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1  
 2 An act relating to transparency in health and human  
 3 services; amending s. 95.11, F.S.; establishing a 3-  
 4 year statute of limitations for an action to collect  
 5 medical debt for services rendered by a health care  
 6 provider or facility; creating s. 222.26, F.S.;  
 7 providing additional personal property exemptions from  
 8 legal process for medical debts resulting from  
 9 services provided in certain licensed facilities;  
 10 amending s. 395.301, F.S.; requiring a licensed  
 11 facility to post on its website a consumer-friendly  
 12 list of standard charges for a minimum number of  
 13 shoppable health care services or a price estimator  
 14 tool meeting certain requirements; providing  
 15 definitions; requiring a licensed facility to provide  
 16 an estimate to a patient or prospective patient and  
 17 the patient's health insurer within specified  
 18 timeframes; requiring a licensed facility to establish  
 19 an internal grievance process for patients to dispute  
 20 charges; requiring a facility to make available  
 21 information necessary for initiating a grievance;  
 22 requiring a facility to respond to a patient grievance  
 23 within a specified timeframe; requiring a licensed  
 24 facility to disclose specified information relating to  
 25 cost-sharing obligations to certain persons; providing

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26 | a penalty; creating s. 395.3011, F.S.; defining the  
 27 | term "extraordinary collection action"; prohibiting  
 28 | certain collection activities by a licensed facility;  
 29 | amending s. 624.27, F.S.; revising the definition of  
 30 | the term "health care provider"; creating s. 627.446,  
 31 | F.S.; defining the term "health insurer"; requiring  
 32 | each health insurer to provide insureds with an  
 33 | advanced explanation of benefits within specified  
 34 | timeframes; providing requirements for the advanced  
 35 | explanation of benefits; amending ss. 627.6387 and  
 36 | 627.6648, F.S.; revising the definition of the term  
 37 | "health insurer"; providing that a shared savings  
 38 | incentive offered by a health insurer constitutes a  
 39 | medical expense for rate development and rate filing  
 40 | purposes for individual and group health insurance  
 41 | policies, respectively; amending s. 641.31076, F.S.;  
 42 | revising the definition of the term "health  
 43 | maintenance organization"; providing that a shared  
 44 | savings incentive offered by a health maintenance  
 45 | organization constitutes a medical expense for rate  
 46 | development and rate filing purposes for individual or  
 47 | group health maintenance contracts; amending ss.  
 48 | 475.01, 475.611, 517.191, 768.28, and 787.061, F.S.;  
 49 | conforming provisions to changes made by the act;  
 50 | providing applicability; requiring the Agency for

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51 Health Care Administration and the Office of Insurance  
 52 Regulation to notify the Division of Law Revision upon  
 53 the promulgation of certain federal rules; amending s.  
 54 409.016, F.S.; defining the term "management  
 55 functions"; amending s. 409.987, F.S.; revising  
 56 requirements for contracts the Department of Children  
 57 and Families has with community-based care lead  
 58 agencies; providing duties for board members of lead  
 59 agencies; requiring lead agencies to ensure that board  
 60 members participate in certain annual training;  
 61 requiring the posting of a fidelity bond; revising the  
 62 definition of the term "conflict of interest";  
 63 defining the term "related party"; requiring the lead  
 64 agency's board of directors to disclose to the  
 65 department any known actual or potential conflicts of  
 66 interest; prohibiting a lead agency from entering into  
 67 a contract or being a party to any transaction with  
 68 related parties if a conflict of interest is not  
 69 properly disclosed; prohibiting a lead agency from  
 70 entering into a contract or being a party to any  
 71 transaction with related parties for officer-level or  
 72 director-level staffing to perform management  
 73 functions; requiring that the contract with the  
 74 department and the lead agency specify the  
 75 administrative functions that the lead agency may

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76 subcontract; authorizing a lead agency to enter into  
 77 certain contracts or be a party to certain  
 78 transactions, provided that a certain requirement for  
 79 fees, rates, and prices paid is met and any conflict  
 80 of interest is properly disclosed; requiring that  
 81 department contracts impose contractual penalties on  
 82 lead agencies for undisclosed conflicts of interest;  
 83 providing applicability; requiring that certain  
 84 contracts be reprocured; authorizing the department to  
 85 recoup lead agency expenses for the execution of  
 86 certain contracts; amending s. 409.988, F.S.; revising  
 87 lead agency duties; specifying requirements for and  
 88 limitations on an exemption for lead agencies from  
 89 certain contract requirements; providing for renewal  
 90 of the exemption; authorizing the department to deny  
 91 an exemption renewal request under certain  
 92 circumstances; requiring such lead agencies to undergo  
 93 an operational audit by the Auditor General;  
 94 specifying requirements for the audit; requiring the  
 95 Auditor General to conduct such audits upon  
 96 notification by the department; repealing s. 409.991,  
 97 F.S., relating to allocation of funds for community-  
 98 based care lead agencies; creating s. 409.9913, F.S.;  
 99 defining the terms "core services funding" and  
 100 "operational and fixed costs"; requiring the

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101 department, in collaboration with the lead agencies  
102 and providers of child welfare services, to develop a  
103 specific funding methodology for the allocation of  
104 core services which must meet certain criteria;  
105 requiring the lead agencies and providers of child  
106 welfare services to submit to the department certain  
107 financial information; requiring the department to  
108 submit to the Governor and the Legislature certain  
109 reports by specified dates; providing construction;  
110 authorizing the department to include certain rates  
111 and total allocations in certain reports; requiring  
112 the Legislature to allocate funding to the lead  
113 agencies with due consideration of the specified  
114 funding methodology, beginning with a specified fiscal  
115 year; prohibiting the department from changing a lead  
116 agency's allocation of funds provided in the General  
117 Appropriations Act without legislative approval;  
118 authorizing the department to approve certain risk  
119 pool funding for a lead agency; requiring the  
120 department to submit to the Governor and the  
121 Legislature certain monthly reports for a specified  
122 period of time; amending s. 409.992, F.S.; revising  
123 requirements for lead agency practices in the  
124 procurement of commodities and contractual services;  
125 requiring the department to impose certain penalties

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126 for a lead agency's noncompliance with applicable  
 127 procurement law; requiring that the contract between  
 128 the department and the lead agency specify the rights  
 129 and obligations with regard to real property held by  
 130 the lead agency during the term of the contract;  
 131 providing applicability of certain limitations on the  
 132 salaries of community-based care lead agency  
 133 administrative employees; amending s. 409.994, F.S.;  
 134 revising the conditions under which the department may  
 135 petition a court for the appointment of a receiver for  
 136 a community-based care lead agency; amending s.  
 137 409.996, F.S.; revising requirements for contracts  
 138 between the department and lead agencies; revising the  
 139 actions the department may take under certain  
 140 circumstances; making a technical change; providing  
 141 duties of the department; requiring the department, by  
 142 specified dates, to submit certain reports to the  
 143 Governor and the Legislature; establishing the Future  
 144 of Child Protection Contracting and Funding Workgroup  
 145 within the department; requiring the department to  
 146 convene the workgroup and submit a report to the  
 147 Governor and the Legislature by a specified date;  
 148 providing for membership of the workgroup; specifying  
 149 requirements for the report; terminating the workgroup  
 150 upon the submission of the report; providing an

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151 effective date.

