**EXHIBIT A – SPECIAL PROVISIONS**

The following provisions supplement or modify the provisions of Items 1 through 10 of the Standard Contract, as provided herein:

1. **ENGAGEMENT, TERM AND CONTRACT DOCUMENT** 
   1. **Contract Document**

In addition to the provisions of **Section 1.5**, the following documents, or the latest revisions thereof, are incorporated herein and made a part of this Contract. Requirements set forth in Guidance Documents are the minimum required program standards and shall not be changed by the Managing Entity unless the Guidance Document expressly permits the Managing Entity to determine the appropriate minimum standard. Managing Entities shall not create additional requirements in subcontracts with Network Service Providers and must refer to the Departments version of the Guidance Document published on the Department’s website.

* + 1. **Additional Contract Exhibits**

Exhibits A1, A2, B1, C1, C2, F1 and F2

* + 1. **Guidance Documents**

Guidance 1 - Evidence-Based Guidelines

Guidance 2 - Tangible Property Requirements

Guidance 3 - Managing Entity Expiration, Termination and Transition Planning Requirements

Guidance 4 - Care Coordination

Guidance 5 - Residential Mental Health Treatment for Children and Adolescents

Guidance 6 - Outpatient Forensic Mental Health Services

Guidance 7 - State Mental Health Treatment Facility Admission and Discharge Processes

Guidance 8 - Assisted Living Facilities with Limited Mental Health (ALF-LMH) Licensure

Guidance 9 - Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI) Outreach Access, and Recovery (SOAR)

Guidance 10 - Prevention Services

Guidance 11 - Juvenile Incompetent to Proceed (JITP)

Guidance 12 - Behavioral Health Network (BNet) Guidelines and Requirements

Guidance 13 - Indigent Drug Program (IDP)

Guidance 14 - Prevention Partnership Grants (PPG)

Guidance 15 - Projects for Assistance in Transition from Homelessness (PATH)

Guidance 16 - Florida Assertive Community Treatment (FACT) Handbook

Guidance 17 - Temporary Assistance for Needy Families (TANF) Funding Guidance

Guidance 18 - Family Intensive Treatment (FIT) Model Guidelines and Requirements

Guidance 19 - Integration with Child Welfare

Guidance 20 – Local, Regional, and State Review Teams

Guidance 21 - Housing Coordination

Guidance 22 - Federal Grant Financial Management Requirements

Guidance 23 - Crisis Counseling Program

Guidance 24 - Performance Outcomes Measurement Manual

Guidance 25 - National Voter Registration Act Guidance

Guidance 26 - Women’s Special Funding, Substance Abuse Services for Pregnant Women and Mothers

Guidance 27 – Central Receiving Systems (CRS)

Guidance 28 – Forensic Multidisciplinary Team

Guidance 29 – Transitional Voucher

Guidance 30 – *Reserved*

Guidance 31 *–* *Reserved*

Guidance 32 – Community Action Treatment (CAT) Team

Guidance 33 – HIV Early Intervention Services

Guidance 34 – Mobile Response Team (MRT)

Guidance 35 – Recovery Management Practices

Guidance 36 – Intermediate Level FACT (FACT-IL)

Guidance 37 – Family First Prevention Services Act (FFPSA) Teams, Community Action Treatment (CAT) Team Variation

Guidance 38 – Community Action Treatment (CAT) Team for Ages 0-10, CAT Team Variation

Guidance 39 – Family Well-being Treatment Teams

Guidance 40 – Family Support Teams (FST) Community Action Treatment (CAT), Team Variation

Guidance 41 – Coordinated Opioid Recovery (CORE) Network of Addiction Care

Guidance 42 – State Opioid Response (SOR) Project

Guidance 43 – 988 Florida Lifeline (988 FL)

Guidance 44 - Treatment Alternative for Safer Communities (TASC)

Guidance 45 – Mobile Medication Assisted Treatment (MAT)

