

Legislative Link

A legislative update provided by the United Way of Florida, Inc.

WHAT'S INSIDE:

Bills Heard this Week



United Way of Florida

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BILLS HEARD THIS WEEK

(Excerpted from Senate and House Committee Staff analyses.)

CS/HB 17 – Developmental Disabilities (Kravitz)

CS/HB 17 requires the Agency for Health Care Administration to develop and seek federal approval for a Model home and community-based waiver to serve children who are diagnosed with familial dysautonomia.

Familial dysautonomia (FD), or Riley-Day syndrome, is a genetic disease that is present from birth, which results in incomplete development of the nervous system causing a decreased number of nerve cells. The sensory nerve cells which are most severely affected are those responsible for pain, heat perception, and taste.

The Dysautonomia Foundation, Inc. in New York reports that based on the FD world-wide registry, as of January 2004 there are over 340 persons worldwide living with FD. One third of them live in the metropolitan New York City area, one third reside in Israel, and the remaining third live elsewhere in the United States and worldwide.² It has been reported that 17 persons with FD are residents of Florida.

Last Action: HOUSE Favorable by Health Care General

SB 96 – Protection & Care for Elders (Margolis and Fasano)

Senate Bill 96 upgrades the offense of aggravated abuse of an elderly or disabled person from a second degree felony to a first degree felony.

The bill also requires that certified law enforcement personnel receive training in the identification and investigation of elder abuse and neglect.

Last Action: SENATE Passed

CS/HB 177 – Substance Abuse Treatment (Adams)

The term “drug court” refers to court programs that specialize in cases where alcohol or drug addiction has led a person into trouble with the law.

Dependency court is for children who are dependent upon the state to protect them from abuse or neglect by their adult caretaker or caretakers.

CS/SB 177 authorizes a dependency court to order individuals involved in a dependency court case to be evaluated for drug or alcohol problems, and allows the court to refer an individual to dependency drug court for monitoring and treatment after a finding of dependency. Individuals may voluntarily enter drug court prior to a finding of dependency. This bill allows incarceration of persons referred to dependency drug court who fail to comply with the conditions of the referral.

Bills Heard this Week continued

CS/HB 177 - This bill also modifies laws regarding drug court programs for adult and juvenile criminal offenders. Currently, those programs are primarily structured as pre-trial diversion programs. This bill provides for post-adjudicatory and community supervision drug court referrals. Drug courts have traditionally used sanctions, including short terms of incarceration, as punishment for participants who violate terms of their treatment plan; however, a recent court ruling found that such incarceration for persons in a pre-adjudicatory drug court program is not authorized by law. This bill provides for incarceration of a person violating his or her treatment plan ordered by a drug court or as part of a pre-trial intervention program, which incarceration is in addition to any term of incarceration that may be ordered should the person leave drug court and then be convicted of the offense. Participation in a drug court prior to adjudication or a pre-trial intervention program is voluntary. The bill further requires that participants acknowledge in writing that they wish to enter the program and understand the program requirements and sanctions for non-compliance.

Last Action: HOUSE Favorable with CS by Justice Council

CS/HB 227 – Children’s Summer Nutrition Program (Greenstein)

CS/HB 227 requires each district school board to develop a plan to sponsor a summer nutrition program by May 1, 2006 and to operate sites beginning the summer of 2006. The sites must be within 5 miles of at least one elementary school at which 50% or more of the students are eligible for free and reduced-priced meals, for a period of 35 consecutive days. The sites must also be within 10 miles of each elementary school at which 50% or more of the students are eligible for free or reduced-price meals.

District school boards may exempt themselves from sponsoring a summer nutrition program by including the issue on an agenda at a regular or a special district school board meeting. The district must provide residents an opportunity to participate, and must vote on whether or not their district is to be exempt. The exemption shall be reconsidered annually by the school board, and the Commissioner of Education shall be notified of the board’s decision within 10 days.

District school boards may encourage not-for-profit entities to sponsor the program, but will be held harmless for failure to perform by any not-for-profit entity.

Last Action: HOUSE Favorable with CS by Future of Florida’s Families

SB 282 – Criminal Acts/State of Emergency (Aronberg and Fasano)

Senate Bill 282 upgrades the classification of “burglary” from a second degree felony to a first degree felony if the burglary is committed within an area subject to a state of emergency declared by the Governor.

