



# HEPATITIS RESOURCE GUIDE

## OKALOOSA COUNTY – PUTNAM COUNTY

BUREAU OF COMMUNICABLE DISEASES  
DIVISION OF DISEASE CONTROL AND HEALTH PROTECTION  
FLORIDA DEPARTMENT OF HEALTH

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## OKALOOSA COUNTY

|          |  |                            |    |     |       |  |
|----------|--|----------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact—Nicole Harris or Mark Bagby |                            |    |     |       |  |
| ADDRESS  | 221 Hospital Dr. NE  |                            |    |     |       |  |
| CITY     | Fort Walton Beach  | STATE                      | FL | ZIP | 32548 |  |
| PHONE    | 850-344-0611 or 850-344-0608                                 | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | http://okaloosa.floridahealth.gov/                           |                            |    |     |       |  |
| SERVICES | Hepatitis B and C screening, Hepatitis A and B vaccinations  |                            |    |     |       |  |

|       |   |  |  |  |  |  |
|-------|---|--|--|--|--|--|
| NAME  | DOH Regional Volunteer Coordinator—Susan Prescott |  |  |  |  |  |
| PHONE | 850-892-8040 ext. 1159                            |  |  |  |  |  |

### Medicaid, Social Security, and Related Services

|          |  |       |    |     |       |  |
|----------|--|-------|----|-----|-------|--|
| NAME     | Medicaid Eligibility   |       |    |     |       |  |
| ADDRESS  | 407 Racetrack Rd. NE   |       |    |     |       |  |
| CITY     | Fort Walton Beach  | STATE | FL | ZIP | 32547 |  |
| PHONE    | Medicaid Helpline: 1-866-762-2237  |       |    |     |       |  |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |       |    |     |       |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Social Security Office                                  |  |    |     |       |
| ADDRESS  | 111B Racetrack RD NW                                    |  |    |     |       |
| CITY     | Fort Walton Beach                                       | STATE  | FL | ZIP | 32547 |
| PHONE    | 1-866-331-2194  | HOURS M/T/R/F: 9:00 AM—4 PM, & W, 9 AM—12 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |  |    |     |       |
| SERVICES | Assistance with Social Security benefits                |  |    |     |       |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Veterans Services   |       |    |     |       |
| ADDRESS  | 1250 N Eglin Pkwy, Suite 302  |       |    |     |       |
| CITY     | Shalimar  | STATE | FL | ZIP | 32579 |
| PHONE    | 850-651-7258  | HOURS |    |     |       |
| WEBSITE  | <a href="http://www.co.okaloosa.fl.us/veterans/home">http://www.co.okaloosa.fl.us/veterans/home</a> |       |    |     |       |
| SERVICES | Benefits and medical care assistance  |       |    |     |       |

|          |   |       |    |     |       |  |
|----------|---|-------|----|-----|-------|--|
| NAME     | Veterans Services   |       |    |     |       |  |
| ADDRESS  | 601-A N. Pearl St., Suite 100   |       |    |     |       |  |
| CITY     | Crestview   | STATE | FL | ZIP | 32536 |  |
| PHONE    | 850-689-5922  | HOURS |    |     |       |  |
| WEBSITE  | <a href="http://www.co.okaloosa.fl.us/veterans/home">http://www.co.okaloosa.fl.us/veterans/home</a> |       |    |     |       |  |
| SERVICES | Benefits and medical care assistance  |       |    |     |       |  |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Shalimar Vet Center   |   |    |     |       |
| ADDRESS  | 6 11 <sup>th</sup> Ave., Suite G-1  |   |    |     |       |
| CITY     | Shalimar  | STATE   | FL | ZIP | 32579 |
| PHONE    | 850-651-1000  | HOURS M: 8 AM—7:30 PM, T/W: 7:00 AM—7:30 PM<br>R/F: 7:00 AM—5:30 PM |    |     |       |
| WEBSITE  | <a href="https://www.va.gov/directory/guide/facility.asp?ID=6139&amp;dnum=All">https://www.va.gov/directory/guide/facility.asp?ID=6139&amp;dnum=All</a> |   |    |     |       |
| SERVICES | Comprehensive care for veterans   |   |    |     |       |