Guidance 46 – Communications Protocol

Guidance 47 – Behavioral Health Consultants

Guidance 48 – Supported Employment

* + 1. **Templates**

Template 1 – Provider Tangible Property Inventory Form

Template 2 – SAMH Block Grant Reporting Template Overview and Instructions

Template 3 – Narrative Report for the Substance Abuse and Mental Health Block Grant

Template 4 – Managing Entity Annual Business Operations Plan

Template 5 – ALF-LMH Forms

Template 6 – BNet Participant Forms

Template 7 – BNet Alternative Service Forms

Template 8 – *Reserved*

Template 9 – Local Match Calculation Form

Template 10 – Managing Entity Monthly Fixed Payment Invoice

Template 11 – Managing Entity Monthly Progress Report

Template 12 – Managing Entity Monthly Expenditure Report

Template 13 – Managing Entity Monthly Carry Forward Expenditure Report

Template 14 – Cost Allocation Plan

Template 15 – Managing Entity Spending Plan for Carry Forward Report

Template 16 – *Reserved*

Template 17 – *Reserved*

Template 18 – *Reserved*

Template 19 – *Reserved*

Template 20 – *Reserved*

Template 21 – Monthly Care Coordination Report

Template 22 – Forensic Mental Health Services Report

Template 23 – Forensic Diversion Report

Template 24 – CCP Supplemental Invoice and Expenditure Report

Template 25 – Forensic Multidisciplinary Team Report

Template 26 – *Reserved*

Template 27 – *Reserved*

Template 28 – Mobile Response Team Report

Template 29 – FACT Quarterly Report

Template 30 – Proviso Project Return on Investment Report

Template 31 – *Reserved*

Template 32 – Transitional Voucher Incidental Report

Template 33 – Community Forensic Beds Report

Template 34 – SOR Reports

Template 35 – FY 2023-24 $126M Tracking Tool

Template 36 – Sustainability Plan for Nonrecurring Funds

Template 37 – Coordinated Opioid Recovery (CORE) Network Quarterly Narrative Report

Template 38 – Coordinated Opioid Recovery (CORE) Network Quarterly Data Report

* + 1. Financial and Services Accountability Management System (FASAMS) Pamphlet 155-2, available at: [Financial and Services Accountability Management System - FASAMS | Florida DCF (myflfamilies.com)](https://www.myflfamilies.com/services/substance-abuse-and-mental-health/samh-providers/FASAMS), https://www.myflfamilies.com/services/samh/providers/FASAMS
    2. Unless otherwise specified in this Contract, all documents incorporated by reference may be located at the following Department webpage location: [Managing Entities | Florida DCF (myflfamilies.com)](https://www.myflfamilies.com/services/substance-abuse-and-mental-health/samh-providers/managing-entities), https://myflfamilies.com/services/samh/providers/managing-entities
    3. Copies of these documents may also be obtained from the Department, 2415 North Monroe Street, Suite 400, Tallahassee, FL 32303.
    4. The Department, in its role as the Mental Health and Substance Abuse Authority of Florida, shall be responsible for making final determinations regarding service delivery in the event of any perceived ambiguity within this Contract.
  1. **Program Specific Terms**

In addition to the provisions of **Section 1.6.1.3**, the definitions in **Exhibit A1** apply to this Contract.

* 1. **The following supplements Section 1.4**

All communication, including but not limited to contract budget, policy clarifications, or other guidance must be directed to the Contract Manager. The Department will communicate all final decisions in writing. The Managing Entity shall not take action on information that is communicated verbally.

1. **STATEMENT OF WORK**

There are no additional provisions to this section of the Contract.

1. **PAYMENT, INVOICE AND RELATED TERMS**

There are no additional provisions to this section of the Contract.

1. **GENERAL TERMS AND CONDITIONS GOVERNING PERFORMANCE** 
   1. Notwithstanding the terms of **Section 4.6**, the Managing Entity may subcontract with Network Service Providers without advance approval in writing by the Department.
   2. **Insurance**

In addition to the provisions of **Section 4.8.**, the following Special Insurance Provisions shall apply to this Contract. In the event of any inconsistency between the requirements of this section and the requirements of **Section 4.8**, the provisions of this section shall prevail and control.