Last Action: SENATE Favorable with 1 Amendment by Criminal Justice; Now in Domestic Security

HB 287 – Affordable Housing for the Elderly (Patterson)

HB 287 increases the maximum loan amount from \$200,000 to \$750,000 under the Elderly Housing Community Loan Program. This program is a component of the State Apartment Incentive Loan Program (SAIL), and provides funding for the repair or improvement of homes for the low-income elderly.

Last Action: HOUSE Favorable by State Infrastructure Council

CS/SB 318 – Cystic Fibrosis Treatment/Insurance (Margolis)

Cystic fibrosis is a progressive genetic disease that causes a range of symptoms primarily affecting the lungs and the digestive system. According to the Cystic Fibrosis Foundation, “the basic problem in cystic fibrosis is an error in the salt and water exchange in some cells. This causes the body to make thick, sticky mucous, which clogs the lungs and the pancreas.” This mucous can also prevent pancreatic enzymes from reaching the intestines to digest food and absorb food which results in malnutrition, slow growth, and poor weight gain. Approximately 10-20 percent of cystic fibrosis patients also have cystic fibrosis-related diabetes which usually begins in their teens or young adult years.

Bills Heard this Week continued

CS/SB 318 - The disease is the most common life-shortening genetic disorder among Caucasian individuals worldwide. Approximately 40 percent of children with cystic fibrosis live beyond age 18. The average life expectancy for those who live to adulthood is 30-33 years of age. The incident rate for cystic fibrosis in the United States is approximately one out of every 2,500 infants.

Committee Substitute for Senate Bill 318 requires group health insurance policies and group health maintenance organization (HMO) contracts to provide coverage for all medically necessary chest physiotherapy provided by a licensed respiratory therapist, home health care, equipment, supplies, and enteral formulas used to treat cystic fibrosis if the patient's treating physician or a physician authorized by the insurer or HMO who specializes in the treatment of cystic fibrosis certifies that such services are medically necessary.

The bill would not apply to any individual health insurance policy or individual HMO contract. It would also not apply to the standard policy, basic policy, or limited benefit policy sold to a small employer since a mandated benefit does not apply without a specific reference to such small group policies.

Last Action: SENATE Favorable with CS by Health Care; Now in General Government Appropriations

CS/HB 569 – Florida KidCare Program (Garcia)

CS/HB 569 allows continuous, year-round enrollment in the Florida KidCare program by removing statutory language restricting open enrollment to January and September of each year.

The bill provides that a KidCare application is valid for a period of 120 days from the date it was received. At the end of the 120 day period, if the applicant has not been enrolled in the program, the application is rendered invalid and the applicant must be notified of the action. The applicant may then resubmit the application after notification.

When the enrollment ceiling is reached, enrollment shall immediately cease.

Year round enrollment in KidCare will allow an increase in the number of children enrolled in the KidCare Program and the program will be able to use the full amount budgeted by the Legislature.

Last Action: HOUSE Favorable by Future of Florida's Families

CS/SB 590 - Mold Assessment/Remediation (Regulated Industries Committee and Senator Bennett)

This committee substitute provides a statutory section that gives authority to the Department of Business and Professional Regulation, Construction Industry Licensing Board (board), to regulate individuals and companies who hold themselves out to the public to perform mold assessment or mold remediation for compensation.

It exempts Division I and Division II contractors licensed under ch. 489, F.S., an individual in the manufactured housing industry who is licensed under ch. 320, F.S., or engineers licensed under ch. 471, F.S., when engaged in mold-related activities incidental to activities within the scope of their respective licenses. It also exempts authorized employees of the U.S., state, city and county governments performing mold assessment or mold remediation within the scope of their employment.

Last Action: SENATE Favorable by Criminal Justice; Now in General Government Appropriations

CS/SB 838 – Medicaid (Health Care Committee and Senator Peaden)

Committee Substitute for Senate Bill 838 was developed from recommendations submitted to the President of the Senate by the Senate Select Committee on Medicaid Reform. The bill contains both short and long-term Medicaid reform activities, pilot projects, and studies designed to improve efficiency and achieve sustainable growth in Florida's Medicaid program.

