



Final Weekly Digest: 2020 Legislative Session

Florida Association of Managing Entities



Notes from Natalie

A much quieter Sine Die for 2020!

The Florida Legislature, under the leadership of President Bill Galvano and Speaker Jose Oliva extended the 2020 Legislative Session by one week to complete negotiations and pass the budget. Session ended on Thursday, March 19th, without the traditional dropping of the handkerchiefs as part of the 'sine die' ceremony.

The Legislature unanimously approved the \$92.3 billion FY 2020-2021 General Appropriations Act. To date, the Governor

has not received the budget from the Legislature. Once received, the Governor has 15 days to release his line item vetoes. The budget sets aside \$300 million to handle the coronavirus outbreak and boosts state reserves to \$3.9 billion.

Bills passed during the 2020 SESSION

Below are bills that passed both Houses that are of interest to the Managing Entities.

CS/SB 1326: Child Welfare (DCF Accountability) Simpson / Ponder

The bill makes several changes to the child welfare programs administered by the Department of Children and Families (DCF) to promote accountability and improve program performance. The bill also seeks to increase the use of faith-based organizations in the delivery of services.

To improve accountability, the bill establishes the Office of Quality within DCF to measure and monitor the performance of agency programs whether provided directly by DCF or through contracts with local service providers. The office must set performance metrics and standards, improve the ability of DCF to analyze program performance data, and recommend initiatives to correct deficiencies. Such initiatives could include enhanced monitoring, corrective action plans, required technical assistance, and financial penalties.

The bill requires certain Sheriffs' Offices that conduct child protective investigations to follow the DCF child welfare practice model. DCF is to collaborate with all Sheriffs' Offices that conduct child protective investigations to develop a monitoring program to assess such services. The monitoring program must include case reviews based on a random selection of child welfare cases.

The bill revises the authority of DCF to contract for children's legal services in the child welfare system and requires increased oversight of contracted attorneys.

The bill directs DCF to develop a statewide accountability system for child welfare. The new accountability system must use a grading scheme to monitor performance in each region.

The bill establishes two 2-year pilot projects to improve child welfare services in the sixth and thirteenth judicial circuits. DCF must set performance metrics and standards for the pilot projects, monitor performance, and based on performance, award incentive funding to the community based care lead agency.

The bill expands the functions of the Florida Institute for Child Welfare (Institute) to inform, train, and engage social work students for a successful career in child welfare. The bill directs the Institute to work with the FSU College of Social Work to redesign the social work curriculum to enable postsecondary students to learn from real-world child welfare cases. Under the bill, the Institute must design and implement a professional development curriculum for the current child welfare workforce by July 1, 2021. The bill requires DCF, in collaboration with the Institute, to develop an expanded career ladder for child protective investigators.

The bill encourages the involvement of community-based and faith-based organizations in the local system of care. Local community alliances that advise DCF on local human services must now include a representative of a faith-based organization. Community-based care lead agencies must assign an employee to serve as a liaison to work with faith-based organizations. The bill also requires DCF to implement programs to prevent and mitigate the impact of secondary traumatic stress and burnout among child protective investigators. These three components of the bill have a short title of "State of Hope Act." *Note: No grading system outlined in the Senate, but authorizes DCF to develop a grading system.* (Summary by the Florida Senate)

CS/CS/HB 945: Children's Mental Health Silvers / Powell

The bill requires the Department of Children and Families (DCF) and the Agency for Health Care Administration (AHCA) to identify children, adolescents, and young adults age 25 and under who are the highest users of crisis stabilization services. The bill also requires DCF to collaboratively take action to meet the behavioral health needs of such children. The bill directs these agencies to jointly submit a quarterly report to the Legislature during Fiscal Years 2020-2021 and 2021-2022 on the actions taken by both agencies to better serve these individuals.

The bill requires the behavioral health managing entities (MEs) to create plans that promote the development and implementation of a coordinated system of care for children, adolescents, and young adults to integrate behavioral health services provided through state-funded child serving systems and to facilitate access to mental health and substance abuse treatment and services. The bill requires DCF to contract with the MEs for crisis response services provided through mobile response teams (MRTs) to provide immediate, onsite behavioral health services 24 hours per day, seven days per week within available resources.

