

	Contract Document	Section	Effective Change Date	Previous Contract Language	New Contract Language	Description of Change
1	Standard Contract	5. Contract Amount	As amended	<p>5. Contract Amount</p> <p>The ME shall pay for contracted services according to the terms and conditions of this Contract in an amount not to exceed «Grand_Total», subject to the availability of funds and satisfactory performance of all terms by the Network Provider. Of the total Contract amount, the ME will be required to pay «Program__Required», subject to the delivery and billing for services. The remaining amount of «Uncompensated», represents “Uncompensated Units Reimbursement Funds”, which the ME, at its sole discretion and subject to the availability of funds, may pay to the Network Provider, in whole or in part, or not at all, for Exemplary Performance by the Network Provider. Exemplary Performance will be determined by the Network Provider delivering and billing for services in excess of those units of service the ME will be required to pay. Should the Network Provider receive any funding from the “Uncompensated Units Reimbursement Funds”, then the amount of Local Match will be recalculated by Carisk, utilizing the formula prescribed in the Method of Payment Exhibit of this contract. The ME’s obligation to pay under this Contract is contingent upon an annual appropriation by the Legislature and the Contract between the ME and the Department. Any costs or services eligible to be paid for under any other contract or from any other source are not eligible for payment under this Contract.</p>	<p>5. Contract Amount</p> <p>The ME shall pay for contracted services according to the terms and conditions of this Contract in an amount not to exceed «Grand_Total», subject to the availability of funds and satisfactory performance of all terms by the Network Provider. The ME’s obligation to pay under this Contract is contingent upon an annual appropriation by the Legislature and the Contract between the ME and the Department. Any costs or services eligible to be paid for under any other contract or from any other source are not eligible for payment under this Contract.</p>	Removal of the uncompensated amount and local match language
2	Attachment I HC02(a)	Section B. Paragraph (23)(a) 2) i., Continuous Quality Improvement Initiatives, Recovery Management Practices	As amended	<p>2) A Network Provider who employs peers must:</p> <p>i. Use the Recovery Capital Scale available at: https://facesandvoicesofrecovery.org/resource/recovery-capital-scale/, in the recovery process.</p>	<p>2) A Network Provider who employs peers must:</p> <p>i. Use the Recovery Capital Scale available at: https://www.myflfamilies.com/services/samh/providers/recovery-oriented-system-care/providers, in the recovery process.</p>	Link was updated
3	Attachment I HC02(a)	Section B.1). a. (27) (c) Financial Audit Reports	As amended	<p>c. The Network Provider must complete and submit the Department-approved Local Match Calculation Form, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	<p>c. The Network Provider must complete and submit the Department-approved Local Match Calculation Form (“Match Plan”) in the Carisk Portal, on a quarterly basis, as a supplemental report to the annual financial submission. The required annual financial submission shall be one of the following:</p> <p>Annual Financial Audit Report: Required for Network Providers that meet the state and federal audit requirements specified in Attachment II, Financial Compliance for Network Providers.</p> <p>Agency Prepared Financial Statements: Required for Network Providers that do not meet the audit requirements specified in Attachment II.</p> <p>All submissions are due per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. The Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	Added: (“Match Plan”) in the Carisk Portal, requiring a quarterly submission of match plan

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4	Attachment I HC02(a)	Section 2. e. (2) (k) Minimum Programmatic Requirements, Guiding Principles	As amended	N/A	(k) First-Person Language and Trauma-Informed Care – The Network Provider must ensure the use of person-first language and trauma-informed responsive care among its staff, as required by Florida Statutes ss 394.9082. This includes, but is not limited to, using this language in all documentation, communication, and training materials. For the purposes of this Contract, “person-first language” means language that emphasizes the individual as a person rather than focusing on their disability, illness, or condition	New clause added to the contract to meet the requirement pursuant to 394.9082, Florida Statutes
5	Attachment I HC02(a)	Section B. b. 3. c. Data Submission	As amended	N/A	(g) Program paid under bundled project codes must submit data for actual services provided as required in Pamphlet 155-2.	New clause
6	Attachment I HC02 (a) (only applicable to Network Providers that use FARS/CFARS)	Section B, Manner of Service Provision	As amended	N/A	(41) The Network Provider must require the use of the most recent version of the Daily Living Activities-20 (DLA-20) functional assessment tool by its staff for all individuals requiring functional assessment, unless the Department of Children and Families specifies in rule a different assessment tool. The Network Provider acknowledges that this requirement is based on Florida Statute 394.9082(5)(y) and understands that the ME will communicate any changes or alternatives specified by the Department of Children and Families in a formally adopted rule.	New clause added to the contract to meet the requirement pursuant to 394.9082, Florida Statutes
