

DCF Chart 8 System



Chart 8	DEPARTMENT OF CHILDREN AND FAMILIES REVENUE MANAGEMENT	BE: 60910950 OCA: MS0CN
BUDGET ENTITY: SUBS ABUSE AND MENTAL HLTH		CYCLE: 2018 2
OCA: ME SA CARE COORDINATION DIRECT CLIENT SERVICES		

FUNDS:

20 2 261015 FEDERAL GRANTS TRUST FUND - DCF

STATE PROGRAMS:

1301110000 000000 COMM SUBSTANCE ABUSE SERV

PURPOSE:

This BE/OCA combination captures allowable costs of care coordination as outlined in Guidance 4 - Care Coordination of the Managing Entity contracts, available at:

<http://www.myflfamilies.com/service-programs/substance-abuse/managing-entities/2017-contract-docs>

Pursuant to s. 394.9082(3)(c), F.S., the Department has defined several priority populations to potentially benefit from Care Coordination. Network Service Providers are expected to minimally serve the following population:

1. Adults with a substance use disorder (SUD) or co-occurring disorders who demonstrate high utilization of acute care services, including crisis stabilization, inpatient, and inpatient detoxification services. For the purposes of this document, high utilization is defined as:
 - a. Adults with three (3) or more acute care admissions within 180 days; or
 - b. Adults with acute care admissions that last 16 days or longer.

Adults with a SMI awaiting placement in a state mental health treatment facility (SMHTF) or awaiting discharge from a SMHTF back to the community.

Populations identified to potentially benefit from Care Coordination that may be served in addition to the required group include:

1. Persons with a SUD or co-occurring disorders who have a history of multiple arrests, involuntary placements, or violations of parole leading to institutionalization or incarceration.
2. Caretakers and parents with a SUD or co-occurring disorders involved with child welfare.
3. Individuals with a SUD identified by the Department, managing entities, or Network Service Providers as potentially high risk due to concerns that warrant Care Coordination, as approved by the Department.

The following covered services described in ch. 65E-14.021, F.A.C. are allowable uses of these funds:

Outreach; Assessment; Case Management; Crisis Support/Emergency; Incidental Expenses; Intervention; In-Home and On-Site; Recovery Support; Supportive Housing/Living.

SOURCE OF MATCH:

This BE/OCA combination is 100% state funded, therefore, there is no match requirement.

COST ALLOCATION METHODOLOGY: Costs associated with this BE/OCA combination are directly charged to a non-grant related cost objective.

BUDGET RESTRICTIONS: Care Coordination funds may not be used for the following puposes:
 To make direct payments to individuals to induce them to enter prevention or treatment services.
 To make direct payments to individuals to encourage attendance and/or attainment of prevention or treatment goals.
 To pay for the purchase or construction of any building or structure to house any part of the program.
 To pay for inpatient, residential, and any other covered services that are not listed in this Chart 8.

SOURCE OF FUNDS: This BE/OCA combination is 100% state funded.

REV MGMT ANALYST: SUNDAY, DIANE

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* Indicates a link to an Internet site not under the control of the Department of Children and Families.

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