Bills Head this Week continued

Specifically, the bill:

- Requires the Agency for Health Care Administration (AHCA) to contract with a vendor to identify and counsel providers whose clinical practice patterns are outside normal practice patterns.
- Authorizes AHCA to use more single source contracting to reduce costs.
- Requires AHCA to determine if purchasing medical equipment is less expensive than rental and authorizes AHCA to facilitate purchases in lieu of long-term rentals.
- Directs AHCA to redesign and implement the capitated, integrated long-term care system (Senior Health Choices).
- Requires AHCA to consider increasing rates for certain services if it reduces costs in other parts of the Medicaid program.
- Requires the Comprehensive Assessment and Review for Long-term Care Services (CARES) staff to identify Medicare patients in nursing homes who are being inappropriately disqualified from coverage under Medicare and assist with appeal of the disqualification.
- Requires AHCA to contract with an entity to develop a real-time utilization tracking system or electronic medical record for Medicaid recipients.
- Requires the expansion of disease management programs through pilot projects.
- Requires AHCA to provide emergency department diversion programs.
- Changes the Medicaid prescription drug cost control program to reduce costs, waste, and fraud, while improving recipient safety.
- Allows mental health crisis care to be provided in a non-hospital setting if it is less costly.
- Authorizes AHCA to continue developing a plan to pilot the Governor's capitated managed care system to replace the fee-for-service system.
- Requires AHCA to develop an implementation plan with all specified elements to be submitted to the Senate and House Select Committees on Medicaid Reform for consideration and recommendation to the Legislature for implementation approval.
- Requires an evaluation of the pilot to be provided to the Governor and the Legislature no later than June 30, 2008, to consider statewide expansion.
- Requires Medicaid recipients in the MediPass program to have prior authorization by their assigned MediPass primary care physician for any non-emergency service.
- Requires that at least 5 percent of Medicaid audits to detect Medicaid funds lost to fraud and abuse be conducted on a random basis.
- Requires Medicaid recipients to be provided explanations of benefits.
- Requires AHCA to study the legal and program barriers to enforcing co-payments in the Medicaid program.
- Requires AHCA to develop recommendations to improve third-party liability recoveries.
- Requires AHCA to study ways to give financial incentives to physicians and other providers to reduce inappropriate utilization.
- Requires the Office of Program Policy Analysis and Government Accountability (OPPAGA) to confirm the value of nursing home diversion programs.
- Requires AHCA to conduct an analysis of joining a multi-state drug purchasing pool.
- Requires AHCA to study mechanisms for collecting patient-responsibility payments from persons in the diversion programs.
- Requires OPPAGA to conduct a study of Medicaid buy-in programs.
- Provides non-recurring funds to AHCA for the purpose of developing administrative infrastructure for the managed care pilot project and non-recurring funds to AHCA for the purpose of developing a managed care encounter data system.

Last Action: SENATE Temporarily Postponed by Health Care

CS/HB 881 – Community Behavioral Health Agencies (Cannon)

CS/HB 881 provides that, notwithstanding any other provision of law, mental health or substance abuse providers which are members in good standing of a nonprofit statewide association which has been in existence for at least 10 years and is comprised of at least 50 community-based mental health and substance abuse agencies which are primarily publicly funded and located in this state may form a self-insurance fund for the purpose of pooling and spreading liabilities of its group members in any property or casualty risk or surety insurance or securing the payment of benefits under worker's compensation. This authorization is predicated upon the fund: 1) having annual normal premiums in excess of \$5 million; 2) maintaining a continuing program of excess insurance coverage and reserve evaluation to protect the fund's financial stability; 3) submitting to the Office of Insurance Regulation annual audited financial statements; and 4) having a governing body comprised entirely of provider officials. For a fund's first 5 years of its existence the fund must comply with the same regulatory requirements of all other commercial or group self-insurance funds.

The bill also exempts the self insurance fund from the solvency, reserve and financial reporting requirements pertaining to workers compensation group self insurance funds, as well as from the premium tax and participation in the Florida Self-Insurance Fund Guaranty Association after five years of a fund's formation.

The bill designates certain substance abuse treatment and mental health service providers as agents of the state for the purposes of the sovereign immunity statute. However the immunity only applies to publicly funded services.