|          |  |       |                            |     |       |  |
|----------|--|-------|----------------------------|-----|-------|--|
| NAME     | Eglin Community Based VA Outpatient Center   |       |                            |     |       |  |
| ADDRESS  | 100 Veterans Way                             |       |                            |     |       |  |
| CITY     | Eglin AFB                                    | STATE | FL                         | ZIP | 32542 |  |
| PHONE    | 866-520-7359                                 |       | HOURS M-F: 7:30 AM—4:30 PM |     |       |  |
| WEBSITE  | https://www.biloxi.va.gov/locations/EOPC.asp |       |                            |     |       |  |
| SERVICES | Comprehensive care for veterans              |       |                            |     |       |  |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Office of Insurance Regulation  |       |    |     |       |
| ADDRESS  | 160 Governmental Center, Suite 515  |       |    |     |       |
| CITY     | Pensacola   | STATE | FL | ZIP | 32501 |
| PHONE    | 850-595-8040  |       |    |     |       |
| WEBSITE  | <a href="https://www.flair.com/choices.aspx">https://www.flair.com/choices.aspx</a> |       |    |     |       |
| SERVICES | Find rate information for Medicare supplement and small group health                |       |    |     |       |

### Community Healthcare Clinics or Health Centers

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Crestview Health Center   |                            |    |     |       |  |
| ADDRESS  | 800 Hospital Dr.  |                            |    |     |       |  |
| CITY     | Crestview   | STATE                      | FL | ZIP | 32539 |  |
| PHONE    | 850-682-1164  | HOURS M-F: 7:30 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.northfloridamedicalcenters.org/locations/crestview-health-center/">https://www.northfloridamedicalcenters.org/locations/crestview-health-center/</a> |                            |    |     |       |  |
| SERVICES | Screenings, immunizations, primary care; sliding fee scale  |                            |    |     |       |  |

### Support Groups

|         |  |  |    |     |       |
|---------|--|--|----|-----|-------|
| NAME    | Hep Club                                   |  |    |     |       |
| ADDRESS | Shalimar United Methodist Church—Old Ferry |  |    |     |       |
| CITY    | Shalimar                                   | STATE  | FL | ZIP | 32579 |
| PHONE   | 850-651-5500 (Jan)                         | HOURS Third Tuesday of the month<br>7:00—8:30 PM |    |     |       |

### Continuum of Care/ Homeless Services

|          |  |       |                      |     |       |  |
|----------|--|-------|----------------------|-----|-------|--|
| NAME     | Homeless and Housing Alliance (ask for Sarah Yelverton)  |       |                      |     |       |  |
| ADDRESS  | P.O. Box 115   |       |                      |     |       |  |
| CITY     | Ft. Walton Beach   | STATE | FL                   | ZIP | 32549 |  |
| PHONE    | 850-362-7429   |       | HOURS Call for hours |     |       |  |
| WEBSITE  | www.hhalliance.org   |       |                      |     |       |  |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                      |     |       |  |

## OKEECHOBEE COUNTY

|          |   |                         |    |     |       |  |
|----------|---|-------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact—Patricia Pelayo or Danielle Stevens                    |                         |    |     |       |  |
| ADDRESS  | 1728 NW 9 <sup>th</sup> Ave.  |                         |    |     |       |  |
| CITY     | Okeechobee  | STATE                   | FL | ZIP | 34972 |  |
| PHONE    | 863-462-5792  | HOURS M-F: 8:00—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://okeechobee.floridahealth.gov/">http://okeechobee.floridahealth.gov/</a> |                         |    |     |       |  |
| SERVICES | Hepatitis B and C screening, Hepatitis A and B vaccinations                             |                         |    |     |       |  |

|       |  |  |  |  |  |  |
|-------|--|--|--|--|--|--|
| NAME  | DOH Regional Volunteer Coordinator—Steve Krajewski |  |  |  |  |  |
| PHONE | 772-785-6183                                       |  |  |  |  |  |

