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2018 INNOVATION & POLICY CONFERENCE

Health & Safety Policy Committee Committee Leadership



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2018 INNOVATION & POLICY CONFERENCE



Health and Human Services Policy

County officials recognize the importance of adequately providing for quality health and human services to protect and assist citizens in need. As a critical link in the federal/state/county human services partnership, counties must be included in formulating and implementing policies that protect the health, safety, and welfare of all the citizens of the state.

- HS 1. The Florida Association of Counties supports allowing for flexibility in the delivery of health and human services within communities to achieve the desired level of services based on local needs and priorities.
- HS 2. The Florida Association of Counties supports expanding health care access and believe that efforts to refine and enhance state and local programs that provide access to affordable health care are essential.
- HS 3. The Florida Association of Counties supports policies that increase access to acute care behavioral health services for individuals and families.
- HS 4. The Florida Association of Counties supports policies that increase supportive housing, jail diversion, and employment and education initiatives for people with mental health, substance abuse issues, behavioral health issues and/or disabilities.
- HS 5. The Florida Association of Counties supports diverting, medically assisting, or treating the mentally ill outside of the criminal justice process through alternative programs, such as Crisis Intervention Teams.
- HS 6. The Florida Association of Counties supports Medicaid reform initiatives to ensure that persons with substance abuse and mental health treatment needs are appropriately served.
- HS 7. The Florida Association of Counties supports the implementation of discharge protocols and/or procedures for hospitals, correctional facilities, and mental health facilities when releasing homeless persons.
- HS 8. The Florida Association of Counties supports the development of policies that would allow local governments to work with the state and federal government to serve target populations: the chronically homeless, veterans, and families and children, with emphasis on children aging out of the foster care system.



- HS 9. The Florida Association of Counties supports policies that promote continued coordination with the state's Council on Homelessness, specifically as it recommends policies and practices in support of the Federal Strategic Plan to End Homelessness.
- HS 10. The Florida Association of Counties supports policies that lessen fragmentation, inefficient operation, and costly duplication of transportation disadvantaged services.

Health and Human Services Funding

While most health and human service programs and the laws that govern these programs are established by federal and state governments, many of these services are being provided through community-based services at the local level. Given the varying capacity and funding capabilities of counties, adequate federal and state funding to ensure uniformity in the human services continuum.

- HS 11. The Florida Association of Counties supports, when feasible, directing existing funding from institutional care to community-based care programs.
- HS 12. The Florida Association of Counties supports increased funding for core and crisis mental health services, including beds, statewide.
- HS 13. The Florida Association of Counties supports life-saving interventions, including medication-assisted treatment, residential treatment, twelve-step recovery and detoxification programs, and diversions from the criminal justice system.
- HS 14. The Florida Association of Counties supports increased funding of the Criminal Justice Mental Health and Substance Abuse Reinvestment Grant Program with recurring dollars in a trust fund.
- HS 15. The Florida Association of Counties supports sustainable matching state funds to counties that have received both planning and implementation Reinvestment Grant funds.
- HS 16. The Florida Association of Counties supports a system for distributing Low Income Pool dollars that ensures IGT-donor counties are able to direct the federal matching dollars generated by their local IGT contributions to best meet the health care needs of their constituents, rather than having those dollars redistributed throughout the state.



- HS 17. The Florida Association of Counties supports adequate funding for the Community Care for the Elderly Program, which provides cost efficient diversion from nursing home placement for impaired elders.
- HS 18. The Florida Association of Counties supports funding Graduate Medical Education programs to meet the healthcare needs of the state and its local communities, with an emphasis on programs that provide for specialties in need, as well as the development of physicians to practice in medically underserved areas.
- HS 19. The Florida Association of Counties supports funding for the Florida Healthy Start and Healthy Families program.
- HS 20. The Florida Association of Counties opposes policies that further shift state Medicaid costs to counties.
- HS 21. The Florida Association of Counties supports the continued evaluation of the countystate Medicaid cost-share arrangement, taking into consideration the impacts of state policies designed to contain growth in Medicaid costs, including statewide Medicaid managed care and diagnosis related group reimbursement for hospitals.
- HS 22. The Florida Association of Counties supports increasing state general revenue funding for county health departments (CHDs), and opposes any state reductions to the CHD Trust Funds.
- HS 23. The Florida Association of Counties supports maintaining a coordinated system of CHDs that is centrally housed within the Department of Health (DOH).
- HS 24. The Florida Association of Counties supports preserving the ability of CHDs to provide primary care and direct patient care services, particularly in communities without adequate substitutes or alternative providers for these services.
- HS 25. The Florida Association of Counties supports a dedicated state funding source for homeless programs.
- HS 26. The Florida Association of Counties supports the continuation of the Medically Needy program.
- HS 27. The Florida Association of Counties supports policies that allocate state funds to hire Veterans Services Officers in counties in order to increase services and federal benefits for Florida veterans.