Last Action: HOUSE Favorable by Civil Justice

CS/HB 883 – Health Care Services for Minors and Incapacitated Persons (Ryan)

HB 883 specifies requirements for the Department of Children and Families (department) with respect to providing psychotropic medication to a child in the custody of the department. The bill:

- Requires the prescribing physician to attempt to obtain express and informed parental consent for providing such medication.
- Authorizes the department to provide psychotropic medication without such consent in certain circumstances.
- Requires the child to be evaluated by a physician.
- Requires the department to obtain court authorization for providing such medication within a specified period of time.
- Specifies circumstances under which medication may be provided in advance of a court order.
- Requires that a hearing be held on the motion to provide psychotropic medication to a child under certain circumstances.
- Requires the department to provide a child's medical records to the court.
- Requires the department to adopt rules governing procedures for determining the services needed, obtaining personal consent, and obtaining court authorization for the use of psychotropic medication.
- Requires that a patient be asked to give express and informed consent before admission or treatment.
- Requires additional information be provided with respect to risks and benefits of treatment, the dosage range of medication, potential side effects, and the monitoring of treatment.

Last Action: HOUSE Favorable with CS by Civil Justice

SB 1032 – Access to Health Care Act (Bennett)

SB 1032 revises the definition of "low-income" under the Access to Health Care Act, to extend eligibility for volunteer, uncompensated health care services to persons who are without health insurance and whose family income does not exceed 200 percent, rather than 150 percent, of the federal poverty level.

Last Action: SENATE Favorable by Health Care

Bills Heard this Week continued

HB 1073 – Immunizations (Hays)

HB 1073 requires each licensed assisted living facility to implement a program to offer immunizations against influenza viruses to all residents aged 65 or older.

The bill also requires district school boards and private school governing authorities to provide every student's parent specified information about meningococcal disease in accordance with the recommendations of the Department of Health (DOH). The bill requires the DOH to adopt rules specifying the age or grade level of students to receive the information consistent with recommendations of the Centers for Disease Control (CDC). It requires DOH to make information about the disease available to district school boards and private school governing authorities, who shall determine the means and methods for providing this information to students' parent.

Last Action: HOUSE Favorable with CS by Elder & Long-Term Care

HB 1179 – Eligibility for Medicaid Payments (Bullard)

The 2004 Legislature eliminated Medicaid eligibility for pregnant women with incomes above 150 percent of the federal poverty level effective July 1, 2005.

HB 1179 restores Medicaid coverage for pregnant women up to 185% of the federal poverty level.

This bill has a fiscal impact of \$60,760,185.

Last Action: HOUSE Favorable by Health Care General

CS/SB 1218 – Juvenile Defendants (Criminal Justice Committee and Wise)

CS/SB 1218 would expand the authority of the public defender from representing an indigent youth "alleged to be a delinquent child pursuant to a petition filed before a circuit court" to representing any indigent youth who is "taken into custody for a felony, a misdemeanor, or criminal contempt, or who is facing delinquency proceedings under chapter 985, F.S."

In addition, the PCS would provide that a youth may only waive the right to counsel after he or she has been given a meaningful opportunity to confer with counsel.

Last Action: SENATE Favorable with CS by Criminal Justice

CS/SB 1308 – Enclosed Indoor Workplace/Smoking (Regulated Industries Committee)

Committee Substitute for Senate Bill 1308 amends s. 386.204, F.S., to provide that a proprietor or other person in charge of an enclosed indoor workplace may not permit another person to smoke in the workplace. The CS also amends the penalty provisions in s. 561.695, F.S., to apply the penalty provisions for stand-alone bars to alcoholic beverage vendors who permit smoking in alcoholic beverage licensed establishments. Under current law these penalties only apply to alcoholic beverage vendors who have received a stand-alone bar designation from the Department of Business and Professional Regulation (DBPR).

The CS also amends s. 386.208, F.S., to provide that a law enforcement officer may issue a citation to any person who violates the provisions of the Clean Indoor Air Act. The CS specifies the minimum information that a citation must contain.

Last Action: SENATE temporarily postponed by Criminal Justice

HB 1319 – Independent Living (Bogdanoff)

HB 1319 provides number of revisions to the independent living transition services program within the Department of Children and Families (DCF or the department), including the following:

- Authorizes the court on its own motion, or a child to petition the court at any time prior to his or her 19th birthday to extend the court’s jurisdiction for a period of time not to exceed one year after his or her 18th birthday for purposes of:
 - Determining whether appropriate aftercare support, Road-to-Independence Scholarship Program, transitional support, mental health, and developmental disability services have been provided.
 - Meeting any requirement of federal law with respect to the court’s ongoing jurisdiction pending the federal government’s issuance of a Special Immigrant Juvenile Visa.
- Adds new requirements that must be included in the department’s judicial review social study report for each judicial review hearing held after a child’s 17th birthday, including written verification that a child has been:
 - Provided information about the right to petition for continued court jurisdiction;
 - Informed of the ability, if eligible for the Road-to-Independence Scholarship Program, to continue to reside with his or her licensed foster family or group care provider or in another licensed foster home arranged by the department; and
 - Appointed a guardian ad litem by his or her 17th birthday.
- Authorizes a young adult who is eligible for the Road-to-Independence Scholarship Program to choose between continuing to reside in his or her foster placement or reside in another licensed foster home arranged by DCF.