### Medicaid, Social Security, and Related Services

|          |  |       |    |     |       |  |
|----------|--|-------|----|-----|-------|--|
| NAME     | Medicaid Eligibility   |       |    |     |       |  |
| ADDRESS  | 108 NE 7 <sup>th</sup> St.   |       |    |     |       |  |
| CITY     | Okeechobee   | STATE | FL | ZIP | 34972 |  |
| PHONE    | Medicaid Helpline: 1-866-762-2237  |       |    |     |       |  |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |       |    |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Social Security Office                                  |   |    |     |       |  |
| ADDRESS  | 6810 S. US Hwy 1  |   |    |     |       |  |
| CITY     | Port St. Lucie  | STATE   | FL | ZIP | 34952 |  |
| PHONE    | 1-866-366-1627  | HOURS M/T/R/F: 9:00 AM—4:00 PM<br>W: 9:00 AM—12:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |  |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Veterans Services   |                            |    |     |       |  |
| ADDRESS  | 304 NW 2 <sup>nd</sup> St., Room 106  |                            |    |     |       |  |
| CITY     | Okeechobee  | STATE                      | FL | ZIP | 34972 |  |
| PHONE    | 863-763-6441, option 5  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://www.co.okeechobee.fl.us/departments/veterans-services">http://www.co.okeechobee.fl.us/departments/veterans-services</a> |                            |    |     |       |  |
| SERVICES | Benefits and medical care assistance  |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Okeechobee Community Based Outpatient Clinic  |                            |    |     |       |  |
| ADDRESS  | 1201 N. Parrot Ave.   |                            |    |     |       |  |
| CITY     | Okeechobee  | STATE                      | FL | ZIP | 34972 |  |
| PHONE    | 863-824-3232  | HOURS M-F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Okeechobee_CBOC.asp">https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Okeechobee_CBOC.asp</a> |                            |    |     |       |  |
| SERVICES | Healthcare services for veterans  |                            |    |     |       |  |

|          |   |       |    |     |       |  |
|----------|---|-------|----|-----|-------|--|
| NAME     | Office of Insurance Regulation  |       |    |     |       |  |
| ADDRESS  | 400 N. Congress Ave., Suite 210   |       |    |     |       |  |
| CITY     | West Palm Beach   | STATE | FL | ZIP | 33401 |  |
| PHONE    | 561-681-6392  |       |    |     |       |  |
| WEBSITE  | <a href="https://www.floir.com/choices.aspx">https://www.floir.com/choices.aspx</a> |       |    |     |       |  |
| SERVICES | Find rate information for Medicare supplement and small group health                |       |    |     |       |  |



### Community Healthcare Clinics or Health Centers

|          |   |  |  |       |    |           |
|----------|---|--|--|-------|----|-----------|
| NAME     | Lakeshore Medical Center  |  |  |       |    |           |
| ADDRESS  | 1100 N. Parrott Ave.  |  |  |       |    |           |
| CITY     | Okeechobee  |  |  | STATE | FL | ZIP 34972 |
| PHONE    | 863-763-7481  | HOURS T-R: 8 AM—5 PM, & M: 8AM—6 PM,<br>F: 8:00 AM—4:00 PM |  |       |    |           |
| WEBSITE  | <a href="https://www.fhcinc.org/centers/centers1-2/lakeshore-medical-center">https://www.fhcinc.org/centers/centers1-2/lakeshore-medical-center</a>                         |  |  |       |    |           |
| SERVICES | Hepatitis A and B vaccinations, Hepatitis B and C testing<br>Accepts Medicare (no HMO plans), Medicaid, and private insurance; sliding fee schedule available for uninsured |  |  |       |    |           |

### Support Groups

|         |   |       |                        |     |       |  |
|---------|---|-------|------------------------|-----|-------|--|
| NAME    | Hepatitis & Liver Disease Awareness Group                     |       |                        |     |       |  |
| ADDRESS | County Home, 1200 45 <sup>th</sup> St.                        |       |                        |     |       |  |
| CITY    | West Palm Beach   | STATE | FL                     | ZIP | 33407 |  |
| CONTACT | <u>reddwolf@mindspring.com</u><br>732-690-4744                |       | HOURS    Meets Tuesday |     |       |  |
| WEBSITE | http://www.hepatitiscentral.com/hcv/support/fl/westpalmbeach/ |       |                        |     |       |  |