* + 1. The Managing Entity shall notify the Contract Manager within 30 calendar days if there is a modification to the terms of insurance including but not limited to, cancellation or modification to policy limits.
    2. The Managing Entity acknowledges that, as an independent contractor, the Managing Entity and its Network Service Providers at all tiers are not covered by the State of Florida Risk Management Trust Fund for liability created by § 284.30, F.S.
    3. The Managing Entity shall obtain and provide proof to the Department a comprehensive general liability insurance coverage (broad form coverage), specifically including premises, fire and legal liability to cover managing the Managing Entity and all its employees. The limits of the Managing Entity’s coverage shall be no less than $300,000 per occurrence with a minimal annual aggregate of no less than $1,000,000.
    4. With the exception of any state agency or subdivision as defined by § 768.28(2), F.S., the Managing Entity shall cause all Network Service Providers, at all tiers, who the Managing Entity reasonably determines to present a risk of significant loss to the Managing Entity or the Department, to obtain and provide proof to the Managing Entity and the Department a comprehensive general liability insurance coverage (broad form coverage), specifically including premises, fire and legal liability covering the Network Service Provider and all its employees. The limits of coverage for the Managing Entity’s Network Service Providers, at all tiers, shall be in such amounts as the Managing Entity reasonably determines to be sufficient to cover the risk of loss.
    5. If any officer, employee, or agent of the Managing Entity operates a motor vehicle in the course of the performance of its duties under this contract, the Managing Entity shall obtain and provide proof to the Department of comprehensive automobile liability insurance coverage. The limits of the Managing Entity’s coverage shall be no less than $300,000 per occurrence with a minimal annual aggregate of no less than $1,000,000.
    6. If any officer, employee, or agent of any Network Service Provider, at all tiers, operates a motor vehicle in the course of the performance of the duties of the Network Service Provider, the Managing Entity shall cause the Network Service Provider to obtain and provide proof to the Managing Entity and the Department of comprehensive automobile liability insurance coverage with the same limits.
    7. The Managing Entity shall obtain and provide proof to the Department of professional liability insurance coverage, including errors and omissions coverage, to cover the Managing Entity and all its employees. If any officer, employee, or agent of the Managing Entity administers any prescription drug or medication or controlled substance in the course of the performance of the duties of the Managing Entity under this contract, the professional liability coverage shall include medical malpractice liability and errors and omissions coverage, to cover the Managing Entity and all its employees. The limits of the coverage shall be no less than $300,000 per occurrence with a minimal annual aggregate of no less than $1,000,000.
    8. If any officer, employee, or agent of the Network Service Provider, at all tiers, provides any professional services or provides or administers any prescription drug or medication or controlled substance in the course of the performance of the duties of the Network Service Provider, the Managing Entity shall cause the Network Service Provider, at all tiers, to obtain and provide proof to the Managing Entity and the Department of professional liability insurance coverage, including medical malpractice liability and errors and omissions coverage, to cover all Network Service Provider employees with the same limits.
    9. The Department shall be exempt from, and in no way liable for, any sums of money that may represent a deductible or self-insured retention under any such insurance. The payment of any deductible on any policy shall be the sole responsibility of the Managing Entity, or Network Service Provider purchasing the insurance.
    10. All such insurance policies of the Managing Entity and its Network Service Providers, at all tiers, shall be provided by insurers licensed or eligible to do and that are doing business in the State of Florida. Each insurer must have a minimum rating of “A” by A. M. Best or an equivalent rating by a similar insurance rating firm and shall name the Department as an additional insured under the policy or policies. The Managing Entity shall use its best good faith efforts to cause the insurers issuing all such general, automobile, and professional liability insurance to use a policy form with additional insured provisions naming the Department as an additional insured or a form of additional insured endorsement that is acceptable to the Department in the reasonable exercise of its judgment.
    11. All such insurance proposed by the Managing Entity shall be submitted to and confirmed by the Contract Manager annually by **March 31**.
  1. In addition to the requirements of **Section 4.8**, the Managing Entity shall comply with the publicity requirements mandated in § 394.9082(5)(u), F.S.