The Department of Children and Families and the Statewide Guardian ad Litem Office estimates that the bill will have a fiscal impact on their agencies of \$6,469,184 for FY 2005-2006 and \$5,949,709 for FY 2006-2007.

The bill shall take effect on July 1, 2005.

Last Action: HOUSE Favorable with CS by Civil Justice

HB 1379 – Older Adults and the Criminal Justice System (Gelber)

HB 1379 creates a time-limited workgroup to study the involvement of older adults in the criminal justice system.

The bill directs the Department of Elder Affairs (DOEA) to establish a workgroup to study older adults age 60 and above within the criminal justice system. The study will place particular emphasis on older adults age 70 and above.

The study shall address the following questions:

- To what extent do crimes committed by older adults result in arrest? If so, how does this affect these older adults and the criminal justice system?
- How do dementia and other mental illnesses affect older adults’ involvement with the criminal justice system?
- To what extent do current programs including the community and forensic mental health, substance abuse, and domestic violence systems, and specialty courts address the issues of older adults in the criminal justice system?

Bills Heard this Week continued

- Can meeting health, mental health, and social service needs of older adults result in reduced arrests, incarcerations, and recidivism?
- What is the state's capacity to provide early detection of significant medical issues or mental health conditions and what is its ability to respond timely and meaningfully?
- What services and practices would ensure the best early detection, assessment, treatment, and diversion of older adults who are arrested to ensure more effective use of available resources?
- What are the costs of services and practices identified by the workgroup?

This bill provides that the workgroup must be composed of at least 10 members from various state and local agencies.

Last Action: HOUSE Favorable by Elder & Long-Term Care

SB 1512 – Drug Abuse Prevention and Control (Aronberg and Miller)

Senate Bill 1512 increases criminal penalties for the sale, delivery, manufacture, or possession with intent to sell controlled substances within 1000 feet of a library.

Last Action: SENATE Favorable by Criminal Justice

HB 1605 – Caregivers for Adults (Brutus)

The bill creates the Seniors Offering Services program as an independent, not-for-profit organization within the Department of Elderly Affairs (DOEA).

The bill provides the following purposes for the Seniors Offering Services program:

- To foster the development of training and employment opportunities for economically disadvantaged workers 55 years of age and older that are critical to the provision of community-based and institutional care for frail and vulnerable adults who live in the community.
- To assist in meeting the growing demand for in-home companion care services and prevent costly premature institutional placement.
- To become a direct referral resource for DOEA.

Last Action: HOUSE Favorable with CS by Elder & Long-Term Care

HB 1615 – Guardianship (Sands)

HB1615 incorporates the recommendations of the Guardianship Task Force, the Florida State Guardianship Association, the Statewide Public Guardianship Office and the State Long-term Care Ombudsman Program within the Department of Elder Affairs. Among others, the bill:

- Creates definitions for the terms “audit” and “surrogate guardian,” and amending the definition of the term “professional guardian.”
- Increases the dollar threshold required for a court to appoint a guardian ad litem to review a settlement from \$15,000 to \$50,000 when the settlement involves a minor.
- Creates new reporting requirements related to the appointment of emergency temporary guardians.
- Creates new requirements related to investigations of credit history and background screening for guardians, including background investigations using inkless electronic fingerprints instead of fingerprint cards.
- Decreases the amount of time during which a guardian must complete the required instruction and education from 1 year to 4 months.
- Emphasizes the importance of an incapacitated person's right to quality of life, clarifying which rights cannot be delegated, reinforcing the significance of the right to marry, and subjecting the right to marry to court approval.
- Creates new restrictions and requirements relating to the appointment of an attorney for an alleged incapacitated person and providing for new requirements for members of examining committees.
- Creates requirements for additional information that must be included in an annual guardianship plan.