When contracting for an MRT, MEs must collaborate with local sheriff's offices and public schools in the selection process. The bill also requires that the MRT establish response protocols with local law enforcement agencies, community-based care lead agencies, the child welfare system, and the Department of Juvenile Justice, and requires that the MRT provide access to psychiatrists or psychiatric nurse practitioners. The bill requires MRTs to refer children, adolescents, or young adults and their families to an array of crisis response services that address their individual needs.

The bill requires MEs to promote the use of available crisis intervention services. The bill requires contracted providers to give parents and caregivers of children who receive behavioral health services information on how to contact an MRT.

The bill amends foster parent preservice training requirements to include local MRT contact information and requires community-based care lead agencies to provide MRT contact information to all individuals that provide care for dependent children.

The bill requires principals of public and charter schools to verify de-escalation procedures have been followed and an MRT has been contacted prior to initiating a Baker Act of a student unless the principal or their designee reasonably believes a delay will increase the likelihood of harm to the student or others.

The bill requires DCF and AHCA to assess the quality of care provided in crisis stabilization units to children and adolescents who are high utilizers of such services and submit a joint report on their findings to the Governor and Legislature by November 15, 2020. The bill also requires AHCA to regularly test Medicaid managed care plan provider network databases to ensure that behavioral health providers are accepting enrollees and confirm sufficient access to behavioral health systems.

(Summary by the Florida Senate)

CS/SB 7012: Substance Abuse and Mental Health Book / Stevenson

The bill makes several changes to laws relating to **suicide prevention and substance abuse and mental health services**. Specifically, the bill:

- Broadens the scope and duties of the Statewide Office of Suicide Prevention (Statewide Office) in the Department of Children and Families (DCF) by requiring the Statewide Office to coordinate education and training curricula on suicide prevention efforts for law enforcement personnel, first responders to emergency calls, veterans, military service members, health care providers, and school employees.
- Creates the First Responders Suicide Deterrence Task Force within the Statewide Office to assist in the reduction of suicide rates of first responders, such as law enforcement officers and firefighters.

- Broadens the scope and duties of the Suicide Prevention Coordinating Council by requiring the Council to make recommendations on the implementation of evidence-based mental health programs and suicide risk identification training and adds five new members to the Council. **Includes FAME.**
- Requires Baker Act receiving facilities to provide information regarding the availability of local mobile response services and suicide prevention resources to minors being released from a facility.
- Redefines “mental illness” related to the Baker Act and post-adjudication commitment to exclude dementia and traumatic brain injury.
- Defines “coordinated specialty care programs” as an essential element of a coordinated system of care and requires the DCF to report annually on any gaps in availability or access in the state. Makes coordinated specialty care programs eligible for Criminal Justice, Mental Health, and Substance Abuse Reinvestment grants.
- Allows licensed health care professionals and facilities to contract with the DCF and managing entities to provide mental health services without obtaining a separate license from the DCF.
- Removes the requirement for substance abuse prevention coalitions to be certified by the DCF.
- Requires county jails to administer the psychotropic medications prescribed by the DCF when a forensic client is discharged and returned to the county jail to stand trial, unless the jail physician documents the need to change or discontinue such medication.
- Requires the DCF treating physician to consult with the jail physician and consider prescribing medication included in the jail’s drug formulary.
- Requires county jails to send to the DCF all medical information on individuals in their custody who will be admitted to a state mental health treatment facility for restoration of competency. Requires the DCF to request this information immediately upon receipt of a completed commitment packet and requires the county jail to provide such information within three business days of the request. *(Summary by the Florida Senate)*

OTHER BILLS OF INTEREST:

CS/HB 43: Child Welfare *Latvala / Rouson*

The bill is titled “Jordan’s Law” and makes a number of changes to the laws related to the child welfare system in an attempt to address issues that were identified in the case of Jordan Belliveau, a two-year old boy who was killed by his mother in Pinellas County in 2018.