152

153 Be It Enacted by the Legislature of the State of Florida:

154

155 Section 1. Present subsections (4) through (12) of section  
 156 95.11, Florida Statutes, are redesignated as subsections (5)  
 157 through (13), respectively, a new subsection (4) is added to  
 158 that section, and paragraph (b) of subsection (2), paragraph (n)  
 159 of subsection (3), paragraphs (f) and (g) of present subsection  
 160 (5), and present subsection (10) are amended, to read:

161 95.11 Limitations other than for the recovery of real  
 162 property.—Actions other than for recovery of real property shall  
 163 be commenced as follows:

164 (2) WITHIN FIVE YEARS.—

165 (b) A legal or equitable action on a contract, obligation,  
 166 or liability founded on a written instrument, except for an  
 167 action to enforce a claim against a payment bond, which shall be  
 168 governed by the applicable provisions of paragraph (6)(e)  
 169 ~~paragraph (5)(e)~~, s. 255.05(10), s. 337.18(1), or s.  
 170 713.23(1)(e), and except for an action for a deficiency judgment  
 171 governed by paragraph (6)(h) ~~paragraph (5)(h)~~.

172 (3) WITHIN FOUR YEARS.—

173 (n) An action for assault, battery, false arrest,  
 174 malicious prosecution, malicious interference, false  
 175 imprisonment, or any other intentional tort, except as provided

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176 in subsections (5), (6), and (8) ~~subsections (4), (5), and (7)~~.  
 177 (4) WITHIN THREE YEARS.—An action to collect medical debt  
 178 for services rendered by a facility licensed under chapter 395,  
 179 provided that the period of limitations shall run from the date  
 180 on which the facility refers the medical debt to a third party  
 181 for collection.

182 ~~(6)(5)~~ WITHIN ONE YEAR.—

183 (f) Except for actions described in subsection (9) ~~(8)~~, a  
 184 petition for extraordinary writ, other than a petition  
 185 challenging a criminal conviction, filed by or on behalf of a  
 186 prisoner as defined in s. 57.085.

187 (g) Except for actions described in subsection (9) ~~(8)~~, an  
 188 action brought by or on behalf of a prisoner, as defined in s.  
 189 57.085, relating to the conditions of the prisoner's  
 190 confinement.

191 ~~(11)(10)~~ FOR INTENTIONAL TORTS RESULTING IN DEATH FROM  
 192 ACTS DESCRIBED IN S. 782.04 OR S. 782.07.—Notwithstanding  
 193 paragraph (5)(e) ~~paragraph (4)(e)~~, an action for wrongful death  
 194 seeking damages authorized under s. 768.21 brought against a  
 195 natural person for an intentional tort resulting in death from  
 196 acts described in s. 782.04 or s. 782.07 may be commenced at any  
 197 time. This subsection shall not be construed to require an  
 198 arrest, the filing of formal criminal charges, or a conviction  
 199 for a violation of s. 782.04 or s. 782.07 as a condition for  
 200 filing a civil action.



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201 Section 2. Section 222.26, Florida Statutes, is created to  
 202 read:

203 222.26 Additional exemptions from legal process concerning  
 204 medical debt.—If a debt is owed for medical services provided by  
 205 a facility licensed under chapter 395, the following property is  
 206 exempt from attachment, garnishment, or other legal process in  
 207 an action on such debt:

208 (1) A debtor's interest, not to exceed \$10,000 in value,  
 209 in a single motor vehicle as defined in s. 320.01(1).

210 (2) A debtor's interest in personal property, not to  
 211 exceed \$10,000 in value, if the debtor does not claim or receive  
 212 the benefits of a homestead exemption under s. 4, Art. X of the  
 213 State Constitution.

214 Section 3. Present paragraphs (b), (c), and (d) of  
 215 subsection (1) of section 395.301, Florida Statutes, are  
 216 redesignated as paragraphs (c), (d), and (e) of that subsection,  
 217 respectively, present subsection (6) is redesignated as  
 218 subsection (8) of that section, a new paragraph (b) is added to  
 219 subsection (1), a new subsection (6) and subsection (7) are  
 220 added to that section, and present paragraph (b) of subsection  
 221 (1) is amended, to read:

222 395.301 Price transparency; itemized patient statement or  
 223 bill; patient admission status notification.—

224 (1) A facility licensed under this chapter shall provide  
 225 timely and accurate financial information and quality of service

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226 | measures to patients and prospective patients of the facility,  
 227 | or to patients' survivors or legal guardians, as appropriate.  
 228 | Such information shall be provided in accordance with this  
 229 | section and rules adopted by the agency pursuant to this chapter  
 230 | and s. 408.05. Licensed facilities operating exclusively as  
 231 | state facilities are exempt from this subsection.

232 | (b) Each licensed facility shall post on its website a  
 233 | consumer-friendly list of standard charges for at least 300  
 234 | shoppable health care services, or an Internet-based price  
 235 | estimator tool meeting federal standards. If a facility provides  
 236 | fewer than 300 distinct shoppable health care services, it shall  
 237 | make available on its website the standard charges for each  
 238 | service it provides. As used in this paragraph, the term:

239 | 1. "Shoppable health care service" means a service that  
 240 | can be scheduled by a healthcare consumer in advance. The term  
 241 | includes, but is not limited to, the services described in s.  
 242 | 627.6387(2)(e) and any services defined in regulations or  
 243 | guidance issued by the United States Department of Health and  
 244 | Human Services.

245 | 2. "Standard charge" has the same meaning as that term is  
 246 | defined in regulations or guidance issued by the United States  
 247 | Department of Health and Human Services for purposes of hospital  
 248 | price transparency.

249 | ~~(c)(b)~~1. ~~Upon request, and~~ Before providing any  
 250 | nonemergency medical services, each licensed facility shall

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251 provide in writing or by electronic means a good faith estimate  
 252 of reasonably anticipated charges by the facility for the  
 253 treatment of a the patient's or prospective patient's specific  
 254 condition. The facility ~~must provide the estimate to the patient~~  
 255 ~~or prospective patient within 7 business days after the receipt~~  
 256 ~~of the request and~~ is not required to adjust the estimate for  
 257 any potential insurance coverage. The facility must provide the  
 258 estimate to the patient's health insurer, as defined in s.  
 259 627.446(1), and the patient at least 3 business days before the  
 260 date such service is to be provided, but no later than 1  
 261 business day after the date such service is scheduled or, in the  
 262 case of a service scheduled at least 10 business days in  
 263 advance, no later than 3 business days after the date the  
 264 service is scheduled. The facility must provide the estimate to  
 265 the patient no later than 3 business days after the date the  
 266 patient requests an estimate. The estimate may be based on the  
 267 descriptive service bundles developed by the agency under s.  
 268 408.05(3)(c) unless the patient or prospective patient requests  
 269 a more personalized and specific estimate that accounts for the  
 270 specific condition and characteristics of the patient or  
 271 prospective patient. The facility shall inform the patient or  
 272 prospective patient that he or she may contact his or her health  
 273 insurer ~~or health maintenance organization~~ for additional  
 274 information concerning cost-sharing responsibilities.