7	Attachment I HC02(b)	Section 2. e. (2) (k) Minimum Programmatic Requirements, Guiding Principles	As amended	N/A	(k) First-Person Language and Trauma-Informed Care – The Network Provider must ensure the use of person-first language and trauma-informed responsive care among its staff, as required by Florida Statutes ss 394.9082. This includes, but is not limited to, using this language in all documentation, communication, and training materials. For the purposes of this Contract, “person-first language” means language that emphasizes the individual as a person rather than focusing on their disability, illness, or condition.	New clause added to the contract to meet the requirement pursuant to 394.9082, Florida Statutes
8	Attachment I HC02(b)	Section B. Paragraph (17) (a) 2) Continuous Quality Improvement Initiatives, (a) Recovery Management Practices	As amended	2) A Network Provider who employs peers must: Use the Recovery Capital Scale available at: https://facesandvoicesofrecovery.org/resource/recovery-capital-scale/ , in the recovery process.	2) A Network Provider who employs peers must: i. Use the Recovery Capital Scale available at: https://www.myflfamilies.com/services/samh/providers/recovery-oriented-system-care/providers/ , in the recovery process.	Link was updated

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9	Attachment I HC02(b)	Section B.1). a. (20) (c)Financial Audit Reports	As amended	<p>c.The Network Provider must complete and submit the Department-approved Local Match Calculation Form, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (mytffamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	<p>c. The Network Provider must complete and submit the Department-approved Local Match Calculation Form (“Match Plan”) in the Carisk Portal, on a quarterly basis, as a supplemental report to the annual financial submission. The required annual financial submission shall be one of the following: Annual Financial Audit Report: Required for Network Providers that meet the state and federal audit requirements specified in Attachment II, Financial Compliance for Network Providers. Agency Prepared Financial Statements: Required for Network Providers that do not meet the audit requirements specified in Attachment II.</p> <p>All submissions are due per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. The Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (mytffamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	Added: (“Match Plan”) in the Carisk Portal, requiring a quarterly submission of match plan
10	Attachment I HC02 (c) - Prevention Services	Section 2. e. (2) (k) Minimum Programmatic Requirements, Guiding Principles	As amended	N/A	<p>(k) First-Person Language and Trauma-Informed Care – The Network Provider must ensure the use of person-first language and trauma-informed responsive care among its staff, as required by Florida Statutes ss 394.9082. This includes, but is not limited to, using this language in all documentation, communication, and training materials. For the purposes of this Contract, “person-first language” means language that emphasizes the individual as a person rather than focusing on their disability, illness, or condition.</p>	New clause added to the contract to meet the requirement pursuant to 394.9082, Florida Statutes
11	Attachment I HC02 (c) - Prevention Services	Section B.1). a. (22) (c)Financial Audit Reports	As amended	<p>c.The Network Provider must complete and submit the Department-approved Local Match Calculation Form, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (mytffamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	<p>c. The Network Provider must complete and submit the Department-approved Local Match Calculation Form (“Match Plan”) in the Carisk Portal, on a quarterly basis, as a supplemental report to the annual financial submission. The required annual financial submission shall be one of the following: Annual Financial Audit Report: Required for Network Providers that meet the state and federal audit requirements specified in Attachment II, Financial Compliance for Network Providers. Agency Prepared Financial Statements: Required for Network Providers that do not meet the audit requirements specified in Attachment II.</p> <p>All submissions are due per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. The Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (mytffamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	Added: (“Match Plan”) in the Carisk Portal, requiring a quarterly submission of match plan

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12	Attachment I HC02 (e) - Prevention System Evaluation	Multiple sections	As amended	Multiple Sections - Replaced "Consumers" with "Individuals Served"	Multiple Sections - Replaced "Consumers" with "Individuals Served"	Multiple Sections - Replaced "Consumers" with "Individuals Served"
13	Attachment I HC02 (e) - Prevention System Evaluation	Section B.1). a. (23) (c)Financial Audit Reports	As amended	<p>c.The Network Provider must complete and submit the Department-approved Local Match Calculation Form, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	<p>c. The Network Provider must complete and submit the Department-approved Local Match Calculation Form ("Match Plan") in the Carisk Portal, on a quarterly basis, as a supplemental report to the annual financial submission. The required annual financial submission shall be one of the following: Annual Financial Audit Report: Required for Network Providers that meet the state and federal audit requirements specified in Attachment II, Financial Compliance for Network Providers. Agency Prepared Financial Statements: Required for Network Providers that do not meet the audit requirements specified in Attachment II.</p> <p>All submissions are due per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. The Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	Added: "("Match Plan") in the Carisk Portal", requiring a quarterly submission of match plan
14	Attachment I HC02 (e) - Prevention System Evaluation	Section D, Special Provisions 5.b.. Mandatory Reporting Requirements	As amended		i. In the event of a breach or potential breach of Protected Health Information, the Network Provider is directed to the reporting requirements delineated in the executed Business Associate Agreement, incorporated herein by reference.	