HS 28. The Florida Association of Counties supports policies that protect the Transportation Disadvantaged (TD) trust fund, as well as dedicated state funding for the TD program, including funding to address unmet TD needs in rural areas.

Public Safety and Emergency Services

Providing for public safety is one of the core functions of county governments. Counties provide for safety through support of first-responder services from sheriffs' offices, ambulance services, fire and rescue, and emergency management centers that protect the public during natural or man-made disasters, terrorism, emergencies, and public health threats.

- HS 29. The Florida Association of Counties supports policies that maintain and enhance established trauma care funding, including incentives for the development of new trauma centers.
- HS 30. The Florida Association of Counties opposes policies that shift the state's financial responsibility for the trauma system to counties or divert trauma care funding for purposes other than those intended by the existing legislation.
- HS 31. The Florida Association of Counties supports policies that protect the ability of counties to provide for coordinated, countywide systems of emergency medical services, and not limit the ability of ambulance and other emergency medical transportation providers to be reimbursed for their services.
- HS 32. The Florida Association of Counties opposes sentencing of state inmates to county jails, but supports counties' ability to contract with the Department of Corrections for housing state inmates.
- HS 33. The Florida Association of Counties supports funding for capital improvements to county courthouses and other court-related facilities, including jails.
- HS 34. The Florida Association of Counties supports policies designed to prevent human trafficking, protect victims, prosecute human traffickers, and create partnerships across all levels of government, the private sector, and state agencies to provide training opportunities for local government employees and their agents to recognize the signs of human trafficking including government inspectors, law enforcement, criminal justice, health care, transportation and public transit, educational partners, and employees working with vulnerable populations.



- HS 35. The Florida Association of Counties opposes policies that would shift funds or impede counties from building and maintaining an interoperable radio communication system as authorized by statute.
- HS 36. The Florida Association of Counties supports increased funding for locally-operated crime analysis laboratories.
- HS 37. The Florida Association of Counties supports policies and funding targeted at enhancing the quality of volunteer firefighting services in rural and unincorporated communities.
- HS 38. The Florida Association of Counties supports the provision of state matching funds for all disaster-related / emergency management projects deemed eligible and approved by FEMA including, but not limited to, backup generators for facilities for elders.
- HS 39. The Florida Association of Counties supports continued state funding for county EOCs to ensure each is able to meet the minimum structural survivability and operational space criteria established by the state and federal government.
- HS 40. The Florida Association of Counties supports policies and funding that provide enhanced training and education opportunities for County Emergency Management employees.

Criminal Justice System

Florida's counties also play a critical role in state's criminal justice system, providing prevention, pre-trial, and reintegration services, juvenile programs, victims' assistance, and jail funding throughout the state. Success of such programs hinges on a comprehensive and coordinated approach across local agencies, jurisdictions, and with state and federal partners. When determining appropriate programming and funding, Florida's counties work to encourage improved outcomes for system participants and communities while also seeking cost reductions and efficiencies. Public safety and criminal justice services continue to have increased funding needs, however, as counties and their public safety partners face new and evolving threats to the safety and welfare of their communities and counties must be empowered to adequately address funding of necessary services. Furthermore, considering the interconnected nature of many of these threats, increased federal and state funding is essential to ensure that effective public safety systems are provided throughout Florida.



- HS 41. The Florida Association of Counties supports policies preserving counties' ability to provide risk assessment pretrial release services that prevent new offenses and ensures appearance as obligated.
- HS 42. The Florida Association of Counties opposes policies limiting the discretion of the first appearance judges.
- HS 43. The Florida Association of Counties opposes policies that restrict pretrial services to only indigent defendants.
- HS 44. The Florida Association of Counties supports policies that reduce county jail expenses, including juvenile and adult diversion programs.
- HS 45. The Florida Association of Counties supports policies that provide Medicaid eligibility for persons incarcerated in county jails while waiting disposition of their cases and to ensure that existing Medicaid benefits are not terminated during incarceration.
- HS 46. The Florida Association of Counties supports policies and initiatives which reduce juvenile detention through prevention, civil citation, treatment, and rehabilitation services.
- HS 47. The Florida Association of Counties supports state investments in juvenile facilities to improve the conditions of secure confinement for detained youth without such costs being shifted to the counties.
- HS 48. The Florida Association of Counties supports policies that ensure that adequate safety, supervision, and facility maintenance is provided at juvenile residential assessment centers and secure detention facilities.
- HS 49. The Florida Association of Counties supports state funding of Juvenile Assessment Centers throughout Florida to strive to achieve equal treatment of youth offenders.
- HS 50. The Florida Association of Counties supports policies that increase judicial oversight and authority for charging and sentencing juvenile defendants as adults without creating additional county service requirements.