### Continuum of Care/ Homeless Services

|          |  |       |                      |     |            |  |
|----------|--|-------|----------------------|-----|------------|--|
| NAME     | Heartland Coalition for the Homeless (ask for Brenda Gray)   |       |                      |     |            |  |
| ADDRESS  | P.O. Box 1023  |       |                      |     |            |  |
| CITY     | Avon Park  | STATE | FL                   | ZIP | 33826-1023 |  |
| PHONE    | 863-453-8901 or 863-657-2637   |       | HOURS Call for hours |     |            |  |
| WEBSITE  | www.heartlandhomeless.com  |       |                      |     |            |  |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                      |     |            |  |

## ORANGE COUNTY

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact—Luz Higuera                |                            |    |     |       |  |
| ADDRESS  | 832 W. Central Blvd.  |                            |    |     |       |  |
| CITY     | Orlando   | STATE                      | FL | ZIP | 32805 |  |
| PHONE    | 407-723-5054  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | http://orange.floridahealth.gov/                            |                            |    |     |       |  |
| SERVICES | Hepatitis B and C screening, Hepatitis A and B vaccinations |                            |    |     |       |  |

|       |   |  |  |  |  |  |
|-------|---|--|--|--|--|--|
| NAME  | DOH Regional Volunteer Coordinator—LaRaine Berkeley |  |  |  |  |  |
| PHONE | 407-858-1400 ext. 1161                              |  |  |  |  |  |

### Medicaid, Social Security, and Related Services

|          |   |       |    |     |       |  |
|----------|---|-------|----|-----|-------|--|
| NAME     | Medicaid Eligibility  |       |    |     |       |  |
| ADDRESS  | 6218 W. Colonial Dr. Suite 240  |       |    |     |       |  |
| CITY     | Orlando   | STATE | FL | ZIP | 32808 |  |
| PHONE    | Medicaid Helpline: 1-866-762-2237   |       |    |     |       |  |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>For additional local assistance, search ‘Orange County’ here:<br><a href="https://access-web.dcf.state.fl.us/CPSLookup/search.aspx">https://access-web.dcf.state.fl.us/CPSLookup/search.aspx</a> |       |    |     |       |  |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Social Security Office                                  |   |    |     |       |
| ADDRESS  | 5520 Gatlin Ave.  |   |    |     |       |
| CITY     | Orlando   | STATE                                   | FL | ZIP | 32812 |
| PHONE    | 1-866-964-6146  | HOURS M/T/R/F: 9AM—4 PM & W: 9 AM—12 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |

|          |                                      |                            |    |     |       |  |
|----------|--------------------------------------|----------------------------|----|-----|-------|--|
| NAME     | Veterans Services                    |                            |    |     |       |  |
| ADDRESS  | 2100 E. Michigan St.                 |                            |    |     |       |  |
| CITY     | Orlando                              | STATE                      | FL | ZIP | 32806 |  |
| PHONE    | 407-836-8990                         | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | www.orangecountyfl.net               |                            |    |     |       |  |
| SERVICES | Benefits and medical care assistance |                            |    |     |       |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Orlando Vet Center  |  |    |     |       |
| ADDRESS  | 5575 S. Semoran Blvd., Suite 30   |  |    |     |       |
| CITY     | Orlando   | STATE  | FL | ZIP | 32822 |
| PHONE    | 407-857-2800, 877-927-8387  | HOURS M-F 8:00 AM—6:00 PM<br>(5-5:30 PM group meetings are held and counselors are not available during that time) |    |     |       |
| WEBSITE  | <a href="https://www.va.gov/directory/guide/facility.asp?ID=553&amp;dnum=All">https://www.va.gov/directory/guide/facility.asp?ID=553&amp;dnum=All</a> |  |    |     |       |
| SERVICES | Comprehensive care for veterans   |  |    |     |       |