15	Attachment I - HC02(f)Prevention Partnership Contract (PPG)	Section B.1). a. (23) (c)Financial Audit Reports	As amended	<p>c.The Network Provider must complete and submit the Department-approved Local Match Calculation Form, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	<p>c.The Network Provider must complete and submit the Department-approved Local Match Calculation Form ("Match Plan") in the Carisk Portal, on a quarterly basis, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	Added: "("Match Plan") in the Carisk Portal", requiring a quarterly submission of match plan
16	Attachment I - HC02(f)Prevention Partnership Contract (PPG)	Section 2. e. (2) (k) Minimum Programmatic Requirements, Guiding Principles	As amended	N/A	(k) First-Person Language and Trauma-Informed Care – The Network Provider must ensure the use of person-first language and trauma-informed responsive care among its staff, as required by Florida Statutes ss 394.9082. This includes, but is not limited to, using this language in all documentation, communication, and training materials. For the purposes of this Contract, "person-first language" means language that emphasizes the individual as a person rather than focusing on their disability, illness, or condition.	New clause added to the contract to meet the requirement pursuant to 394.9082, Florida Statutes

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17	Attachment I - HC02(f)Prevention Partnership Contract (PPG)	(f) Mandatory Accreditation	As amended	<p>(f)Mandatory Accreditation</p> <p>The Network Provider shall take appropriate steps to maintain its accreditation as required by this section, in order to promote best practices and the highest quality of care. The Network Provider shall provide the ME with their full accreditation and licensing reports upon request.</p> <p>Network Provider applicants for licensure and licensed network providers must meet the most current best practice standards related to the licensable service components of the accrediting organization.</p> <p>Accreditation by an accrediting organization recognized by the Department, as required by Chapter 397, F.S., is a requirement for licensure renewal of clinical substance abuse treatment services. The licensable substance abuse treatment components are listed in subsection 65D-30.002 (17), F.A.C.</p> <p>Failure to meet the accreditation requirements will be considered by the ME to be a breach of this Contract and this contract may be subject to termination.</p>	N/A	This requirement is removed from the contract
18	Attachment I - HC02(f)Prevention Partnership Contract (PPG)	Section F, Contract Document Revisions	As amended	N/A	<p>F. Contract Document Revisions</p> <p>The Network Provider acknowledges and agrees that the ME may, from time to time, update the terms and conditions contained in the Standard Contract, Attachments and Exhibits ("Contract Documents") contained in this Contract. These updates may include, but are not limited to, revisions to language, clarifications, or administrative procedures that do not materially alter the fundamental rights, obligations, or financial terms of this Contract. The ME will determine, in its reasonable discretion, whether a change is considered material. Material changes to the Contract Documents will be subject to a formal written amendment executed by both parties.</p> <p>The ME will provide notice to the Network Provider of any such updates by posting the revised Contract Documents on its website at: Contracts - Thriving Mind South Florida and by sending the notice via e-mail to the representative of the Network Provider responsible for the administration of the programs under the Contract pursuant to Section 4. Of the Standard Contract. The effective date of any updated Contract Documents will be the date of posting on the website, unless a specific effective date is stated within the updated Contract Documents or in a separate notice.</p> <p>It is the Network Provider's responsibility to regularly review the website and Network Provider Notices for any updates to the Contract Documents.</p>	New clause to allow Thriving Mind to update contract documents on website
19	Attachment I - HC02(f)Prevention Partnership Contract (PPG)	Section B.1). a. (23) (c)Financial Audit Reports	As amended	<p>c.The Network Provider must complete and submit the Department-approved Local Match Calculation Form, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance per the schedule and to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	<p>c. The Network Provider must complete and submit the Department-approved Local Match Calculation Form ("Match Plan") in the Carisk Portal, on a quarterly basis, as a supplemental report to the annual financial audit reports as required by Attachment II, Financial and Audit Compliance to the individual(s) identified in the Exhibit C, Required Reports. A sample of the Department-approved Local Match Calculation Form, Template 9 – Local Match Calculation Form is available at the following website: Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 ME Templates and click on Reporting Template 9 – Local Match Calculation Form</p>	