County Policy Proposal Submitted by: Alachua County Contact: msexton@alachuacounty.us

HS-1: Arrestee Medical Expenses

FAC Staff Recommendation: Defer to Health and Safety committee.

Possible non-legislative solution:

Inmate Medical Cost Management

The Florida Sheriffs Association established the Inmate Medical Cost Management Program in 2012 as a solution to offsite inmate medical costs. Unlike Department of Corrections and Department of Juvenile Justice, jails are not guaranteed any caps on inmate medical costs. While some counties can negotiate good rates with local hospitals, others struggle when the inmate must be taken offsite to receive medical care.

The program is an enhancement to onsite medical care and does not carry any enrollment fee. Sheriffs or county-run jails only pay for the service if savings are achieved. A portion of the savings goes to pay for the negotiation and intense review of medical bills for offsite inmate medical care.

In 2016, 19 sheriffs saved \$1.9 million or 28% of all claims submitted.

Recent cases. To understand how significant the savings can be, one Florida Sheriff's Office asked the provider to review a bill that was several years old. After scrubbing the bill, the sheriff received a 59% reduction in the total bill.

In another instance, the provider was able to negotiate a 51% reduction on a bill for an inmate who was treated at an out-of-county trauma center.

How it works. This program gives the sheriffs and/or the county access to a nationwide network of medical providers. While the average savings are 35-40%, this network has provided up to 60% in savings for offsite medical services.

There are two ways to benefit from the program. The first method is to use the savings card anytime an inmate has to go offsite for medical care. The second way is when the care has already been delivered. When you enter into an agreement for this Program, Prime Health can take the outstanding bills and scrub them to secure a reduced rate.

The program works in concert with the contracts already established for in house medical services, so you can keep your current agreements in place.



Proposed Policy: SUPPORT legislation that would make county inmate medical charges consistent with the Florida Department of Corrections charges.

Issue Summary: Align County Inmate Medical Charges with the Florida Department of Corrections Charges. Florida Counties and Jails have different rates of payment to individual hospitals for healthcare provided to arrestees/detainees per F.S. 901.35. This change would allow payment structures for Florida Counties and Jails to be in alignment with the Florida Department of Corrections as specified in F.S. 945.6041.

Background: There is inconsistency in the rates counties and jails are paying for arrestee/detainee medical care. Counties and jails have little to no leverage in negotiating with healthcare providers for the escalating charges being demanded. This is causing unnecessary and unpredictable financial burdens on the taxpayer. The Florida Sheriff's Association tried, unsuccessfully, to address this issue in 2012 with House Bill 263 and Senate Bill 452.

Analysis: In many Florida counties, hospitals and healthcare providers have been reluctant to negotiate for the care of arrestees/detainees. Many have stated that this is a population they do not wish to have in their facility. Taxpayers are carrying the burden of the high cost of care. Alachua County has collected data from other counties to compare the rates being paid. These rates are not consistent. Alachua County has very poor negotiated rates with the two major hospitals in Gainesville.

Fiscal Impact:

Alachua County's medical costs are approximately \$2.5 million annually. FY18 costs will be approximately \$3 million. It is estimated Alachua County's arrestee/detainee medical cost would be reduced by 60% should the county have the same rates established by F.S. 945.6041.



HS-2: Dedicated State Funding for Homeless Assistance Programs

FAC Staff Recommendation: Pursue under guiding principles. Please refer to FAC 2018 Guiding Principles HS 8 and HS 25.

Proposed Policy: SUPPORT dedicated state funding for homeless assistance programs.

Issue Summary: Dedicated State Matching Funds for Homeless Assistance. This policy is designed to assist counties that are investing in homeless services. Counties are awarded federal and state grants to address local housing issues. Commissioners are able to work with staff to determine the best use of the funds specific to the needs of their residents. Some counties focus all funding on rehabilitation to ensure ongoing habitability of existing housing stock. In many cases, this leaves homeless residents without local assistance.

Background: The lack of dedicated homeless funding to assist residents in all 67 counties, results in those homeless individuals residing in counties where no federal, state or local funds are provided for homeless assistance relocating. They often move to neighboring counties who do dedicate resources for homeless services. This further burdens an overtaxed system in counties that do provide homeless assistance. It also causes homeless residents to be separated from family, friends, community support systems, and other resources.

Analysis:

Counties that do fund homeless services with local dollars, as well as direct a portion of federal and state dollars, are left to try to plan for the needs of residents who become homeless as well as anticipate the need of those whose counties do not make such provision. While at times these are fiscally constrained counties with limited resources, recognition of the impact on the part of the state to either assist those counties further or reward the counties that are making the investment in homeless assistance funding.