The bill requires specified child welfare professionals, circuit and county judges who have responsibility for dependency cases, Guardian ad Litem program staff, and law enforcement officers to receive training developed on the recognition of and response to head trauma and brain injury in children under six years old. Such training for child welfare professionals must be developed by the Child Protection Teams within the Department of Health.

The bill creates a communication process between the Department of Children and Families and law enforcement by requiring the systems used by both agencies to allow the Florida Department of Law Enforcement to make available to law enforcement agencies information that a person is a parent or caregiver involved in the child welfare system. The communication process must be operational by March 1, 2021. The bill further requires that if a law enforcement officer interacts with such a person and has concerns for a child’s health, safety, or well-being, the officer shall contact the Florida central abuse hotline. The hotline must then provide relevant information to individuals involved in the child’s case. Quarterly progress reports are required until all systems enhancements and integrations required to implement these provisions are complete and in production.

The bill also requires third-party credentialing entities that certify child welfare personnel to review the findings and all relevant records involving the death of a child or other critical incident following completion of any reviews by the department, the inspector general, or the Office of the Attorney General if a complaint is filed by an outside party involving certified personnel. This review must assess the certified personnel’s compliance with the third-party credentialing entity’s published code of ethical and professional conduct and disciplinary procedures. The bill allows credentialing and provides additional duties for the department and third-party credentialing entities. *(Summary by the Florida Senate)*

CS/HB 81: Health Care for Children *Andrade / Montford*

Medicaid is the health care safety net for low-income Floridians. Medicaid is a partnership of federal and state governments established to provide coverage for health services for eligible persons. The program is administered by the Agency for Health Care Administration (AHCA) and financed by federal and state funds.

The Florida Medicaid Certified School Match Program (program) authorizes Medicaid coverage for certain school health services in public and private schools for students that are Medicaid recipients. Under the program, schools and school districts use state and local funds to pay for covered health services provided to students who are Medicaid recipients for which AHCA then reimburses them with matching federal Medicaid funds. Current law allows public school districts, charter schools, and private

schools to enroll as Medicaid providers, but also requires practitioners providing services in charter and private schools to individually enroll as Medicaid providers.

Medicaid recipients who receive services through the program must be under the age of 21 and qualify for Part B or H of the Individuals with Disabilities Education Act (IDEA) or for exceptional student services, or must have an individualized education plan (IEP) or individualized family service plan (IFSP). Health services provided must be both educationally relevant and medically necessary and tailored to meet the recipient's individual needs.

Until 2014, the federal Centers for Medicare and Medicaid Services (CMS) prohibited reimbursement for the services covered by the program provided to Medicaid recipients who did not have an IEP or IFSP. In December 2014, the CMS issued guidance which permits reimbursement of covered services provided to Medicaid recipients who do not have an IEP or IFSP.

The bill aligns Florida law with the 2014 CMS guidance by eliminating the requirement that Medicaid recipients receiving services through the Florida Medicaid Certified School Match Program qualify for Part B or H of the IDEA, or for exceptional student services, or have an IEP or IFSP.

The bill also aligns Medicaid provider enrollment requirements for charter and private schools with those in place for public school districts. Under the bill, practitioners providing services in charter and private schools will not be required to directly enroll as Medicaid providers, so long as the charter or private school in which services occur is enrolled as a Medicaid provider.

(Summary by the Florida Senate)

HB 163: Homelessness *Altman / Book*

The bill makes a number of changes to 420, F. S., relating to homelessness, to bring state laws in line with corresponding federal statutes. The bill eliminates outdated provisions and allows sources of federal funding to be accessed on an expedited basis. The bill adds two members to the Council on Homelessness; one representative of the Florida Housing Coalition and the Secretary of the Department of Elder Affairs or his or her designee. Additionally, the bill makes several changes to challenge grants provided by the State Office on Homelessness within the Department of Children and Families to the local homeless continuums of care (CoC), which are dedicated to preventing and ending homelessness throughout the state. The bill increases the amount of challenge grant funds each CoC lead agency may receive annually from \$500,000 to \$750,000, and requires each CoC lead agency to document the commitment of local government or private organizations to provide matching funds or in-kind support in an amount equal to 25 percent of the grant requested.

