision is not
163 required; however, 24-hour crisis intervention and support must
164 be available.

165 2. The young adult will live in an independent living
166 environment that offers, at a minimum, life skills instruction,
167 counseling, educational support, employment preparation and
168 placement, and development of support networks. The
169 determination of the type and duration of services shall be
170 based on the young adult's assessed needs, interests, and input
171 and must be consistent with the goals set in the young adult's
172 case plan.

173 (5) Eligibility for a young adult to remain in extended
174 foster care ends on the earliest of the dates that the young
175 adult:

176 (a) Reaches 21 years of age or, in the case of a young
177 adult with a disability, reaches 22 years of age;

178 (b) Leaves care to live in a permanent home consistent
179 with his or her permanency plan; or

180 (c) Knowingly and voluntarily withdraws his or her consent
181 to participate in extended care. Withdrawal of consent to
182 participate in extended care shall be verified by the court
183 pursuant to s. 39.701, unless the young adult refuses to
184 participate in any further court proceeding.

185 (6) A young adult who has reached 18 years of age but is
186 not yet 21 years of age and who has left care may return to care
187 by applying to the community-based care lead agency for



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188 readmission. The community-based care lead agency shall readmit
189 the young adult if he or she continues to meet the eligibility
190 requirements of this section.

191 (a) The department shall develop a standard procedure and
192 application packet for readmission to care to be used by all
193 community-based care lead agencies.

194 (b) Within 30 days after the young adult has been
195 readmitted to care, the community-based care lead agency shall
196 assign a case manager to update the case plan and the transition
197 plan and to arrange for the required services. Such activities
198 shall be undertaken in consultation with the young adult. The
199 department shall petition the court to reinstate jurisdiction
200 over the young adult.

201 (7) During each period of time that a young adult is in
202 care, the community-based care lead agency shall provide regular
203 case management reviews that must include at least monthly
204 contact with the case manager. If a young adult lives outside
205 the service area of his or her community-based care lead agency,
206 monthly contact may occur by telephone.

207 (8) During the time that a young adult is in care, the
208 court shall maintain jurisdiction to ensure that the department
209 and the lead agencies are providing services and coordinate
210 with, and maintain oversight of, other agencies involved in
211 implementing the young adult's case plan, individual education
212 plan, and transition plan. The court shall review the status of
213 the young adult at least every 6 months and hold a permanency
214 review hearing at least annually. The court may appoint a
215 guardian ad litem or continue the appointment of a guardian ad



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216 litem with the young adult's consent. The young adult or any
217 other party to the dependency case may request an additional
218 hearing or review.

219 (9) The department shall establish a procedure by which a
220 young adult may appeal a determination of eligibility to remain
221 in care that was made by a community-based care lead agency. The
222 procedure must be readily accessible to young adults, must
223 provide for timely decisions, and must provide for an appeal to
224 the department. The decision of the department constitutes final
225 agency action and is reviewable by the court as provided in s.
226 120.68.

227 Section 5. Section 39.701, Florida Statutes, is amended to
228 read:

229 39.701 Judicial review.—

230 (1) GENERAL PROVISIONS.—

231 (a) The court shall have continuing jurisdiction in
232 accordance with this section and shall review the status of the
233 child at least every 6 months as required by this subsection or
234 more frequently if the court deems it necessary or desirable.

235 (b) The court shall retain jurisdiction over a child
236 returned to his or her parents for a minimum period of 6 months
237 following the reunification, but, at that time, based on a
238 report of the social service agency and the guardian ad litem,
239 if one has been appointed, and any other relevant factors, the
240 court shall make a determination as to whether supervision by
241 the department and the court's jurisdiction shall continue or be
242 terminated.



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243 (c)1.~~(2)(a)~~ The court shall review the status of the child
244 and shall hold a hearing as provided in this part at least every
245 6 months until the child reaches permanency status. The court
246 may dispense with the attendance of the child at the hearing,
247 but may not dispense with the hearing or the presence of other
248 parties to the review unless before the review a hearing is held
249 before a citizen review panel.

250 2.~~(b)~~ Citizen review panels may conduct hearings to review
251 the status of a child. The court shall select the cases
252 appropriate for referral to the citizen review panels and may
253 order the attendance of the parties at the review panel
254 hearings. However, any party may object to the referral of a
255 case to a citizen review panel. Whenever such an objection has
256 been filed with the court, the court shall review the substance
257 of the objection and may conduct the review itself or refer the
258 review to a citizen review panel. All parties retain the right
259 to take exception to the findings or recommended orders of a
260 citizen review panel in accordance with Rule 1.490(h), Florida
261 Rules of Civil Procedure.

262 3.~~(e)~~ Notice of a hearing by a citizen review panel must
263 be provided as set forth in paragraph (f) subsection~~(5)~~. At the
264 conclusion of a citizen review panel hearing, each party may
265 propose a recommended order to the chairperson of the panel.
266 Thereafter, the citizen review panel shall submit its report,
267 copies of the proposed recommended orders, and a copy of the
268 panel's recommended order to the court. The citizen review
269 panel's recommended order must be limited to the dispositional
270 options available to the court in paragraph (2)(d) subsection



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271 ~~(10)~~. Each party may file exceptions to the report and
272 recommended order of the citizen review panel in accordance with
273 Rule 1.490, Florida Rules of Civil Procedure.

274 (d)1.~~(3)(a)~~ The initial judicial review hearing must be
275 held no later than 90 days after the date of the disposition
276 hearing or after the date of the hearing at which the court
277 approves the case plan, whichever comes first, but in no event
278 shall the review be held later than 6 months after the date the
279 child was removed from the home. Citizen review panels may ~~shall~~
280 not conduct more than two consecutive reviews without the child
281 and the parties coming before the court for a judicial review.

282 2.~~(b)~~ If the citizen review panel recommends extending the
283 goal of reunification for any case plan beyond 12 months from
284 the date the child was removed from the home, the case plan was
85 adopted, or the child was adjudicated dependent, whichever date
286 came first, the court must schedule a judicial review hearing to
287 be conducted by the court within 30 days after receiving the
288 recommendation from the citizen review panel.

289 3.~~(e)~~ If the child is placed in the custody of the
290 department or a licensed child-placing agency for the purpose of
291 adoptive placement, judicial reviews must be held at least every
292 6 months until the adoption is finalized.

293 4.~~(d)~~ If the department and the court have established a
294 formal agreement that includes specific authorization for
295 particular cases, the department may conduct administrative
296 reviews instead of the judicial reviews for children in out-of-
297 home care. Notices of such administrative reviews must be
298 provided to all parties. However, an administrative review may



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299 not be substituted for the first judicial review, and in every
300 case the court must conduct a judicial review at least every 6
301 months. Any party dissatisfied with the results of an
302 administrative review may petition for a judicial review.

303 5.~~(e)~~ The clerk of the circuit court shall schedule
304 judicial review hearings in order to comply with the mandated
305 times cited in this section.

306 6.~~(f)~~ In each case in which a child has been voluntarily
307 placed with the licensed child-placing agency, the agency shall
308 notify the clerk of the court in the circuit where the child
309 resides of such placement within 5 working days. Notification of
310 the court is not required for any child who will be in out-of-
311 home care no longer than 30 days unless that child is placed in
312 out-of-home care a second time within a 12-month period. If the
313 child is returned to the custody of the parents before the
314 scheduled review hearing or if the child is placed for adoption,
315 the child-placing agency shall notify the court of the child's
316 return or placement within 5 working days, and the clerk of the
317 court shall cancel the review hearing.

318 (e)~~(4)~~ The court shall schedule the date, time, and
319 location of the next judicial review during the judicial review
320 hearing and shall list same in the judicial review order.

321 (f)~~(5)~~ Notice of a judicial review hearing or a citizen
322 review panel hearing, and a copy of the motion for judicial
323 review, if any, must be served by the clerk of the court upon
324 all of the following persons, if available to be served,
325 regardless of whether the person was present at the previous



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326 hearing at which the date, time, and location of the hearing was
327 announced:

328 1.(a) The social service agency charged with the
329 supervision of care, custody, or guardianship of the child, if
330 that agency is not the movant.

331 2.(b) The foster parent or legal custodian in whose home
332 the child resides.

333 3.(c) The parents.

334 4.(d) The guardian ad litem for the child, or the
335 representative of the guardian ad litem program if the program
336 has been appointed.

337 5.(e) The attorney for the child.

338 6.(f) The child, if the child is 13 years of age or older.

339 7.(g) Any preadoptive parent.

40 8.(h) Such other persons as the court may direct.

341 (g)(6) The attorney for the department shall notify a
342 relative who submits a request for notification of all
343 proceedings and hearings pursuant to s. 39.301(14)(b). The
344 notice shall include the date, time, and location of the next
345 judicial review hearing.

346 ~~(7)(a) In addition to paragraphs (1)(a) and (2)(a), the~~
347 ~~court shall hold a judicial review hearing within 90 days after~~
348 ~~a youth's 17th birthday. The court shall also issue an order,~~
349 ~~separate from the order on judicial review, that the disability~~
350 ~~of nonage of the youth has been removed pursuant to s. 743.045.~~
351 ~~The court shall continue to hold timely judicial review hearings~~
352 ~~thereafter. In addition, the court may review the status of the~~
353 ~~child more frequently during the year prior to the youth's 18th~~



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354 ~~birthday if necessary. At each review held under this~~
355 ~~subsection, in addition to any information or report provided to~~
356 ~~the court, the foster parent, legal custodian, guardian ad~~
357 ~~litem, and the child shall be given the opportunity to address~~
358 ~~the court with any information relevant to the child's best~~
359 ~~interests, particularly as it relates to independent living~~
360 ~~transition services. In addition to any information or report~~
361 ~~provided to the court, the department shall include in its~~
362 ~~judicial review social study report written verification that~~
363 ~~the child:~~

364 1. ~~Has been provided with a current Medicaid card and has~~
365 ~~been provided all necessary information concerning the Medicaid~~
366 ~~program sufficient to prepare the youth to apply for coverage~~
367 ~~upon reaching age 18, if such application would be appropriate.~~

368 2. ~~Has been provided with a certified copy of his or her~~
369 ~~birth certificate and, if the child does not have a valid~~
370 ~~driver's license, a Florida identification card issued under s.~~
371 ~~322.051.~~

372 3. ~~Has been provided information relating to Social~~
373 ~~Security Insurance benefits if the child is eligible for these~~
374 ~~benefits. If the child has received these benefits and they are~~
375 ~~being held in trust for the child, a full accounting of those~~
376 ~~funds must be provided and the child must be informed about how~~
377 ~~to access those funds.~~

378 4. ~~Has been provided with information and training related~~
379 ~~to budgeting skills, interviewing skills, and parenting skills.~~

380 5. ~~Has been provided with all relevant information related~~
381 ~~to the Road to Independence Program, including, but not limited~~



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382 ~~to, eligibility requirements, forms necessary to apply, and~~
383 ~~assistance in completing the forms. The child shall also be~~
384 ~~informed that, if he or she is eligible for the Road to~~
385 ~~Independence Program, he or she may reside with the licensed~~
386 ~~foster family or group care provider with whom the child was~~
387 ~~residing at the time of attaining his or her 18th birthday or~~
388 ~~may reside in another licensed foster home or with a group care~~
389 ~~provider arranged by the department.~~

390 ~~6. Has an open bank account, or has identification~~
391 ~~necessary to open an account, and has been provided with~~
392 ~~essential banking skills.~~

393 ~~7. Has been provided with information on public assistance~~
394 ~~and how to apply.~~

395 ~~8. Has been provided a clear understanding of where he or~~
96 ~~she will be living on his or her 18th birthday, how living~~
397 ~~expenses will be paid, and what educational program or school he~~
398 ~~or she will be enrolled in.~~

399 ~~9. Has been provided with notice of the youth's right to~~
400 ~~petition for the court's continuing jurisdiction for 1 year~~
401 ~~after the youth's 18th birthday as specified in s. 39.013(2) and~~
402 ~~with information on how to obtain access to the court.~~

403 ~~10. Has been encouraged to attend all judicial review~~
404 ~~hearings occurring after his or her 17th birthday.~~

405 ~~(b) At the first judicial review hearing held subsequent~~
406 ~~to the child's 17th birthday, in addition to the requirements of~~
407 ~~subsection (8), the department shall provide the court with an~~
408 ~~updated case plan that includes specific information related to~~
409 ~~independent living services that have been provided since the~~



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410 ~~child's 13th birthday, or since the date the child came into~~
411 ~~foster care, whichever came later.~~

412 ~~(c) At the time of a judicial review hearing held pursuant~~
413 ~~to this subsection, if, in the opinion of the court, the~~
414 ~~department has not complied with its obligations as specified in~~
415 ~~the written case plan or in the provision of independent living~~
416 ~~services as required by s. 409.1451 and this subsection, the~~
417 ~~court shall issue a show cause order. If cause is shown for~~
418 ~~failure to comply, the court shall give the department 30 days~~
419 ~~within which to comply and, on failure to comply with this or~~
420 ~~any subsequent order, the department may be held in contempt.~~

421 ~~(2)(8) REVIEW HEARINGS FOR CHILDREN YOUNGER THAN 18 YEARS~~
422 ~~OF AGE.~~

423 ~~(a) Social study report for judicial review.~~ Before every
424 judicial review hearing or citizen review panel hearing, the
425 social service agency shall make an investigation and social
426 study concerning all pertinent details relating to the child and
427 shall furnish to the court or citizen review panel a written
428 report that includes, but is not limited to:

429 1. A description of the type of placement the child is in
430 at the time of the hearing, including the safety of the child
431 and the continuing necessity for and appropriateness of the
432 placement.