275 2. In the estimate, the facility shall provide to the

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276 patient or prospective patient information on the facility's  
 277 financial assistance policy, including the application process,  
 278 payment plans, and discounts and the facility's charity care  
 279 policy and collection procedures.

280 3. The estimate shall clearly identify any facility fees  
 281 and, if applicable, include a statement notifying the patient or  
 282 prospective patient that a facility fee is included in the  
 283 estimate, the purpose of the fee, and that the patient may pay  
 284 less for the procedure or service at another facility or in  
 285 another health care setting.

286 4. ~~Upon request,~~ The facility shall notify the patient or  
 287 prospective patient of any revision to the estimate.

288 5. In the estimate, the facility must notify the patient  
 289 or prospective patient that services may be provided in the  
 290 health care facility by the facility as well as by other health  
 291 care providers that may separately bill the patient, if  
 292 applicable.

293 6. ~~The facility shall take action to educate the public~~  
 294 ~~that such estimates are available upon request.~~

295 7. Failure to timely provide the estimate pursuant to this  
 296 paragraph shall result in a daily fine of \$1,000 until the  
 297 estimate is provided to the patient or prospective patient and  
 298 the health insurer. The total fine per patient estimate may not  
 299 exceed \$10,000.

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301 ~~The provision of an estimate does not preclude the actual~~  
 302 ~~charges from exceeding the estimate.~~

303 (6) Each facility shall establish an internal process for  
 304 reviewing and responding to grievances from patients. Such  
 305 process must allow a patient to dispute charges that appear on  
 306 the patient's itemized statement or bill. The facility shall  
 307 prominently post on its website and indicate in bold print on  
 308 each itemized statement or bill the instructions for initiating  
 309 a grievance and the direct contact information required to  
 310 initiate the grievance process. The facility must provide an  
 311 initial response to a patient grievance within 7 business days  
 312 after the patient formally files a grievance disputing all or a  
 313 portion of an itemized statement or bill.

314 (7) Each licensed facility shall disclose to a patient, a  
 315 prospective patient, or a patient's legal guardian whether a  
 316 cost-sharing obligation for a particular covered health care  
 317 service or item exceeds the charge that applies to an individual  
 318 who pays cash or the cash equivalent for the same health care  
 319 service or item in the absence of health insurance coverage.  
 320 Failure to provide a disclosure in compliance with this  
 321 subsection may result in a fine not to exceed \$500 per incident.

322 Section 4. Section 395.3011, Florida Statutes, is created  
 323 to read:

324 395.3011 Billing and collection activities.—

325 (1) As used in this section, the term "extraordinary

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326 collection action" means any of the following actions taken by a  
 327 licensed facility against an individual in relation to obtaining  
 328 payment of a bill for care covered under the facility's  
 329 financial assistance policy:

330 (a) Selling the individual's debt to another party.

331 (b) Reporting adverse information about the individual to  
 332 consumer credit reporting agencies or credit bureaus.

333 (c) Deferring, denying, or requiring a payment before  
 334 providing medically necessary care because of the individual's  
 335 nonpayment of one or more bills for previously provided care  
 336 covered under the facility's financial assistance policy.

337 (d) Actions that require a legal or judicial process,  
 338 including, but not limited to:

339 1. Placing a lien on the individual's property;

340 2. Foreclosing on the individual's real property;

341 3. Attaching or seizing the individual's bank account or  
 342 any other personal property;

343 4. Commencing a civil action against the individual;

344 5. Causing the individual's arrest; or

345 6. Garnishing the individual's wages.

346 (2) A facility may not engage in an extraordinary  
 347 collection action against an individual to obtain payment for  
 348 services:

349 (a) Before the facility has made reasonable efforts to  
 350 determine whether the individual is eligible for assistance

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351 under its financial assistance policy for the care provided and,  
 352 if eligible, before a decision is made by the facility on the  
 353 patient's application for such financial assistance.

354 (b) Before the facility has provided the individual with  
 355 an itemized statement or bill.

356 (c) During an ongoing grievance process as described in s.  
 357 395.301(6) or an ongoing appeal of a claim adjudication.

358 (d) Before billing any applicable insurer and allowing the  
 359 insurer to adjudicate a claim.

360 (e) For 30 days after notifying the patient in writing, by  
 361 certified mail, or by other traceable delivery method, that a  
 362 collection action will commence absent additional action by the  
 363 patient.

364 (f) While the individual:

365 1. Negotiates in good faith the final amount of a bill for  
 366 services rendered; or

367 2. Complies with all terms of a payment plan with the  
 368 facility.

369 Section 5. Paragraph (b) of subsection (1) of section  
 370 624.27, Florida Statutes, is amended to read:

371 624.27 Direct health care agreements; exemption from  
 372 code.—

373 (1) As used in this section, the term:

374 (b) "Health care provider" means a health care provider  
 375 licensed under chapter 458, chapter 459, chapter 460, chapter

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376 461, chapter 464, or chapter 466, chapter 490, or chapter 491,  
 377 or a health care group practice, who provides health care  
 378 services to patients.

379 Section 6. Section 627.446, Florida Statutes, is created  
 380 to read:

381 627.446 Advanced explanation of benefits.-

382 (1) As used in this section, the term "health insurer"  
 383 means a health insurer issuing individual or group coverage or a  
 384 health maintenance organization issuing coverage through an  
 385 individual or a group contract.

386 (2) Each health insurer shall prepare an advanced  
 387 explanation of benefits upon receiving a patient estimate from a  
 388 facility pursuant to s. 395.301(1). The health insurer must  
 389 provide the advanced explanation of benefits to the insured no  
 390 later than 1 business day after receiving the patient estimate  
 391 from the facility or, in the case of a service scheduled at  
 392 least 10 business days in advance, no later than 3 business days  
 393 after receiving such estimate. The health insurer must provide  
 394 an advanced explanation of benefits to the insured no later than  
 395 3 business days after the date on which the health insurer  
 396 receives a request from the insured.

397 (3) At a minimum, the advanced explanation of benefits  
 398 must include detailed coverage and cost-sharing information  
 399 pursuant to the No Surprises Act, Title I of Division BB of the  
 400 Consolidated Appropriations Act, 2021, Pub. L. No. 116-260.



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401 Section 7. Paragraph (b) of subsection (2) and paragraph  
 402 (a) of subsection (4) of section 627.6387, Florida Statutes, are  
 403 amended to read:

404 627.6387 Shared savings incentive program.—

405 (2) As used in this section, the term:

406 (b) "Health insurer" means an authorized insurer issuing  
 407 major medical or other comprehensive coverage through an  
 408 individual policy ~~offering health insurance as defined in s.~~  
 409 ~~624.603.~~

410 (4)(a) A shared savings incentive offered by a health  
 411 insurer in accordance with this section:

412 1. Is not an administrative expense for rate development  
 413 or rate filing purposes and shall be counted as a medical  
 414 expense for such purposes.