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20	Exhibit A, Individuals/ Participants to be Served	D. 1. Contract Limits	7/1/2025	1.The Network Provider is not authorized to bill the ME for more units than can be purchased with the amount of funds specified in Exhibit G, Covered Service Funding by OCA, subject to the availability of funds. An exception is granted at the end of the contract term, when the ME at its sole discretion may pay, subject to the availability of funds, the Network Provider for “Uncompensated Units Reimbursement Funds”, in whole or in part, or not at all, for Exemplary Performance by the Network Provider. Exemplary Performance will be determined by the Network Provider delivering and billing for services in excess of those units of service the ME will be required to pay. The ME’s obligation to pay under this Contract is contingent upon an annual appropriation by the Legislature and the Contract between the ME and the Department.	1. The Network Provider is not authorized to bill the ME for more units than can be purchased with the amount of funds specified in Exhibit G, Covered Service Funding by OCA , subject to the availability of funds. The ME’s obligation to pay under this Contract is contingent upon an annual appropriation by the Legislature and the Contract between the ME and the Department.	Removal of the uncompensated amount and contract language
21	Exhibit B, Method of Payment	1.e. Payment Clauses	As amended	e.The total contract amount for services purchased through this contract is «Grand_Total». of the total Contract amount, the ME will be required to pay «Program_Required» subject to the delivery and appropriate billing for services. The remaining amount of «Uncompensated» represents “Uncompensated Units Reimbursement Funds”, which the ME, at its sole discretion and subject to the availability of funds, may pay to the Network Provider, in whole or in part, or not at all, for Exemplary Performance by the Network Provider. Exemplary Performance will be demonstrated by the Network Provider’s service delivery and billing for those services in excess of those units of service the ME will be required to pay. The ME’s obligation to pay under this Contract is contingent upon an annual appropriation by the Legislature and the Contract between the ME and the Department. Any costs or services eligible to be paid for under any other contract or from any other source are not eligible for payment under this Contract.	a. The total contract amount for services purchased through this contract is «Grand_Total» . The ME’s obligation to pay under this Contract is contingent upon an annual appropriation by the Legislature and the Contract between the ME and the Department. Any costs or services eligible to be paid for under any other contract or from any other source are not eligible for payment under this Contract.	Removal of the uncompensated amount and contract language and updated Local Match language
22	Exhibit B, Method of Payment	4.a. and b., Local Match	As amended	<p>a. Pursuant to s. 394.76(3), Florida Statutes (F.S.), the Network Provider agrees to provide local matching funds. The Network Provider will obtain its specific local match obligation directly from Carisk.</p> <p>b. Should the Network Provider receive any funding from the “Uncompensated Units Reimbusemen Funds”, then the amount of Local Match will be recalculated by Carisk utilizing the following formula:</p> <p>The additional match required on the uncompensated units = Uncompensated Substance Abuse Services X 16.67% + Uncompensated Mental Health Services that is not exempt from local match requirements X 33.33%. *</p> <p>*The services and funds that do not require local match listed in Rule 65E-14.005, Matching, of the Florida Administrative Code.</p>	a. Pursuant to s. 394.76(3), Florida Statutes (F.S.), the Network Provider agrees to provide local matching funds. The Network Provider must complete the Match Plan in the Carisk Portal, on a quarterly basis, by the deadline on Exhibit C, Required Reports.	
23	Exhibit C, Required Reports	Multiple	10/1/2025	As amended	As amended	As amended

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24	Exhibit D, Substance Abuse & Mental Health Required Performance Outcomes & Outputs	New Tables Table 3. Network Provider Timely Access Measures Table 4. Network Provider Performance Measures Table 5. Quality Indicators	As amended	New Tables Table 3. Network Provider Timely Access Measures Table 4. Network Provider Performance Measures Table 5. Quality Indicators	New Tables Table 3. Network Provider Timely Access Measures - newly established measures capturing appointments. Table 4. Network Provider Performance Measures - This table captures Guidance Document and/or Exhibit Specific performance measures. <u>Table 5. Quality Indicators</u>	New measures pursuant to Thriving Mind's new contract with the Florida Department of Children and Families.
