

**Agency for Health Care Administration  
Florida 211 Network Provider Certification  
Application Form**

Pursuant to Chapter 59-G-11, Florida Administrative Code, for consideration as a Florida 211 Network Provider all candidates must complete the following form certifying that all criteria have been met. This form and accompanying documentation must be submitted to the Agency for Health Care Administration, Bureau of Medicaid Research. **Written statements and supportive documentation provided by a candidate are subject to the provisions in 837.06, F.S.**

**Date:** \_\_\_\_\_ **Name of Organization:** \_\_\_\_\_

**Address:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**County or Counties to be Served by the Organization:**

\_\_\_\_\_

\_\_\_\_\_  
**Name of Person Completing the Agency's Florida 211 Network Provider Certification Application Form**

**Title:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

\_\_\_\_\_  
**Authorized Signature**

\_\_\_\_\_  
**Title**

\_\_\_\_\_  
**Printed Name**

\_\_\_\_\_  
**Telephone Number**

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To be certified by the Agency as a Florida 211 Network Provider, a candidate shall certify that the organization meets all the criteria listed below.

Provide a brief narrative in the space following each standard explaining how each of the criteria have been achieved. Documentation must include signed written agreements with collaborating agencies which must be submitted with this application.

If the candidate does not fully comply with any of the following criteria, a statement that clearly delineates a specific plan and timeframe for compliance must be provided.

- provides 24-hour coverage, 7 days a week either on-site or through written arrangements with organizations for after hours coverage, that shall be provided by personnel monitoring the 211 phone line and shall not be answered through an answering service or answering machine
  
  
  
  
  
  
  
  
  
  
- adheres to the Alliance of Information and Referral Systems (AIRS), Incorporated *Standards for Professional Information and Referral*, 4<sup>th</sup> edition, revised October, 2002, and is AIRS accredited, or has initiated the written application process and shall become accredited within three years
  
  
  
  
  
  
  
  
  
  
- has 25 percent or more of eligible staff with AIRS certification as information and referral specialists or resource specialists
  
  
  
  
  
  
  
  
  
  
- works collaboratively and has written agreements with specialized information and referral systems, which shall include crisis centers, child care resource and referral programs, elder help-lines, homeless coalitions, designated emergency management systems, 911 and 311 systems

has an established automated information tracking system that maintains call center data that shall include the following statistics: call volume, number of abandoned calls, average speed of answering, and average call length

maintains a computerized information and referral system database that has up-to-date information and resource data and the capacity to collect caller information

uses the Alliance of Information and Referral Systems and AIRS/INFO LINE Taxonomy and has incorporated the taxonomy into its resource data base

publicizes 211 services through a written public awareness, marketing, advertising, and education plan to inform the public regarding available services

provides teletyping (TTY) services for speech and hearing impaired individuals and multi-lingual accessibility either on-site, or through access to translators

has formal agreements with clearinghouse agencies that provide volunteer or donation management services

- ensures quality of service and caller and customer satisfaction through follow-up and written outcome evaluations
  
- shares resource database information with other Florida 211 Network Providers
  
- tracks information on inquirer needs, unmet needs, and barriers to services and shares this data with other 211 providers, and local and state organizations
  
- uses a method common to all Florida 211 Network Providers to measure and evaluate outcomes for the operation of a 211 call center
  
- submits to the Agency an annual report documenting the information and referral services provided. The annual report shall include: geographical areas served, call volume, number of abandoned calls, average speed of answering, average call length, information on inquirer needs, unmet needs, and barriers to services. This report shall cover the previous year's activities and shall follow the state's fiscal year from July 1<sup>st</sup> through June 30<sup>th</sup>. The report shall be due to the Division of Medicaid in the Agency on or before August 1<sup>st</sup> of each year.
  
- adheres to the provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).