1. **RECORDS, AUDITS AND DATA SECURITY** 
   1. **Inspections and Corrective Action**

In addition to the terms of **Section 5.1**, the following requirements shall apply to this Contract.

* + 1. The Managing Entity shall be monitored in accordance with § 402.7305, F.S., and CFOP 75-8, Policies and Procedures of Contract Oversight. The Managing Entity shall comply with any requests made by the Department as part of the conduct of such monitoring. At no cost to the Department, the Managing Entity shall provide complete access to all programmatic, administrative, management, budget and financial information related to services provided under this contract.
    2. The Department will provide a written report to the Managing Entity within 30 days of the monitoring team’s exit. If the report indicates corrective action is necessary, the Managing Entity shall provide a proposed corrective action plan for the Department’s approval, except in the case of threat to life or safety of Individuals Served, in which case the Managing Entity shall take immediate action to ameliorate the threat and associated causes.
    3. The Managing Entity shall cooperate at all times with the Department to conduct these reviews and shall provide all documentation requested by the reviewers in a timely manner at its administrative office or other location, as determined by the Department.
    4. The Managing Entity shall comply with the Department and its authorized representatives contracted to conduct operational and financial audits in accordance with § 394.9082(3), F.S. At no cost to the Department or its authorized representatives, the Managing Entity shall provide the right of access to all programmatic, administrative, management, budget, and financial information deemed necessary by the Department or its authorized representatives to complete the required operational and financial audits. This right also includes timely and reasonable access to the Managing Entity’s personnel for the purpose of interview and discussion related to such documents or this Contract in general. The Managing Entity shall provide any data or information requested by the Department or its authorized representatives as part of these audits within one business day, unless a later submission date is expressly authorized by the Department. The operational and financial audits of the Managing Entity shall consist of a review of business practices, personnel, financial records, related parties, compensation, and other areas as determined by the Department and shall include the following:
       1. The services administered, the method of provider payment, expenditures, outcomes, and other information as determined by the Department.
       2. Referral patterns, including the Managing Entity’s referral volume; provider referral assignments; services referred; length of time to obtain services; and key referral performance measures.
       3. Provider network adequacy and provider network participation in the Department's available bed platform, the Opioid Data Management System, the Agency for Health Care Administration Event Notification Service, and other Department required provider data submissions.
       4. Audits of the Managing Entity's expenditures and claims that include the following:
          1. Comparison of services administered through the Managing Entity, the outcomes of the Managing Entity's expenditures, the Managing Entity's expenditures for behavioral health services, and any other information as determined by the Department.
          2. Analysis of services funded by the Managing Entity rendered to individuals who are also Medicaid beneficiaries to, at a minimum, assess the extent to which the Managing Entity is funding services that are also available as covered services under the Medicaid program.
       5. The Department’s and its authorized representatives’ rights of access shall last as long as the records are retained.

1. **INSPECTIONS, PENALTIES, AND TERMINATION** 
   1. **Termination**

The provisions of **Section 6.2.1** and **Section 6.2.2** are hereby modified and superseded as follows. The remaining clauses of **Section 6** remain in effect.

* + 1. Notwithstanding the provisions of **Section 6.2.1**, in accordance with Section 22 of PUR 1000 Form, this Contract may be terminated by the Department without cause upon no less than 180 calendar days’ notice in writing to the Provider unless a sooner time is mutually agreed upon in writing.
    2. Notwithstanding the provisions of **Section 6.2.2**, this Contract may be terminated by the Provider upon no less than 180 calendar days’ notice in writing to the Department unless a sooner time is mutually agreed upon in writing.
  1. **Dispute Resolution**

The following Dispute Resolution terms shall apply to this Contract:

* + 1. The parties agree to cooperate in resolving any differences in interpreting the contract. Within five working days of the execution of this contract, each party shall designate one person with the requisite authority to act as its representative for dispute resolution purposes. Each party shall notify the other party of the person’s name and business address and telephone number. Within five working days from delivery to the designated representative of the other party of a written request for dispute resolution, the representatives will conduct a face-to-face meeting to resolve the disagreement amicably. If the representatives are unable to reach a mutually satisfactory resolution, either representative may request referral of the issue to the Managing Entity’s Chief Executive Officer (CEO) and the Department’s Deputy Assistant Secretary for Substance Abuse and Mental Health. Upon referral to this second step, the respective parties shall confer in an attempt to resolve the issue.
    2. If the CEO and Deputy Assistant Secretary are unable to resolve the issue within 10 days, the parties’ appointed representatives shall meet within 10 working days and select a third representative. These three representatives shall meet within 10 working days to seek resolution of the dispute. If the representatives’ good faith efforts to resolve the dispute fail, the representatives shall make written recommendations to the Secretary who will work with both parties to resolve the dispute. The parties reserve all their rights and remedies under Florida law. Venue for any court action will be in Leon County, Florida.

1. **OTHER TERMS** 
   1. The Managing Entity shall comply with all applicable federal and state laws and regulations and all policies, directives and guidelines published by the Department. In the event the Department amends any policies, directives, or guidelines after contract execution, the Department will provide electronic notice to the Managing Entity.
   2. **Exhibit A2** contains additional state and federal laws, rules, and regulations applicable to performance under this Contract.
2. **FEDERAL FUNDS APPLICABILITY**

There are no additional provisions to this section of the Contract.

1. **CLIENT SERVICES APPLICABILITY**

There are no additional provisions to this section of the Contract.

1. **PROPERTY** 
   1. The Managing Entity shall ensure that Network Service Providers comply with requirements in **Guidance 2 – Tangible Property Requirements** and document compliance through the submission of **Template 1 – Provider Tangible Property Inventory Form**.

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**EXHIBIT A1 – PROGRAM AND SERVICE SPECIFIC TERMS**

1. **Behavioral Health Network (BNet)**

A statewide network of Behavioral Health Service providers which serve children with mental health or substance use disorders who are ineligible for Medicaid and are determined eligible for Title XXI of the United States Public Health Services Act.

1. **Behavioral Health Services**

As defined by § 394.9082(2)(a), F.S.

1. **Block Grants**

The Community Mental Health Block Grant (CMHBG), pursuant to 42 U.S.C. s. 300x, et seq.; and the Substance Use Prevention, Treatment, and Recovery Services (SUPTRS) block grant, pursuant to 42 U.S.C. s. 300x-21, et seq.

1. **Continuous Quality Improvement (CQI)**

An ongoing, systematic process of internal and external improvements in service provision and administrative functions, taking into account both in process and end of process indicators, in order to meet the valid requirements of Individuals Served.

1. **Coordinated System of Care**

As defined by § 394.9082(2)(b), F.S.

1. **Electronic Health Record (EHR)**

As defined by § 408.051(2)(a), F.S.

1. **Electronic Vault**

An information technology system designed to store, manage, and track electronic versions of original and scanned documents, and to provide remote document access to Department staff.

1. **Evidence-Based Practice (EBP)**

As defined by **Guidance 1 – Evidence-Based Guidelines**.

1. **Indigent Psychiatric Medication Program, also known as the Indigent Drug Program (IDP)**

Behavioral Health Services provided pursuant to § 394.676, F.S.

1. **Individual(s) Served**

An individual who receives substance abuse or mental health services, the cost of which is paid, either in part or whole, by Department appropriated funds or local match (matching).

1. **Juvenile Incompetent to Proceed (JITP)**

"Child," "juvenile" or "youth" as defined by § 985.03(7), F.S., deemed incompetent to proceed for accused crimes pursuant to § 985.19, F.S.

1. **Local Match**

Pursuant to § 394.74(2)(b), F.S., and § 394.76, F.S.

1. **Managing Entity**

As defined by § 394.9082(2)(e), F.S. Throughout this Contract, the term Managing Entity is synonymous with the definition of Provider in the Department’s Standard Contract.

1. **Mental Health Services**

As defined by § 394.67(16), F.S.