25	Exhibit G, Covered Services by OCA	Network Provider Specific Budget Revisions and the removal of Uncompesated Amounts	As amended	As amended	Network Provider Specific Budget Revisions and the removal of Uncompesated Amounts	Network Provider Specific Budget Revisions and the removal of Uncompesated Amounts
26	Exhibit H, Funding Detail	Network Provider Specific Budget Revisions and the removal of Uncompesated Amounts	As amended	As amended	Network Provider Specific Budget Revisions and the removal of Uncompesated Amounts	Network Provider Specific Budget Revisions and the removal of Uncompesated Amounts
27	Exhibit L, Assisted Living Facilities with Limited Mental Health License	Authority	10/1/2025	Authority: s. 394.4574, F.S	Authority: s. 394.4574, F.S., 429.075, F.S., the Prime Contract, and Guidance Document 8, Assisted Living Facilities with Limited Mental Health (ALF-LMH) Licensure	Updated authority
28	Exhibit N, (Guidance 13), Indigent Psychiatric Medication Program known as the Indigent Drug Program	Exhibit in its entirety	10/1/2025	Exhibit updated in its entirety	Exhibit updated in its entirety	Updated to conform with DCF Guidance Document 13, Indigent Psychiatric Medication Program known as the Indigent Drug Program
29	Exhibit X, (Guidance 15) Projects for Assistance in Transition from Homelessness (PATH)	Exhibit in its entirety	10/1/2025	Exhibit updated in its entirety	Exhibit updated in its entirety	Exhibit X, (Guidance 15) Projects for Assistance in Transition from Homelessness (PATH)
30	Exhibit T, FACES	Section 5. Data and Reporting Rquirements	9/1/2025	N/A	F.A.C.E.S. Children's System of Care (CSOC) Monthly Census and Waitlist Report – To ensure consistency and accuracy in monitoring service availability and capacity, the Network Provider will submit the F.A.C.E.S. Children's System of Care Monthly Census and Waitlist Report in the template provided by the ME, by the due date and to the individuals listed in Exhibit C, Required Reports.	Thriving Specific Reporting Requirements added: Collection of a Census and Waitlist Report due by the 5th of each month for the prior months' services.

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31	Exhibit V, Forensic Services Program	Section (k) Reporting Requirements	10/1/2025	<p>Reporting Requirements: The Network Provider shall submit the following report on a quarterly basis for the preceding quarter. The due dates are as follows: October 10, January 10, April 10, August 5.</p> <p>Reporting Template 33, Community Forensic Beds Report.</p> <p>The template is available at the following link:</p> <p>Managing Entities Florida DCF (myflfamilies.com)</p> <p>Note: Click on FY25-26 METemplates and click on Template 33 – Community Forensic Beds Report</p>	<p>Reporting Requirements: The Forensic Team at the Network Provider shall submit the following report on a quarterly basis for the preceding quarter. The due dates are as follows: October 10, January 10, April 10, August 5.</p> <p>Reporting Template 33, Community Forensic Beds Report.</p> <p>Reporting Template 22 – Forensic Mental Health Services Report</p> <p>Reporting Template 23 – Forensic Diversion Report</p> <p>The templates for the reports above are available at the following link:</p> <p>Managing Entities Florida DCF (myflfamilies.com)</p>	
32	Exhibit Y, Guidance 17 Temporary Assistance for Needy Families (TANF) Funding Guidance	Contract Reference	7/1/2025	Florida Department of Children and Families Guidance Document 17, effective dated July 1, 2021, or the latest revision thereof.	Florida Department of Children and Families Guidance Document 17, effective dated July 1, 2025, or the latest revision thereof.	Updated effective date from July 1, 2021 to July 1, 2025
33	Exhibit AF (Guidance 16) Florida Assertive Community Treatment (FACT)	Exhibit in its entirety	7/1/2025	Exhibit in its entirety	Exhibit in its entirety	<p>Exhibit AF has been revised to align with the Department of Children and Families Guidance Document 16.</p> <p>Updates in GD 16:</p> <ul style="list-style-type: none">• GD16 adds a separate clinical characteristic of "high risk of, or recent history of, criminal justice involvement (arrest and incarceration" under clinical criteria.• Nurse Staffing: "At lease 1.0 FTE Nurse who must be a Registered Nurse (RN)" for a small team, and "At least 2.0 FTE Nurses, At least one FTE must be an RN" for a large team.• Substance Abuse Specialist: A bachelor's level specialist must be a Certified Addiction Professional• Total FACT Team Composition – table updated• Added due date for the submission of the monthly Outcome Measures report. <p>All Thriving Mind specific language have been moved to a new section VII, Thriving Mind (ME) Specific Requirements.</p>