415 2. Does not constitute an unfair method of competition or  
 416 an unfair or deceptive act or practice under s. 626.9541 and is  
 417 presumed to be appropriate unless credible data clearly  
 418 demonstrates otherwise.

419 Section 8. Paragraph (b) of subsection (2) and paragraph  
 420 (a) of subsection (4) of section 627.6648, Florida Statutes, are  
 421 amended to read:

422 627.6648 Shared savings incentive program.—

423 (2) As used in this section, the term:

424 (b) "Health insurer" means an authorized insurer issuing  
 425 major medical or other comprehensive coverage through a group

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426 ~~policy offering health insurance as defined in s. 624.603.~~ The  
 427 term does not include the state group health insurance program  
 428 provided under s. 110.123.

429 (4)(a) A shared savings incentive offered by a health  
 430 insurer in accordance with this section:

431 1. Is not an administrative expense for rate development  
 432 or rate filing purposes and shall be counted as a medical  
 433 expense for such purposes.

434 2. Does not constitute an unfair method of competition or  
 435 an unfair or deceptive act or practice under s. 626.9541 and is  
 436 presumed to be appropriate unless credible data clearly  
 437 demonstrates otherwise.

438 Section 9. Paragraph (b) of subsection (2) and paragraph  
 439 (a) of subsection (4) of section 641.31076, Florida Statutes,  
 440 are amended to read:

441 641.31076 Shared savings incentive program.—

442 (2) As used in this section, the term:

443 (b) "Health maintenance organization" means an authorized  
 444 health maintenance organization issuing major medical or other  
 445 comprehensive coverage through individual or group contract ~~has~~  
 446 ~~the same meaning as provided in s. 641.19.~~ The term does not  
 447 include the state group health insurance program provided under  
 448 s. 110.123.

449 (4) A shared savings incentive offered by a health  
 450 maintenance organization in accordance with this section:

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451 (a) Is not an administrative expense for rate development  
 452 or rate filing purposes and shall be counted as a medical  
 453 expense for such purposes.

454 Section 10. Paragraphs (a) and (j) of subsection (1) of  
 455 section 475.01, Florida Statutes, are amended to read:

456 475.01 Definitions.—

457 (1) As used in this part:

458 (a) "Broker" means a person who, for another, and for a  
 459 compensation or valuable consideration directly or indirectly  
 460 paid or promised, expressly or impliedly, or with an intent to  
 461 collect or receive a compensation or valuable consideration  
 462 therefor, appraises, auctions, sells, exchanges, buys, rents, or  
 463 offers, attempts or agrees to appraise, auction, or negotiate  
 464 the sale, exchange, purchase, or rental of business enterprises  
 465 or business opportunities or any real property or any interest  
 466 in or concerning the same, including mineral rights or leases,  
 467 or who advertises or holds out to the public by any oral or  
 468 printed solicitation or representation that she or he is engaged  
 469 in the business of appraising, auctioning, buying, selling,  
 470 exchanging, leasing, or renting business enterprises or business  
 471 opportunities or real property of others or interests therein,  
 472 including mineral rights, or who takes any part in the procuring  
 473 of sellers, purchasers, lessors, or lessees of business  
 474 enterprises or business opportunities or the real property of  
 475 another, or leases, or interest therein, including mineral

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476 rights, or who directs or assists in the procuring of prospects  
477 or in the negotiation or closing of any transaction which does,  
478 or is calculated to, result in a sale, exchange, or leasing  
479 thereof, and who receives, expects, or is promised any  
480 compensation or valuable consideration, directly or indirectly  
481 therefor; and all persons who advertise rental property  
482 information or lists. A broker renders a professional service  
483 and is a professional within the meaning of s. 95.11(5)(b) ~~s.~~  
484 ~~95.11(4)(b)~~. Where the term "appraise" or "appraising" appears  
485 in the definition of the term "broker," it specifically excludes  
486 those appraisal services which must be performed only by a  
487 state-licensed or state-certified appraiser, and those appraisal  
488 services which may be performed by a registered trainee  
489 appraiser as defined in part II. The term "broker" also includes  
490 any person who is a general partner, officer, or director of a  
491 partnership or corporation which acts as a broker. The term  
492 "broker" also includes any person or entity who undertakes to  
493 list or sell one or more timeshare periods per year in one or  
494 more timeshare plans on behalf of any number of persons, except  
495 as provided in ss. 475.011 and 721.20.

496 (j) "Sales associate" means a person who performs any act  
497 specified in the definition of "broker," but who performs such  
498 act under the direction, control, or management of another  
499 person. A sales associate renders a professional service and is  
500 a professional within the meaning of s. 95.11(5)(b) ~~s.~~

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501 ~~95.11(4)(b).~~

502 Section 11. Paragraph (h) of subsection (1) of section  
503 475.611, Florida Statutes, is amended to read:

504 475.611 Definitions.—

505 (1) As used in this part, the term:

506 (h) "Appraiser" means any person who is a registered  
507 trainee real estate appraiser, a licensed real estate appraiser,  
508 or a certified real estate appraiser. An appraiser renders a  
509 professional service and is a professional within the meaning of  
510 s. 95.11(5)(b) ~~s. 95.11(4)(b)~~.

511 Section 12. Subsection (7) of section 517.191, Florida  
512 Statutes, is amended to read:

513 517.191 Injunction to restrain violations; civil  
514 penalties; enforcement by Attorney General.—

515 (7) Notwithstanding s. 95.11(5)(f) ~~s. 95.11(4)(f)~~, an  
516 enforcement action brought under this section based on a  
517 violation of any provision of this chapter or any rule or order  
518 issued under this chapter shall be brought within 6 years after  
519 the facts giving rise to the cause of action were discovered or  
520 should have been discovered with the exercise of due diligence,  
521 but not more than 8 years after the date such violation  
522 occurred.

523 Section 13. Subsection (14) of section 768.28, Florida  
524 Statutes, is amended to read:

525 768.28 Waiver of sovereign immunity in tort actions;

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526 recovery limits; civil liability for damages caused during a  
 527 riot; limitation on attorney fees; statute of limitations;  
 528 exclusions; indemnification; risk management programs.—

529 (14) Every claim against the state or one of its agencies  
 530 or subdivisions for damages for a negligent or wrongful act or  
 531 omission pursuant to this section shall be forever barred unless  
 532 the civil action is commenced by filing a complaint in the court  
 533 of appropriate jurisdiction within 4 years after such claim  
 534 accrues; except that an action for contribution must be  
 535 commenced within the limitations provided in s. 768.31(4), and  
 536 an action for damages arising from medical malpractice or  
 537 wrongful death must be commenced within the limitations for such  
 538 actions in s. 95.11(5) ~~s. 95.11(4)~~.

539 Section 14. Subsection (4) of section 787.061, Florida  
 540 Statutes, is amended to read:

541 787.061 Civil actions by victims of human trafficking.—

542 (4) STATUTE OF LIMITATIONS.—The statute of limitations as  
 543 specified in s. 95.11(8) or (10) ~~s. 95.11(7) or (9)~~, as  
 544 applicable, governs an action brought under this section.