(Summary by the Florida Senate)

CS/CS/HB 731: Agency for Health Care Administration *Perez / Bean*

The bill amends various authorizing and licensing statutes for entities regulated by the Agency for Health Care Administration (AHCA), including, nurse registries, home medical equipment providers, health care clinics, nursing homes, assisted living facilities, diagnostic imaging centers, ambulatory surgical centers (ASCs), and home health agencies. The bill revises certain duties of AHCA relating to reporting, oversight, licensure inspections, issuance of licenses, & Medicaid fraud investigations; removes annual assessment on health care entities; removes provisions relating to multiphasic testing centers.

The bill strengthens AHCA's authority to conduct retrospective review of Medicaid hospital payments to allow AHCA to recover all overpayments. The bill also strengthens AHCA's ability to collect legal fees for Medicaid cases in which AHCA prevails.

(Summary by the Florida Senate)

HB 743: Nonopioid Alternatives *Plakon / Perry*

Substance abuse affects millions of people in the U.S. each year. Drug overdoses have steadily increased and now represent the leading cause of accidental death in the U.S., the majority of which involve an opioid. In Florida, opioids (licit and illicit) were responsible for more than 5,000 deaths in 2018. The National Institute of Health reports that the majority of heroin users first misused a prescription opioid.

The Department of Health (DOH) publishes a pamphlet regarding the use of non-opioid alternatives to treat pain on its website. Current law requires health care practitioners, except pharmacists, to discuss non-opioid alternatives with patients prior to prescribing, ordering, dispensing, or administering opioids, provide a copy of the DOH pamphlet, and document the discussion in the patient's medical record. The requirements do not apply to emergency care and services.

The bill revises these requirements by:

- 1) Requiring that the pamphlet provided to the patient be printed;
- 2) Authorizing a health care practitioner to discuss non-opioid alternatives with, and provide the pamphlet to, the patient's representative rather than the patient;
- 3) Removing the requirement to address non-opioid alternatives when a drug is dispensed or administered; and
- 4) Exempting hospice services and care provided in a hospital critical care unit or emergency department from the requirement to discuss non-opioid alternatives with a patient.

(Summary by the Florida Senate)

CS/HB 1087: Domestic Violence Services *Fernandez-Barquin / Bean*

The bill (Chapter 2020-6, L.O.F.) makes a number of changes to Florida law relating to the domestic violence program and the provision of domestic violence services statewide. Specifically, the law removes the requirement for the Department of Children and Families (department) to contract with the Florida Coalition Against Domestic Violence (coalition) for the delivery and management of domestic violence services statewide.

The bill also retains the ability of the department to contract with the coalition or another entity in the future, shifts certain duties previously performed by the coalition to the department including, but not limited to, certifying domestic violence centers and implementing, administering, and evaluating all domestic violence services provided by domestic violence centers.

(Summary by the Florida Senate)

CS/CS/HB 1105: Child Welfare *Tomkow / Simpson*

The bill makes a number of changes to the laws relating to child welfare designed to increase the accountability of parents with children in out-of-home care, encourage better communication between caregivers and birth parents, and shorten the length of time children spend in out-of-home care. Specifically, the bill:

- Specifies timelines and steps in both foster parent licensing and approval of adoptive parents.
- Requires the Department of Children and Families (department) to notify the court of any report to the central abuse hotline that involves a child under court jurisdiction.
- Allows the department to file a shelter or dependency petition without the need for a new child protective investigation or the concurrence of the child protective investigator if the department determines that the safety plan is no longer sufficient to keep the child safe or that the parent or caregiver has not sufficiently increased his or her level of protective capacities to ensure the child's safety.
- Provides factors for the court to consider when determining whether a change of legal custody or placement is in the child's best interest.
- Provides circumstances under which a court may remove a child and place him or her in out-of-home care if a child was placed in his or her own home with an in-home safety plan or was reunited with a parent with an in-home safety plan.
- Requires circuit and county court judges for dependency cases to receive education relating to early childhood development, which includes the value of strong parent-child relationships, secure attachments, stable placements and the impact of trauma on children in out-of-home care.