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34	Exhibit AG, MDFAC	4.c. (2) Reports	10/1/2025	<p>The MDFAC must maintain an operating capacity of sixteen (16) individual beds and the daily census will be limited to that number. The ME recognizes physical occupancy must not exceed sixteen (16) individual beds under normal operating circumstances.</p> <p>Up to six (6) beds must be available to Broward residents who meet MDFAC's Eligibility Criteria. Only inpatient services will be provided to patients from Broward County. Other services such as transportation, case management and aftercare will not be provided.</p>	<p>The MDFAC must maintain an operating capacity of thirteen (13) individual beds and the daily census will be limited to that number. The ME recognizes physical occupancy must not exceed thirteen (13) individual beds under normal operating circumstances.</p> <p>Up to five (5) beds must be available to Broward residents who meet MDFAC's Eligibility Criteria. Only inpatient services will be provided to patients from Broward County. Other services such as transportation, case management and aftercare will not be provided.</p>	Updated the number of beds purchased
35	Exhibit AI, Guidance 18 Family Intensive Treatment (FIT) Team Model	Exhibit in its entirety	7/1/2025	Exhibit in its entirety	Exhibit in its entirety	<p>Exhibit updated to conform with DCF Guidance Document 18</p> <p>Thriving Specific Reporting Requirements added:</p> <p>Section IV. Outcome Measures due to Thriving Mind by the 10th of each month for the prior months' services.</p> <p>Section VIII.(1) Data submission into the Access Database due to Thriving Mind by the the 10th day of each month following service delivery.</p> <p>(2) Annual and minimum service targets listed</p>
36	Exhibit AJ, Guidance 32 Community Action Treatment (CAT) Team	Exhibit in its entirety	7/1/2025	i.	<p>Exhibit in its entirety and addition of Section 6. Managing Entity Specific Requirements as follows:</p> <p>CAT Children's System of Care (CSOC) Monthly Census and Waitlist Report - To ensure consistency and accuracy in monitoring service availability and capacity, the Managing Entity (ME) requires each CAT team to submit the CSOC Monthly Census and Waitlist information. The information must be reported using the template provided by the ME, by the 5th of each month following the month of service to the individual listed in Exhibit C, Required Reports.</p>	<p>Exhibit updated to conform with DCF Guidance Document 32</p> <p>Thriving Specific Reporting Requirements added: Collection of a Census and Waitlist Report due by the 5th of each month for the prior months' services(this requirement became effective beginning September 1, 2025)</p>

	Contract Document	Section	Effective Change Date	Previous Contract Language	New Contract Language	Description of Change
37	Exhibit AL, Wraparound Services/Transition to Independence Services	Section 6.	10/1/2025	New requirement	Transition to Independence Process (TIP) model services monthly report:) Monthly Census and Waitlist Report – To ensure consistency and accuracy in monitoring service availability and capacity, the Network Provider will submit the Children’s System of Care Monthly Census and Waitlist Report in the template provided by the ME, by the 5th of each month following the moth of services to the individual listed in Exhibit C, Required Reports	New report added: collection of a census and waitlist report due by the 5th of each month for the prior months' services
38	Exhibit AN, Supplemental Security Income/Social Security Disability Insurance (SSI/SSDI) Outreach, Access, and Recovery (SOAR)	As amended	12/1/2025	As amended	Exhibit in its entirety	The SOAR TA Center at the federal level closed effective August 18th. Exhibti AN to be revised to meet the new DCF and Thriving Mind requirements.