545 Section 15. The requirements of s. 395.301(1)(b), Florida  
 546 Statutes, as created by this act, relating to shoppable health  
 547 care services, do not apply to ambulatory surgical centers as  
 548 defined in s. 395.002, Florida Statutes, until January 1, 2026.

549 Section 16. The changes made by this act to s. 395.301,  
 550 Florida Statutes, relating to good faith estimates, are not

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551 effective until the United States Department of Health and Human  
 552 Services, the United States Department of Labor, and the United  
 553 States Department of the Treasury issue a final rule pertaining  
 554 to good faith estimates required by section 2799B-6 of the  
 555 Public Health Services Act. The Agency for Health Care  
 556 Administration shall notify the Division of Law Revision upon  
 557 the promulgation of the final rule.

558 Section 17. The changes made by this act to s. 627.446,  
 559 Florida Statutes, relating to advanced explanation of benefits,  
 560 are not effective until the United States Department of Health  
 561 and Human Services, the United States Department of Labor, and  
 562 the United States Department of the Treasury issue final rules  
 563 pertaining to advanced explanation of benefits required by  
 564 section 2799A-1(f) of the Public Health Services and good faith  
 565 estimates required by section 2799B-6 of the Public Health  
 566 Services Act. The Office of Insurance Regulation shall notify  
 567 the Division of Law Revision upon the promulgation of the final  
 568 rule pertaining to advanced explanation of benefits.

569 Section 18. Present subsections (3) and (4) of section  
 570 409.016, Florida Statutes, are redesignated as subsections (4)  
 571 and (5), respectively, and a new subsection (3) is added to that  
 572 section, to read:

573 409.016 Definitions.—As used in this chapter:

574 (3) "Management functions" means:

575 (a) Planning, directing, organizing, coordinating, and

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576 carrying out oversight duties of the lead agency; or  
 577 (b) Contracting for officer or director level staffing in  
 578 performance of the planning, directing, organizing,  
 579 coordinating, and carrying out of oversight duties of the lead  
 580 agency.

581 Section 19. Subsections (3) and (4) and paragraphs (a) and  
 582 (b) of subsection (7) of section 409.987, Florida Statutes, are  
 583 amended, and paragraph (g) is added to subsection (7) of that  
 584 section, to read:

585 409.987 Lead agency procurement; boards; conflicts of  
 586 interest.—

587 (3) Notwithstanding s. 287.057, the department shall use  
 588 5-year contracts with lead agencies. The department may only  
 589 extend a contract for a period of 1 to 5 years, in accordance  
 590 with s. 287.057, if the lead agency has met performance  
 591 expectations within the monitoring evaluation.

592 (4) In order to serve as a lead agency, an entity must:

593 (a) Be organized as a Florida corporation or a  
 594 governmental entity.

595 (b) Be governed by a board of directors or a board  
 596 committee composed of board members. Board members shall provide  
 597 oversight and ensure accountability and transparency for the  
 598 system of care. The board of directors shall provide fiduciary  
 599 oversight to prevent conflicts of interest, promote  
 600 accountability and transparency, and protect state and federal



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601 funding from misuse. The board of directors shall act in  
 602 accordance with s. 617.0830. The membership of the board of  
 603 directors or board committee must be described in the bylaws or  
 604 articles of incorporation of each lead agency, which must  
 605 provide that at least 75 percent of the membership of the board  
 606 of directors or board committee must be composed ~~consist~~ of  
 607 persons residing in this state, and at least 51 percent of the  
 608 state residents on the board of directors must reside within the  
 609 service area of the lead agency. The lead agency shall ensure  
 610 that board members participate in annual training related to  
 611 their responsibilities. The department shall set forth minimum  
 612 training criteria in the contracts with the lead agencies.

613 However, for procurements of lead agency contracts initiated on  
 614 or after July 1, 2014:

615 1. At least 75 percent of the membership of the board of  
 616 directors must be composed ~~consist~~ of persons residing in this  
 617 state, and at least 51 percent of the membership of the board of  
 618 directors must be composed ~~consist~~ of persons residing within  
 619 the service area of the lead agency. If a board committee  
 620 governs the lead agency, 100 percent of its membership must be  
 621 composed ~~consist~~ of persons residing within the service area of  
 622 the lead agency.

623 2. The powers of the board of directors or board committee  
 624 include, but are not limited to, approving the lead agency's  
 625 budget and setting the lead agency's operational policy and

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626 | procedures. A board of directors must additionally have the  
 627 | power to hire the lead agency's executive director, unless a  
 628 | board committee governs the lead agency, in which case the board  
 629 | committee must have the power to confirm the selection of the  
 630 | lead agency's executive director.

631 | (c) Demonstrate financial responsibility through an  
 632 | organized plan for regular fiscal audits; ~~and~~ the posting of a  
 633 | performance bond; and the posting of a fidelity bond to cover  
 634 | any costs associated with reprocurement and the assessed  
 635 | penalties related to a failure to disclose a conflict of  
 636 | interest under subsection (7).

637 | (7)(a) As used in this subsection, the term:

638 | 1. "Activity" includes, but is not limited to, a contract  
 639 | for goods and services, a contract for the purchase of any real  
 640 | or tangible property, or an agreement to engage with a lead  
 641 | agency for the benefit of a third party in exchange for an  
 642 | interest in real or tangible property, a monetary benefit, or an  
 643 | in-kind contribution.

644 | 2. "Conflict of interest" means when a board member, a  
 645 | director, or an officer, or a relative of a board member, a  
 646 | director, or an officer, of a lead agency does any of the  
 647 | following:

648 | a. Enters into a contract or other transaction for goods  
 649 | or services with the lead agency.

650 | b. Holds a direct or indirect interest in a corporation,

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651 limited liability corporation, partnership, limited liability  
 652 partnership, or other business entity that conducts business  
 653 with the lead agency or proposes to enter into a contract or  
 654 other transaction with the lead agency. For purposes of this  
 655 paragraph, the term "indirect interest" has the same meaning as  
 656 in s. 112.312.

657 c. Knowingly obtains a direct or indirect personal,  
 658 financial, professional, or other benefit as a result of the  
 659 relationship of such board member, director, or officer, or  
 660 relative of the board member, director, or officer, with the  
 661 lead agency. For purposes of this paragraph, the term "benefit"  
 662 does not include per diem and travel expenses paid or reimbursed  
 663 to board members or officers of the lead agency in connection  
 664 with their service on the board.

665 3. "Related party" means any entity of which a director or  
 666 an officer of the entity is also directly or indirectly related  
 667 to, or has a direct or indirect financial or other material  
 668 interest in, the lead agency. The term also includes any  
 669 subsidiary firm, parent entity, associate firm, or joint  
 670 venture. Lead agencies that hold more than one lead agency  
 671 contract with the department may request an exemption from the  
 672 department for specific related party requirements.

673 ~~4.3.~~ "Relative" means a relative within the third degree  
 674 of consanguinity by blood or marriage.