Bills Heard this Week continued

- Creates additional requirements relating to proof of payment for expenditures and disbursements made on behalf of a ward.
- Provides clerks of court with the authority to audit simplified and final accountings.
- Creates a new section of law related to the appointment of surrogate guardians.
- Corrects an unintended consequence of Article V whereby public guardians were not included in the group of entities exempt from payment of court-related fees and charges assessed by the clerks of the circuit court.

The bill imposes a surcharge on non-criminal traffic infractions and certain criminal violations to fund a county's public guardianship program. The surcharge must be approved by either a vote of two-thirds of the board of county commissioners or a referendum approved by the county's electors. The bill also provides for a surcharge to all misdemeanors; a portion of which would be used to fund public guardianship programs, with the remaining portion going to the clerks of court as a service fee.

Last Action: HOUSE Favorable with CS by Future of Florida's Families

SB 1618 – Autism Spectrum Disorder Medicaid Waiver Program (Atwater)

Senate Bill 1618 directs the Agency for Health Care Administration (AHCA) and the Agency for Persons with Disabilities (APD) to develop a home and community-based waiver program to provide personal care assistance, respite, and applied behavioral analysis for children who are diagnosed with Autism Spectrum Disorder. The bill directs AHCA to apply for federal approval of a Medicaid waiver and, subject to the availability of funding and any limitations provided in the General Appropriations Act, to implement the waiver program.

Last Action: SENATE Favorable by Health Care

HB 1633 – Hospices (Jennings)

HB 1633 removes the requirement that a hospice be operated as a not-for-profit corporation. The effective date is July 1, 2005.

Last Action: HOUSE Favorable with CS by Elder & Long-Term Care

HB 1659 – Parental Notification of Termination of a Minor's Pregnancy (Kottkamp)

In 1999, the Legislature created the "Parental Notice of Abortion Act" (Act), which requires that a physician performing or inducing the termination of the pregnancy of a minor must give at least 48 hours notice of the intention to terminate the pregnancy to one of the minor's parents or legal guardians. The Act provides for a judicial waiver of the notice requirement under certain circumstances.

Due to litigation over the constitutionality of the Act, it has never been enforced. In 2003, the Florida Supreme Court held that the Act violated a minor's right to privacy under art. I, s. 23, Fla. Const. In 2004, voters approved an amendment to the state constitution to permit the Legislature to require by general law for notification to a parent or guardian of a minor before the termination of the minor's pregnancy. The amendment requires the Legislature to provide exceptions to such requirement for notification and to create a process for judicial waiver of the notification.

HB 1659 implements the constitutional amendment. It re-enacts most of the Act. This bill requires that a physician must give 48 hours actual notice of the physician's intent to perform or induce the termination of a minor's pregnancy to one of the minor's parents or to the legal guardian of the minor. This bill provides exceptions to the notice requirement if a medical emergency exists and there is insufficient time to comply with the notice requirements or if notice is waived by the minor who is or has been married or has had the disability of nonage removed.

Bills Heard this Week continued

This bill provides for a judicial waiver of the notice requirement. It provides that a pregnant minor who is 14 years of age or older may petition the circuit court in the county where she resides for a waiver of the notice requirements. It provides a counsel and a guardian ad litem. This bill requires the court to rule on the petition within 7 days and provides the minor with a right to appeal an adverse ruling. The bill requires the court to grant the waiver of notice if the court finds, by clear and convincing evidence, that the minor is sufficiently mature to terminate her pregnancy without the knowledge of her parent or guardian. This bill requires the court to waive the notice requirement if the court finds by a greater weight of the evidence that there is evidence of child abuse or sexual abuse. This bill also requires the court to report evidence of child abuse or sexual abuse to the appropriate agency or law enforcement agency. This bill clarifies standards for the court to use in determining whether a minor is sufficiently mature to decide whether to terminate her pregnancy without the knowledge of her parent or guardian. It requires the court to hear all relevant evidence including evidence relating to the minor's emotional development, maturity, intellect, and understanding of the consequences of her actions.

Last Action: HOUSE Favorable with CS by Civil Justice

SB 1716 – Regional Autism Centers (Klein)

The bill increases the number of regional autism centers from six to seven. The new center is created by s. 1004.55, F.S., at the Department of Exceptional Student Education at Florida Atlantic University. The service area consists of Palm Beach, Indian River, Martin, Okeechobee, and St. Lucie Counties. The bill designates the Department of Psychology as an additional site at the University of Miami's center. The bill requires consistent service delivery for all centers and requires the board for each center to raise funds that are equivalent to 2 percent of the center's total fund allocation for each fiscal year. Finally, the bill prohibits direct medical intervention or pharmaceutical intervention at any center.