39	Exhiit AO, Peer Services	Section 3, Network Provider Responsibilities	10/1/2025		3. Assessment Tools: Peers who are employed at a SOR funded RCO must use the Recovery Capital Scale available at https://www.myflfamilies.com/document/4476 in the recovery planning process. The ME may require the Network Provider to report aggregate scores derived from the collection of Recovery Capital Scale tool. This information may be used to determine baseline data for the development of future performance measures. Peers who are employed at subcontracted Network Service Providers who employ peers with direct recovery-support services are required to: Use the Recovery Capital training as a foundation to inform the recovery planning process available at: https://www.myflfamilies.com/document/4566	•Removed “3. Recovery Capital” and replaced with “3. Assessment Tools” language. See Redline
40	Exhibit AQ, Central Receivling Facility - Miami Dade County	Section VII CRF Specific Performance Measures	7/1/2025	New Measures	1. Reduce drop-off processing time by law enforcement officers for admission to crisis services; until they are maintained at less than 10 minutes. 2. Increase participant access to community-based behavioral health services after referral. 3. Annually fewer than 25 percent of all individuals served will be re-admitted to a Baker Act Receiving Facility or Inpatient Detoxification Unit within the Central Receiving System. 4. Reduce Number of Individuals Admitted to a State Mental Health Treatment Facility. First quarter numbers will be used to determine baseline.	added new DCF performance measures

	Contract Document	Section	Effective Change Date	Previous Contract Language	New Contract Language	Description of Change
41	Exhibit AQ, Central Receiving Facility - Miami Dade County	Section VIII, paragraph 2 b., CRF Specific Reports	7/1/2025	b) Performance Measures Report: By the 15 th of every month following the reporting month for the measures listed above in Section VI., paragraph D., Performance Measures.	b) Performance Measures Report: By the 10 th of every month following the reporting month for the measures listed above in Section VI., paragraph D., Performance Measures.	Changed due date
42	Exhibit AQ, Central Receiving Facility - Miami Dade County	Section VIII, paragraph 2 g), CRF Specific Reports	7/1/2025	New	g) Central Receiving Facility Social and Cost Avoidance Impact Report: The Network Provider shall submit the year-end Central Receiving Facility Social and Cost Avoidance Impact Report, outlining how the county funds were utilized and a full analysis of the social impact of the funds. The report is due annually no later than October 5th.	Added new year end report for the county funded portion of the CRF
43	Exhibit AS, Central Receiving Facility - Monroe County	Section I, Overview	7/1/2025	The designation as the CRF and the services to be provided are established in accordance with Florida Statute 394, Florida Mental Health Act, Florida Statute 397, Hal S. Marchman Alcohol and Other Drug Services Act, and in accordance with the Monroe County Designated Receiving System Plan, dated 2021-2023, (MC-Plan, or latest revision thereof), herein incorporated by reference.	The designation as the CRF and the services to be provided are established in accordance with Florida Statute 394, Florida Mental Health Act, Florida Statute 397, Hal S. Marchman Alcohol and Other Drug Services Act, and in accordance with the Monroe County Designated Receiving System Plan, dated 2023-2026, (MC-Plan, or latest revision thereof), herein incorporated by reference.	updated date of the Monroe County Designated Receiving System plan
44	Exhibit AS, Central Receiving Facility - Monroe County	Section III, III.MONROE COUNTY DESIGNATED RECEIVING SYSTEM PLAN	7/1/2025	The Network Provider agrees to adhere to and implement the CRF in Monroe County as described in the Monroe County Designated Receiving System Plan, dated 2021-2023, or the latest revision thereof, herein incorporated by reference.	The Network Provider agrees to adhere to and implement the CRF in Monroe County as described in the Monroe County Designated Receiving System Plan, dated 2023-2026, or the latest revision thereof, herein incorporated by reference.	updated date of the Monroe County Designated Receiving System plan
45	Exhibit AS, Central Receiving Facility - Monroe County	Section V, paragraph D	7/1/2025	New	1. Reduce drop-off processing time by law enforcement officers for admission to crisis services; until they are maintained at less than 10 minutes. 2. Increase participant access to community-based behavioral health services after referral. 3. Annually fewer than 25 percent of all individuals served will be re-admitted to a Baker Act Receiving Facility or Inpatient Detoxification Unit within the Central Receiving System. 4. Reduce Number of Individuals Admitted to a State Mental Health Treatment Facility. First quarter numbers will be used to determine baseline.	added new DCF performance measures

	Contract Document	Section	Effective Change Date	Previous Contract Language	New Contract Language	Description of Change
46	Exhibit AS, Central Receiving Facility - Monroe County	Section V, paragraph I, Reporting	7/1/2005	2. Performance Measures Report: By the 15 th of every month following the reporting month for the measures listed above in Section VI., paragraph D., Performance Measures.	2. Performance Measures Report: By the 10 th of every month following the reporting month for the measures listed above in Section VI., paragraph D., Performance Measures.	Changed due date
47	Exhibit BD (Guidance 42) State Opioid Response (SOR) Project	Secion VI, Required Rporting, paragraph C	10/1/2025	C.WITS Open Ticket and Challenges Report – The Network Provider shall submit a monthly Open Ticket and Challenges Report no later than the 5th of each month. The report shall include the following: • Open tickets – date ticket to TMSF, ticket number, brief description of issue, and current status • Describe any challenges with WITS entry for which there is no WITS ticket	N/A - Requirement removed	Removed WITS Open Ticket and Challenges Report.