675 (b)1. For any activity that is presented to the board of a

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676 | lead agency for its initial consideration and approval ~~after~~  
 677 | ~~July 1, 2021,~~ or any activity that involves a contract that is  
 678 | being considered for renewal ~~on or after July 1, 2021, but~~  
 679 | ~~before January 1, 2022,~~ a board member, a director, or an  
 680 | officer of a lead agency shall disclose to the board any  
 681 | activity that may reasonably be construed to be a conflict of  
 682 | interest before such activity is initially considered and  
 683 | approved or a contract is renewed by the board. A rebuttable  
 684 | presumption of a conflict of interest exists if the activity was  
 685 | acted on by the board without prior notice as required under  
 686 | paragraph (c). The board shall disclose any known actual or  
 687 | potential conflicts to the department.

688 |       2. A lead agency may not enter into a contract or be a  
 689 | party to any transaction with related parties if a conflict of  
 690 | interest is not properly disclosed. A lead agency may not enter  
 691 | into a contract with a related party for officer-level or  
 692 | director-level staffing to perform management functions. The  
 693 | contract with the department and lead agency must specify the  
 694 | administrative functions that the lead agency may subcontract  
 695 | ~~For contracts with a lead agency which are in existence on July~~  
 696 | ~~1, 2021, and are not subject to renewal before January 1, 2022,~~  
 697 | ~~a board member or an officer of the lead agency shall disclose~~  
 698 | ~~to the board any activity that may reasonably be construed to be~~  
 699 | ~~a conflict of interest under this section by December 31, 2021.~~

700 |       3. Subject to the requirements of subparagraph 2., a lead

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701 agency may enter into a contract or be a party to any  
 702 transaction with related parties as long as the fee, rate, or  
 703 price paid by the lead agency for the commodities or services  
 704 being procured does not exceed the fair market value for such  
 705 commodities or services. The lead agency shall disclose any  
 706 known actual or potential conflicts to the department.

707 (g)1. All department contracts with lead agencies must  
 708 contain the following contractual penalty provisions:

709 a. Penalties in the amount of \$5,000 per occurrence must  
 710 be imposed for each known and potential conflict of interest, as  
 711 described in paragraph (b), which is not disclosed to the  
 712 department.

713 b. If a contract is executed for which a conflict of  
 714 interest was not disclosed to the department before execution of  
 715 the contract, the following penalties apply:

716 (I) A penalty in the amount of \$20,000 for a first  
 717 offense.

718 (II) A penalty in the amount of \$30,000 for a second or  
 719 subsequent offense.

720 (III) Removal of the board member who did not disclose a  
 721 known conflict of interest.

722 2. The penalties for failure to disclose a conflict of  
 723 interest under sub-subparagraphs 1.a. and 1.b. apply to any  
 724 contract entered into, regardless of the method of procurement,  
 725 including, but not limited to, formal procurement, single-source

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726 contracts, and contracts that do not meet the minimum threshold  
 727 for formal procurement.

728 3. A contract procured for which a conflict of interest  
 729 was not disclosed to the department before execution of the  
 730 contract must be reprocured. The department shall recoup from  
 731 the lead agency expenses related to a contract that was executed  
 732 without disclosure of a conflict of interest.

733 Section 20. Paragraphs (c), (j), and (k) of subsection (1)  
 734 of section 409.988, Florida Statutes, are amended to read:

735 409.988 Community-based care lead agency duties; general  
 736 provisions.—

737 (1) DUTIES.—A lead agency:

738 (c) Shall follow the financial guidelines developed by the  
 739 department and shall comply with regular, independent auditing  
 740 of its financial activities, including any requests for records  
 741 associated with such financial audits within the timeframe  
 742 established by the department or its contracted vendors ~~provide~~  
 743 ~~for a regular independent auditing of its financial activities.~~  
 744 The results of the financial audit must ~~Such financial~~  
 745 ~~information shall~~ be provided to the community alliance  
 746 established under s. 20.19(5).

747 (j)1. May subcontract for the provision of services,  
 748 excluding subcontracts with a related party for officer-level or  
 749 director-level staffing to perform management functions,  
 750 required by the contract with the lead agency and the

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751 department; however, the subcontracts must specify how the  
 752 provider will contribute to the lead agency meeting the  
 753 performance standards established pursuant to the child welfare  
 754 results-oriented accountability system required by s. 409.997.  
 755 Any contract with an unrelated entity for officer-level or  
 756 director-level staffing to perform management functions must  
 757 adhere to the executive compensation provision in s. 409.992(3).

758 2. The lead agency Shall directly provide no more than 35  
 759 percent of all child welfare services provided unless it can  
 760 demonstrate a need, within the lead agency's geographic service  
 761 area, where there is a lack of qualified providers available to  
 762 perform necessary services. The approval period for an exemption  
 763 to exceed the 35 percent threshold is limited to 2 years ~~to~~  
 764 ~~exceed this threshold.~~ To receive approval, the lead agency must  
 765 create and submit to the department through the lead agency's  
 766 local community alliance a detailed report of all efforts to  
 767 recruit a qualified provider to perform the necessary services  
 768 in that geographic service area. The local community alliance in  
 769 the geographic service area in which the lead agency is seeking  
 770 to exceed the threshold shall review the lead agency's  
 771 justification for need and recommend to the department whether  
 772 the department should approve or deny the lead agency's request  
 773 for an exemption from the services threshold. If there is not a  
 774 community alliance operating in the geographic service area in  
 775 which the lead agency is seeking to exceed the threshold, such

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776 review and recommendation shall be made by representatives of  
 777 local stakeholders, including at least one representative from  
 778 each of the following:

- 779 ~~a.1.~~ The department.
- 780 ~~b.2.~~ The county government.
- 781 ~~c.3.~~ The school district.
- 782 ~~d.4.~~ The county United Way.
- 783 ~~e.5.~~ The county sheriff's office.
- 784 ~~f.6.~~ The circuit court corresponding to the county.
- 785 ~~g.7.~~ The county children's board, if one exists.

786  
 787 The lead agency may request a renewal of the exemption allowing  
 788 the lead agency to directly provide child welfare services by  
 789 following the process outlined in this subparagraph. The  
 790 approval period for an exemption renewal is limited to 2 years.  
 791 If, after the expiration of the exemption, the department  
 792 determines the lead agency is not making a good faith effort to  
 793 recruit a qualified provider, the department may deny the  
 794 renewal request and require reprocurement.

795 3. Upon approving any exemption that allows a lead agency  
 796 to directly provide more than 40 percent of all child welfare  
 797 services provided, the department shall require the lead agency  
 798 to undergo an operational audit by the Auditor General to  
 799 examine the lead agency's procurement of and financial  
 800 arrangements for providing such services. The audit shall, at a



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801 minimum, examine the costs incurred and any payments made by the  
 802 lead agency to itself for services directly provided by the lead  
 803 agency compared to any procurement solicitations by the lead  
 804 agency, and assess the adequacy of the efforts to obtain  
 805 services from subcontractors and the resulting cost and cost-  
 806 effectiveness of the services provided directly by the lead  
 807 agency. The Auditor General shall conduct such audits upon  
 808 notification by the department.