433 2. Documentation of the diligent efforts made by all
434 parties to the case plan to comply with each applicable
435 provision of the plan.

436 3. The amount of fees assessed and collected during the
437 period of time being reported.



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438 4. The services provided to the foster family or legal
439 custodian in an effort to address the needs of the child as
440 indicated in the case plan.

441 5. A statement that either:

442 a. The parent, though able to do so, did not comply
443 substantially with the case plan, and the agency
444 recommendations;

445 b. The parent did substantially comply with the case plan;
446 or

447 c. The parent has partially complied with the case plan,
448 with a summary of additional progress needed and the agency
449 recommendations.

450 6. A statement from the foster parent or legal custodian
451 providing any material evidence concerning the return of the
452 child to the parent or parents.

453 7. A statement concerning the frequency, duration, and
454 results of the parent-child visitation, if any, and the agency
455 recommendations for an expansion or restriction of future
456 visitation.

457 8. The number of times a child has been removed from his
458 or her home and placed elsewhere, the number and types of
459 placements that have occurred, and the reason for the changes in
460 placement.

461 9. The number of times a child's educational placement has
462 been changed, the number and types of educational placements
463 which have occurred, and the reason for any change in placement.

464 10. If the child has reached 13 years of age but is not
465 yet 18 years of age, a statement from the caregiver on the



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466 progress the child has made in acquiring independent living
467 skills ~~the results of the preindependent living, life skills, or~~
468 ~~independent living assessment; the specific services needed; and~~
469 ~~the status of the delivery of the identified services.~~

470 11. Copies of all medical, psychological, and educational
471 records that support the terms of the case plan and that have
472 been produced concerning the parents or any caregiver since the
473 last judicial review hearing.

474 12. Copies of the child's current health, mental health,
475 and education records as identified in s. 39.6012.

476 (b) Submission and distribution of reports.-

477 1. A copy of the social service agency's written report
478 and the written report of the guardian ad litem must be served
479 on all parties whose whereabouts are known; to the foster
480 parents or legal custodians; and to the citizen review panel, at
481 least 72 hours before the judicial review hearing or citizen
482 review panel hearing. The requirement for providing parents with
483 a copy of the written report does not apply to those parents who
484 have voluntarily surrendered their child for adoption or who
485 have had their parental rights to the child terminated.

486 2.~~(e)~~ In a case in which the child has been permanently
487 placed with the social service agency, the agency shall furnish
488 to the court a written report concerning the progress being made
489 to place the child for adoption. If the child cannot be placed
490 for adoption, a report on the progress made by the child towards
491 alternative permanency goals or placements, including, but not
492 limited to, guardianship, long-term custody, long-term licensed
493 custody, or independent living, must be submitted to the court.



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494 The report must be submitted to the court at least 72 hours
495 before each scheduled judicial review.

496 ~~3.(d)~~ In addition to or in lieu of any written statement
497 provided to the court, the foster parent or legal custodian, or
498 any preadoptive parent, shall be given the opportunity to
499 address the court with any information relevant to the best
500 interests of the child at any judicial review hearing.

501 ~~(c)(9)~~ Review determinations.—The court and any citizen
502 review panel shall take into consideration the information
503 contained in the social services study and investigation and all
504 medical, psychological, and educational records that support the
505 terms of the case plan; testimony by the social services agency,
506 the parent, the foster parent or legal custodian, the guardian
507 ad litem or surrogate parent for educational decisionmaking if
508 one has been appointed for the child, and any other person
509 deemed appropriate; and any relevant and material evidence
510 submitted to the court, including written and oral reports to
511 the extent of their probative value. These reports and evidence
512 may be received by the court in its effort to determine the
513 action to be taken with regard to the child and may be relied
514 upon to the extent of their probative value, even though not
515 competent in an adjudicatory hearing. In its deliberations, the
516 court and any citizen review panel shall seek to determine:

517 ~~1.(a)~~ If the parent was advised of the right to receive
518 assistance from any person or social service agency in the
519 preparation of the case plan.

520 ~~2.(b)~~ If the parent has been advised of the right to have
521 counsel present at the judicial review or citizen review



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522 | hearings. If not so advised, the court or citizen review panel
523 | shall advise the parent of such right.

524 | 3.(e) If a guardian ad litem needs to be appointed for the
525 | child in a case in which a guardian ad litem has not previously
526 | been appointed or if there is a need to continue a guardian ad
527 | litem in a case in which a guardian ad litem has been appointed.

528 | 4.(d) Who holds the rights to make educational decisions
529 | for the child. If appropriate, the court may refer the child to
530 | the district school superintendent for appointment of a

531 | surrogate parent or may itself appoint a surrogate parent under
532 | the Individuals with Disabilities Education Act and s. 39.0016.

533 | 5.(e) The compliance or lack of compliance of all parties
534 | with applicable items of the case plan, including the parents'
535 | compliance with child support orders.

536 | 6.(f) The compliance or lack of compliance with a
537 | visitation contract between the parent and the social service
538 | agency for contact with the child, including the frequency,
539 | duration, and results of the parent-child visitation and the
540 | reason for any noncompliance.

541 | 7.(g) The compliance or lack of compliance of the parent
542 | in meeting specified financial obligations pertaining to the
543 | care of the child, including the reason for failure to comply if
544 | such is the case.

545 | 8.(h) Whether the child is receiving safe and proper care
546 | according to s. 39.6012, including, but not limited to, the
547 | appropriateness of the child's current placement, including
548 | whether the child is in a setting that is as family-like and as
549 | close to the parent's home as possible, consistent with the



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550 child's best interests and special needs, and including
551 maintaining stability in the child's educational placement, as
552 documented by assurances from the community-based care provider
553 that:

554 ~~a.1-~~ The placement of the child takes into account the
555 appropriateness of the current educational setting and the
556 proximity to the school in which the child is enrolled at the
557 time of placement.

558 ~~b.2-~~ The community-based care agency has coordinated with
559 appropriate local educational agencies to ensure that the child
560 remains in the school in which the child is enrolled at the time
561 of placement.

562 ~~9.(i)~~ A projected date likely for the child's return home
563 or other permanent placement.

564 ~~10.(j)~~ When appropriate, the basis for the unwillingness
565 or inability of the parent to become a party to a case plan. The
566 court and the citizen review panel shall determine if the
567 efforts of the social service agency to secure party
568 participation in a case plan were sufficient.

569 ~~11.(k)~~ For a child who has reached 13 years of age but is
570 not yet 18 years of age, the adequacy of the child's preparation
571 for adulthood and independent living.

572 ~~12.(l)~~ If amendments to the case plan are required.
573 Amendments to the case plan must be made under s. 39.6013.

574 ~~(d)(10)(a)~~ Orders.-

575 1. Based upon the criteria set forth in paragraph (c)
576 ~~subsection (9)~~ and the recommended order of the citizen review
577 panel, if any, the court shall determine whether or not the



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578 social service agency shall initiate proceedings to have a child
579 declared a dependent child, return the child to the parent,
580 continue the child in out-of-home care for a specified period of
581 time, or initiate termination of parental rights proceedings for
582 subsequent placement in an adoptive home. Amendments to the case
583 plan must be prepared as prescribed in s. 39.6013. If the court
584 finds that the prevention or reunification efforts of the
585 department will allow the child to remain safely at home or be
586 safely returned to the home, the court shall allow the child to
587 remain in or return to the home after making a specific finding
588 of fact that the reasons for the creation of the case plan have
589 been remedied to the extent that the child's safety, well-being,
590 and physical, mental, and emotional health will not be
591 endangered.

592 2.~~(b)~~ The court shall return the child to the custody of
593 the parents at any time it determines that they have
594 substantially complied with the case plan, if the court is
595 satisfied that reunification will not be detrimental to the
596 child's safety, well-being, and physical, mental, and emotional
597 health.

598 3.~~(e)~~ If, in the opinion of the court, the social service
599 agency has not complied with its obligations as specified in the
600 written case plan, the court may find the social service agency
601 in contempt, shall order the social service agency to submit its
602 plans for compliance with the agreement, and shall require the
603 social service agency to show why the child could not safely be
604 returned to the home of the parents.



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605 ~~4.(d)~~ If, at any judicial review, the court finds that the
606 parents have failed to substantially comply with the case plan
607 to the degree that further reunification efforts are without
608 merit and not in the best interest of the child, on its own
609 motion, the court may order the filing of a petition for
610 termination of parental rights, whether or not the time period
611 as contained in the case plan for substantial compliance has
612 expired.

613 ~~5.(e)~~ Within 6 months after the date that the child was
614 placed in shelter care, the court shall conduct a judicial
615 review hearing to review the child's permanency goal as
616 identified in the case plan. At the hearing the court shall make
617 findings regarding the likelihood of the child's reunification
618 with the parent or legal custodian within 12 months after the
19 removal of the child from the home. If the court makes a written
620 finding that it is not likely that the child will be reunified
621 with the parent or legal custodian within 12 months after the
622 child was removed from the home, the department must file with
623 the court, and serve on all parties, a motion to amend the case
624 plan under s. 39.6013 and declare that it will use concurrent
625 planning for the case plan. The department must file the motion
626 within 10 business days after receiving the written finding of
627 the court. The department must attach the proposed amended case
628 plan to the motion. If concurrent planning is already being
629 used, the case plan must document the efforts the department is
630 taking to complete the concurrent goal.

631 ~~6.(f)~~ The court may issue a protective order in
632 assistance, or as a condition, of any other order made under



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633 this part. In addition to the requirements included in the case
634 plan, the protective order may set forth requirements relating
635 to reasonable conditions of behavior to be observed for a
636 specified period of time by a person or agency who is before the
637 court; and the order may require any person or agency to make
638 periodic reports to the court containing such information as the
639 court in its discretion may prescribe.

640 (3) REVIEW HEARINGS FOR CHILDREN 17 YEARS OF AGE.—

641 (a) In addition to the review and report required under
642 paragraphs (1)(a) and (2)(a), respectively, the court shall hold
643 a judicial review hearing within 90 days after a child's 17th
644 birthday. The court shall also issue an order, separate from the
645 order on judicial review, that the disability of nonage of the
646 child has been removed pursuant to s. 743.045 and shall continue
647 to hold timely judicial review hearings. If necessary, the court
648 may review the status of the child more frequently during the
649 year before the child's 18th birthday. At each review hearing
650 held under this subsection, in addition to any information or
651 report provided to the court by the foster parent, legal
652 custodian, or guardian ad litem, the child shall be given the
653 opportunity to address the court with any information relevant
654 to the child's best interest, particularly in relation to
655 independent living transition services. The department shall
656 include in the social study report for judicial review written
657 verification that the child has:

658 1. A current Medicaid card and all necessary information
659 concerning the Medicaid program sufficient to prepare the child



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660 to apply for coverage upon reaching the age of 18, if such
661 application is appropriate.

662 2. A certified copy of the child's birth certificate and a
663 valid driver license or, if the child does not have a valid
664 driver license, a Florida identification card issued under s.
665 322.051.

666 3. A social security card and information relating to
667 social security insurance benefits if the child is eligible for
668 those benefits. If the child has received such benefits and they
669 are being held in trust for the child, a full accounting of
670 these funds must be provided and the child must be informed as
671 to how to access those funds.

672 4. All relevant information related to the Road-to-
673 Independence Program, including, but not limited to, eligibility
74 requirements, information on participation, and assistance in
675 gaining admission to the program. If the child is eligible for
676 the Road-to-Independence Program, he or she must be advised that
677 he or she may continue to reside with the licensed family home
678 or group care provider with whom the child was residing at the
679 time the child attained his or her 18th birthday, in another
680 licensed family home, or with a group care provider arranged by
681 the department.

682 5. An open bank account or the identification necessary to
683 open a bank account and to acquire essential banking and
684 budgeting skills.