1. **Network Service Provider(s)**

A direct service agency providing Substance Abuse or Mental Health Services that is under contract with a Managing Entity and referred to collectively as the “Network.” The Network shall consist of a comprehensive array of Behavioral Health Services and programs that are designed to meet the local need, are accessible and responsive to the needs of Individuals Served, their families, and community stakeholders, and include the essential elements of a coordinated system of care specified in § 394.4573(2), F.S.

1. **Operational Costs**

The allowable expenses incurred by a Managing Entity in performing its contracted functions and delivering its contracted services.

1. **Opioid Settlement Trust Fund**

The purpose of the State Opioid Settlement Trust Fund within the Department is to abate the opioid epidemic in accordance with settlement agreements reached in opioid-related litigation and bankruptcy, as specified in General Appropriations Acts, pursuant to § 20.195, F.S.

1. **Projects for Assistance in Transition from Homelessness (PATH)**

A federal grant established under 42 U.S.C. ss. 290cc-21 – 290cc-35 to support homeless individuals who are homeless or at risk of homelessness with mental illnesses, who may also have co-occurring substance abuse and mental health treatment needs.

1. **Risk Assessment**

A process for evaluating the threat of damage, loss, liability, or other negative occurrence caused by external or internal vulnerabilities that may be avoided through pre-emptive action. An effective Risk Assessment prioritizes the extent and degree of appropriate monitoring activities.

1. **Safety Net**

The publicly funded Behavioral Health Services and providers that have either historically received or currently receive funding appropriated to the Department by the General Appropriations Act (GAA). The Safety Net is intended to provide funding to Network Service Providers for expenditures that would otherwise be uncompensated costs for services provided to individuals in need of services.

1. **Stakeholders**

Individuals or groups with an interest in the provision of treatment or prevention services to individuals with substance use, mental health, and co-occurring disorders in the county(ies) specified in **Section B.3.1.** This includes, but is not limited to, the key community constituents included in § 394.9082(5), F.S.

1. **State Mental Health Treatment Facilities**

State Mental Health Treatment Facilities serve adults who have been voluntarily admitted or court ordered for intensive inpatient treatment by a circuit court and pursuant to Chapter 394, F.S. or Chapter 916, F.S.

1. **Statewide Inpatient Psychiatric Programs (SIPP)**

Medicaid-funded services to children under age 18 provided in a residential treatment center or hospital, licensed by the Agency for Health Care Administration (AHCA), which provides diagnostic and active treatment services in a secure setting. SIPP providers must be under contract with AHCA and provide these services in accordance with Chapter 394, F.S., Chapter 408, F.S., Chapter 409, F.S., and Rule 65E-9.008(4), F.A.C.

1. **Submit**

Unless otherwise specified, the term “Submit” as used in this Contract shall be construed to mean submission of a contractual requirement to the Department’s Contract Manager, subject to the provisions of **Section C.2.4.7.**

1. **Substance Abuse and Mental Health Data System (SAMH Data System)**

Collectively, the Department’s web-based data systems for reporting substance abuse and mental health services, including the Substance Abuse and Mental Health Information System (SAMHIS), the Performance Based Prevention System (PBPS), the Financial and Service Accountability Management System (FASAMS) or any replacement systems identified by the Department for the reporting of data by the Managing Entity and all Network Service Providers in accordance with this contract.

1. **Substance Abuse Services**

Any of the substance abuse prevention, intervention and clinical treatment services defined in § 397.311(26), F.S.

1. **Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI) Outreach, Access, and Recovery (SOAR)**

A Substance Abuse and Mental Health Services Administration (SAMHSA) technical assistance initiative designed to help individuals increase earlier access to SSI and SSDI through improved approval rates on initial Social Security applications by providing training, technical assistance, and strategic planning to Network Service Providers.

1. **Temporary Assistance to Needy Families (TANF)**

As defined by 42 U.S.C. ss. 601, et seq., and Chapter 414, F.S.

1. **Wait List**

A master list for the Network, maintained by a Managing Entity that shows:

* 1. The number of individuals waiting for access to the recommended service or program;
  2. The length of time each individual has been on the waiting list; and
  3. The interim services provided to the individual.