Fiscal Impact:

At any given time, 25% to 40% of those identified as newly seeking homeless assistance services in Alachua County are from out of the area, having come from other counties in Florida as well as other states across the country. Currently, Alachua County funds the Grace Marketplace Emergency Homeless Shelter at \$725,000 annually (this matches the same amount from the City of Gainesville) and the County and City each use \$120,000 of their SHIP dollars for Rapid Rehousing.

2018 INNOVATION & POLICY CONFERENCE



HS-3: Dental Therapists

FAC Staff Recommendation: Not adopt.

History: The Commission on Dental Accreditation (CODA) is an independent entity recognized by the US Department of Education as the national accrediting agency for dental, allied dental and advanced dental education programs. In February of 2015, CODA adopted standards by which programs that educate midlevel dental providers—non-dentists who perform such surgical procedures as extracting teeth--can apply for accreditation. CODA's decisions are made independently from the American Dental Association (ADA) policy.

The ADA believes it is in the best interests of the public that only dentists diagnose dental disease and perform surgical and irreversible procedures. It is important to note that although legislation has been passed authorizing dental therapist – there are no CODA accredited dental therapy programs in any state.

A recent report by the ADA Health Policy Institute shows that the number of dentists practicing per 100,000 people today has climbed more than 4 percent from 2003 to 2013, and is projected to climb 1.5 percent from 2013 to 2018 and 2.6 percent by 2033.

There are people in underserved communities having difficulties connecting to public health resources and dentists who can provide needed treatment. However, there are solutions available. Many federal and state programs offer incentives like student loan repayment assistance to attract dentists to these communities. The ADA created a new dental team member, the Community Dental Health Coordinator (CDHC). The initial ADA CDHC pilot project graduated 34 CDHCs. Pilot project graduates have brought their skills to such underserved communities as inner cities, remote rural areas and Native American communities in more than eight states. Three schools in New Mexico, Arizona and Florida are offering the CDHC program. They provide oral health education, disease prevention, help coordinate appointments and can reduce patient no-show rates from nearly 50 percent to below 10 percent.

The Florida Dental Association is not in support of any legislation that would allow dental therapist to practice within the State of Florida.

Proposed Policy: SUPPORT the use of Dental Therapists in Florida.

Issue Summary: Support the use of Dental Therapists in Florida. As defined on the PEW Charitable Trust's website, "Dental Therapists are midlevel providers similar to physician assistants in medicine. They deliver preventive and routine restorative care, such as filling cavities, placing temporary crowns, and extracting badly diseased or loose teeth. As states grapple with provider shortages, especially to serve vulnerable populations, a handful have acted



to allow dentists to hire these practitioners, and many others are exploring the option. Dental therapists also practice in several tribal communities, where access to care can be especially limited."

Background: In the 2018 Legislative Session, SB 1498 and HB 683 dealt with dental therapists and were unsuccessful. In other states:

- The Alaska Native Tribal Health Consortium introduced dental therapists to Alaska's tribal communities in 2004. The new providers were authorized in compliance with federal law and were the first such workers in the nation.
- Minnesota in 2009 approved the nation's first statewide legislation to authorize dental therapists.
- Maine enacted legislation in 2014 authorizing dentists to hire dental therapists, and the state is now working to implement the law and create a training program.
- The Swinomish Indian Tribal Community, located in Washington state, hired a dental therapist in January 2016.
- Oregon approved a pilot in February 2016 allowing two local tribes to hire dental therapists.

*Although legislation has been passed – there are no CODA accredited dental therapy programs in any state.

Analysis: According to federal statistics, 63 million Americans live in places that the federal government has designated as dentist shortage areas. More than half of this population resides in rural communities. A recently released study from Minnesota shows that a dental therapist can be a cost-efficient member of a rural dental clinic's team, with average daily billings only slightly lower than those of clinic dentists. The findings suggest that expanded use of these therapists can improve access to oral health care while keeping costs down.

Fiscal Impact:

A recent Pew study that examined how a dental therapist was used in a rural private practice found that in the therapist's first year new patients increased by 38 percent, the share of Medicaid patients increased from 26 percent to 39 percent, and the dentist was able to focus on more advanced procedures. The study also showed that hiring dental therapists can be a good business decision for dentists, over 90 percent of whom own or work in private settings.



HS-4: Emergency Shelters – Reimbursement

FAC Staff Recommendation: Not Adopt. FAC has been in communication with both FEMA and the Florida Division of Emergency Management and has provided the following recommendations:

The question of whether the new policy regarding legal responsibility for emergency sheltering correctly implements the statutes remains unresolved. However, to allow counties to focus on the priority of the 2018 hurricane season, and because a timely resolution is improbable, FAC provides the following recommendations:

While the statutes mandate that school boards provide emergency sheltering, there is no legal requirement that "local emergency management agencies" are responsible for funding these emergency sheltering costs or the administrative expense of applying for reimbursement. The decision to apply for reimbursement on behalf of the school boards remains at the discretion of the local board of county commissioners (or other applicable local government entity authorized to request these mandated services from school boards).

