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LEGISLATIVE ACTION

Senate

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House

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The Committee on Children, Families, and Elder Affairs (Brodeur) recommended the following:

**Senate Amendment (with title amendment)**

Delete everything after the enacting clause  
and insert:

Section 1. Section 393.064, Florida Statutes, is amended to  
read:

393.064 Care navigation ~~Prevention~~.—

(1) Within available resources, the agency shall offer to clients and their caregivers care navigation services for voluntary participation at the time of application and as part



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11 of any eligibility or renewal review. The goals of care  
12 navigation are to create a seamless network of community  
13 resources and supports for the client and the client's family as  
14 a whole to support a client in daily living, community  
15 integration, and achievement of individual goals. Care  
16 navigation services must involve assessing client needs and  
17 developing and implementing care plans, including, but not  
18 limited to, connecting a client to resources and supports. At a  
19 minimum, a care plan must address immediate, intermediate, and  
20 long-term needs and goals to promote and increase well-being and  
21 opportunities for education, employment, social engagement,  
22 community integration, and caregiver support. For a client who  
23 is a public school student entitled to a free appropriate public  
24 education under the Individuals with Disabilities Education Act,  
25 I.D.E.A., as amended, the care plan must be integrated with the  
26 student's individual education plan (IEP). The care plan and IEP  
27 must be implemented to maximize the attainment of educational  
28 and habilitation goals ~~give priority to the development,~~  
29 ~~planning, and implementation of programs which have the~~  
30 ~~potential to prevent, correct, cure, or reduce the severity of~~  
31 ~~developmental disabilities. The agency shall direct an~~  
32 ~~interagency and interprogram effort for the continued~~  
33 ~~development of a prevention plan and program. The agency shall~~  
34 ~~identify, through demonstration projects, through program~~  
35 ~~evaluation, and through monitoring of programs and projects~~  
36 ~~conducted outside of the agency, any medical, social, economic,~~  
37 ~~or educational methods, techniques, or procedures that have the~~  
38 ~~potential to effectively ameliorate, correct, or cure~~  
39 ~~developmental disabilities. The agency shall determine the costs~~



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40 ~~and benefits that would be associated with such prevention~~  
41 ~~efforts and shall implement, or recommend the implementation of,~~  
42 ~~those methods, techniques, or procedures which are found likely~~  
43 ~~to be cost beneficial.~~

44 (2) ~~Prevention~~ Services provided by the agency must ~~shall~~  
45 include services to high-risk children from 3 to 5 years of age,  
46 and their families, to meet the intent of chapter 411. Except  
47 for services for children from birth to age 3 years which are  
48 the responsibility of the Division of Children's Medical  
49 Services in the Department of Health or part H of the  
50 Individuals with Disabilities Education Act, such services may  
51 include:

52 (a) Individual evaluations or assessments necessary to  
53 diagnose a developmental disability or high-risk condition and  
54 to determine appropriate, individual family and support  
55 services.

56 (b) Early intervention services, including developmental  
57 training and specialized therapies.

58 (c) Support services, such as respite care, parent  
59 education and training, parent-to-parent counseling, homemaker  
60 services, and other services which allow families to maintain  
61 and provide quality care to children in their homes.

62 (3) Other agencies of state government shall cooperate with  
63 and assist the agency, within available resources, in  
64 implementing programs which have the potential to prevent, or  
65 reduce the severity of, developmental disabilities and shall  
66 consider the findings and recommendations of the agency in  
67 developing and implementing agency programs and formulating  
68 agency budget requests.



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69 (4) There is created at the developmental disabilities  
70 center in Gainesville a research and education unit. Such unit  
71 shall be named the Raymond C. Philips Research and Education  
72 Unit. The functions of such unit shall include:

73 (a) Research into the etiology of developmental  
74 disabilities.

75 (b) Ensuring that new knowledge is rapidly disseminated  
76 throughout the agency.

77 (c) Diagnosis of unusual conditions and syndromes  
78 associated with developmental disabilities in clients identified  
79 throughout developmental disabilities programs.

80 (d) Evaluation of families of clients with developmental  
81 disabilities of genetic origin in order to provide them with  
82 genetic counseling aimed at preventing the recurrence of the  
83 disorder in other family members.

84 (e) Ensuring that health professionals in the developmental  
85 disabilities center at Gainesville have access to information  
86 systems that will allow them to remain updated on newer  
87 knowledge and maintain their postgraduate education standards.

88 (f) Enhancing staff training for professionals throughout  
89 the agency in the areas of genetics and developmental  
90 disabilities.