685 6. Information on public assistance and how to apply for
686 public assistance.



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687 7. A clear understanding of where he or she will be living
688 on his or her 18th birthday, how living expenses will be paid,
689 and the educational program or school in which he or she will be
690 enrolled.

691 8. Information related to the ability of the child to
692 remain in care until he or she reaches 21 years of age under s.
693 39.013.

694 9. A letter providing the dates that the child is under
695 the jurisdiction of the court.

696 10. When applicable, a letter stating that the child is in
697 compliance with financial aid documentation requirements.

698 11. The child's educational records.

699 12. The child's entire health and mental health records.

700 13. The process for accessing his or her case file.

701 14. A statement encouraging the child to attend all
702 judicial review hearings occurring after the child's 17th
703 birthday.

704 (b) At the first judicial review hearing held subsequent
705 to the child's 17th birthday, the department shall provide the
706 court with an updated case plan that includes specific
707 information related to the independent living skills that the
708 child has acquired since the child's 13th birthday, or since the
709 date the child came into foster care, whichever came later.

710 (c) If the court finds at the judicial review hearing that
711 the department has not met with its obligations to the child as
712 stated in the written case plan or in the provision of
713 independent living services, the court may issue an order
714 directing the department to show cause as to why it has not done



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715 so. If the department cannot justify its noncompliance, the
716 court may give the department 30 days within which to comply. If
717 the department fails to comply within 30 days, the court may
718 hold the department in contempt.

719 (d) At the last review hearing before the child reaches 18
720 years of age, and in addition to the requirements of subsection
721 (2), the court shall:

722 1. Address whether the child plans to remain in foster
723 care, and, if so, ensure that the child's transition plan
724 includes a plan for meeting one or more of the criteria
725 specified in s. 39.6251.

726 2. Ensure that the transition plan includes a supervised
727 living arrangement under s. 39.6251.

728 3. Ensure the child has been informed of:

729 a. The right to continued support and services from the
730 department and the community-based care lead agency.

731 b. The right to request termination of dependency
732 jurisdiction and be discharged from foster care.

733 c. The opportunity to reenter foster care pursuant to s.
734 39.6251.

735 4. Ensure that the young adult, if he or she requests
736 termination of dependency jurisdiction and discharge from foster
737 care, has been informed of:

738 a. Services or benefits for which the young adult may be
739 eligible based on his or her former placement in foster care.

740 b. Services or benefits that may be lost through
741 termination of dependency jurisdiction.



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742 c. Other federal, state, local, or community-based
743 services or supports available to him or her.

744 (4) REVIEW HEARINGS FOR YOUNG ADULTS IN FOSTER CARE.—
745 During each period of time that a young adult remains in foster
746 care, the court shall review the status of the young adult at
747 least every 6 months and must hold a permanency review hearing
748 at least annually.

749 (a) The department and community-based care lead agency
750 shall prepare and submit to the court a report, developed in
751 collaboration with the young adult, which addresses the young
752 adult's progress in meeting the goals in the case plan. The
753 report must include progress information related to the young
754 adult's independent living plan and transition plan, if
755 applicable, and shall propose modifications as necessary to
756 further the young adult's goals.

757 (b) The court shall attempt to determine whether the
758 department and any service provider under contract with the
759 department are providing the appropriate services as provided in
760 the case plan.

761 (c) If the court believes that the young adult is entitled
762 under department policy or under a contract with a service
763 provider to additional services to achieve the goals enumerated
764 in the case plan, it may order the department to take action to
765 ensure that the young adult receives the identified services.

766 (d) The young adult or any other party to the dependency
767 case may request an additional hearing or judicial review.

768 (e) Notwithstanding the provisions of this subsection, if
769 a young adult has chosen to remain in extended foster care after



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770 he or she has reached 18 years of age, the department may not
771 close a case and the court may not terminate jurisdiction until
772 the court finds, following a hearing, that the following
773 criteria have been met:

774 1. Attendance of the young adult at the hearing; or

775 2. Findings by the court that:

776 a. The young adult has been informed by the department of
777 his or her right to attend the hearing and has provided written
778 consent to waive this right; and

779 b. The young adult has been informed of the potential
780 negative effects of early termination of care, the option to
781 reenter care before reaching 21 years of age, the procedure for,
782 and limitations on, reentering care, and the availability of
783 alternative services, and has signed a document attesting that
784 he or she has been so informed and understands these provisions;
785 or

786 c. The young adult has voluntarily left the program, has
787 not signed the document in sub-subparagraph b., and is unwilling
788 to participate in any further court proceeding.

789 (f) In all permanency hearings or hearings regarding the
790 transition of the young adult from care to independent living,
791 the court shall consult with the young adult regarding the
792 proposed permanency plan, case plan, and individual education
793 plan for the young adult and ensure that he or she has
794 understood the conversation.

795 Section 6. Section 409.145, Florida Statutes, is amended
796 to read:



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797 409.145 Care of children; quality parenting; "reasonable
798 and prudent parent" standard.—The child welfare system of the
799 department shall operate as a coordinated community-based system
800 of care which empowers all caregivers for children in foster
801 care to provide quality parenting, including approving or
802 disapproving a child's participation in activities based on the
803 caregiver's assessment using the "reasonable and prudent parent"
804 standard.

805 (1) SYSTEM OF CARE.—The department shall develop,
806 implement ~~conduct, supervise,~~ and administer a coordinated
807 community-based system of care program for dependent children
808 who are found to be dependent and their families. This system of
809 care must ~~The services of the department are to be directed~~
810 toward the following goals:

811 (a) ~~The~~ Prevention of separation of children from their
812 families.

813 (b) Intervention to allow children to remain safely in
814 their own homes.

815 (c) ~~(b)~~ ~~The~~ Reunification of families who have had children
816 removed from their care placed in foster homes or institutions.

817 (d) Safety for children who are separated from their
818 families by providing alternative emergency or longer-term
819 parenting arrangements.

820 (e) Well-being of children through emphasis on maintaining
821 educational stability and providing timely health care.

822 (f) ~~(e)~~ Permanency for ~~The permanent placement of children~~
823 for whom reunification ~~who cannot be reunited with their~~



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824 families is not possible or when reunification would is not be
825 in the best interest of the child.

826 ~~(d) The protection of dependent children or children~~
827 ~~alleged to be dependent, including provision of emergency and~~
828 ~~long term alternate living arrangements.~~

829 ~~(g)(e) The transition to independence and self-sufficiency~~
830 ~~for older children who remain in foster care through adolescence~~
831 ~~continue to be in foster care as adolescents.~~

832 ~~(2) The following dependent children shall be subject to~~
833 ~~the protection, care, guidance, and supervision of the~~
834 ~~department or any duly licensed public or private agency:~~

835 ~~(a) Any child who has been temporarily or permanently~~
836 ~~taken from the custody of the parents, custodians, or guardians~~
837 ~~in accordance with those provisions in chapter 39 that relate to~~
838 ~~dependent children.~~

839 ~~(b) Any child who is in need of the protective supervision~~
840 ~~of the department as determined by intake or by the court in~~
841 ~~accordance with those provisions of chapter 39 that relate to~~
842 ~~dependent children.~~

843 ~~(c) Any child who is voluntarily placed, with the written~~
844 ~~consent of the parents or guardians, in the department's foster~~
845 ~~care program or the foster care program of a licensed private~~
846 ~~agency.~~

847 ~~(3) The circuit courts exercising juvenile jurisdiction in~~
848 ~~the various counties of this state shall cooperate with the~~
849 ~~department and its employees in carrying out the purposes and~~
850 ~~intent of this chapter.~~



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851 ~~(4) The department is authorized to accept children on a~~
852 ~~permanent placement basis by order of a court of competent~~
853 ~~jurisdiction for the single purpose of adoption placement of~~
854 ~~these children. The department is authorized to provide the~~
855 ~~necessary services to place these children ordered to the~~
856 ~~department on a permanent placement basis for adoption.~~

857 ~~(5) Any funds appropriated by counties for child welfare~~
858 ~~services may be matched by state and federal funds, such funds~~
859 ~~to be utilized by the department for the benefit of children in~~
860 ~~those counties.~~

861 ~~(6) Whenever any child is placed under the protection,~~
862 ~~care, and guidance of the department or a duly licensed public~~
863 ~~or private agency, or as soon thereafter as is practicable, the~~
864 ~~department or agency, as the case may be, shall endeavor to~~
865 ~~obtain such information concerning the family medical history of~~
866 ~~the child and the natural parents as is available or readily~~
867 ~~obtainable. This information shall be kept on file by the~~
868 ~~department or agency for possible future use as provided in ss.~~
869 ~~63.082 and 63.162 or as may be otherwise provided by law.~~

870 ~~(7) Whenever any child is placed by the department in a~~
871 ~~shelter home, foster home, or other residential placement, the~~
872 ~~department shall make available to the operator of the shelter~~
873 ~~home, foster home, other residential placement, or other~~
874 ~~caretaker as soon thereafter as is practicable, all relevant~~
875 ~~information concerning the child's demographic, social, and~~
876 ~~medical history.~~

877 (2) QUALITY PARENTING.-A child in foster care shall be
878 placed only with a caregiver who has the ability to care for the



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879 child, is willing to accept responsibility for providing care,
880 and is willing and able to learn about and be respectful of the
881 child's culture, religion and ethnicity, special physical or
882 psychological needs, unique circumstances, and family
883 relationships. The department, the community-based care lead
884 agency, and other agencies shall provide such caregiver with all
885 available information necessary to assist the caregiver in
886 determining whether he or she is able to appropriately care for
887 a particular child.

888 (a) Roles and responsibilities of caregivers.—A caregiver
889 shall:

890 1. Participate in developing the case plan for the child
891 and his or her family and work with others involved in his or
892 her care to implement this plan. This participation includes the
93 caregiver's involvement in all team meetings or court hearings
894 related to the child's care.

895 2. Complete all training needed to improve skills in
896 parenting a child who has experienced trauma due to neglect,
897 abuse, or separation from home, to meet the child's special
898 needs, and to work effectively with child welfare agencies, the
899 court, the schools, and other community and governmental
900 agencies.

901 3. Respect and support the child's ties to members of his
902 or her biological family and assist the child in maintaining
903 allowable visitation and other forms of communication.

904 4. Effectively advocate for the child in the caregiver's
905 care with the child welfare system, the court, and community



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906 agencies, including the school, child care providers, health and
907 mental health providers, and employers.

908 5. Participate fully in the child's medical,
909 psychological, and dental care as the caregiver would for his or
910 her biological child.

911 6. Support the child's school success by participating in
912 school activities and meetings, including individual education
913 plan meetings, assisting with school assignments, supporting
914 tutoring programs, meeting with teachers and working with an
915 educational surrogate if one has been appointed, and encouraging
916 the child's participation in extracurricular activities.

917 7. Work in partnership with other stakeholders to obtain
918 and maintain records that are important to the child's well-
919 being, including child resource records, medical records, school
920 records, photographs, and records of special events and
921 achievements.

922 8. Ensure that the child who has reached 13 years of age
923 but is not yet 17 years of age learns and masters independent
924 living skills.

925 9. Ensure that the child is aware of the requirements and
926 benefits of the Road-to-Independence Program.

927 10. Work to enable the child to establish and maintain
928 naturally occurring mentoring relationships.

929 (b) Roles and responsibilities of the department, the
930 community-based care lead agency, and other agency staff.-The
931 department, the community-based care lead agency, and other
932 agency staff shall:



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933 1. Include the caregiver in the development and
934 implementation of the case plan for the child and his or her
935 family. The caregiver shall be authorized to participate in all
936 team meetings or court hearings related to the child's care and
937 future plans. The caregiver's participation shall be facilitated
938 through timely notification, an inclusive process, and
939 alternative methods for participation for a caregiver who cannot
940 be physically present.

941 2. Develop and make available to the caregiver the
942 information, services, training, and support that the caregiver
943 needs to improve his or her skills in parenting children who
944 have experienced trauma due to neglect, abuse, or separation
945 from home, to meet these children's special needs, and to
946 advocate effectively with child welfare agencies, the courts,
47 schools, and other community and governmental agencies.

948 3. Provide the caregiver with all information related to
949 services and other benefits that are available to the child.

950 (c) Transitions.-

951 1. Once a caregiver accepts the responsibility of caring
952 for a child, the child will be removed from the home of that
953 caregiver only if:

954 a. The caregiver is clearly unable to safely or legally
955 care for the child;

956 b. The child and his or her biological family are
957 reunified;

958 c. The child is being placed in a legally permanent home
959 pursuant to the case plan or a court order;



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960 d. The removal is demonstrably in the child's best
961 interest; or

962 e. The caregiver is no longer able or willing to care for
963 the child.