The bill also provides legislative findings and intent and codifies responsibilities for working partnerships between foster parents and birth parents in order to ensure that children in out-of-home care achieve permanency as soon as possible, to reduce the likelihood they will re-enter care, and to ensure that families are prepared to resume care of their children.

The bill further provides a process for a community-based care lead agency to demonstrate the need to directly provide more than 35 percent of all child welfare services in the lead agency's service area.

Additionally, the bill codifies the creation and establishment of early childhood court (ECC) programs that serve the needs of children (typically under the age of three) in dependency court by using specialized dockets, multidisciplinary teams, community coordinators, and evidence-based treatment that supports the needs of the parent and child in a non-adversarial manner.

- The Office of the State Courts Administrator (OSCA) may coordinate with each participating circuit court to hire a community coordinator for the circuit's early childhood court program to manage programs and data collection between ECC court team participants.
- Directs OSCA to contract for an evaluation of the ECC's evidence-based treatment services and authorizes the OSCA to provide ECC court teams with training, consultation, and guidance.

(Summary by the Florida Senate)

CS/CS/SB 1120: Substance Abuse Services *Harrell / Caruso*

The bill addresses individuals who have experienced substance abuse treatment, as well as recovery residence service providers, who have been disqualified from employment following a failed background screening by requiring the Department of Children and Families to provide exemptions from employment disqualification for certain offenses. The bill condenses several background screening sections of ch. 397, F.S., into a single set of requirements. Additionally, the bill modifies patient-brokering laws to exempt discounts, waivers of payment, or payments not prohibited by the federal anti-kickback statute or regulations. The bill also applies such exemptions to all payment methods used by federal health care programs, and provides that patient-brokering constitutes a first-degree misdemeanor.

(Summary by the Florida Senate)

Bills that did NOT pass the Legislature

—**SB 7040: Implementation of MSDHS Public Safety Commission Recommendations**

—**SB 800: Division of State Technology**

BUDGET

OVERVIEW: The 2020-21 GAA is approximately \$91 billion.

The State currently collects \$30.4 billion in total revenues. However, \$7 billion of that total is paid by tourists visiting our state. State economists have expressed concern that this number could drop substantially should the COVID-19 crisis continue for several months.

The Fiscal Year 2020-2021 budget is highlighted by one of Governor Ron DeSantis' top priorities, a \$500 million appropriation to increase teacher pay. \$400 million is set aside to provide for a minimum salary of \$47,500, while the remaining \$100 million is to increase veteran teacher pay. Other items of interest include \$100 million for the Florida Forever land acquisition program; \$690 million for Everglades restoration and water quality projects; \$10 million for the Job Growth Grant Fund (down from \$40 million this year); \$370 million for affordable housing; and \$400 million for 750 local projects sponsored by individual members.

Total state reserves are now \$3.8 billion. \$300 million was redirected into reserves in anticipation of the economic impact of the coronavirus. The Legislature reduced the tax package to \$47.4 million by diverting money from the Land Acquisition Trust Fund, and spending less on some enhanced Medicaid payments. The reduced tax package is now \$47.4 million. A total of \$25 million has been set aside for COVID-19 spending, which is in addition to the \$27 million the federal government has contributed to date.

2020 - 2021 General Appropriations Act

Health Care/HHS Appropriations: *(Overall \$16,000,000 increase in SAMH)*

Administrative costs of the seven regional Managing Entities - Total amount: \$22,115,157

Provided for the administration costs of the seven regional managing entities that deliver behavioral health care through local network providers.

Road to Recovery - Modernizing Behavioral Health System - Total amount: \$3,500,000

The following are funded as non-recurring from the General Revenue Fund.

State Opioid Response Grant from Federal Grants Trust Fund - Total amount: \$81 million

Children's Community Action Teams (CAT) - Total amount: \$30,800,000

Funds in Specific Appropriation, provides for the 38 CAT teams and are funded from recurring general revenue funds: (No cuts to existing recurring CAT teams.) Funds provided in Specific Appropriation include the additional sum of \$2,250,000 from the General Revenue recurring Fund to procure for additional Community Action Teams in the areas of greatest need and to ensure statewide coverage. NOTE: Intended for Apalachee Center-Leon, Apalachee Center-Franklin, and Charlotte, but are not identified in Proviso. (An increase of \$750,000 over last year.)