809 (k) Shall publish on its website by the 15th day of each  
 810 month at a minimum the data specified in subparagraphs 1.-10.  
 811 ~~subparagraphs 1.-5.~~, calculated using a standard methodology  
 812 determined by the department, for the preceding calendar month  
 813 regarding its case management services. The following  
 814 information shall be reported by each individual subcontracted  
 815 case management provider, by the lead agency, if the lead agency  
 816 provides case management services, and in total for all case  
 817 management services subcontracted or directly provided by the  
 818 lead agency:

- 819 1. The average caseload of case managers, including only
- 820 filled positions;
- 821 2. The total number and percentage of case managers who
- 822 have 25 or more cases on their caseloads;
- 823 3. The turnover rate for case managers and case management
- 824 supervisors for the previous 12 months;
- 825 4. The percentage of required home visits completed; ~~and~~

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826           5. Performance on outcome measures required pursuant to s.  
827 409.997 for the previous 12 months;~~-~~

828           6. The number of unlicensed placements for the previous  
829 month;

830           7. The percentages and trends for foster parent and group  
831 home recruitment and licensure for the previous month;

832           8. The percentage of families being served through family  
833 support services, in-home services, and out-of-home services for  
834 the previous month;

835           9. The percentage of cases that were converted from  
836 nonjudicial to judicial for the previous month; and

837           10. Children's legal service staffing rates.

838           Section 21. Section 409.991, Florida Statutes, is  
839 repealed.

840           Section 22. Section 409.9913, Florida Statutes, is created  
841 to read:

842           409.9913 Funding methodology to allocate funding to lead  
843 agencies.-

844           (1) As used in this section, the term:

845           (a) "Core services funding" means all funds allocated to  
846 lead agencies. The term does not include any of the following:

847           1. Funds appropriated for independent living services.

848           2. Funds appropriated for maintenance adoption subsidies.

849           3. Funds allocated by the department for child protective  
850 investigation service training.

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- 851           4. Nonrecurring funds.
- 852           5. Designated mental health wrap-around service funds.
- 853           6. Funds for special projects for a designated lead  
 854 agency.
- 855           7. Funds appropriated for the Guardianship Assistance  
 856 Program established under s. 39.6225.
- 857           (b) "Operational and fixed costs" means:
- 858           1. Administrative expenditures, including, but not limited  
 859 to, information technology and human resources functions.
- 860           2. Lease payments.
- 861           3. Asset depreciation.
- 862           4. Utilities.
- 863           5. Administrative components of case management.
- 864           6. Mandated activities such as training, quality  
 865 improvement, or contract management.
- 866           (2) The department shall develop, in collaboration with  
 867 lead agencies and providers of child welfare services, a funding  
 868 methodology for allocating core services funding to lead  
 869 agencies which, at a minimum:
- 870           (a) Is actuarially sound.
- 871           (b) Is reimbursement-based.
- 872           (c) Is designed to incentivize efficient and effective  
 873 lead agency operation, prevention, family preservation, and  
 874 permanency.
- 875           (d) Considers variable costs, including, but not limited

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876 to:

877 1. Direct costs for in-home and out-of-home care for  
 878 children served by the lead agencies.

879 2. Direct costs for prevention services.

880 3. Operational and fixed costs.

881 (e) Is scaled regionally for cost-of-living factors.

882 (3) The lead agencies and providers shall submit any  
 883 detailed cost and expenditure data that the department requests  
 884 for the development of the funding methodology.

885 (4) The department shall submit a report to the Governor,  
 886 the President of the Senate, and the Speaker of the House of  
 887 Representatives by December 1, 2024, which, at a minimum:

888 (a) Describes a proposed funding methodology and formula  
 889 that will provide for the annual budget of each lead agency,  
 890 including, but not limited to, how the proposed methodology will  
 891 meet the criteria specified in subsection (2).

892 (b) Describes the data used to develop the methodology and  
 893 the data that will be used to annually calculate the proposed  
 894 lead agency budget.

895 (c) Specifies proposed rates and total allocations for  
 896 each lead agency. The allocations must ensure that the total of  
 897 all amounts allocated to lead agencies under the funding  
 898 methodology does not exceed the total amount appropriated to  
 899 lead agencies in the 2024-2025 General Appropriations Act.

900 (d) Provides risk mitigation recommendations that ensure

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901 that lead agencies do not experience a reduction in funding that  
 902 would be detrimental to operations or result in a reduction in  
 903 services to children.

904 (5) By October 31, 2025, and each October 31 thereafter,  
 905 the department shall submit a report to the Governor, the  
 906 President of the Senate, and the Speaker of the House of  
 907 Representatives which includes recommendations for adjustments  
 908 to the funding methodology for the next fiscal year, calculated  
 909 using the criteria in subsection (2). Such recommendations must,  
 910 at a minimum, be based on updated expenditure data, cost-of-  
 911 living adjustments, market dynamics, or other catchment area  
 912 variations. The total of all amounts proposed for allocation to  
 913 lead agencies under the funding methodology for the subsequent  
 914 fiscal year may not exceed the total amount appropriated in the  
 915 General Appropriations Act for core services funding in the  
 916 present fiscal year. The funding methodology must include risk  
 917 mitigation strategies that ensure that lead agencies do not  
 918 experience a reduction in funding that would be detrimental to  
 919 operations or result in a reduction in services to children.

920 (6) (a) The requirements of this section do not replace,  
 921 and are in addition to, any requirements of chapter 216,  
 922 including, but not limited to, submission of final legislative  
 923 budget requests by the department under s. 216.023.

924 (b) The data and reports required under subsections (4)  
 925 and (5) may also include proposed rates and total allocations

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926 for each lead agency which reflect any additional core services  
 927 funding for lead agencies which is requested by the department  
 928 under s. 216.023.

929 (7)(a) Beginning with the 2025-2026 fiscal year, the  
 930 Legislature shall allocate funding to lead agencies through the  
 931 General Appropriations Act with due consideration of the funding  
 932 methodology developed under this section.

933 (b) The department may not change the allocation of funds  
 934 to a lead agency as provided in the General Appropriations Act  
 935 without legislative approval. The department may approve  
 936 additional risk pool funding for a lead agency as provided under  
 937 s. 409.990.

938 (8) The department shall provide to the Governor, the  
 939 President of the Senate, and the Speaker of the House of  
 940 Representatives monthly reports from July through October 2024  
 941 which provide updates on activities and progress in developing  
 942 the funding methodology.

943 Section 23. Subsections (1) and (3) of section 409.992,  
 944 Florida Statutes, are amended to read:

945 409.992 Lead agency expenditures.—

946 (1) The procurement of commodities or contractual services  
 947 by lead agencies is ~~shall be~~ governed by the financial  
 948 guidelines developed by the department and must comply with  
 949 applicable state and federal law and follow good business  
 950 practices. Pursuant to s. 11.45, the Auditor General may provide

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951 technical advice in the development of the financial guidelines.