964 2. In the absence of an emergency, if a child leaves the
965 caregiver's home for a reason provided under subparagraph 1.,
966 the transition must be accomplished according to a plan that
967 involves cooperation and sharing of information among all
968 persons involved, respects the child's developmental stage and
969 psychological needs, ensures the child has all of his or her
970 belongings, and allows for a gradual transition from the
971 caregiver's home and, if possible, for continued contact with
972 the caregiver after the child leaves.

973 (d) Information sharing.—Whenever a foster home or
974 residential group home assumes responsibility for the care of a
975 child, the department and any additional providers shall make
976 available to the caregiver as soon as is practicable all
977 relevant information concerning the child. Records and
978 information that are required to be shared with caregivers
979 include, but are not limited to:

980 1. Medical, dental, psychological, psychiatric, and
981 behavioral history, as well as ongoing evaluation or treatment
982 needs.

983 2. School records.

984 3. Copies of his or her birth certificate and, if
985 appropriate, immigration status documents.

986 4. Consents signed by parents.



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987 5. Comprehensive behavioral assessments and other social
988 assessments.

989 6. Court orders.

990 7. Visitation and case plans.

991 8. Guardian ad litem reports.

992 9. Staffing forms.

993 10. Judicial or citizen review panel reports and
994 attachments filed with the court, except confidential medical,
995 psychiatric, and psychological information regarding any party
996 or participant other than the child.

997 (e) Caregivers employed by residential group homes.-All
998 caregivers in residential group homes shall meet the same
999 education, training, and background and other screening
1000 requirements as foster parents.

01 (f) The Department of Children and Families in
1002 collaboration with the Florida State Foster and Adoptive Parent
1003 Association and the Quality Parenting Initiative will design and
1004 disseminate training for caregivers on skill building on the
1005 life skills necessary for youth in the foster care system.

1006 (3) REASONABLE AND PRUDENT PARENT STANDARD.-

1007 (a) Definitions.-As used in this subsection, the term:

1008 1. "Age-appropriate" means generally accepted as suitable
1009 for a child of the same chronological age or level of maturity.
1010 Age appropriateness is based on the development of cognitive,
1011 emotional, physical, and behavioral capacity which is typical
1012 for an age or age group.



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1013 | 2. "Caregiver" means a person with whom the child is
1014 | placed in out-of-home care, or a designated official for a group
1015 | care facility licensed by the department under s. 409.175.

1016 | 3. "Reasonable and prudent parent standard" means the
1017 | standard characterized by careful and sensible parental
1018 | decisions that maintain the child's health, safety, and best
1019 | interest while at the same time encouraging the child's
1020 | emotional and developmental growth, that a caregiver shall use
1021 | when determining whether to allow a child in out-of-home care to
1022 | participate in extracurricular, enrichment, and social
1023 | activities.

1024 | (b) Application of standard of care.-

1025 | 1. Every child who comes into out-of-home care pursuant to
1026 | this chapter is entitled to participate in age-appropriate
1027 | extracurricular, enrichment, and social activities.

1028 | 2. Each caregiver shall use the reasonable and prudent
1029 | parent standard in determining whether to give permission for a
1030 | child living in out-of-home care to participate in
1031 | extracurricular, enrichment, or social activities. When using
1032 | the reasonable and prudent parent standard, the caregiver must
1033 | consider:

1034 | a. The child's age, maturity, and developmental level to
1035 | maintain the overall health and safety of the child.

1036 | b. The potential risk factors and the appropriateness of
1037 | the extracurricular, enrichment, or social activity.

1038 | c. The best interest of the child, based on information
1039 | known by the caregiver.



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1040 d. The importance of encouraging the child's emotional and
1041 developmental growth.

1042 e. The importance of providing the child with the most
1043 family-like living experience possible.

1044 f. The behavioral history of the child and the child's
1045 ability to safely participate in the proposed activity.

1046 (c) Verification of services delivered.—The department and
1047 each community-based care lead agency shall verify that private
1048 agencies providing out-of-home care services to dependent
1049 children have policies in place which are consistent with this
1050 section and that these agencies promote and protect the ability
1051 of dependent children to participate in age-appropriate
1052 extracurricular, enrichment, and social activities.

1053 (d) Limitation of liability.—A caregiver is not liable for
1054 harm caused to a child who participates in an activity approved
1055 by the caregiver, provided that the caregiver has acted in
1056 accordance with the reasonable and prudent parent standard. This
1057 paragraph may not be interpreted as removing or limiting any
1058 existing liability protection afforded by law.

1059 (4) FOSTER PARENT ROOM AND BOARD RATES.—

1060 (a) Effective January 1, 2014, monthly room and board
1061 rates paid to foster parents are as follows:

<u>Monthly Foster</u>	<u>0-5 Years Age</u>	<u>6-12 Years Age</u>	<u>13-21 Years Age</u>
<u>Care Rate</u>	<u>\$429</u>	<u>\$440</u>	<u>\$515</u>

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(b) Foster parents who are receiving the minimum room and board rate as provided in paragraph (a) shall receive an annual cost-of-living increase, beginning July 1, 2014. The department shall calculate the new room and board rate increase equal to the percentage change in the Consumer Price Index for All Urban Consumers, U.S. City Average, All Items, not seasonally adjusted, or successor reports, for the preceding December compared to the prior December as initially reported by the United States Department of Labor, Bureau of Labor Statistics. The department shall make available the adjusted room and board rates annually.

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(c) The amount of the monthly foster parent room and board rate may be increased upon agreement among the department, the community-based care lead agency, and the foster parent.

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(d) Community-based care lead agencies providing care under contract with the department shall pay a supplemental room and board payment to foster care parents for providing independent life skills and normalcy supports to children who are age 13 through 17 placed in their care. The supplemental payment shall be paid monthly to the foster care parents on a per-child basis in addition to the current monthly room and board rate payment. The supplemental monthly payment shall be based on 10 percent of the monthly room and board rate for children age 13 through 21 as provided under this section and adjusted annually.

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(5) RULEMAKING.—The department shall adopt by rule procedures to administer this section.



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1093 Section 7. Section 409.1451, Florida Statutes, is amended
1094 to read:

1095 (Substantial rewording of section. See
1096 s. 409.1451, F.S., for present text).

1097 409.1451 The Road-to-Independence Program.—

1098 (1) LEGISLATIVE FINDINGS AND INTENT.—

1099 (a) The Legislature recognizes that most children and
1100 young adults are resilient and, with adequate support, can
1101 expect to be successful as independent adults. Not unlike many
1102 young adults, some young adults who have lived in foster care
1103 need additional support and resources for a period of time after
1104 reaching 18 years of age.

1105 (b) The Legislature finds that while it is important to
1106 provide young adults who have lived in foster care with
07 education and independent living skills, there is also a need to
1108 focus more broadly on creating and preserving family
1109 relationships so that young adults have a permanent connection
1110 with at least one committed adult who provides a safe and stable
1111 parenting relationship.

1112 (c) It is the intent of the Legislature that young adults
1113 who choose to participate in the program receive the skills,
1114 education, and support necessary to become self-sufficient and
1115 leave foster care with a lifelong connection to a supportive
1116 adult through the Road-to-Independence Program, either through
1117 postsecondary education services and support, as provided in
1118 subsection (2), or aftercare services.

1119 (2) POSTSECONDARY EDUCATION SERVICES AND SUPPORT.—



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1120 (a) A young adult is eligible for services and support
1121 under this subsection if he or she:

1122 1. Was living in licensed care on his or her 18th birthday
1123 or is currently living in licensed care, or was at least 16
1124 years of age and was adopted from foster care or placed with a
1125 court-approved dependency guardian after spending at least 6
1126 months in licensed care within the 12 months immediately
1127 preceding such placement or adoption;

1128 2. Spent at least 6 months in licensed care before
1129 reaching his or her 18th birthday;

1130 3. Earned a standard high school diploma or its equivalent
1131 pursuant to s. 1003.428, s. 1003.4281, s. 1003.429, s. 1003.43,
1132 or s. 1003.435;

1133 4. Has been admitted for enrollment as a full-time student
1134 or its equivalent in an eligible postsecondary educational
1135 institution as provided in s. 1009.533 unless the young adult
1136 has a recognized disability preventing full-time attendance, or
1137 has been admitted for enrollment in an eligible postsecondary
1138 educational institution as provided in s. 1009.533 for a minimum
1139 of 9 credit hours per semester, or the equivalent for vocational
1140 technical programs, and working part-time unless the young adult
1141 has a recognized disability preventing the minimum attendance
1142 and work requirement;

1143 5. Has reached 18 years of age but is not yet 23 years of
1144 age;

1145 6. Has applied, with assistance from the young adult's
1146 caregiver and the community-based care lead agency, for grants
1147 and scholarships;



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1148 7. Submitted a Free Application for Federal Student Aid
1149 which is complete and error free; and

1150 8. Signed an agreement to allow the department and the
1151 community-based care lead agency access to school records.

1152 (b) The amount of the financial assistance shall be as
1153 follows:

1154 1. For a young adult who does not remain in foster care
1155 and is attending a postsecondary educational institution as
1156 provided in s. 1009.533, the amount is \$1,256 monthly.

1157 2. For a young adult who remains in foster care, is
1158 attending a postsecondary educational institution as provided in
1159 s. 1009.533, and continues to reside in a licensed foster home,
1160 the amount is the established room and board rate for foster
1161 parents as provided in s. 409.145(4).

62 3. For a young adult who remains in foster care, but
1163 temporarily resides away from a licensed foster home for
1164 purposes of attending a postsecondary educational institution as
1165 provided in s. 1009.533, the amount is \$1,256 monthly while the
1166 young adult resides away from the licensed group home. The
1167 amount is the board rate while the child resides in the foster
1168 home, instead of the \$1,256.

1169 4. For a young adult who remains in foster care, is
1170 attending a postsecondary educational institution as provided in
1171 s. 1009.533, and continues to reside in a licensed group home,
1172 the amount is negotiated between the community-based care lead
1173 agency and the licensed group home provider.

1174 5. For a young adult who remains in foster care but
1175 temporarily resides away from a licensed group home for purposes



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1176 of attending a postsecondary educational institution as provided
1177 in s. 1009.533, the amount is \$1,256 monthly while the young
1178 adult resides away from the licensed group home. The amount is
1179 negotiated between the licensed group home and the community-
1180 based care lead agency while the young adult resides in the
1181 licensed group home, instead of the \$1,256.

1182 6. The amount of the award may be disregarded for purposes
1183 of determining the eligibility for, or the amount of, any other
1184 federal or federally supported assistance.

1185 7. A young adult is eligible to receive financial
1186 assistance during the months when enrolled in a postsecondary
1187 educational institution.

1188 (c) Payment of financial assistance for a young adult who:

1189 1. Has chosen not to remain in foster care and is
1190 attending a postsecondary educational institution as provided in
1191 s. 1009.533 shall be made to the community-based care lead
1192 agency in order to secure housing and utilities, with the
1193 balance being paid directly to the young adult until such time
1194 the lead agency and the young adult determine that the young
1195 adult can successfully manage the full amount of the assistance.

1196 2. Has remained in foster care, is attending a
1197 postsecondary educational institution as provided in s.
1198 1009.533, and is residing in a foster home or group home shall
1199 be made directly to the foster parent or group home provider.

1200 3. Has chosen to reside temporarily away from a licensed
1201 foster home or group home for purposes of attending
1202 postsecondary educational institution as provided in s. 1009.533
1203 shall be made to the community-based care lead agency in order



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1204 to secure housing and utilities, with the balance being paid
1205 directly to the young adult while they temporarily reside away
1206 from a licensed foster home or group home for purposes of
1207 attending postsecondary school. When the young adult returns to
1208 reside in the foster home or group home, the payment will be
1209 paid directly to the foster parent or licensed group home.

1210 4. Community-Based Care lead agencies or other contracted
1211 providers are prohibited from charging a fee associated with
1212 administering the Road-to-Independence payments

1213 (d)1. The department must advertise the availability of
1214 the stipend and must provide notification of the criteria and
1215 application procedures for the stipend to children and young
1216 adults leaving, or who were formerly in, foster care;
1217 caregivers; case managers; guidance and family services
1218 counselors; principals or other relevant school administrators;
1219 and guardians ad litem.

1220 2. If the award recipient transfers from one eligible
1221 institution to another and continues to meet eligibility
1222 requirements, the award shall be transferred with the recipient.