Last Action: SENATE Favorable with CS by Education

SB 1738 – Juvenile Detention (Wise)

Senate Bill 1738 would remove from the Department of Juvenile Justice (DJJ) the responsibility of supervising a youth placed on home detention pending adjudication, disposition, or placement. Instead of the DJJ having this supervision responsibility, the youth's parent, guardian, or custodian would have it under the bill.

The bill would also make electronic monitoring of youths placed on home detention permissive rather than mandatory. (According to the DJJ, electronic monitoring of youths on home detention is not currently funded under its budget.)

Last Action: SENATE Now in Criminal Justice

SB 1756 – Early Learning (Commerce and Consumer Services Committee and Senator King)

SB 1756 amends Florida's school readiness provisions in several ways:

Currently, early learning coalitions are required to provide to parents a profile of every VPK program provider with the county or multi-county region. The bill imposes a similar requirement on the coalitions for school readiness providers. The profiles must contain, at a minimum, the following information:

- The provider's services, curriculum, instructor credentials and instructor to student ratio;
- Whether the provider delivers the VPK Education Program; and
- If the provider does provide the state proscribed prekindergarten program, the kindergarten readiness rate as calculated under s. 1002.69, F.S.

Bills Heard this Week continued

SB 1756 - The bill revises the provision regarding financial incentives for child care providers who are part of the Gold Seal Quality Care Program. Section 402.281, F.S., provides that child care facilities, large family child care home, or family day care homes that are accredited by a nationally recognized accrediting association whose standards meet or exceed those of particular national child care associations, will be designated Gold Seal Quality Care facilities. Section 402.3051, F.S., provides market rate reimbursement for Gold Seal providers and prevailing market rate reimbursement for other licensed, exempt or registered child care providers. Currently, school readiness providers holding a Gold Seal Quality Care designation are eligible for a stipend of up to 20 percent beyond that provided for school readiness providers without the designation. Section 411.01(5)(e), F.S., is amended to limit this financial incentive to Gold Seal providers that comply with the educational requirements of the coalition's school readiness program.

The bill establishes a definitive priority sequence for admissions to school readiness programs. As in current law, priority admission is given to children from families in the TANF program and children who are served by the Family Safety Program Office of DCF, or similar local program. Using the eligibility categories in current law, subsequent priority is established as follows:

- Children under the age of kindergarten eligibility who are:
 - Children at risk of welfare dependency, including economically disadvantaged children, children of participants in the welfare transition program, children of migrant farm workers, and children of teen parents;
 - Children of working families whose family income does not exceed 150 percent of the federal poverty level; and
 - Children for whom the state is paying a relative caregiver payment under s. 39.5085, F.S.
- Three-year-old children and four-year-old children who may not be economically disadvantaged but who have disabilities, have been served in a specific part-time or combination of part-time exceptional education programs with required special services, aids, or equipment, and were previously reported for funding part time with the Florida Education Finance Program as exceptional students.
- Economically disadvantaged children, children with disabilities, and children at risk of future school failure, from birth to four years of age, who are served at home through home visitor programs and intensive parent education programs.
- Children who meet federal and state eligibility requirements for the migrant preschool program but who do not meet the criteria of economically disadvantaged.

The bill also authorizes provision of school readiness services to school-aged children. In the 2002-2003 fiscal year, 26 percent of school readiness program funds were expended on child care for school-age children and approximately one-third of the children served were school age.¹⁹ According to AWI, the percentage of school readiness program funds expended for school-age children grew to 27 percent, and the percentage of school-age children grew to almost 35 percent of the children served, for the period from January 2003 to August 2004.²⁰

In addition, local coalitions may not allocate more than 25 percent of the total school readiness funds for school-aged services. However, this cap may be exceeded if necessary to provide services for children from families receiving TANF benefits or at-risk children who are served by the Family Safety Program of DCF or similar local program. If the cap is exceeded, the coalition may not provide services to non-TANF school-aged children or school-age children who are not deemed at-risk.

Section 3 of the bill authorizes local coalitions, with the approval of AWI, to provide transportation to children served by school readiness programs. Furthermore, this section is amended to clarify that contracts for transportation services must comply with s. 411.1(5)(e)1., F.S.

