A bill to be entitled
An act relating to a long-acting reversible
contraception pilot program; creating s. 381.00515,
F.S.; requiring the Department of Health to establish
a long-acting reversible contraception (LARC) pilot
program in Hillsborough, Palm Beach, and Pinellas
Counties; requiring the department to contract with
family planning providers to implement the pilot
program; requiring that such contracts include
specified provisions; requiring the department to
apply for grants for additional funding; requiring the
department to submit a report to the Governor and the
Legislature; requiring the department to publish the
report on its website; specifying requirements for
such report; providing an appropriation subject to
certain requirements; providing a statement of
necessity; providing an effective date.

WHEREAS, the Legislature finds that unintended pregnancies,
especially among young women, carry health risks for mother and
baby, and

WHEREAS, the Legislature further finds that programs that
provide long-acting reversible contraceptive (LARC) methods,
along with other contraceptive methods, contribute to declines
in the number of unintended pregnancies and abortions, NOW,
THEREFORE,
Be It Enacted by the Legislature of the State of Florida:

Section 1. Section 381.00515, Florida Statutes, is created to read:

381.00515 Long-acting reversible contraception pilot program.—

(1) The Department of Health shall establish a long-acting reversible contraception (LARC) pilot program in Hillsborough, Palm Beach, and Pinellas Counties. The purpose of the pilot program is to improve the provision of LARC services in those counties. The department shall contract with eligible family planning providers to implement the pilot program. A contract to provide LARC services must include all of the following:

(a) Provision of intrauterine devices and implants to participants.

(b) Training for providers and staff regarding the provision of LARC devices, counseling strategies, and the management of side effects.

(c) Technical assistance regarding issues such as coding, billing, pharmacy rules, and clinic management necessitated by the increased use of LARC devices.

(d) General support to expand the capacity of family planning clinics.

(e) Marketing and outreach regarding the availability of LARC services among other currently available contraceptive
services.

(f) Other services the department considers necessary to ensure the health and safety of participants who receive LARC devices.

(2) The department shall seek grants from federal agencies and other sources to supplement state funds provided for the pilot program.

(3) By January 1, 2018, the department shall submit a report to the Governor, the President of the Senate, and the Speaker of the House of Representatives on the effectiveness of the pilot program. The department shall publish the report on its website. The report must include, but is not limited to:

(a) An assessment of the operation of the pilot program, including any progress made in reducing the number of unintended pregnancies and subsequent births, especially among teenagers.

(b) An assessment of the effectiveness of the pilot program in increasing the availability of LARC services.

(c) The number and location of family planning providers that participated in the pilot program.

(d) The number of clients served by participating family planning providers.

(e) The number of times LARC services were provided by participating family planning providers.

(f) The average cost per client served.

(g) The demographic characteristics of clients served.

(h) The sources and amounts of funding used for the pilot
(i) A description of federal grants the department applied for in order to provide LARC services, including the outcomes of the grant applications.

(j) An analysis of the return on investment for the provision of LARC services with regard to tax dollars saved on health and social services.

(k) A description and analysis of marketing and outreach activities conducted to promote the availability of LARC services.

(l) Recommendations for improving the pilot program.

Section 2. For the 2016-2017 fiscal year, the sum of $75,000 in nonrecurring funds is appropriated from the General Revenue Fund to the Department of Health for the purpose of implementing this act. The department shall distribute the funds equally among the three counties participating in the pilot program. These funds do not supplant or reduce any other appropriation of state funds to family planning providers or to the department for family planning services.

Section 3. The Legislature finds that this act is necessary to protect the public health, safety, and welfare.

Section 4. This act shall take effect July 1, 2016.