

House Bill No. 7041

An act relating to the Florida Self-Directed Care program; amending s. 394.9084, F.S.; authorizing the Department of Children and Family Services to expand the program statewide; requiring the department to implement a payment mechanism for mental health treatment and support services; defining the term “fiscal intermediary”; providing for the duties of the fiscal intermediary; permitting the fiscal intermediary to receive funds on behalf of participants; requiring an evaluation by the Office of Program Policy Analysis and Government Accountability by a certain date; providing evaluation criteria; deleting provisions relating to the evaluation of the original pilot program; deleting the expiration date of the program; providing an effective date.

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

Section 1. Subsections (1), (4), (6), (8), (9), and (10) of section 394.9084, Florida Statutes, are amended to read:

394.9084 Florida Self-Directed Care program.—

(1) The Department of Children and Family Services, in cooperation with the Agency for Health Care Administration, may provide develop a client-directed and choice-based Florida Self-Directed Care program in all department service districts, in addition to the pilot projects established project in district 4 and district 8, three other districts to provide mental health treatment and support services to adults who have a serious mental illness. The department may also develop and implement a client-directed and choice-based pilot project in one district to provide mental health treatment and support services for children with a serious emotional disturbance who live at home. If established, any staff who work with children must be screened under s. 435.04. The department projects shall implement a payment mechanism model in which each client controls the money that is available for that client’s mental health treatment and support services. The department shall establish interagency cooperative agreements and work with the agency, the Division of Vocational Rehabilitation, and the Social Security Administration to implement and administer the Florida Self-Directed Care program.

(4) The fiscal intermediary managing entity shall pay for the cost-efficient community-based services the participant selects to meet his or her mental health care and vocational rehabilitation needs and goals as identified on his or her recovery plan. For purposes of this section, the term “fiscal intermediary” means an entity approved by the department that helps the client manage his or her budget allowance, retains the funds, processes employment information, if any, and tax information, reviews records to ensure correctness, and writes paychecks to providers.

(6) The department, the agency, and the division may transfer funds to the fiscal intermediary managing entity.

(8) The department and the agency shall will complete a memorandum of agreement to delineate management roles for operation of the Florida Self-Directed Care program.

(9) By December 31, 2009, the Office of Program Policy Analysis and Government Accountability shall evaluate the effectiveness ~~The department, the agency, and the division shall each, on an ongoing basis, review and assess the implementation of the Florida Self-Directed Care program. The evaluation shall include an assessment of participant choice and access to services, cost savings, coordination and quality of care, adherence to principles of self-directed care, barriers to implementation, progress toward expansion of the program statewide, and recommendations for improvement in the program.~~

~~(a) The department will implement an evaluation of the program and will include recommendations for improvements in the program.~~

~~(b) At a minimum, the evaluation must compare between program participants and nonparticipants:~~

- ~~1. Re-hospitalization rates.~~
- ~~2. Levels of satisfaction.~~
- ~~3. Service utilization rates.~~
- ~~4. Residential stability.~~
- ~~5. Levels of community integration and interaction.~~

~~(c) The evaluation must evaluate adherence to the Centers for Medicare and Medicaid self-direction requirements, including:~~

- ~~1. Person-centered planning.~~
- ~~2. Individual budgets.~~
- ~~3. Availability of independently brokered services from recovery coaches and quality advocates.~~
- ~~4. Access to the program by all who are eligible to enroll.~~
- ~~5. Participant safety and program incident management planning.~~
- ~~6. An independently mediated grievance process.~~

~~(d) The evaluation must assess the economic self-sufficiency of the program participants, including the number of Individual Development Accounts.~~

~~(e) The evaluation must assess any adverse incidents resulting from the Florida Self-Directed Care, including consumer grievances, conflicts of interest, and patterns of self-referral by licensed professions.~~

~~The department is authorized to spend up to \$100,000 to pay for the evaluation. If the agency and the department obtain a federal waiver, the evaluation will be used to determine effectiveness.~~

~~(10) This section expires July 1, 2008.~~

Section 2. This act shall take effect July 1, 2008.

Approved by the Governor May 28, 2008.

Filed in Office Secretary of State May 28, 2008.