Bills Heard this Week continued

SB 1756 - Section 4 combines two school readiness quality initiatives: the Teacher Education and Compensation Helps (TEACH) Early Childhood Project® and the Home Instruction for Parents of Preschool Youngsters (HIPPIY) Program. In addition, AWI, rather than DCF, is authorized to contract with these programs.

Section 5 renames the Child Care Executive Partnership (CCEP) Act the Early Learning Executive Partnership Act.

Section 6 authorizes the Governor to designate AWI as the lead agency for the federal Early Learning Opportunities Act and designates DOE as the lead agency for the William F. Goodling Even Start Family Literacy Programs. This section further requires DOE to contract with AWI to administer these family literacy programs.

Section 8 transfers, amends and renumbers s. 402.3051, F.S., as s. 411.0107, F.S., to address reimbursement rates. Under the former subsidized child care program, DCF determined reimbursement rates for child care services across the state. In 1999, under the School Readiness Act, the authority to set reimbursement rates was devolved to school readiness coalitions. Under federal regulations governing the Child Care and Development Fund Block Grant, which provides more than one-half of the funding for the state's school readiness programs, the state must demonstrate "[h]ow payment rates are adequate based on a local market rate survey."

Although s. 402.3051, F.S., has not been revised since responsibility for determining reimbursement rates was transferred to the school readiness coalitions, AWI has contracted for the market rate survey partially based on the instructions for collection of market-rate data and calculation of the prevailing market rate described in s. 402.3051, F.S.

This section replaces obsolete provisions relating to the state-level determination of reimbursement rates with provisions requiring the partnership to provide for the adoption of a prevailing market-rate schedule, which must be considered by school readiness coalitions when they adopt their payment schedules.

This section specifies that the schedule will include county-by-county rates at:

- One hundred twenty percent of the prevailing market rate (75th percentile of the market rate) for child development providers that hold a Gold Seal Quality designation and participate in the coalition's School Readiness Program; and
- The prevailing market rate for providers that do not hold a Gold Seal Quality designation.

This section also:

- Deletes a provision specifying that the prevailing market rate is based on the prices charged for child development services only by licensed providers, thereby reflecting the partnership's current practice that the market-rate survey also encompasses unlicensed providers;
- Requires the prevailing market-rate schedule to be based exclusively on the costs and prices charged for child development services;
- Prohibits the schedule from interfering with parental choice requirements or from using an assessment tool that evaluates providers to establish rates;
- Authorizes AWI to contract with a qualified entity to administer these provisions; and
- Provides other conforming changes.

Section 9 specifies that AWI, not DCF, is the agency responsible for the Warm-Line.

Bills Heard this Week continued

SB 1756 - Section 12 reflects the transfer of early learning responsibilities from the Florida Partnership for School Readiness to AWI. This section revises provisions for Early Head Start collaboration grants, clarifying that AWI may establish the grant program, subject to legislative appropriation. This section also specifies that the collaboration grants, if awarded, may only be used to provide matching funds for Early Head Start federal grants. This section clarifies AWI's rulemaking authority for the grant program and clarifies that AWI is not required to submit annual reports unless the grant program is established.

Section 13 directs AWI to create outcome measurements for children in school readiness programs.

Last Action: SENATE Favorable with 1 Amendment by Children & Families; Now in Education

SB 1862 – Women's Health Care (Dockery)

SB 1862 creates the "Women's Health and Safety Act," to require separate rules for licensed abortion clinics that perform abortions only during the first trimester of pregnancy, and for those licensed abortion clinics that perform abortions after the first trimester of pregnancy. The rules may not impose an unconstitutional burden, rather than a legally significant burden, on a woman's freedom to decide whether to terminate her pregnancy.

Last Action: SENATE Favorable by Health Care

SB 1994 – Visual Services for Adult Medicaid Recipients (Garcia)

SB 1994 expands the optional services in Medicaid to cover visual services for all Medicaid recipients, regardless of age.

Florida Medicaid currently reimburses for visual services has the following limitations:

- Eyeglasses and eyeglass repairs are limited to recipients younger than 21 years of age;
- Services limited to the provision or replacement of medically necessary eyeglasses;
- Services limited to no more than two pairs of eyeglasses per recipient, per 365 days; and
- Services for recipients age 21 and above are limited to prosthetic eyes and contact lenses.

Last Action: SENATE Favorable with CS by Health Care

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