<u>OR</u>

2a) Recognizing the risks of applying for Public Assistance reimbursement on behalf of another local government, those "local emergency management agencies" that choose to apply for reimbursement on behalf of the school board should consider doing so under the auspices of a retroactive agreement with the school board that outlines the terms and conditions of the sheltering activities and costs.

2b) Because both FEMA and DEM have indicated that this determination also applies to future disasters, "local emergency management agencies" that choose to apply for reimbursement on behalf of the school board should enter into prospective agreements with their school boards.

Proposed Policy: SUPPORT policy change that allows the school board, municipality, or other emergency sheltering entity to directly seek reimbursement from FEMA for emergency sheltering costs.

Issue Summary: Sec. 252.38 (1)(d), F.S., is justification for counties to reimburse school boards and other entities for emergency sheltering activities. In the past, the entities which provided emergency sheltering were able to apply for reimbursement directly from FEMA. The consequence is counties are now liable for the expenses at emergency shelters and dependent upon the emergency sheltering entity to provide appropriate documentation. Counties are to reimburse the emergency sheltering entity and then seek reimbursement from FEMA for those costs, a process which can take several years. Counties are now financially at risk if future audits determine the emergency sheltering entity acted improperly during the emergency sheltering activity or did not properly document costs.



Background: In 44 CFR 206.223(a)(3), it states that to be eligible for financial assistance the work must "be the legal responsibility of an eligible applicant," and accordingly FEMA's overarching document for Public Assistance, the Public Assistance Program and Policy Guide (PAPPG) on page 21 states "To determine legal responsibility for Emergency Work, FEMA evaluates whether the Applicant requesting the assistance either had jurisdiction over the area or the legal authority to conduct the work related to the request at the time of the incident." As a result of this language, Counties in Florida have the legal responsibility for sheltering as detailed in Florida Statutes§ 252.38 (1)(d). The language in the statute has been in existence for over a decade but never enforced. Now, as the counties are financially liable for emergency sheltering expenses, it is determined a policy change is needed to ensure minimal financial risk to the counties. The requested change is to amend the language in the statute to allow the school board, municipality, or other emergency sheltering entity to directly seek reimbursement from FEMA for emergency sheltering costs. Importantly, the language will need to be clarified to ensure that if emergency sheltering is requested, the entity financially responsible for associated costs would be that entity in all circumstances, regardless of whether there is a Presidential Disaster Declaration. Additionally, the entity with financial responsibility should still be subject to emergency sheltering at the request of the county emergency management director, per Florida Statutes§ 252.385..

Analysis: This issue is highly consequential for all counties in Florida. Of note, Alachua County has considerable shelter space and is considered a host county. Historically, Alachua County has sheltered more Floridians from outside of Alachua County than within. This pattern has held steady for Hurricanes Hermine, Matthew, and Irma. Alachua County supports a statewide sheltering need, yet the existing legislation puts Alachua County financially at risk for sheltering Floridians.

Fiscal Impact:

The costs associated with emergency sheltering from Alachua County Public Schools ("the school board") from Hurricane Irma is \$513,113.80. Alachua County BOCC is wholly responsible for reimbursing the school board for these costs, representing over a half-million dollars extra in associated storm costs that the County must support. Alachua County BOCC is awaiting reimbursement from FEMA for these costs. If any documentation from the school board is incorrect or determined by an Inspector General from either the state or Federal governments to be incorrect, the County is liable to pay the difference under the current structure. Additionally, a municipal entity, the City of Newberry, expended \$9,051.68 in support of emergency sheltering during Hurricane Irma. As a result, the County has reimbursed the City in full, and is again, at risk while awaiting reimbursement from FEMA as well as in future audits.



County Policy Proposal Submitted by: Broward County Contact: dsainvil@broward.org

HS-5: MSD Public Safety Commission

FAC Staff Recommendation: Not adopt as a part of Legislative Action Plan. Adopt as separate motion for FAC staff to take action, if needed.

If any recommendations come out of the MSD Public Safety Commission report that fall within the purview of FAC, the public policy staff will pursue appropriate action.

Proposed Policy: SUPPORT the ability of counties to review and implement relevant countywide changes, as necessary, pursuant to the proposed recommendation of the MSD Public Safety Commission when released.

Issue Summary: With both the House and Senate passing legislation on the last week of the 2018 Legislative Session, Governor Rick Scott signed SB 7026 – Public Safety, into law on Friday, March 9, 2018. The bill, cited as the Marjory Stoneman Douglas High School Public Safety Act, seeks to comprehensively address the crisis of gun violence, particularly gun violence on school campuses.