The Governor's budget included proviso that required DCF to directly contract with providers. FAME educated leaders on our concerns with that language. The legislature included proviso recommended by FAME.

Enhancing Accountability Through Quality Assurance (DCF QA offices) - Total amount: \$5,350,000

Recurring funding from the General Revenue Fund is provided to the department for the establishment of the Office of Quality for the purpose of monitoring and improving the quality, efficiency, and effectiveness of department programs and services. The department may submit a budget amendment in accordance with the provisions of chapter 216, Florida Statutes, for the reassignment of up to 125 authorized positions from within the department to the Office of Quality.

Increasing Access to Mental Health Services through Telehealth (First Lady's initiative) - Total amount: \$4,000,000

Recurring funds from the General Revenue Fund are provided to competitively procure for the implementation of a pilot project that provides behavioral telehealth services to children in public schools, with an emphasis towards serving rural counties. (Establishes the pilot program to 350 schools.)

Supported Employment Services for Individuals with Mental Health Disorders - Total amount: \$700,000

Recurring funds same as previous year.

Child Abuse Prevention and Treatment Act Grant Budget Authority - Total amount: \$1,000,000

The non-recurring funds from the Federal Grants Trust Fund shall be used for evidence-based prevention programs to implement the Plans of Safe Care program to address the needs of substance affected newborns and their families.

Cost of Living Adjustment - Mental Health Contracted Agencies - Total amount: \$5,000,000

Employment - continued funding - Total \$700,000

Family Intensive Treatment (FIT) - continued funding - Total \$12,060,000
Centerstone of Florida for the operation of a Family Intensive Treatment (FIT) team (Recurring) - Total amount: \$840,000
Substance abuse services for pregnant women, mothers, & their affected families - continued funding - Total amount: \$10,000,000

Member Projects

Aspire Health Partners- Behavioral Health Services (Non-recurring) Total amount: \$550,000
Broward County Commission - Long Acting Injectable Buprenorphine Pilot (Non-recurring) Total amount: \$158,184
Camelot Community Care - Hillsborough High Risk Adoption Support Services (Non-recurring) Total amount: \$250,000
CASL - the Renaissance Manor (Independent Supportive Housing) (Non-recurring) Total amount: \$1,100,000
Centerstone Psychiatric Residency (Non-recurring) Total amount: \$1,000,000
Circles of Care - Behavioral Health Services (Non-recurring) Total amount: \$700,000
Citrus Health Network (Recurring) Total amount: \$455,000
Citrus Health Network - Safe Haven for Homeless Youth (Non-recurring) Total amount: \$155,000
Clara White Mission- Homelessness Services (Non-recurring) Total amount: \$100,000
Clay Behavioral Health - Community Crisis Prevention Teams (Non-recurring) Total amount: \$500,000
Community Health of South Florida - Children's Crisis Center (Non-recurring) Total amount: \$250,000
David Lawrence Center Wrap-Around Collier Program (Non-recurring) Total amount: \$279,112
Devereux Advanced Behavioral Health Dual Diagnosis Services: Mental Health & Intellectual/Developmental Disabilities (Non-recurring) Total amount: \$666,713
Directions for Living- Community Action Teams for Babies (Non-recurring) Total amount: \$550,000
Drug Free America Foundation - Substance Abuse Prevention Services (Non-recurring) Total amount: \$100,000
Flagler Health- Behavioral Health Services (Non-recurring) Total amount: \$1,770,000
Florida Alliance for Healthy Communities (Non-recurring) Total amount: \$1,200,000
Florida Assertive Community Treatment (FACT) Team- St. John's/Putnam Counties (Non-recurring) Total amount: \$1,250,000
Ft. Myers Salvation Army Co-Occurring Residential Treatment Program (Non-recurring) Total amount: \$300,000
Fulfilling Lives Foundation - School Telehealth Services (Non-recurring) Total amount: \$250,000
Gateway Community Services - Project Save Lives (Non-recurring) Total amount: \$747,582
Here's Help - Juvenile Residential Treatment Expansion (Non-recurring) Total amount: \$225,000
Hillsborough County - Behavioral Health Residential Treatment Services (Non-recurring) Total amount: \$1,200,000
Hillsborough County - Crisis Stabilization Units (Non-recurring) Total amount: \$800,000
Inmar Government Services - Tech. Support for Public Assistance Recipients (Non-recurring) Total amount: \$250,000
Jewish Family Service - Mental Health First Aid Coalition (Non-recurring) Total amount: \$100,000
Johns Hopkins All Children's Hospital - Pediatric Treatment Alternatives to Opioids (Non-recurring) Total amount: \$850,000
LGBT+ Central Orlando - Mental Health Counseling (Non-recurring) Total amount: \$40,000
Lifestream Behavioral Center - Civil treatment services (Recurring) Total amount: \$1,622,235
Lifestream Behavioral Health - Central Receiving System (Non-recurring) Total amount: \$500,000
Lifestream Behavioral Health - Crisis Stabilization Units (Non-recurring) Total amount: \$300,000
Memorial Healthcare System - Telehealth Access for Patients Program (Non-recurring) Total amount: \$250,000
Metropolitan Ministries - First Hug Program (Non-recurring) Total amount: \$300,000
Metropolitan Ministries - Miracles for Pasco (Non-recurring) Total amount: \$250,000
Miami-Dade Homeless Trust - Residential Support Services (Non-recurring) Total amount: \$250,000