1223 3. The department, or an agency under contract with the
1224 department, shall evaluate each Road-to-Independence award for
1225 renewal eligibility on an annual basis. In order to be eligible
1226 for a renewal award for the subsequent year, the young adult
1227 must:

1228 a. Be enrolled for or have completed the number of hours,
1229 or the equivalent, to be considered a full-time student by the
1230 eligible postsecondary educational institution in which the
1231 young adult is enrolled, unless the young adult has a recognized



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1232 disability preventing full-time attendance, or be enrolled for
1233 or have completed a minimum of 9 credit hours per semester in a
1234 postsecondary educational institution, or the equivalent for
1235 vocational technical programs, and working part-time unless the
1236 young adult has a recognized disability preventing the minimum
1237 attendance and work requirement.

1238 b. Maintain appropriate progress as required by the
1239 educational institution, except that if the young adult's
1240 progress is insufficient to renew the award at any time during
1241 the eligibility period, the young adult may restore eligibility
1242 by improving his or her progress to the required level.

1243 4. Funds may be terminated during the interim between an
1244 award and the evaluation for a renewal award if the department,
1245 or an agency under contract with the department, determines that
1246 the award recipient is no longer enrolled in an educational
1247 institution as described in subparagraph (a)4. or is no longer a
1248 resident of this state.

1249 5. The department, or an agency under contract with the
1250 department, shall notify a recipient who is terminated and
1251 inform the recipient of his or her right to appeal.

1252 6. An award recipient who does not qualify for a renewal
1253 award or who chooses not to renew the award may immediately
1254 apply for reinstatement. An application for reinstatement must
1255 be made before the young adult reaches 23 years of age, and a
1256 student may apply for reinstatement more than once. In order to
1257 be eligible for reinstatement, the young adult must meet the
1258 eligibility criteria and the criteria for award renewal for the
1259 program. The Department shall adopt rules necessary to establish



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1260 standards to determine whether a student meets the eligibility
1261 criteria set for renewal and reinstatement of a Road-to-
1262 Independence award.

1263 (3) AFTERCARE SERVICES.—

1264 (a) Aftercare services are available to young adults who
1265 have chosen not to remain in foster care after reaching 18 years
1266 of age and who are not receiving financial assistance under
1267 subsection (2) to pursue postsecondary education. These
1268 aftercare services include, but are not limited to, the
1269 following:

1270 1. Mentoring and tutoring.

1271 2. Mental health services and substance abuse counseling.

1272 3. Life skills classes, including credit management and
1273 preventive health activities.

1274 4. Parenting classes.

1275 5. Job and career skills training.

1276 6. Counselor consultations.

1277 7. Temporary financial assistance for emergency
1278 situations.

1279 8. Financial literacy skills training.

1280

1281 The specific services to be provided under this paragraph shall
1282 be determined by an assessment of the young adult and may be
1283 provided by the community-based care provider or through
1284 referrals in the community.

1285 (b) Temporary assistance provided to prevent homelessness
1286 shall be provided as expeditiously as possible and within the
1287 limitations defined by the department.



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1288 (c) A young adult who has reached 18 years of age but is
1289 not yet 23 years of age who leaves foster care at 18 years of
1290 age may request and is eligible for such services before
1291 reaching 23 years of age.

1292 (4) APPEAL PROCEDURE.-

1293 (a) The department shall have a procedure by which a young
1294 adult may appeal the department's refusal to provide Road-to-
1295 Independence Program services or support, or the termination of
1296 such services or support if funds for such services or support
1297 are available.

1298 (b) The appeal procedure must be readily accessible to
1299 young adults, must provide for timely decisions, and must
1300 provide for an appeal to the department. The decision of the
1301 department constitutes final agency action and is reviewable by
1302 the court as provided in s. 120.68.

1303 (5) PORTABILITY.-The services provided under this section
1304 are portable across county lines and between lead agencies.

1305 (a) The service needs that are identified in the original
1306 or updated transition plan, pursuant to s. 39.6035, shall be
1307 provided by the lead agency where the young adult is currently
1308 residing but shall be funded by the lead agency that initiated
1309 the transition plan.

1310 (b) The lead agency with primary case management
1311 responsibilities shall provide maintenance payments, case
1312 planning, including a written description of all services that
1313 will assist a child 16 years of age or older in preparing for
1314 the transition from care to independence, and regular case
1315 reviews that conform with all federal scheduling and content



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1316 requirements for all children in foster care who are placed or
1317 visiting out-of-state.

1318 (6) ACCOUNTABILITY.—The department shall develop outcome
1319 measures for the program and other performance measures in order
1320 to maintain oversight of the program. No later than January 31
1321 of each year, the department shall prepare a report on the
1322 outcome measures and the department's oversight activities and
1323 submit the report to the President of the Senate, the Speaker of
1324 the House of Representatives, and the committees with
1325 jurisdiction over issues relating to children and families in
1326 the Senate and the House of Representatives. The report must
1327 include:

1328 (a) An analysis of performance on the outcome measures
1329 developed under this section reported for each community-based
30 care lead agency and compared with the performance of the
1331 department on the same measures.

1332 (b) A description of the department's oversight of the
1333 program, including, by lead agency, any programmatic or fiscal
1334 deficiencies found, corrective actions required, and current
1335 status of compliance.

1336 (c) Any rules adopted or proposed under this section since
1337 the last report. For the purposes of the first report, any rules
1338 adopted or proposed under this section must be included.

1339 (7) INDEPENDENT LIVING SERVICES ADVISORY COUNCIL.—The
1340 secretary shall establish the Independent Living Services
1341 Advisory Council for the purpose of reviewing and making
1342 recommendations concerning the implementation and operation of
1343 the provisions of s. 39.6015 and the Road-to-Independence



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1344 Program. The advisory council shall function as specified in
1345 this subsection until the Legislature determines that the
1346 advisory council can no longer provide a valuable contribution
1347 to the department's efforts to achieve the goals of the services
1348 designed to enable a young adult to live independently.

1349 (a) The advisory council shall assess the implementation
1350 and operation of the Road-to-Independence Program and advise the
1351 department on actions that would improve the ability of these
1352 Road-to-Independence Program services to meet the established
1353 goals. The advisory council shall keep the department informed
1354 of problems being experienced with the services, barriers to the
1355 effective and efficient integration of services and support
1356 across systems, and successes that the system of services has
1357 achieved. The department shall consider, but is not required to
1358 implement, the recommendations of the advisory council.

1359 (b) The advisory council shall report to the secretary on
1360 the status of the implementation of the Road-To-Independence
1361 Program, efforts to publicize the availability of the Road-to-
1362 Independence Program, the success of the services, problems
1363 identified, recommendations for department or legislative
1364 action, and the department's implementation of the
1365 recommendations contained in the Independent Living Services
1366 Integration Workgroup Report submitted to the appropriate
1367 substantive committees of the Legislature by December 31, 2013.
1368 The department shall submit a report by December 31 of each year
1369 to the Governor, the President of the Senate, and the Speaker of
1370 the House of Representatives which includes a summary of the
1371 factors reported on by the advisory council and identifies the



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1372 recommendations of the advisory council and either describes the
1373 department's actions to implement the recommendations or
1374 provides the department's rationale for not implementing the
1375 recommendations.

1376 (c) Members of the advisory council shall be appointed by
1377 the secretary of the department. The membership of the advisory
1378 council must include, at a minimum, representatives from the
1379 headquarters and regional offices of the Department of Children
1380 and Families, community-based care lead agencies, the Department
1381 of Juvenile Justice, the Department of Economic Opportunity, the
1382 Department of Education, the Agency for Health Care
1383 Administration, the State Youth Advisory Board, Workforce
1384 Florida, Inc., the Statewide Guardian Ad Litem Office, foster
1385 parents, recipients of services and funding through the Road-to-
86 Independence Program, and advocates for children in care. The
1387 secretary shall determine the length of the term to be served by
1388 each member appointed to the advisory council, which may not
1389 exceed 4 years.

1390 (d) The department shall provide administrative support to
1391 the Independent Living Services Advisory Council to accomplish
1392 its assigned tasks. The advisory council shall be afforded
1393 access to all appropriate data from the department, each
1394 community-based care lead agency, and other relevant agencies in
1395 order to accomplish the tasks set forth in this section. The
1396 data collected may not include any information that would
1397 identify a specific child or young adult.

1398 (e) The advisory council report required under paragraph
1399 (b) must include an analysis of the system of independent living



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1400 transition services for young adults who reach 18 years of age
1401 while in foster care before completing high school or its
1402 equivalent and recommendations for department or legislative
1403 action. The council shall assess and report on the most
1404 effective method of assisting these young adults to complete
1405 high school or its equivalent by examining the practices of
1406 other states.

1407 (8) PERSONAL PROPERTY.—Property acquired on behalf of a
1408 young adult in this program shall become the personal property
1409 of the young adult and is not subject to the requirements of
1410 chapter 273 relating to state-owned tangible personal property.
1411 Such property continues to be subject to applicable federal
1412 laws.

1413 (9) MEDICAL ASSISTANCE FOR YOUNG ADULTS FORMERLY IN CARE.—
1414 The department or community-based care lead agency shall
1415 document that eligible young adults are enrolled in Medicaid
1416 under s. 409.903(4).

1417 (10) RULEMAKING.—The department shall adopt rules to
1418 administer this section.

1419 Section 8. Paragraph (a) of subsection (3) of section
1420 409.175, Florida Statutes, is amended to read:

1421 409.175 Licensure of family foster homes, residential
1422 child-caring agencies, and child-placing agencies; public
1423 records exemption.—

1424 (3)(a) The total number of children placed in each family
1425 foster home shall be based on the recommendation of the
1426 department, or the community-based care lead agency where one is
1427 providing foster care and related services, based on the needs



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1428 of each child in care, the ability of the foster family to meet
1429 the individual needs of each child, including any adoptive or
1430 biological children or young adults remaining in foster care
1431 living in the home, the amount of safe physical plant space, the
1432 ratio of active and appropriate adult supervision, and the
1433 background, experience, and skill of the family foster parents.

1434 Section 9. Subsection (4) of section 409.903, Florida
1435 Statutes, is amended to read:

1436 409.903 Mandatory payments for eligible persons.—The
1437 agency shall make payments for medical assistance and related
1438 services on behalf of the following persons who the department,
1439 or the Social Security Administration by contract with the
1440 Department of Children and Family Services, determines to be
1441 eligible, subject to the income, assets, and categorical
42 eligibility tests set forth in federal and state law. Payment on
1443 behalf of these Medicaid eligible persons is subject to the
1444 availability of moneys and any limitations established by the
1445 General Appropriations Act or chapter 216.

1446 (4) A child who is eligible under Title IV-E of the Social
1447 Security Act for subsidized board payments, foster care, or
1448 adoption subsidies, and a child for whom the state has assumed
1449 temporary or permanent responsibility and who does not qualify
1450 for Title IV-E assistance but is in foster care, shelter or
1451 emergency shelter care, or subsidized adoption. This category
1452 includes a young adult who is eligible to receive services under
1453 s. 409.1451(5), until the young adult reaches 21 years of age,
1454 without regard to any income, resource, or categorical
1455 eligibility test that is otherwise required. This category also



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1456 includes a person who as a child was eligible under Title IV-E
1457 of the Social Security Act for foster care or the state-provided
1458 foster care and who is a participant in the Road-to-Independence
1459 Program.

1460 Section 10. Effective January 1, 2014, a child or young
1461 adult who is a participant in the program shall transfer to the
1462 program services provided in this act, and his or her monthly
1463 stipend may not be reduced, the method of payment of the monthly
1464 stipend may not be changed, and the young adult may not be
1465 required to change his or her living arrangement. These
1466 conditions shall remain in effect for a child or young adult
1467 until he or she ceases to meet the eligibility requirements
1468 under which he or she entered the Road-to-Independence Program.
1469 A child or young adult applying or reapplying for the Road-to-
1470 Independence Program on or after January 1, 2014, may apply for
1471 program services only as provided in this act.

1472 Section 11. For Fiscal Year 2013-2014, the sums of \$601,029
1473 in recurring funds and \$26,334 in nonrecurring funds from the
1474 General Revenue Fund in the Grants and Aids - Community Based
1475 Care for Providers of Child Welfare Services appropriation
1476 category within the Department of Children and Families shall be
1477 transferred to the Grants and Aids - Child Protection
1478 appropriation category, also within the Department of Children
1479 and Families, for legal case reviews associated with the
1480 requirements of this legislation. For Fiscal Year 2013-2014, the
1481 sum of \$1,044,000 from the General Revenue Fund in the Grants
1482 and Aids - Community Based Care for Providers of Child Welfare
1483 Services appropriation category within the Department of



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1484 Children and Families shall be transferred to the Computer
1485 Related Expenses appropriation category, also within the
1486 Department of Children and Families, for enhancements to the
1487 Florida Safe Families Network. For Fiscal Year 2013-2014, the
1488 sums of \$523,269 in recurring funds from the General Revenue
1489 Fund and \$41,382 in nonrecurring funds from the General Revenue
1490 Fund in the Grants and Aids - Community Based Care for Providers
1491 of Child Welfare Services appropriation category within the
1492 Department of Children and Families shall be transferred to the
1493 Grants and Aids - Child Protection appropriation category, also
1494 within the Department of Children and Families, for the purposes
1495 of providing oversight and resources for the postsecondary
1496 educational campus coaching positions, pursuant to this
1497 legislation. This section shall take effect July 1, 2013.