Components of the bill include, among others, provisions to enhance school safety policies, procedures, and personnel on the state and local level, to improve and expand mental health services, and to revise laws and empower law enforcement and the courts to limit access to firearms by young adults or by individuals exhibiting a risk of harming themselves or others. The bill appropriates \$400 million to implement the provisions of the bill.

Background:

The Marjory Stoneman Douglas High School (MSD) Public Safety Commission within the Florida Department of Law Enforcement was established during the 2018 legislative session. The bill (Chapter 2018-3, L.O.F.) comprehensively addresses the crisis of gun violence, including but not limited to, gun violence on school campuses. The MSD Commission was formed to specifically analyze information from the school shooting and other mass violence incidents in the state and address recommendations and system improvements.

Counties throughout the state may see an increase in requests to fund school safety from their respective sheriff's or law enforcement office. While school safety is the responsibility of the school board, counties understand the general need to have working and reliable infrastructure and communication systems.

Analysis: SB 7026 is intended to improve school safety through the following provisions:



County Policy Proposal Submitted by: Broward County Contact: dsainvil@broward.org

- Establishing the Marjory Stoneman Douglas High School Public Safety Commission to investigate system failures in the Parkland school shooting and prior mass violence incidents and develop recommendations for system improvements.
- Codifying the Office of Safe Schools within the Florida Department of Education (DOE) which will service as a central repository for the best practices, training standards, and compliance regarding school safety and security.
- Permitting a sheriff to establish a Coach Aaron Feis Guardian Program.
 - The legislation allows school districts to decide whether to participate in the guardian program if it is available in their county.
 - A guardian must complete 132 hours of comprehensive firearm safety and proficiency training, pass psychological evaluation, submit to and pass drug tests; and complete certified diversity training. The guardian program is named after Coach Aaron Feis, who lost his life protecting students during the shooting at Marjory Stoneman Douglas High School. The guardian program is completely voluntary for a sheriff to establish, for a school district to participate, and for an individual to volunteer.
 - Individuals who exclusively perform classroom duties as classroom teachers are excluded from participating in a Coach Aaron Feis Guardian Program. However, this limitation does not apply to classroom teachers of a Junior Reserve Officers' Training Corps program; a current service member; and a current or former law enforcement officer.
- Requiring each district school board and school district superintendent to cooperate with law enforcement agencies to assign one or more safe-school officers at each school facility. The safe-school officer requirement can be satisfied by appointing any combination of a school resource officer, a school safety officer, or a school guardian.
- Requiring each district school board to designate a district school safety specialist to serve as the district's primary point of public contact for public school safety functions.
- Requiring each school district to designate school safety specialists and a threat assessment team at each school and requires the team to operate under the district school safety specialist's direction.
- Requiring the DOE to contract for the development of a Florida Safe Schools Assessment Tool which will assist school districts in conducting security assessments to identify threats and vulnerabilities.
- Creating the mental health assistance allocation to assist school districts in establishing or expanding school-based mental health care.

Fiscal Impact: Indeterminate



HS-6: Limit Increases in County Medicaid Cost Share Program

FAC Staff Recommendation: Defer to Health and Safety committee.

Proposed Policy: SUPPORT efforts to prevent increases in Medicaid costs and requests that the provision determining the rate of overall growth of the County Medicaid cost share be maintained at 50% and not be changed to 100% of the rate of growth in the state Medicaid expenditures.

Issue Summary: From FY 2015-16 through FY 2019-20 the rate of growth of the overall County Cost Share program has been determined at the rate of 50% of the percentage change in the state Medicaid expenditures. However, after FY 2019-20, the rate of growth in the total County Cost Share formula will increase or decrease <u>at the same percentage as the changes in the state Medicaid expenditures</u>. This change in percentage will effectively double to rate of growth of the County Medicaid Cost Share program thus increasing the fiscal burden on local county taxpayers.

Background: During the 2013 Legislative Session, the Legislature passed Senate Bill 1520 modifying the method of calculating what each county is required to pay in the State County Medicaid Cost Share program. The statutes changed the criteria for calculating each counties share from a formula based on "Utilization" to a formula based on "Enrollment". The change in county share calculation method outlined a seven-year implementation schedule that changes the County Cost Share formula from being 100% Utilization based to 100% Enrollment Based. In addition, the statutes determined that the level of overall growth of the County Cost Share program would be based on the percentage growth of the overall state Medicaid expenditures. Specifically, for State Fiscal Years 2015-2016 through the 2019-2020, the total amount of the counties' annual contribution shall be the total contribution for the prior fiscal year adjusted by 50 percent of the percentage change in the state Medicaid expenditures as determined by the Social Services Estimating Conference. For each fiscal year after the 2019-2020 state fiscal year, the total amount of the counties' annual contribution shall be the total contribution for the prior fiscal year adjusted by the percentage change in the state Medicaid expenditures as determined by the Social Services Estimating Conference.