952 (a)1. Lead agencies shall competitively procure all  
 953 contracts, consistent with the federal simplified acquisition  
 954 threshold.

955 2. Lead agencies shall competitively procure all contracts  
 956 in excess of \$35,000 with related parties.

957 3. Financial penalties or sanctions, as established by the  
 958 department and incorporated into the contract, must be imposed  
 959 by the department for noncompliance with applicable local,  
 960 state, or federal law for the procurement of commodities or  
 961 contractual services.

962 (b) The contract between the department and the lead  
 963 agency must delineate the rights and obligations of the lead  
 964 agency concerning the acquisition, transfer, or other  
 965 disposition of real property. At a minimum, the contract must:

966 1. Require the lead agency to follow all federal law on  
 967 the acquisition, improvement, transfer, or disposition of real  
 968 property acquired by the lead agency using federal dollars.

969 2. Beginning July 1, 2024, require the department to  
 970 approve any sale, transfer, or disposition of real property  
 971 acquired and held by the lead agency using state funds.

972 (3) Notwithstanding any other provision of law, a  
 973 community-based care lead agency administrative employee may not  
 974 receive a salary, whether base pay or base pay combined with any  
 975 bonus or incentive payments, in excess of 150 percent of the

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976 annual salary paid to the secretary of the Department of  
 977 Children and Families from state-appropriated funds, including  
 978 state-appropriated federal funds. This limitation applies  
 979 regardless of the number of contracts a community-based care  
 980 lead agency may execute with the department. This subsection  
 981 does not prohibit any party from providing cash that is not from  
 982 appropriated state funds to a community-based care lead agency  
 983 administrative employee.

984 Section 24. Paragraph (d) of subsection (1) of section  
 985 409.994, Florida Statutes, is amended to read:

986 409.994 Community-based care lead agencies; receivership.—

987 (1) The Department of Children and Families may petition a  
 988 court of competent jurisdiction for the appointment of a  
 989 receiver for a community-based care lead agency established  
 990 pursuant to s. 409.987 if any of the following conditions exist:

991 (d) The lead agency cannot meet, or is unlikely to meet,  
 992 its current financial obligations to its employees, contractors,  
 993 or foster parents. Issuance of bad checks or the existence of  
 994 delinquent obligations for payment of salaries, utilities, or  
 995 invoices for essential services or commodities constitutes ~~shall~~  
 996 ~~constitute~~ prima facie evidence that the lead agency lacks the  
 997 financial ability to meet its financial obligations.

998 Section 25. Paragraph (d) of subsection (1) of section  
 999 409.996, Florida Statutes, is amended to read:

1000 409.996 Duties of the Department of Children and



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1001 Families.—The department shall contract for the delivery,  
 1002 administration, or management of care for children in the child  
 1003 protection and child welfare system. In doing so, the department  
 1004 retains responsibility for the quality of contracted services  
 1005 and programs and shall ensure that, at a minimum, services are  
 1006 delivered in accordance with applicable federal and state  
 1007 statutes and regulations and the performance standards and  
 1008 metrics specified in the strategic plan created under s.  
 1009 20.19(1).

1010 (1) The department shall enter into contracts with lead  
 1011 agencies for the performance of the duties by the lead agencies  
 1012 established in s. 409.988. At a minimum, the contracts must do  
 1013 all of the following:

1014 (d) Provide for contractual actions ~~tiered interventions~~  
 1015 ~~and graduated penalties~~ for failure to comply with contract  
 1016 terms or in the event of performance deficiencies, as determined  
 1017 appropriate by the department.

1018 1. Such contractual actions must ~~interventions and~~  
 1019 ~~penalties shall~~ include, but are not limited to:

1020 ~~a.1.~~ Enhanced monitoring and reporting.

1021 ~~b.2.~~ Corrective action plans.

1022 ~~c.3.~~ Requirements to accept technical assistance and  
 1023 consultation from the department under subsection (6).

1024 ~~d.4.~~ Financial penalties, as a matter of contract. The  
 1025 financial penalties assessed by the department on the lead

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1026 agency revert to the state ~~which shall require a lead agency to~~  
 1027 ~~reallocate funds from administrative costs to direct care for~~  
 1028 ~~children.~~

1029 ~~e.5.~~ Early termination of contracts, as provided in s.  
 1030 402.7305(3)(f) ~~s. 402.1705(3)(f).~~

1031 2. No later than January 1, 2025, the department shall  
 1032 ensure that each lead agency contract executed includes a list  
 1033 of financial penalties for failure to comply with contractual  
 1034 requirements.

1035 Section 26. By September 30, 2024, and February 1, 2025,  
 1036 respectively, the Department of Children and Families shall  
 1037 submit a report to the Governor, the President of the Senate,  
 1038 and the Speaker of the House of Representatives on rules and  
 1039 policies adopted and other actions taken to implement this act.

1040 Section 27. There is established the Future of Child  
 1041 Protection Contracting and Funding Workgroup within the  
 1042 Department of Children and Families. The department shall  
 1043 convene the workgroup and is responsible for producing and  
 1044 submitting a report of the workgroup's findings and  
 1045 recommendations to the Governor, the President of the Senate,  
 1046 and the Speaker of the House of Representatives by October 15,  
 1047 2025.

1048 (1)(a) The Secretary of Children and Families, or his or  
 1049 her designee, shall chair the workgroup and shall invite the  
 1050 following persons to participate as members of the workgroup:

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- 1051        1. The Secretary of Health Care Administration, or his or  
 1052 her designee.
- 1053        2. The Secretary of Management Services, or his or her  
 1054 designee.
- 1055        (b) The Secretary of Children and Families, or his or her  
 1056 designee, shall appoint the following individuals as members of  
 1057 the workgroup:
- 1058            1. An employee of a community-based care lead agency with  
 1059 executive-level experience.
- 1060            2. A current contractor for lead agency child protection  
 1061 services.
- 1062            3. Two representatives of a direct provider of child  
 1063 protection or child welfare services.
- 1064            4. A member of the Family Law Section of The Florida Bar  
 1065 or a member of the court exercising jurisdiction over family law  
 1066 matters.
- 1067            5. A representative of a for-profit managed care entity.
- 1068            6. A representative from the Florida Institute for Child  
 1069 Welfare.
- 1070            7. Any additional members the department deems  
 1071 appropriate.
- 1072        (2) The report submitted by the department must, at a  
 1073 minimum:
- 1074            (a) Examine the current contracting methods for the  
 1075 provision of all foster care and related services.

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1076        (b) Consider the unique regional needs of children and  
 1077 families at risk of abuse and neglect.  
 1078        (c) Identify current barriers to implementing federally  
 1079 approved Title IV-E prevention services.  
 1080        (d) Recommend changes to existing laws, rules, and  
 1081 policies necessary to implement the workgroup's recommendations.  
 1082        (3) The workgroup shall terminate immediately after the  
 1083 Secretary of Children and Families submits the report to the  
 1084 Governor, the President of the Senate, and the Speaker of the  
 1085 House of Representatives.  
 1086        Section 28. This act shall take effect July 1, 2024.