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**EXHIBIT A2 – SAMH PROGRAMMATIC STATE AND FEDERAL LAWS, RULES, AND REGULATIONS**

The provider and its subcontractors shall comply with all applicable state and federal laws, rules and regulations, as amended from time to time, that affect the subject areas of the contract. Authorities include but are not limited to the following:

1. **FEDERAL AUTHORITY** 
   1. **Block Grants Regarding Mental Health and Substance Abuse**
      1. **Block Grants for Community Mental Health Services**

42 U.S.C. ss. 300x, et seq.

* + 1. **Block Grants for Prevention and Treatment of Substance Abuse**

42 U.S.C. ss. 300x-21 et seq.

45 CFR Part 96, Subpart L

* 1. **Department of Health and Human Services, General Administration, Block Grants**

45 CFR Part. 96

* 1. **Charitable Choice Regulations Applicable to Substance Abuse Block Grant and PATH Grant**

42 CFR Part 54

* 1. **Confidentiality Of Substance Use Disorder Patient Records**

42 CFR Part 2

* 1. **Security and Privacy**

45 CFR Part 164

* 1. **Supplemental Security Income for the Aged, Blind and Disabled**

20 CFR Part 416

* 1. **Temporary Assistance to Needy Families (TANF)**

42 U.S.C. ss. 601 - 619

45 CFR, Part 260

* 1. **Projects for Assistance in Transition from Homelessness (PATH)**

42 U.S.C. ss. 290cc-21 – 290cc-35

* 1. **Equal Opportunity for Individuals with Disabilities (Americans with Disabilities Act of 1990)**

42 U.S.C. ss. 12101 - 12213

* 1. **Prevention of Trafficking (Trafficking Victims Protection Act of 2000)**

22 U.S.C. s. 7104

2 CFR Part 175

* 1. **Governmentwide Requirements for Drug-Free Workplace (Financial Assistance)**

2 CFR Part 182

2 CFR Part 382

**A2.1.12 The 988 Suicide and Crisis Lifeline**

The Communications Act of 1934

47 U.S.C. 609

47 U.S.C. 251

1. **FLORIDA STATUTES**
   1. **Child Welfare and Community Based Care**

Ch. 39, F.S. Proceedings Relating to Children

Ch. 402, F.S. Health and Human Services: Miscellaneous Provisions

* 1. **Substance Abuse and Mental Health Services**

Ch. 381, F.S. Public Health: General Provisions

Ch. 386, F.S. Particular Conditions Affecting Public Health

Ch. 394, F.S. Mental Health

Ch. 395, F.S. Hospital Licensing and Regulation

Ch. 397, F.S. Substance Abuse Services

Ch. 400, F.S. Nursing Home and Related Health Care Facilities

Ch. 414, F.S. Family Self-Sufficiency

Ch. 458, F.S. Medical Practice

Ch. 464, F.S. Nursing

Ch. 465, F.S. Pharmacy

Ch. 490, F.S. Psychological Services

Ch. 491, F.S. Clinical, Counseling, and Psychotherapy Services

Ch. 499, F.S. Florida Drug and Cosmetic Act

Ch. 553, F.S. Building Construction Standards

Ch. 893, F.S. Drug Abuse Prevention and Control

§ 409.906(8), F.S. Optional Medicaid Services – Community Mental Health Services

* 1. **Developmental Disabilities**

Ch. 393, F.S. Developmental Disabilities

* 1. **Adult Protective Services**

Ch. 415, F.S. Adult Protective Services

* 1. **Forensics**

Ch. 916, F.S. Mentally Ill and Intellectually Disabled Defendants

Ch. 985, F.S. Juvenile Justice; Interstate Compact on Juveniles

§ 985.19, F.S. Incompetency in Juvenile Delinquency Cases

§ 985.24, F.S. Use of detention; prohibitions

* 1. **State Administrative Procedures and Services**

Ch. 119, F.S. Public Records

Ch. 120, F.S. Administrative Procedures Act

Ch. 287, F.S. Procurement of Personal Property and Services

Ch. 435, F.S. Employment Screening

Ch. 815, F.S. Computer-Related Crimes

Ch. 817, F.S. Fraudulent Practices

§ 112.061, F.S. Per diem and travel expenses of public officers, employees, and authorized persons; statewide travel management system