91 Section 2. Subsection (1) and paragraph (d) of subsection  
92 (5) of section 393.065, Florida Statutes, are amended to read:

93 393.065 Application and eligibility determination.—

94 (1) (a) The agency shall develop and implement an online  
95 application process that, at a minimum, supports paperless,  
96 electronic application submissions with immediate e-mail  
97 confirmation to each applicant to acknowledge receipt of



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98 application upon submission. The online application system must  
99 allow an applicant to review the status of a submitted  
100 application and respond to provide additional information.

101 (b) The agency shall maintain access to a printable paper  
102 application on its website and, upon request, must provide an  
103 applicant with a printed paper application. Paper applications  
104 may ~~Application for services shall be submitted made~~ in writing  
105 to the agency, in the region in which the applicant resides.

106 (c) The agency ~~must shall~~ review each submitted application  
107 in accordance with federal time standards ~~and make an~~  
108 eligibility determination within 60 days after receipt of the  
109 signed application. ~~If, at the time of the application, an~~  
110 applicant is requesting enrollment in the home and community-  
111 based services Medicaid waiver program for individuals with  
112 developmental disabilities deemed to be in crisis, as described  
113 in paragraph (5) (a), the agency shall complete an eligibility  
114 determination within 45 days after receipt of the signed  
115 application.

116 1. ~~(a)~~ If the agency determines additional documentation is  
117 necessary to make an eligibility determination, the agency may  
118 request the additional documentation from the applicant.

119 2. ~~(b)~~ When necessary to definitively identify individual  
120 conditions or needs, the agency or its designee must provide a  
121 comprehensive assessment.

122 ~~(c) If the agency requests additional documentation from~~  
123 ~~the applicant or provides or arranges for a comprehensive~~  
124 ~~assessment, the agency's eligibility determination must be~~  
125 ~~completed within 90 days after receipt of the signed~~  
126 ~~application.~~



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127       (d)1. For purposes of this paragraph, the term "complete  
128 application" means an application submitted to the agency which  
129 is signed and dated by the applicant or an individual with legal  
130 authority to apply for public benefits on behalf of the  
131 applicant, is responsive on all parts of the application, and  
132 contains documentation of a diagnosis.

133       2. If the applicant requesting enrollment in the home and  
134 community-based services Medicaid waiver program for individuals  
135 with developmental disabilities is deemed to be in crisis as  
136 described in paragraph (5) (a), the agency must make an  
137 eligibility determination within 15 calendar days after receipt  
138 of a complete application.

139       3. If the applicant meets the criteria specified in  
140 paragraph (5) (b), the agency must review and make an eligibility  
141 determination as soon as practicable after receipt of a complete  
142 application.

143       4. If the application meets any of the criteria specified  
144 in paragraphs (5) (c)-(g), the agency shall make an eligibility  
145 determination within 60 days after receipt of a complete  
146 application.

147       (e) Any delays in the eligibility determination process, or  
148 any tolling of the time standard until certain information or  
149 actions have been completed, must be conveyed to the client as  
150 soon as such delays are known through verbal contact with the  
151 client or the client's designated caregiver and confirmed by a  
152 written notice of the delay, the anticipated length of delay,  
153 and a contact person for the client.

154       (5) Except as provided in subsections (6) and (7), if a  
155 client seeking enrollment in the developmental disabilities home



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156 and community-based services Medicaid waiver program meets the  
157 level of care requirement for an intermediate care facility for  
158 individuals with intellectual disabilities pursuant to 42 C.F.R.  
159 ss. 435.217(b)(1) and 440.150, the agency must assign the client  
160 to an appropriate preenrollment category pursuant to this  
161 subsection and must provide priority to clients waiting for  
162 waiver services in the following order:

163 (d) Category 4, which includes, but is not required to be  
164 limited to, clients whose caregivers are 60 ~~70~~ years of age or  
165 older and for whom a caregiver is required but no alternate  
166 caregiver is available.

167  
168 Within preenrollment categories 3, 4, 5, 6, and 7, the agency  
169 shall prioritize clients in the order of the date that the  
170 client is determined eligible for waiver services.