|          |   |                             |    |     |       |  |
|----------|---|-----------------------------|----|-----|-------|--|
| NAME     | Lake Baldwin Outpatient Clinic  |                             |    |     |       |  |
| ADDRESS  | 5201 Raymond St.  |                             |    |     |       |  |
| CITY     | Orlando   | STATE                       | FL | ZIP | 32803 |  |
| PHONE    | 407-646-5500  | HOURS M- F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.orlando.va.gov/locations/lakebaldwin.asp">https://www.orlando.va.gov/locations/lakebaldwin.asp</a> |                             |    |     |       |  |
| SERVICES | Comprehensive care for veterans   |                             |    |     |       |  |

|          |   |                     |    |     |       |  |
|----------|---|---------------------|----|-----|-------|--|
| NAME     | Orlando VA Medical Center   |                     |    |     |       |  |
| ADDRESS  | 13800 Veterans Way  |                     |    |     |       |  |
| CITY     | Orlando   | STATE               | FL | ZIP | 32827 |  |
| PHONE    | 407-631-1000, 800-922-7521  | HOURS Open 24 Hours |    |     |       |  |
| WEBSITE  | <a href="https://www.orlando.va.gov/">https://www.orlando.va.gov/</a> |                     |    |     |       |  |
| SERVICES | Comprehensive care for veterans                                       |                     |    |     |       |  |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Office of Insurance Regulation  |       |    |     |       |
| ADDRESS  | 400 W. Robinson St., Suite N-401  |       |    |     |       |
| CITY     | Orlando   | STATE | FL | ZIP | 32801 |
| PHONE    | 407-245-0870  |       |    |     |       |
| WEBSITE  | <a href="https://www.flor.com/choices.aspx">https://www.flor.com/choices.aspx</a> |       |    |     |       |
| SERVICES | Find rate information for Medicare supplement and small group health              |       |    |     |       |

### Community Health Clinics

|         |  |  |    |     |       |
|---------|--|--|----|-----|-------|
| NAME    | Shepherd’s Hope Health Center—At Samaritan Resource Center |  |    |     |       |
| ADDRESS | 9833 E. Colonial Dr.                                       |  |    |     |       |
| CITY    | Orlando  | STATE  | FL | ZIP | 32817 |
| PHONE   | 407-876-6699   | HOURS M-R: 6:00 –9:00 PM<br>Registration begins at 4:30 pm; no walk-ins on 3 <sup>rd</sup> Thursday of the month |    |     |       |
| WEBSITE | http://shepherdshope.org                                   |  |    |     |       |

|         |  |  |    |     |       |
|---------|--|--|----|-----|-------|
| NAME    | Shepherd’s Hope Health Center—Downtown |  |    |     |       |
| ADDRESS | 101 S. Westmoreland Dr.                |  |    |     |       |
| CITY    | Orlando                                | STATE  | FL | ZIP | 32805 |
| PHONE   | 407-876-6699                           | HOURS M-W: 6:00 –9:00 PM. Registration begins at 5:00 pm |    |     |       |
| WEBSITE | http://shepherdshope.org               |  |    |     |       |

|         |                                     |  |    |     |       |
|---------|-------------------------------------|--|----|-----|-------|
| NAME    | Shepherd’s Hope Health Center—Ocoee |  |    |     |       |
| ADDRESS | 10101 W. Colonial Dr.               |  |    |     |       |
| CITY    | Ocoee                               | STATE  | FL | ZIP | 34761 |
| PHONE   | 407-876-6699                        | HOURS M-W: 6:00 –9:00 PM    Registration begins at 5:00 pm |    |     |       |
| WEBSITE | http://shepherdshope.org            |  |    |     |       |