98 Section 12. This act shall take effect January 1, 2014.

1501 -----
1502 **T I T L E A M E N D M E N T**

1503 Remove everything before the enacting clause and insert:
1504 An act relating to independent living; amending s. 39.013, F.S.;
1505 providing that when the court obtains jurisdiction over a child
1506 who has been found to be dependent, the court retains
1507 jurisdiction until the child reaches a certain age; providing
1508 exceptions; amending s. 39.6013, F.S.; conforming a cross-
1509 reference; creating s. 39.6035, F.S.; requiring the Department
1510 of Children and Families, the community-based care provider, and
1511 others to assist a child in developing a transition plan after



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1512 the child reaches a specified age and requiring a meeting to
1513 develop the plan; specifying requirements and procedures for the
1514 transition plan; requiring periodic review of the transition
1515 plan; requiring the court to approve the transition plan before
1516 the child leaves foster care and the court terminates
1517 jurisdiction; creating s. 39.6251, F.S.; providing definitions;
1518 providing that a young adult may remain in foster care under
1519 certain circumstances after attaining 18 years of age;
1520 specifying criteria for extended foster care; providing that the
1521 permanency goal for a young adult who chooses to remain in care
1522 transition from care to independent living; specifying dates for
1523 eligibility for a young adult to return extended foster care;
1524 providing for supervised living arrangements in extended foster
1525 care; providing for supervised living arrangements in extended
1526 foster care; authorizing a young adult to return to foster care;
1527 providing for supervised living arrangements in extended foster
1528 care; authorizing a young adult to return to foster care under
1529 certain circumstances; specifying services that must be provided
1530 to the young adult; directing the court to retain jurisdiction
1531 and hold review hearings; amending s. 39.701, F.S.; revising
1532 judicial review of foster care cases; making technical changes;
1533 providing criteria for review hearings for children 17 years of
1534 age; requiring the department to update the case plan; providing
1535 for review hearings for young adults in foster care; amending s.
1536 409.145, F.S.; requiring the department to develop and implement
1537 a system of care for children in foster care; specifying the
1538 goals of the foster care system; requiring the department to
1539 assist foster care caregivers to achieve quality parenting;



Amendment No.

1540 specifying the roles and responsibilities of caregivers, the
1541 department, and others; providing for transition from a
1542 caregiver; requiring information sharing; providing for the
1543 adoption and use of a reasonable and prudent parent standard;
1544 defining terms; providing for the application for the standard
1545 of care; providing for limiting liability of caregivers;
1546 specifying foster parent room and board rates; requiring
1547 community-based care service providers to pay a supplemental
1548 monthly room and board payment to foster parents for providing
1549 certain services; directing the department to adopt rules;
1550 deleting obsolete provisions; amending s. 409.1451, F.S.;
1551 providing for the Road-to-Independence program; providing
1552 legislative findings and intent; providing for postsecondary
1553 services and support; specifying aftercare services; providing
1554 for appeals of a determination of eligibility; providing for
1555 portability of services across county lines and between lead
1556 agencies; providing for accountability; requiring a report to
1557 the Legislature; creating the Independent Living Services
1558 Advisory Council; providing for membership and specifying the
1559 duties and functions of the council; requiring reports and
1560 recommendations; providing for a young adult to retain personal
1561 property; requiring the department to document enrollment of
1562 eligible young adults in Medicaid; directing the department to
1563 adopt rules; amending s. 409.175, F.S.; allowing young adults
1564 remaining in care to be considered in the total number of
1565 children placed in a foster home; amending s. 409.903, F.S.;
1566 conforming a cross-reference; transferring funds within specific



Amendment No.

1567 | appropriations categories to implement programs in fiscal year
1568 | 2013-14; providing an effective date.

COMMITTEE MEETING REPORT
Health & Human Services Committee
4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

HB 4031 : Home Health Agencies

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones	X				
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz			X		
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 14 Total Nays: 0					

Appearances:

Lolley, Bobby (Lobbyist) - Waive In Support
 Home Care Association of Florida
 2489 Arvah Branch Blvd.
 Tallahassee FL 32309
 Phone: (850) 567-1951

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

HB 7129 : Residential Services for Children

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford				X	
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 13		Total Nays: 0			

HB 7129 Amendments

Amendment 225723

Adopted Without Objection

Amendment - Amendment to Strike all amendment by Rep. Fasano

Withdrawn



Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input checked="" type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee
 3 Representative Perry offered the following:

Amendment (with title amendment)

Remove everything after the enacting clause and insert:

7 Section 1. Paragraph (b) of subsection (2) of section
 8 409.175, Florida Statutes, is amended, and subsection (17) is
 9 added to that section, to read:

10 409.175 Licensure of family foster homes, residential
 11 child-caring agencies, and child-placing agencies; public
 12 records exemption.—

(2) As used in this section, the term:

14 (b) "Boarding school" means a school that ~~which~~ is
 15 registered with the Department of Education as a school which
 16 provides a residential service for students, and is either:

17 1. Accredited for academic programs by the Florida Council
 18 of Independent Schools, ~~or~~ the Southern Association of Colleges
 19 and Schools, an accrediting association that is a member of the
 20 National Council for Private School Accreditation, or an



Amendment No.

21 accrediting association that is a member of the Florida
22 Association of Academic Nonpublic Schools, ~~and which is~~
23 accredited for residential programs by the Council on
24 Accreditation, the Commission on Accreditation of Rehabilitation
25 Facilities, or the Coalition for Residential Education, ~~and or~~
26 2. accredited by one of the organizations in (b)1 as a
27 boarding school which includes both an academic and residential
28 component in the accreditation. ~~which is registered with the~~
29 ~~Department of Education as a school. Its program must follow~~
30 ~~established school schedules, with holiday breaks and summer~~
31 ~~recesses in accordance with other public and private school~~
32 ~~programs. The children in residence must customarily return to~~
33 ~~their family homes or legal guardians during school breaks and~~
34 ~~must not be in residence year round, except that this provision~~
35 ~~does not apply to foreign students. The parents of these~~
36 ~~children retain custody and planning and financial~~
37 ~~responsibility. A boarding school currently in existence and a~~
38 ~~boarding school opening and seeking accreditation have 3 years~~
39 ~~to comply with the requirements of this paragraph. A boarding~~
40 ~~school must provide proof of accreditation or documentation of~~
41 ~~the accreditation process upon request. A boarding school that~~
42 ~~cannot produce the required documentation or that has not~~
43 ~~registered with the Department of Education shall be considered~~
44 ~~to be providing residential group care without a license. The~~
45 ~~department may impose administrative sanctions or seek civil~~
46 ~~remedies as provided under paragraph (11) (a).~~

47 (17) Boarding schools are subject to the following
48 requirements:



Amendment No.

49 (a) A boarding school currently in existence or a boarding
50 school opening and seeking accreditation has 3 years after the
51 date of registration with the Department of Education to
52 complete the accreditation requirements of paragraph (2)(b).

53 (b) Effective July 1, 2013, the Department of Education
54 shall remove from registration and its website any boarding
55 school that has not completed the accreditation requirements of
56 paragraph (2)(b) or has not provided to the department letters
57 verifying that boarding school's application for accreditation
58 within 270 days after registration. Those verification letters
59 must be provided by an accrediting agency from (2)(b)1. or (2)
60 (b)2.

61 (c) A boarding school must provide proof of accreditation
62 or documentation of the accreditation process upon request by
63 the department. The boarding school must provide an annual
64 report to the department on its accreditation status pursuant to
65 paragraph (2)(b). The first report is due 1 year after the date
66 the boarding school registered with the Department of Education.
67 A boarding school that has been accredited pursuant to paragraph
68 (2)(b) is not subject to the reporting requirements required
69 under this subsection.

70 (d) A boarding school that cannot produce the required
71 documentation in accordance with this subsection, is not
72 registered with the Department of Education, or has not obtained
73 the accreditation required under paragraph (2)(b) shall be
74 considered to be providing residential group care without a
75 license. The department may impose administrative sanctions or
76 seek civil remedies as provided under paragraph (11)(a).



Amendment No.

77 (e) A boarding school shall require employees and
78 contracted personnel with direct student contact upon employment
79 to undergo level 2 background screening pursuant to chapter 435.
80 "Direct student contact" means unsupervised access to a student
81 for whom the boarding school is responsible. The department may
82 grant exemptions from disqualification from working with
83 children as provided in s. 435.07.

84 (f) A boarding school shall follow established school
85 schedules and provide holiday breaks and summer recesses
86 provided by other public and private school programs. The
87 students in residence must customarily return to their family
88 homes or legal guardians during school breaks and, with the
89 exception of students who are citizens of foreign countries,
90 must not be in residence year-round. The parents of a child
91 attending a boarding school shall retain custody of and planning
92 and financial responsibility for their child.

93 Section 2. Subsections (10) and (15) of section 409.176,
94 Florida Statutes, are amended to read:

95 409.176 Registration of residential child-caring agencies
96 and family foster homes.—

97 (10) (a) The qualified association shall notify the
98 department within 24 hours after ~~when~~ the qualified association
99 finds there is a violation of any of the provisions of this
100 section which threatens harm to any child or which constitutes
101 an emergency requiring immediate action.

102 (b) The qualified association shall notify the department
103 within 3 calendar days after ~~when~~ the qualified association
104 finds, ~~within 30 days after written notification by registered~~



Amendment No.

105 ~~mail of the requirement for registration,~~ that a person or
106 facility continues to care for children without a certificate of
107 registration issued pursuant to this section, a license pursuant
108 to s. 409.175, or registration as a boarding school pursuant to
109 s. 409.175. The department shall notify the appropriate state
110 attorney of the violation of law and, if necessary, shall
111 institute a civil suit to enjoin the person or facility from
112 continuing the care of children.

113 (c) The department may institute injunctive proceedings in
114 a court of competent jurisdiction to:

- 115 1. Enforce the provisions of this section; or
116 2. Terminate the operation of a facility in which any of
117 the conditions described in paragraph (a) or paragraph (b)
118 exist.

19
120 Such injunctive relief may be temporary or permanent.

121 (15) The qualified association issuing certificates of
122 registration for Type II facilities under this section shall
123 annually report to the department the following information:

124 (a) The number of Type II facilities registered during the
125 most recent calendar year, the names and addresses of the
126 facilities, and the name of each facility's administrator, ~~and~~

127 (b) The total number of children served by each facility
128 during the calendar year.

129
130 The department may impose an administrative fine against the
131 qualified association not to exceed \$250 per violation for
132 failure to comply with the requirements of this section.



Amendment No.

133 Section 3. This act shall take effect July 1, 2013.

134

135

136

137

138

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

139

Remove everything before the enacting clause and insert:

140

An act relating to residential services for children; amending

141

s. 409.175, F.S.; providing accreditation requirements for

142

boarding schools; establishing reporting requirements for

143

boarding schools during the accreditation process; authorizing

144

the Department of Children and Families to impose administrative

145

sanctions or civil remedies when residential group care is

146

provided without a license; requiring background screening for

147

boarding school personnel; requiring boarding schools to follow

148

standard school schedules, holiday breaks, and summer recesses;

149

revising residency requirements; amending s. 409.176, F.S.;

150

requiring notification of qualified associations for specified

151

violations; providing for fines; providing an effective date.



Committee on _____

Date _____

Action Withdrawn

HOUSE AMENDMENT FOR DRAFTING PURPOSES ONLY
(may be used in Committee, but not on House Floor)

Amendment No. 1a

Bill No. 7129

(For filing with the Clerk, Committee and Member Amendments **must** be prepared on computer)

Representative(s)/The Committee on Fasano

offered the following amendment:

Amendment to Amendment

on page 4, line 93,

Delete lines 93-132

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

HB 7139 : Mental Health First Aid Training Program

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings	X				
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis	X				
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 16		Total Nays: 0			

HB 7139 Amendments

Amendment 673323

Adopted Without Objection

Appearances:

Messer, Shane (Lobbyist) - Waive In Support
 Florida Council for Community Mental Health
 316 E Park Ave
 Tallahassee FL 32301
 Phone: 850) 224-6048

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM



Amendment No.