Analysis: At a time of limited revenues and efforts to reduce the local tax burden – counties are facing a number of state mandates that will increase county costs. Specifically, the rate of growth of the overall County Cost Share formula has been limited to 50% of the percentage change in the state Medicaid expenditures. However, for each year after 2019-20 – the rate of growth in the total County Cost Share formula will increase or decrease at the same percentage as the changes in the state Medicaid expenditures. Example - currently if the total state Medicaid expenditures grow at 5% - the rated of growth in the County Medicare Cost Share program would be 2.5% of 50% of the rate of growth of the state Medicaid expenditures.



2019-20 – if the total rate of growth in the state Medicaid expenditures is 5% the rate of growth for the in the total County Cost Share formula will be 5%.

Fiscal Impact: If no change is made to the statutes governing the method for calculating the rate of growth in the County Medicaid Cost Share program - after FY 2019-20 – the rate of growth in the County Medicaid Cost Share will double.



HS-7: School Resource Officers

FAC Staff Recommendation: Not adopt. FAC worked extensively on SB 7026 (Public Safety) and had several meetings with the following groups regarding the interpretation and fiscal impact of the legislation:

Florida Association of District School Superintendents (FADSS) Florida School Boards Association (FSBA) Florida Sheriffs Association (FSA) Florida League of Cities (FLC) Small County Coalition

Out of those meetings came 5 recommendations from FAC. The recommendations expressed below are the sole opinion of FAC.

1. FAC is of the opinion that counties have no legal funding responsibility relating to safe school officers. However, the political reality is that some counties have traditionally assisted in subsidizing School Resource Officers through the sheriff's budget. FAC recommends considering the potential legal and administrative ramifications of decisions regarding the funding of any requests from each county's respective sheriff.

2. FAC is of the opinion that county commissioners and staff should communicate with the local school district when determining whether the county will consider providing a subsidy.

3. FAC is of the opinion that local school officials may have the ability to develop a hybrid model combining one or more of the defined legislative options provided to address school safety. This policy area is evolving and local officials will be on the forefront of shaping this expanding endeavor for years to come.

4. FAC is of the opinion that counties should budget any supplemental funding separate and apart from the sheriff's normal budget.

5. FAC is of the opinion that counties consider developing an interlocal agreement on an annual basis, subject to the availability of state and local funds.



Proposed Policy: SUPPORT increased funding for public education, particularly a concentration in funding for school resource officers.

Issue Summary: SUPPORT legislation fully funding the mandated positions of School Resource Officers (SRO) in schools. This mandate has placed a heavy burden on local agencies to fund additional SRO's through ad valorem taxes. Funding of the recurring cost of SRO's through the requirement of this mandate is unsustainable, resulting in the necessity of cutting other public services and having a direct negative impact on the welfare and public safety of all counties in the state.

Background:

In 2018, following the horrific events in Parkland, the Florida Legislature passed Senate Bill 7026 which requires a school resource officer in every public school within the County's school district.

Analysis:

The legislation listed above indicates that it is the school district's responsibility to partner with the Sheriff's office to assist in providing school resource officers in every school. Although the legislation contains funding for this initiative, however it is grossly underestimated as to the cost for the Sheriff's office to fulfill this endeavor. More importantly, the BOCC is responsible to fund the Sheriff's budget in its entirety, so due to the minimal funding of the program by the Legislature, BOCC will be utilizing reserves in order to provide these officers in every school.

Fiscal Impact:

The total negative fiscal impact to St. Lucie County's budget is \$7.8 million for the school resource officer program.



HS-8: Corrections Contraband Articles - Portable Communications Devices

FAC Staff Recommendation: Adopt.

In 2017, an almost identical proposal was adopted by the Health and Safety Committee and was added to the 2018 Florida Legislative Action Plan for the 2018 Legislative Session. HB 733 (Contraband in County Detention Facilities) by Representative Jennifer Sullivan was voted up on the House floor, 80-35, and was sent to the Senate. The Senate version was amended onto several bills late in the process in hopes to pass, but ultimately did not.

Proposed Policy: SUPPORT legislation that strengthens the safety and security of county detention facility staff and the inmates that they are responsible for by listing portable communication devices as contraband.

Issue Summary: SUPPORT legislation that strengthens the safety and security of county detention facility staff and the inmates that they are responsible for by listing portable communication devices as contraband.

Background:

Despite listing cell phones as contraband in the statute that governs state prisons, cell phones were never added to the statute involving county detention facilities. This oversight means county detention facilities cannot get a search warrant when cell phones are found. There is no way to pull data to show how the cell phone was brought into the facility or how it was being used.