171 Section 3. Section 393.0651, Florida Statutes, is amended  
172 to read:

173 393.0651 Family or individual support plan.—The agency  
174 shall provide directly or contract for the development of a  
175 family support plan for children ages 3 to 18 years of age and  
176 an individual support plan for each client served by the home  
177 and community-based services Medicaid waiver program under s.  
178 393.0662. The client, if competent, the client's parent or  
179 guardian, or, when appropriate, the client advocate, shall be  
180 consulted in the development of the plan and shall receive a  
181 copy of the plan. Each plan must include the most appropriate,  
182 least restrictive, and most cost-beneficial environment for  
183 accomplishment of the objectives for client progress and a  
184 specification of all services authorized. The plan must include



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185 provisions for the most appropriate level of care for the  
186 client. Within the specification of needs and services for each  
187 client, when residential care is necessary, the agency shall  
188 move toward placement of clients in residential facilities based  
189 within the client's community. The ultimate goal of each plan,  
190 whenever possible, shall be to enable the client to live a  
191 dignified life in the least restrictive setting, be that in the  
192 home or in the community. The family or individual support plan  
193 must be developed within 60 calendar days after the agency  
194 determines the client eligible pursuant to s. 393.065(3).

195 (1) The agency shall develop and specify by rule the core  
196 components of support plans.

197 (2) The family or individual support plan shall be  
198 integrated with the individual education plan (IEP) for all  
199 clients who are public school students entitled to a free  
200 appropriate public education under the Individuals with  
201 Disabilities Education Act, I.D.E.A., as amended. The family or  
202 individual support plan and IEP must be implemented to maximize  
203 the attainment of educational and habilitation goals.

204 (a) If the IEP for a student enrolled in a public school  
205 program indicates placement in a public or private residential  
206 program is necessary to provide special education and related  
207 services to a client, the local education agency must provide  
208 for the costs of that service in accordance with the  
209 requirements of the Individuals with Disabilities Education Act,  
210 I.D.E.A., as amended. This does not preclude local education  
211 agencies and the agency from sharing the residential service  
212 costs of students who are clients and require residential  
213 placement.





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214 (b) For clients who are entering or exiting the school  
215 system, an interdepartmental staffing team composed of  
216 representatives of the agency and the local school system shall  
217 develop a written transitional living and training plan with the  
218 participation of the client or with the parent or guardian of  
219 the client, or the client advocate, as appropriate.

220 (3) Each family or individual support plan shall be  
221 facilitated through case management designed solely to advance  
222 the individual needs of the client.

223 (4) In the development of the family or individual support  
224 plan, a client advocate may be appointed by the support planning  
225 team for a client who is a minor or for a client who is not  
226 capable of express and informed consent when:

227 (a) The parent or guardian cannot be identified;

228 (b) The whereabouts of the parent or guardian cannot be  
229 discovered; or

230 (c) The state is the only legal representative of the  
231 client.

232  
233 Such appointment may not be construed to extend the powers of  
234 the client advocate to include any of those powers delegated by  
235 law to a legal guardian.

236 (5) The agency shall place a client in the most appropriate  
237 and least restrictive, and cost-beneficial, residential facility  
238 according to his or her individual support plan. The client, if  
239 competent, the client's parent or guardian, or, when  
240 appropriate, the client advocate, and the administrator of the  
241 facility to which placement is proposed shall be consulted in  
242 determining the appropriate placement for the client.



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243 Considerations for placement shall be made in the following  
244 order:

245 (a) Client's own home or the home of a family member or  
246 direct service provider.

247 (b) Foster care facility.

248 (c) Group home facility.

249 (d) Intermediate care facility for the developmentally  
250 disabled.

251 (e) Other facilities licensed by the agency which offer  
252 special programs for people with developmental disabilities.

253 (f) Developmental disabilities center.

254 (6) In developing a client's annual family or individual  
255 support plan, the individual or family with the assistance of  
256 the support planning team shall identify measurable objectives  
257 for client progress and shall specify a time period expected for  
258 achievement of each objective.

259 (7) The individual, family, and support coordinator shall  
260 review progress in achieving the objectives specified in each  
261 client's family or individual support plan, and shall revise the  
262 plan annually, following consultation with the client, if  
263 competent, or with the parent or guardian of the client, or,  
264 when appropriate, the client advocate. The agency or designated  
265 contractor shall annually report in writing to the client, if  
266 competent, or to the parent or guardian of the client, or to the  
267 client advocate, when appropriate, with respect to the client's  
268 habilitative and medical progress.

269 (8) Any client, or any parent of a minor client, or  
270 guardian, authorized guardian advocate, or client advocate for a  
271 client, who is substantially affected by the client's initial



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272 family or individual support plan, or the annual review thereof,  
273 shall have the right to file a notice to challenge the decision  
274 pursuant to ss. 120.569 and 120.57. Notice of such right to  
275 appeal shall be included in all support plans provided by the  
276 agency.