48	Exhibit BF, Recovery Community Organization Scope of Work (New Hope CORPS and South Florida Wellness Network)	Section K, Required Reports	10/1/2025	New section	K. Required Reports The Network Provider shall submit the following reports by the dates and to the individuals listed in Exhibit C, Required Reports. 1.DCF Template 34 - RCO Report: No later than the 10th of the month, the DCF RCO Report will be submitted to the Peer Services Manager. The DCF RCO Report Template 34, SOR Reports, is found by clicking on the link below: Managing Entities Florida DCF Note: Click on FY25-26 ME Templates and click on Reporting Template 34, SOR Reports	added new requirement, submission of DCF Template 34, RCO Report. Due by the 10th of each month for the prior months' service
49	Exhibit BF - Miami Recovery Project	Section M. 1. Required Reports	10/1/2025	M. Required Reports. The Network Provider shall submit the following reports by the dates and to the individuals listed in Exhibit C, Required Reports. 1.DCF - RCO Monthly Report: No later than the 10th of the month, the DCF RCO Monthly Report will be submitted to the Peer Services Manager. The DCF RCO Monthly Report Template 34, SOR Reports, is found by clicking on the link below: Managing Entities Florida DCF Note: Click on FY25-26 ME Templates and click on Reporting Template 34, SOR Reports	M. Required Reports. The Network Provider shall submit the following reports by the dates and to the individuals listed in Exhibit C, Required Reports. 1. DCF Template 34 - RCO Report: No later than the 10th of the month, the DCF RCO Report will be submitted to the Peer Services Manager. The DCF RCO Report Template 34, SOR Reports, is found by clicking on the link below:. Managing Entities Florida DCF Note: Click on FY25-26 ME Templates and click on Reporting Template 34, SOR Reports	Revised the naming convention of the DCF Template 34, to "DCF Template 34 - ROC Reports"

	Contract Document	Section	Effective Change Date	Previous Contract Language	New Contract Language	Description of Change
50	Exhibit BK, Children's Short-Term Residential Treatment Program	Section IX, Performance Measures	10/1/2025	<p>1.Diversions</p> <p>The Network Provider shall collect the following base line data:</p> <p>a. Number of children diverted from a Statewide Inpatient Psychiatric Program (SIPP)/Psychiatric Hospitalization treatment.</p> <p>b. Number of children diverted from the child welfare system/custody.</p> <p>2. Stable Housing</p> <p>a. Percent of children who live in a stable housing environment thirty (30) days post discharge. Minimum Standard 88.4%</p> <p>3. Recidivism</p> <p>a. Percent change in the number of children arrested 30 days prior to admission versus 30 days post discharge: Minimum Standard - 19.0%</p> <p>b. Readmission to Crisis Stabilization Unit: No more than 14.5% CSU readmissions within thirty (30) calendar days post Short-Term Residential treatment discharge.</p> <p>c. Readmission to Juvenile Addiction Receiving Facility: No more than 15.0% Detoxification readmissions within thirty (30) calendar days post-detoxification discharge services.</p>	<p>1. Diversions</p> <p>The Network Provider shall collect the following base line data:</p> <p>a. Number of children diverted from a Statewide Inpatient Psychiatric Program (SIPP)/Psychiatric Hospitalization treatment (applicable to SRT only).</p> <p>b. Number of children diverted from the child welfare system/custody (applicable to SRT and JARF).</p> <p>2. Stable Housing</p> <p>a. Percent of children who live in a stable housing environment thirty (30) days post discharge (applicable to SRT and JARF). Minimum Standard: 81.0%</p> <p>3. Recidivism</p> <p>a. Percent change in the number of children arrested 30 days prior to admission versus 30 days post discharge (for JARF only): Minimum Standard: 18.0%</p> <p>b. Readmission to Crisis Stabilization Unit: No more than 14.5% CSU readmissions within thirty (30) calendar days post Short-Term Residential treatment discharge (applicable to SRT only).</p>	<p>Clarifies which program (SRT or JARF or both) the report is required from.</p> <p>Revision to minimum performance measure standards.</p>
51	Exhibit BK, Children's Short-Term Residential Treatment Program	Section X, a. Other Network Provider Responsibilities	10/1/2025	<p>a.The Network Provider, in coordination with the corresponding ME, shall conduct at least one outreach/program presentation to each Baker Act designated receiving facility for minors in the southern Region and Broward County, no later than the end of the second quarter every fiscal year.</p>	<p>a. The Network Provider, in coordination with the corresponding ME, shall conduct at least one outreach/program presentation to each Baker Act designated receiving facility for minors in the southern Region and Broward County, no later than the end of the second quarter every fiscal year.</p> <p>The Network Provider must submit a report detailing the completion of the required outreach/program presentations annually by January 15th.</p>	<p>added deadline for the submission of the Outreach/Program presentation report</p>
52	Exhibit BV, Federal Grant Financial Management	New Exhibit	12/1/2025	New Exhibit	New Exhibit	New Exhibit in compliance with DCF Guidance Document 22