

26 Coordination Program. If the department establishes the program,
27 it may contract with managing entities as defined in s.
28 394.9082(2)(e) to provide veterans and their families in this
29 state with dedicated behavioral health care referral services,
30 especially mental health and substance abuse services. The
31 department may model the program after the proof-of-concept
32 pilot program established in 2014 by the Crisis Center of Tampa
33 Bay and the Florida Department of Veterans' Affairs in
34 Hillsborough, Pasco, Pinellas, Polk, and Manatee Counties.

35 (2) The goals of the program are to:

36 (a) Prevent suicides by veterans.

37 (b) Increase veterans' use of programs and services
38 provided by the United States Department of Veterans Affairs.

39 (c) Increase the number of veterans who use other
40 available community-based programs and services.

41 (3) The program must be available statewide. Program
42 services may be provided by program teams operated by Florida
43 211 Network participants, as authorized by s. 408.918. A Florida
44 211 Network participant may provide services in more than one
45 managing entity's geographic area under a single contract.

46 (4) The program teams may provide referral and care
47 coordination services to veterans and their families and expand
48 the existing Florida 211 Network to include the optimal range of
49 veterans' service organizations and programs. Program services
50 may include:

51 (a) Telephonic peer support, crisis intervention, and the
52 communication of information on referral resources.

53 (b) Treatment coordination, including coordination of
54 followup care.

55 (c) Suicide risk assessment.

56 (d) Promotion of the safety and wellness of veterans and
57 their families, including continuous safety planning and
58 support.

59 (e) Resource coordination, including data analysis, to
60 facilitate acceptance, enrollment, and attendance of veterans
61 and their families in programs and services provided by the
62 United States Department of Veterans Affairs and other available
63 community-based programs and services.

64 (f) Immediate needs assessments, including safety planning
65 and support.

66 (5) To enhance program services, program teams may:

67 (a) Track the number of requests from callers who are
68 veterans or members of a veteran's family.

69 (b) Follow up with callers who are veterans or members of
70 a veteran's family to determine whether they have acted on the
71 referrals or received the assistance needed and whether
72 additional referral or advocacy is needed.

73 (c) Develop and implement communication strategies, such
74 as media promotions, public service announcements, print and
75 Internet articles, and community presentations, to inform

76 veterans and their families about available programs and
77 services provided by the United States Department of Veterans
78 Affairs and other available community-based programs and
79 services.

80 (d) Document all calls and capture all necessary data to
81 improve outreach to veterans and their families and report such
82 data to the managing entity.

83 (6) Upon implementation of the program, Florida 211
84 Network participants shall collect data on the implementation
85 and submit such data to the department in the format prescribed
86 by the department. The department shall use such data to prepare
87 a report for submittal to the Governor, the President of the
88 Senate, and the Speaker of the House of Representatives by
89 December 15, 2020. The report must include:

90 (a) The number of calls received.

91 (b) Demographic information for each caller, including,
92 but not limited to, the caller's military affiliation, the
93 caller's veteran status, and whether the caller is receiving
94 services provided by the United States Department of Veterans
95 Affairs or other available community-based programs and
96 services.

97 (c) The nature of each call, including, but not limited
98 to, the concerns prompting the call and the services requested.

99 (d) The outcome of each call, including, but not limited
100 to, the services for which referrals were made and the

101 organizations to which the caller was referred.

102 (e) Services received as a result of each call.

103 (f) Information regarding followup by the program team,
104 including, but not limited to, the percentage of calls receiving
105 followup and the amount of time between initial contact and
106 followup.

107 (g) Information regarding the program's impact on each
108 caller's quality of life and on the avoidance of negative
109 outcomes, including arrest and suicide.

110 (h) Each caller's level of satisfaction with program
111 services.

112 Section 2. This act shall take effect July 1, 2019.