Analysis:

Since 2012, sixteen (16) incidents involving contraband currently in statute were referred to law enforcement in Orange County. The state filed charges on nine (9) of the referred incidents. Here's an overview on what Orange County found during that period and how the violations were handled: Tobacco Number reported: 29 Internal discipline: 29 Felony charges: 0 Ammunition or explosives Number reported: 1 Internal discipline: 1 Felony charges: 0 Narcotics/Drug Paraphernalia Number reported: 16 Internal discipline: 16 Felony charges: 9 During the same period, seven (7) cell phones were found. Because this is not a violation of something in the statutory definition of contraband in a county detention facility, all seven (7) violations were handled using an internal disciplinary process. In recent years, there have been several issues involving cell phone was involved with the murder of a witness in 2012. Another incident involved the attempted murder of a law enforcement officer in 2016. (Data as of February 2018)



County Policy Proposal Submitted by: Orange County Contact: <u>kelley.teague@ocfl.net</u>

Fiscal Impact:

Though the change may result in additional charges, when compared to existing data, the fiscal impact appears to be insignificant.



HS-9: Distracted Driving

FAC Staff Recommendation: Adopt.

In 2017, an identical proposal was adopted by the Health and Safety Committee and was added to the 2018 Florida Legislative Action Plan for the 2018 Legislative Session. The Florida House voted 112-2 in support of making texting while driving a primary offense, however there was opposition from the Senate and their version stalled in Appropriations, with the chair of that committee citing concerns about racial profiling and giving police the ability to look through personal cell phones.

The Florida Sheriffs Association has committed to this issue as a top priority.

Proposed Policy: SUPPORT legislation to make texting while driving a primary offense.

Issue Summary: Distracted driving crashes accounted for 50,000 crashes in Florida in 2016 and Florida is one of five states that do not currently consider texting while operating a motor vehicle a primary offense. Motorists in Florida can only be cited for texting while driving if they are stopped for other reasons such as speeding or failing to wear seat belts. Currently, 47 states, D.C., Puerto Rico, Guam and the U.S. Virgin Islands ban text messaging for all drivers. Manatee and Palm Beach County supports legislation to make texting while driving a primary offense.

Background: At any given daylight moment across America, approximately 660,000 drivers are using cell phones or manipulating electronic devices while driving, a number that has held steady since 2010. Other states have addressed texting while driving by establishing 'hands free' language. HB 47 (Stark and Slosberg) was a bill presented in the 2017 Session, and never got a hearing, while it's Senate counterpart SB 144 (Garcia-R, Hialeah) made it through its first committee of reference, and then did not get another hearing. HB 33 (Toledo) was a bill presented in 2018, and passed the House with 112 Yeas and 2 Nays. SB 90 (Perry) was the companion bill to HB 33, and passed out of the first three committees of reference. SB 90 died in the last committee of reference.

Analysis: In 2015, there were more than 45,700 distracted driving crashes in Florida resulting in more than 39,000 injuries and more than 200 fatalities, according to the Florida Department of Highway Safety and Motor Vehicles. Texting while driving takes your eyes off the road for an average of 4.6 seconds, equivalent at 55 mph of driving the length of a football field, blind. Manatee and Palm Beach County hopes this legislation will result in safer streets and highways throughout Florida by imposing greater penalties for those texting while driving.

Fiscal Impact:

N/A

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County Policy Proposal Submitted by: Palm Beach County Contact: rdelarosa@pbcgov.org

HS-10: Statewide Drug Take-Back System

FAC Staff Recommendation: Defer to Health and Safety committee discretion.

Proposed Policy: SUPPORT implementation of a statewide drug take-back system, funded by pharmaceutical companies, as a prevention strategy to reduce prescription drug abuse and addiction, as well as reduce suicides, poisonings, and accidental overdoses.

Issue Summary: Implement a statewide drug take-back system, funded by pharmaceutical companies, as a prevention strategy to reduce prescription drug abuse and addiction, as well as reduce suicides, poisonings, and accidental overdoses. Pharmaceutical companies will be required to finance and operate secure and convenient methods of dropping off unwanted and expired medications, such as drop boxes. Additionally, companies will be required to conduct educational campaigns about safe medicine storage and disposal.

Background: From 2000-2017, over 500,000 people lost their lives to drug overdoses in the United States. In 2016, there were over 42,000 opioid-related overdoses nationwide, 40% of which were from prescription opioids. Four out of five new heroin users started by misusing prescription painkillers. According to a recent study in the Journal of the American Medical Association, up to 92% of patients did not use their entire opioid prescription, creating significant opportunities for misuse.

Analysis:

According to figures released by the Palm Beach County Medical Examiner, in 2016, there were 590 opioid overdose deaths. That year, Florida suffered 6,658 deaths in which at least one prescription drug was found in the body, a 24% increase from 2015.

Fiscal Impact:

Not applicable, as this proposal would be funded by pharmaceutical companies.

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