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee
 3 Representative Harrell offered the following:

Amendment (with title amendment)

Remove everything after the enacting clause and insert:

Section 1. Mental Health First Aid Training program.-

8 (1) The Department of Children and Families shall
 9 establish a Mental Health First Aid Training program to help the
 10 public identify and understand the signs of mental illness and
 11 substance use disorders and to provide the public with skills to
 12 help a person who is developing or experiencing a mental health
 13 or substance use problem.

14 (2) The program shall provide an interactive Mental Health
 15 First Aid Training course through contracts with behavioral
 16 health managing entities or other appropriate community
 17 providers. The contracting entity shall work cooperatively with
 18 local schools to provide first priority for training to the
 19 staff in schools, as appropriate.



Amendment No.

20 (3) The mental health first aid training shall include,
21 but not be limited to, the following:

22 (a) An overview of mental illnesses and substance use
23 disorders and the need to reduce the stigma of mental illness.

24 (b) Information on the potential risk factors and warning
25 signs of mental illness or substance use disorders, including
26 depression, anxiety, psychosis, eating disorders, and self-
27 injury, and common treatments for those conditions.

28 (c) An action plan that encompasses the skills, resources,
29 and knowledge to assess the situation; select and implement
30 appropriate interventions; and help an individual with
31 appropriate professional, peer, social, or self-help care.

32 (4) The department shall insure that instructors of the
33 Mental Health First Aid Training have been certified by a
34 National Authority for Mental Health First Aid USA.

35 (5) The department shall submit a report on the
36 effectiveness of Mental Health First Aid Training pursuant to
37 this Act, with recommendations regarding continued
38 implementation. The reports shall be delivered to the Governor,
39 President of the Senate, and Speaker of the House of
40 Representatives by December 31, 2015.

41 (6) This section shall expire on June 30, 2016.

42 Section 2. This act shall take effect July 1, 2013.

43

44

45

46

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

47

Remove everything before the enacting clause and insert:



Amendment No.

48 An act relating to a mental health first aid training
49 program; requiring the Department of Children and
50 Families to establish a Mental Health First Aid
51 Training program; providing for a Mental Health First
52 Aid course to be offered by behavioral health managing
53 entities or other community providers; providing
54 course requirements; requiring the department to
55 ensure that instructors of the course have been
56 certified; requiring the department to submit a
57 report; providing an expiration date; providing an
58 effective date.

59

COMMITTEE MEETING REPORT
Health & Human Services Committee
4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

HB 7151 : Agency for Health Care Administration

Favorable

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings	X				
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones	X				
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis	X				
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)	X				
Total Yeas: 17					
		Total Nays: 0			

Appearances:

McKinstry, Molly (Lobbyist) (State Employee) - Information Only
 Agency for Health Care Administration
 2727 Mahan Dr
 Tallahassee FL 32308
 Phone: 850) 412-4334

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM

COMMITTEE MEETING REPORT
Health & Human Services Committee

4/16/2013 9:00:00AM

Location: Morris Hall (17 HOB)

HB 7153 : Quality Cancer Care and Research

Favorable With Committee Substitute

	<i>Yea</i>	<i>Nay</i>	<i>No Vote</i>	<i>Absentee Yea</i>	<i>Absentee Nay</i>
Larry Ahern	X				
Gwyndolen Clarke-Reed	X				
W. Travis Cummings			X		
Katie Edwards	X				
Mike Fasano	X				
Joseph Gibbons	X				
Gayle Harrell	X				
Mia Jones				X	
Shevrin Jones	X				
Mark Pafford	X				
Jimmy Patronis			X		
Cary Pigman	X				
Ronald Renuart			X		
Kenneth Roberson	X				
Elaine Schwartz	X				
John Tobia	X				
John Wood	X				
Richard Corcoran (Chair)			X		
Total Yeas: 13		Total Nays: 0			

HB 7153 Amendments

Amendment 236069

Adopted as Amended

Amendment 495975

Adopted Without Objection

Amendment 742705

Adopted Without Objection

Appearances:

Smith, Layne (Lobbyist) - Waive In Support
 Mayo Clinic
 4500 San Pablo Road
 Jacksonville Fl 32224
 Phone: (904) 343-3213

Committee meeting was reported out: Tuesday, April 16, 2013 3:49:26PM



Amendment No. 1

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input checked="" type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee

3 Representative Oliva offered the following:

Amendment (with title amendment)

6 Remove everything after the enacting clause and insert:
 7 Section 1. Section 381.925, Florida Statutes, is created to
 8 read:

381.925 Cancer Center of Excellence Award.-

10 (1) The Legislature intends to recognize hospitals,
 11 treatment centers, and other providers in this state which
 12 demonstrate excellence in patient-centered, coordinated care for
 13 persons undergoing cancer treatment and therapy in this state.
 14 The goal of this program is to encourage excellence in cancer
 15 care in this state, attract and retain the best cancer care
 16 providers to the state, and help Florida providers be recognized
 17 nationally as a preferred destination for quality cancer care.
 18 The Cancer Center of Excellence Award will recognize providers
 19 that exceed service standards and excel in providing quality,
 20 comprehensive, and patient-centered coordinated care.



Amendment No. 1

21 (2) The Florida Cancer Control and Research Advisory
22 Council, established in s. 1004.435, and the Biomedical Research
23 Advisory Council, established in s. 215.5602, shall select 7
24 members and 6 members, respectively, to form a joint committee.

25 (a) The joint committee, consisting of 13 members, shall:

26 1. By January 1, 2014, develop rigorous performance
27 measures, a rating system, and a rating standard that must be
28 achieved to document and distinguish a cancer center that excels
29 in providing quality, comprehensive, and patient-centered
30 coordinated care;

31 2. Review at least every 3 years, and revise if
32 applicable, the performance measures, rating system, and rating
33 standard to ensure providers are continually enhancing their
34 programs to reflect best practices and advances in cancer
35 treatment and care from the perspective of comprehensive and
36 patient-centered coordinated care; and

37 3. Submit its proposed performance measures, rating
38 system, and rating standard to the Florida Cancer Control and
39 Research Advisory Council and the Biomedical Research Advisory
40 Council to be approved by both councils prior to the evaluation
41 of any provider under such criteria.

42 (b) The criteria established by the joint committee must
43 require, at a minimum, that each hospital, treatment center, or
44 other provider:

45 1. Maintain a license in this state which authorizes
46 health care services to be provided. A provider may not have
47 been disciplined or subjected to any administrative enforcement



Amendment No. 1

48 action by state or federal regulatory authorities within the
49 preceding 3 years.

50 2. Be accredited by the Commission on Cancer of the
51 American College of Surgeons.

52 3. Actively participate in at least one regional cancer
53 control collaborative that is operating pursuant to the Florida
54 Comprehensive Cancer Control Program's cooperative agreement
55 with the Centers for Disease Control and Prevention's National
56 Comprehensive Cancer Control Program.

57 4. Meet enhanced cancer care coordination standards which,
58 at a minimum, focus on:

59 a. Coordination of care by cancer specialists and nursing
60 and allied health professionals.

61 b. Psychosocial assessment and services.

62 c. Suitable and timely referrals and followup.

63 d. Providing accurate and complete information on
64 treatment options, including clinical trials, which consider
65 each person's needs, preferences, and resources, whether
66 provided by that center or available through other health care
67 providers.

68 e. Participation in a comprehensive network of cancer
69 specialists of multiple disciplines, which enables the patient
70 to consult with a variety of experts to examine treatment
71 alternatives.

72 f. Family services and support.

73 g. Aftercare and survivor services.

74 h. Patient and family satisfaction survey results.



Amendment No. 1

75 (c) The members of the joint committee shall serve without
76 compensation, but may receive reimbursement as provided in s.
77 112.061 for travel and other necessary expenses incurred in the
78 performance of their official duties.

79 (d) The Department of Health shall provide such staff,
80 information, and other assistance as is reasonably necessary to
81 assist the joint committee in carrying out its responsibilities.

82 (3)(a) A provider may apply to the Department of Health
83 for a Cancer Center of Excellence Award. The joint committee
84 must develop an application form to be used by the Department of
85 Health that requires, among other things, submission of
86 documentation by the provider which demonstrates that the
87 criteria in subsection (2) have been met.

88 (b) After January 1, 2014, the Department of Health shall
89 annually conduct two application cycles. The applications are
90 not applications for licensure, the grant of the award by the
91 Surgeon General is not final agency action, and the Cancer
92 Center of Excellence Award program is not subject to the
93 provisions of chapter 120.

94 (4)(a) The State Surgeon General shall appoint a team of
95 independent evaluators to assess applicants to determine
96 eligibility for the award. An application is to be evaluated
97 independently of any other application. The team shall consist
98 of five evaluators to be selected, in any combination, from the
99 following:

100 1. No more than five health care practitioners or health
101 care facilities not licensed in this state which provide health
102 care services involving cancer diagnoses or treatment;



Amendment No. 1

103 2. No more than three members from the Florida Cancer
104 Control and Research Advisory Council;

105 3. No more than two members from the Biomedical Research
106 and Advisory Council; and

107 4. No more than one layperson who has experience as a
108 cancer patient or as a family member of a cancer patient if that
109 person or his or her family member did not receive care from the
110 applicant or providers being evaluated.

111 (b) Each evaluator must be independent and free of any
112 conflict of interest with respect to a health care provider or
113 facility licensed in this state. Each person selected to
114 participate on the evaluation team must sign a conflict of
115 interest attestation before being appointed to the evaluation
116 team.

117 (5) (a) Two evaluation team members may, as necessary,
118 conduct an onsite evaluation to verify submitted application
119 documentation.

120 (b) Each member on the evaluation team shall report to the
121 State Surgeon General those applicants that achieved or exceeded
122 the required score based on the rating system developed in
123 subsection (2) which demonstrates the cancer center excels in
124 providing quality, comprehensive, and patient-centered
125 coordinated care.

126 (c) The State Surgeon General shall, after consultation
127 with the evaluation team, determine if the review process was
128 objective and consistent to ensure a fair and high quality
129 evaluation process, and grant the awards.



Amendment No. 1

130 (6) The State Surgeon General shall notify the Governor
131 which providers have been granted the Cancer Center of
132 Excellence Award by the Surgeon General.

133 (7) The award shall be recognized for a period of 3 years
134 from the date of the award. A provider may reapply for
135 subsequent awards.

136 (8) A provider that receives a Cancer Center of Excellence
137 Award may use the designation in its advertising and marketing
138 for up to 3 years from the date of the award. In addition, a
139 provider that receives a Cancer Center of Excellence Award may
140 be granted, for 3 years from the date of the award, a preference
141 in competitive solicitations related to cancer care or research
142 undertaken by a state agency or state university.

143 (9) The State Surgeon General shall report to the
144 President of the Senate and the Speaker of the House of
145 Representatives by January 31, 2014, the status of implementing
146 the Cancer Center of Excellence Award program, and by December
147 15 annually thereafter, the number of applications received, the
148 number of award recipients by application cycle, a list of award
149 recipients, and recommendations to strengthen the program.

150 (10) The Department of Health shall adopt necessary rules
151 related to the application cycles and submission of the
152 application form.

153 Section 2. Paragraph (j) is added to subsection (4) of
154 section 215.5602, Florida Statutes, and paragraphs (a) and (b)
155 of subsection (10) and subsection (12) are amended in that
156 section to read:



Amendment No. 1

157 215.5602 James and Esther King Biomedical Research
158 Program.—

159 (4) The council shall advise the State Surgeon General as
160 to the direction and scope of the biomedical research program.
161 The responsibilities of the council may include, but are not
162 limited to:

163 (j) The council shall select, by majority vote, 6 members
164 of the council, who must combine with 7 members of the Florida
165 Cancer Control and Research Advisory Council to form a joint
166 committee to develop performance measures, a rating system, a
167 rating standard, and an application form for the Cancer Center
168 of Excellence Award created in s. 381.925. The council shall
169 also support the State Surgeon General in implementing the award
170 program by ensuring that at least two members of the council,
71 who must be independent of the applicants for the award, are
172 available to serve on the evaluation team as requested by the
173 State Surgeon General. The council shall advise the State
174 Surgeon General with respect to the Cancer Center of Excellence
175 Award program.

176 (10) The council shall submit a fiscal-year progress
177 report on the programs under its purview to the Governor, the
178 State Surgeon General, the President of the Senate, and the
179 Speaker of the House of Representatives by December 15. The
180 report must include:

181 (a) A list of research projects supported by grants or
182 fellowships awarded under the program. For each listed research
183 project, the report must include:



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184 1. The total amount granted to support the research
185 project and any amount of unobligated or unspent funds.

186 2. An itemization of all expenditures, including those for
187 salaries, equipment, and overhead.

188 3. Whether the research is ongoing or has been completed.

189 4. If the research has not been completed, the estimated
190 date of completion.