277 (9) When developing or reviewing a client's family or  
278 individual support plan, the waiver support coordinator shall  
279 inform the client, the client's parent or guardian, or, when  
280 appropriate, the client advocate about the consumer-directed  
281 care program established under s. 409.221.

282 Section 4. For the 2024-2025 fiscal year, the sum of  
283 \$16,562,703 in recurring funds from the General Revenue Fund and  
284 \$22,289,520 in recurring funds from the Operations and  
285 Maintenance Trust Fund are appropriated in the Home and  
286 Community Based Services Waiver category to the Agency for  
287 Persons with Disabilities to offer waiver services to the  
288 greatest number of individuals permissible under the  
289 appropriation from preenrollment categories 3, 4, and 5,  
290 including individuals whose caregiver is age 60 or older in  
291 category 4, as provided in s. 393.065, Florida Statutes, as  
292 amended by this act.

293 Section 5. The Agency for Health Care Administration and  
294 the Agency for Persons with Disabilities, in consultation with  
295 other stakeholders, shall jointly develop a comprehensive plan  
296 for the administration, finance, and delivery of home and  
297 community-based services through a new home and community-based  
298 services Medicaid waiver program. The waiver program shall be  
299 for clients transitioning into adulthood and shall be designed  
300 to prevent future crisis enrollment into the waiver program



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301 authorized under s. 393.0662, Florida Statutes. The Agency for  
302 Health Care Administration is authorized to contract with  
303 necessary experts to assist in developing the plan. The Agency  
304 for Health Care Administration must submit a report to the  
305 Governor, the President of the Senate, and the Speaker of the  
306 House of Representatives by December 1, 2024, addressing, at a  
307 minimum, all of the following:

308 (1) The purpose, rationale, and expected benefits of the  
309 new waiver program.

310 (2) The proposed eligibility criteria for clients and  
311 service packages to be offered through the new waiver program.

312 (3) A proposed implementation plan and timeline, including  
313 recommendations for the number of clients to be served by the  
314 new waiver program at initial implementation, changes over time,  
315 and any per-client benefit caps.

316 (4) Proposals for how clients will transition onto and off  
317 of the new waiver, including, but not limited to, transitions  
318 between this new waiver and the waiver established under s.  
319 393.0662, Florida Statutes.

320 (5) The fiscal impact for the implementation year and  
321 projections for the subsequent 5 years, determined on an  
322 actuarially sound basis.

323 (6) An analysis of the availability of services that would  
324 be offered under the new waiver program and recommendations to  
325 increase availability of such services, if necessary.

326 (7) A list of all stakeholders, public and private, who  
327 were consulted or contacted as part of developing the plan for  
328 the new waiver program.

329 Section 6. This act shall take effect July 1, 2024.



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

And the title is amended as follows:

Delete everything before the enacting clause  
and insert:

A bill to be entitled  
An act relating to individuals with disabilities;  
amending s. 393.064, F.S.; revising provisions related  
to programs and services provided by the Agency for  
Persons with Disabilities; requiring the agency,  
within available resources, to offer voluntary  
participation care navigation services to clients and  
their caregivers at specified times; specifying goals  
and requirements for such care navigation services;  
specifying requirements for care plans; requiring the  
integration of care plans with any individual  
education plans of clients; specifying requirements  
for such integration; amending s. 393.065, F.S.;  
requiring the agency to develop and implement an  
online application process; specifying requirements  
for the online application process; defining the term  
"complete application"; revising timeframes within  
which the agency must make eligibility determinations  
for services; lowering the age that a caregiver must  
be for an individual to be placed in a certain  
preenrollment category; amending s. 393.0651, F.S.;  
revising which types of clients are eligible for an  
individual support plan; clarifying the timeframe  
within which a family or individual support plan must



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359 be developed; requiring waiver support coordinators to  
360 inform the client, client's parent or guardian, or  
361 client's advocate, as appropriate, of certain  
362 information when developing or reviewing the family or  
363 individual support plan; providing appropriations;  
364 requiring the Agency for Health Care Administration  
365 and the Agency for Persons with Disabilities, in  
366 consultation with other stakeholders, to jointly  
367 develop a comprehensive plan for the administration,  
368 finance, and delivery of home and community-based  
369 services through a new home and community-based  
370 services Medicaid waiver program; providing  
371 requirements for the waiver program; authorizing the  
372 Agency for Health Care Administration to contract with  
373 necessary experts to assist in developing the plan;  
374 requiring the Agency for Health Care Administration to  
375 submit a specified report to the Governor and the  
376 Legislature by a specified date; providing an  
377 effective date.