NAMI Broward Reach and Teach for Mental Health (Non-recurring) Total amount: \$150,000
Northwest Behavioral Health Services - Training Trauma NOW (Non-recurring) Total amount: \$50,000
Okaloosa-Walton Mental Health and Substance Abuse Pretrial Diversion Project (Non-recurring) Total amount: \$350,000
Personal Enrichment Mental Health Services - Crisis Stabilization Services (Non-recurring) Total amount: \$750,000
Project Opioid - Florida Opioid Crisis Pilot (Non-recurring) Total amount: \$200,000
River Region Human Services - Outpatient Behavioral Health Services (Non-recurring) Total amount: \$250,000
Seminole County Sheriff - Substance Abuse Recovery Center(Non-recurring) Total amount: \$400,000
South Florida Behavioral Network - Miami Center for Mental Health and Recovery (Non-recurring) Total amount: \$4,000,000
South Florida Behavioral Network - Outpatient Behavioral Health Services Pilot(Non-recurring) Total amount: \$400,000
Starting Point Behavioral Healthcare - Helping Others Promote Empathy Program (Non-recurring) Total amount: \$350,000
St. Johns EPIC Recovery Center - Detoxification and Residential Treatment (Non-recurring) Total amount: \$600,000
STEPS Women's Level II Residential Treatment (Non-recurring) Total amount: \$250,000
The Salvation Army of Sarasota - Community Addiction Recovery Program (Non-recurring Fund) Total amount: \$250,000
Trilogy Integrated Resources- Network of Care for Veteran and Military Service Members (Non-recurring Fund) Total amount: \$135,000
Trilogy Network of Care Software Solution (Non-recurring Fund) Total amount: \$100,000
University of Florida Health Center Psychiatry (Non-recurring Fund) Total amount: \$250,000
Veterans Alternative Retreat (Non-recurring Fund) Total amount: \$100,000
Whole Child Leon - Telehealth Services (Non-recurring Fund) Total amount: \$50,000
Youth Crisis Center - Touchstone Village (Non-recurring Fund) Total amount: \$200,000
211 Palm Beach Treasure Coast - South Florida Suicide Prevention and Crisis Intervention (Non-recurring Fund) Total amount: \$250,000

Housing Appropriations:

Sadowski funds - Not reductions this year for the first time in 16 years.

K-12 Education Appropriations:

School Mental Health Funding - Additional \$23 million for a total of \$100 million.

Criminal Justice Appropriations:

Managing Entities Proviso Language - (From the funds in Specific Appropriations 718 through 720, the Department of Corrections may contract with Florida's **managing entities** for the statewide management of behavioral health treatment for offenders under community supervision. The entities shall work with the department to develop service delivery strategies that will improve the coordination, integration, and management of behavioral health services to offenders.