191 (b) A list of recipients of program grants or fellowships.
192 The report must include, for each recipient, the amount awarded,
193 the intended use of the award, and a brief description of the
194 reasons why the recipient was chosen for the award.

195 (12) (a) Beginning in the 2011-2012 fiscal year and
196 thereafter, \$25 million from the revenue deposited into the
197 Health Care Trust Fund pursuant to ss. 210.011(9) and 210.276(7)
198 shall be reserved for research of tobacco-related or cancer-
199 related illnesses. Of the revenue deposited in the Health Care
200 Trust Fund pursuant to this section, \$25 million shall be
201 transferred to the Biomedical Research Trust Fund within the
202 Department of Health. Subject to annual appropriations in the
203 General Appropriations Act, \$5 million shall be appropriated to
204 the James and Esther King Biomedical Research Program, \$5
205 million shall be appropriated to the William G. "Bill" Bankhead,
206 Jr., and David Coley Cancer Research Program created under s.
207 381.922.

208 (b) Subject to annual appropriations in the General
209 Appropriations Act, \$5 million shall be appropriated to the H.
210 Lee Moffitt Cancer Center and Research Institute established
211 under s. 1004.43, \$5 million shall be appropriated to the



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212 Sylvester Comprehensive Cancer Center of the University of
213 Miami, and \$5 million shall be appropriated to the Shands Cancer
214 Hospital.

215 (c) Funds appropriated to entities listed in subsection (b)
216 and any other entity that performs or is associated with cancer
217 research or care that receives a specific appropriation for
218 biomedical research, research-related functions, operations or
219 other supportive functions, or expansion of operations in the
220 General Appropriations Act must submit beginning July 1, 2014 an
221 annual fiscal-year progress report to the President of the
222 Senate and the Speaker of the House of Representatives by
223 December 15. The report must:

- 224 1. Contain an itemization of all expenditures;
- 225 2. Identify the amount of unobligated or unspent funds
226 appropriated, if any;
- 227 3. Include a report from an independent audit of receipts
228 and payments of the state funds, which may be funded by a
229 portion of the appropriation;
- 230 4. Specify the research, if any, funded by the
231 appropriation, as well as the expected and actual results of
232 such research;
- 233 5. Describe any fixed capital outlay project funded by the
234 appropriation, the need for the project, how the project will be
235 utilized, and the timeline for and status of the project, if
236 applicable;
- 237 6. Include the job description, annual salary and
238 benefits, and performance reviews of all funded staff positions,
239 if applicable;



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240 7. Identify any federal or private grants or donations
241 generated as a result of the appropriation or activities funded
242 by the appropriation;

243 8. Specify the research, if any, funded by the
244 appropriation, as well as the expected and actual results of
245 such research; and

246 9. Include an assessment of the direct and indirect
247 economic impact of the appropriation, including a description of
248 the contribution of research funded by the appropriation to
249 scientific or technological advancement, and including the
250 economic impact of any federal and private grants or donations
251 generated as a result of the appropriation or activities funded
252 by the appropriation.

253 Section 3. Subsection (4) of section 381.922, Florida
254 Statutes, is renumbered as subsection (5), and new subsections
255 (4) and (6) are added to that section, to read:

256 381.922 William G. "Bill" Bankhead, Jr., and David Coley
257 Cancer Research Program.—

258 (4) In order to attract and retain experienced research
259 talent and attendant national grant-producing researchers to
260 integrated cancer research and care institutions in this state,
261 the Department of Health may award only one endowment per
262 integrated cancer research and care institution that applies, on
263 a form developed by the department, for an endowed research
264 chair grant. The institution must hold a Cancer Center of
265 Excellence Award pursuant to s. 381.925 or a designation by the
266 National Cancer Institute or its successor organization, for the
267 purpose of establishing funded research chairs, pursuant to a



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268 specific appropriation for this purpose in the General
269 Appropriations Act. The funds used for such purpose must be
270 independent of funds appropriated pursuant to s. 215.5602(12).
271 A recipient of endowed research chair funds is required to place
272 the funds in an interest bearing account and the interest must
273 be added to the principal balance of the endowment. The
274 endowments are to be used to provide secure funding for research
275 chairs for at least 7 years and to attract experienced and
276 promising researchers whose continued employment for this period
277 is not contingent upon grant awards associated with time-limited
278 research projects. In addition, the Legislature intends for the
279 research chairs to specialize in a cancer-related research field
280 that will facilitate coordination among research institutions
281 within the state, attract other promising researchers and
282 funding to the state, and assist in the sharing of knowledge,
283 resources and facilities to spur initiatives that facilitate
284 commercialization of scientific or technological advancements
285 related to cancer research.

286 (a) Upon selection of a research chair the institution
287 shall notify the chair of the Appropriations Committee of the
288 Senate and the chair of the Appropriations Committee of the
289 House of Representatives. An institution funded pursuant to
290 this subsection shall provide to the Governor, the President of
291 the Senate, and the Speaker of the House of Representatives an
292 annual progress report by December 15 that must, at a minimum:

- 293 1. Describe the research program or institution receiving
294 the endowed chair funds;
295 2. Identify the endowed research chair's name;



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296 3. Indicate the amount of the endowment funds used for the
297 chair's salary;

298 4. State the endowment balance, expenditures, interest
299 rate, and interest earned;

300 5. Describe the general responsibilities of the researcher
301 who is to be selected for the endowed research chair;

302 6. Identify the percentage of time devoted to research and
303 research-related activities if the chair also serves as a member
304 of the faculty;

305 7. Describe the status of recruitment activities and
306 identify any barriers to attracting promising researchers to the
307 state;

308 8. Identify any federal or private grants or donations
309 generated as a result of the chair's efforts; and

310 9. Describe initiatives that spur the sharing of
311 knowledge, facilities, and resources and facilitate
312 commercialization of scientific or technological advancements
313 related to cancer research.

314 (b) If an institution must replace an endowed research
315 chair, the endowment must cease funding expenses associated with
316 the endowed research chair, other than reasonable costs for
317 recruitment, until a replacement chair has been retained. While
318 the endowed research chair is vacant, the endowment must
319 continue to earn interest and all earnings must be added to the
320 balance of the endowment. A vacancy tolls the 7-year timeframe
321 for the endowed research chair.

322 (6) The department shall submit a report relating to
323 grants awarded under the program to the Governor, the President



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324 of the Senate, and the Speaker of the House of Representatives
325 by December 15 each year. The report must include:

326 (a) A list of cancer research projects supported by grants
327 awarded under the program. For each listed research project, the
328 report must include:

329 1. The total amount granted to support the research
330 project and any amount of unobligated or unspent funds.

331 2. An itemization of all expenditures, including those for
332 salaries, equipment, and overhead.

333 3. Whether the research is ongoing or has been completed.

334 4. If the research has not been completed, the estimated
335 date of completion.

336 (b) A list of recipients of research grants. The report
337 must include, for each recipient, the amount awarded, the
38 intended use of the award, and a brief description of the
339 reasons why the recipient was chosen for the award.

340 Section 4. Paragraph (r) of subsection (4) of section
341 1004.435, Florida Statutes, is redesignated as paragraph (s),
342 and a new paragraph (r) is added to that subsection, to read:

343 1004.435 Cancer control and research.—

344 (4) FLORIDA CANCER CONTROL AND RESEARCH ADVISORY COUNCIL;
345 CREATION; COMPOSITION.—

346 (r) The council shall select, by majority vote, 7 members
347 of the council, who must combine with 6 members of the
348 Biomedical Research Advisory Council to form a joint committee
349 to develop performance measures, a rating system, a rating
350 standard, and an application form for the Cancer Center of
351 Excellence Award created in s. 381.925. The council shall also



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352 support the State Surgeon General in implementing the Cancer
353 Center of Excellence Award program by ensuring that at least
354 three members of the council, who must be independent of the
355 applicants for the award, are available to serve on the
356 evaluation team as requested by the State Surgeon General. The
357 council shall advise the State Surgeon General with respect to
358 the Cancer Center of Excellence Award program.

359 Section 5. This act shall take effect July 1, 2013.

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

364 Remove everything before the enacting clause and insert:
365 An act relating to quality cancer care and research; creating s.
366 381.925, F.S.; providing legislative intent and goals;
367 establishing a Cancer Center of Excellence Award for providers
368 that excel in providing cancer care and treatment in this state;
369 requiring the Florida Cancer Control and Research Advisory
370 Council and the Biomedical Research Advisory Council to each
371 select a certain number of members to form a joint committee to
372 develop and periodically update performance measures, a rating
373 system, and a rating standard in accordance with specified
374 criteria for applicants to qualify for the award; requiring
375 approval by both councils of the performance measures, rating
376 system, and rating standard developed by the joint committee;
377 providing minimum standards; prohibiting members of the joint
378 committee from being compensated, but authorizing reimbursement
379 for travel and other necessary expenses; authorizing a provider



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380 to apply to the Department of Health for the award; requiring
381 the joint committee to develop an application form; requiring
382 the department to conduct two application cycles each year;
383 specifying that ch. 120, F.S., does not apply to the
384 applications for or the award of the grant by the Surgeon
385 General; requiring the State Surgeon General to assemble an
386 evaluation team to assess applications; requiring each
387 application to be evaluated independently of any other
388 application; providing membership of and requirements for the
389 evaluation team; providing duties of the members of the
390 evaluation team; requiring the State Surgeon General to notify
391 the Governor of the providers that are to receive the award;
392 limiting the duration of the award; authorizing an award-winning
393 cancer provider to use the designation in its advertising and
94 marketing; providing that an award-winning cancer provider is
395 granted preference in competitive cancer care solicitations for
396 a specified period of time; requiring the State Surgeon General
397 to report to the Legislature by a specified date, and annually
398 thereafter, the status of implementing the award program;
399 requiring the Department of Health to adopt rules related to the
400 application cycles and submission of the application forms;
401 amending s. 215.5602, F.S.; revising the responsibilities of the
402 Biomedical Research Advisory Council with regard to the Cancer
403 Center of Excellence Award program; requiring the council to
404 submit additional information in an annual fiscal-year progress
405 report; requiring entities receiving an appropriation in the
406 General Appropriations Act to submit by a specific date to the
407 Legislature an annual fiscal-year progress report; amending s.



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408 | 381.922, F.S.; authorizing endowments, subject to an
409 | appropriation, under the William G. "Bill" Bankhead, Jr., and
410 | David Coley Cancer Research Program for establishing funded
411 | research chairs at integrated research and care institutions who
412 | hold an Cancer Center of Excellence Award; providing procedures
413 | if the endowed chair becomes vacant; requiring that research
414 | institutions report certain information regarding the selected
415 | research chair of the endowment and other information about the
416 | endowment; providing for qualifications of the chair; specifying
417 | the use of the funds in the endowment; requiring the Department
418 | of Health to submit an annual report relating to grants awarded
419 | under the William G. "Bill" Bankhead, Jr., and David Coley
420 | Cancer Research Program; amending s. 1004.435, F.S.; revising
421 | the responsibilities of the Florida Cancer Control and Research
422 | Advisory Council with regard to the Cancer Center of Excellence
423 | Award program; providing an effective date.



Amendment No. 1a

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	___	(Y/N)
ADOPTED AS AMENDED	___	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	___	(Y/N)
WITHDRAWN	___	(Y/N)
OTHER	_____	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee

3 Representative Pigman offered the following:

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Amendment to Amendment (236069) by Representative

Remove line 57 of the amendment and insert:

4. Demonstrate excellence in and dissemination of
 scientifically rigorous cancer research.

5. Integrate training and education of biomedical
 researchers and health care professionals.

6. Meet enhanced cancer care coordination standards,
 which,



Amendment No. 1b

COMMITTEE/SUBCOMMITTEE ACTION

ADOPTED	<input type="checkbox"/>	(Y/N)
ADOPTED AS AMENDED	<input checked="" type="checkbox"/>	(Y/N)
ADOPTED W/O OBJECTION	<input checked="" type="checkbox"/>	(Y/N)
FAILED TO ADOPT	<input type="checkbox"/>	(Y/N)
WITHDRAWN	<input type="checkbox"/>	(Y/N)
OTHER	<input type="checkbox"/>	

1 Committee/Subcommittee hearing bill: Health & Human Services
 2 Committee
 3 Representative Pigman offered the following:

4
 5 **Amendment to Amendment (236069) by Representative (with**
 6 **title amendment)**

7 Remove lines 264-268 of the amendment and insert:
 8 chair grant. The endowment for the research chair is subject to
 9 a specific appropriation for this purpose in the General

10
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T I T L E A M E N D M E N T

14
 15 Remove lines 411-412 of the amendment and insert:
 16 research chairs at integrated research and care institutions;
 17 providing procedures