§ 112.3185, F.S. Additional standards for state agency employees

§ 215.422, F.S. Payments, warrants, and invoices; processing time limits; dispute resolution; agency or judicial branch compliance

§ 216.181(16)(b), F.S. Advanced funds for program startup or contracted services

1. **FLORIDA ADMINISTRATIVE CODE** 
   1. **Child Welfare and Community Based Care**

Ch. 65C-45, F.A.C. Levels of Licensure

Ch. 65C-46, F.A.C. Child-Caring Agency Licensing

Ch. 65C-15, F.A.C. Child-Placing Agencies

* 1. **Substance Abuse and Mental Health Services**

Ch. 65D-30, F.A.C. Substance Abuse Services Office

Ch. 65E-4, F.A.C. Community Mental Health Regulation

Ch. 65E-5, F.A.C. Mental Health Act Regulation

Ch. 65E-9, F.A.C Licensure of Residential Treatment Centers

Ch. 65E-11, F.A.C. Behavioral Health Services

Ch. 65E-12, F.A.C. Public Mental Health Crisis Stabilization Units and Short-Term Residential Treatment Programs

Ch. 65E-14, F.A.C. Community Substance Abuse and Mental Health Services - Financial Rules

Ch. 65E-16, F.A.C. Indigent Psychiatric Medication Program

Ch. 65E-20, F.A.C. Forensic Client Services Act Regulation

Ch. 65E-26, F.A.C. Substance Abuse and Mental Health Priority Populations and Services

* 1. **Financial Penalties**

Ch. 65-29, F.A.C. Penalties on Service Providers

1. **MISCELLANEOUS** 
   1. **Department of Children and Families Operating Procedures**

CFOP 155-10 / 175-40 Services for Children with Mental Health and Any Other Co-Occurring Substance Abuse or Developmental Disability Treatment Needs in Out-of-Home Care Placements

CFOP 155-11 Title XXI Behavioral Health Network

CFOP 155-47 Processing Referrals from the Department of Corrections

CFOP 215-6 Incident Reporting and Analysis System (IRAS)

* 1. **Standards applicable to Cost Principles, Audits, Financial Assistance and Administrative Requirements**

§ 215.425, F.S. Extra Compensation Claims prohibited; bonuses; severance pay

§ 215.97, F.S. Florida Single Audit Act

§ 215.971, F.S. Agreements funded with federal or state assistance

Ch. 69I-42, F.A.C. Travel Expenses

Ch. 69I-5, F.A.C State Financial Assistance

CFO’s Memorandum No. 01 - Contract and Grant Reviews and Related Payment Processing Requirements

CFO’s Memorandum No. 02 - Reference Guide for State Expenditures

Comptroller’s Memorandum No. 04 - Guidance on all Contractual Service Agreements Pursuant to § 215.971, Florida Statutes

CFO’s Memorandum No. 20 - Compliance Requirements for Agreements

2 CFR, Part 180 Office of Management and Budget Guidelines to Agencies on Government Wide Debarment and Suspension (Non-procurement)

2 CFR, Part 200 Office of Management and Budget Guidance - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, available at <https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200>

2 CFR, Part 300 Department of Health and Human Services - Office of Management and Budget Guidance - Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, Adoption of 2 CFR Part 200

45 CFR, Part 75 Uniform Administration Requirements, Cost Principles, and Audit Requirements for HHS Awards

* 1. **Data Collection and Reporting Requirements**

§ 394.74(3)(e), F.S. Data Submission

§ 394.9082, F.S. Behavioral health managing entities

§ 394.77, F.S. Uniform management information, accounting, and reporting systems for providers

§ 397.321(3)(c), F.S. Data collection and dissemination system

DCF PAM 155-2 The Department’s Substance Abuse and Mental Health data system.

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