|         |                                       |  |  |       |    |     |       |
|---------|---------------------------------------|--|--|-------|----|-----|-------|
| NAME    | Tazkiah Shepherd’s Hope Health Center |  |  |       |    |     |       |
| ADDRESS | 120 Floral St.                        |  |  |       |    |     |       |
| CITY    | Ocoee                                 |  |  | STATE | FL | ZIP | 34761 |
| PHONE   | 407-876-6699                          | HOURS M-R: 9:00 AM—12:00 PM Registration begins at 8:00 am |  |       |    |     |       |
| WEBSITE | http://shepherdshope.org              |  |  |       |    |     |       |

|         |                                    |  |   |    |     |       |
|---------|------------------------------------|--|---|----|-----|-------|
| NAME    | True Health –Alafaya               |  |   |    |     |       |
| ADDRESS | 11881-A E. Colonial Dr.            |  |   |    |     |       |
| CITY    | Orlando                            |  | STATE   | FL | ZIP | 32826 |
| PHONE   | 407-322-8645                       |  | HOURS M/W: 8:00 AM—7:00 PM<br>T/R: 8:30 AM—5:30 PM, F, 8:00 AM—12:00 PM |    |     |       |
| WEBSITE | http://mytruehealth.org/locations/ |  |   |    |     |       |

|         |                                   |   |    |     |       |  |
|---------|-----------------------------------|---|----|-----|-------|--|
| NAME    | True Health –Hoffner              |   |    |     |       |  |
| ADDRESS | 5449 S. Semoran Blvd., Suite 14   |   |    |     |       |  |
| CITY    | Orlando                           | STATE   | FL | ZIP | 32822 |  |
| PHONE   | 407-322-8645                      | HOURS M/W: 8:00 AM—7:00 PM<br>T/R: 8:30 AM—5:30 PM, F, 8:00 AM—12:00 PM |    |     |       |  |
| WEBSITE | http://mytruehealth.org/locations |   |    |     |       |  |

|         |   |   |    |     |       |
|---------|---|---|----|-----|-------|
| NAME    | True Health –Lake Underhill   |   |    |     |       |
| ADDRESS | 5370 Lake Underhill Rd.   |   |    |     |       |
| CITY    | Orlando   | STATE   | FL | ZIP | 32807 |
| PHONE   | 407-322-8645  | HOURS M/W: 8:00 AM—7:00 PM<br>T/R, 8:30 AM—5:30 PM, F, 8:00 AM—12:00 PM |    |     |       |
| WEBSITE | <a href="http://mytruehealth.org/locations/">http://mytruehealth.org/locations/</a> |   |    |     |       |

|         |  |   |    |     |       |
|---------|--|---|----|-----|-------|
| NAME    | True Health –Southside and Southside Express |   |    |     |       |
| ADDRESS | 6101 Lake Ellenor Dr., Suite 105             |   |    |     |       |
| CITY    | Orlando                                      | STATE   | FL | ZIP | 32809 |
| PHONE   | 407-322-8645                                 | HOURS M/W: 8:00 AM—7:00 PM<br>T/R: 8:30 AM—5:30 PM, F, 8:00 AM—12:00 PM |    |     |       |
| WEBSITE | http://mytruehealth.org/locations/           |   |    |     |       |

|         |   |   |    |     |       |
|---------|---|---|----|-----|-------|
| NAME    | Pine Hills Community Health Center  |   |    |     |       |
| ADDRESS | 840 Mercy Dr.   |   |    |     |       |
| CITY    | Orlando   | STATE   | FL | ZIP | 32808 |
| PHONE   | 407-905-8827  | HOURS M: 8 AM—6 PM, & T: 8 AM—7 PM,<br>F: 8 AM—1 PM, & W/R: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE | <a href="https://www.chcfl.org/locations/pine-hills/">https://www.chcfl.org/locations/pine-hills/</a> |   |    |     |       |

|         |   |   |    |     |       |
|---------|---|---|----|-----|-------|
| NAME    | Apopka Community Health Center  |   |    |     |       |
| ADDRESS | 225 E. 7 <sup>th</sup> St.  |   |    |     |       |
| CITY    | Apopka  | STATE   | FL | ZIP | 32703 |
| PHONE   | 407-905-8827  | HOURS M: 8 AM—6 PM, & T: 8 AM—7 PM<br>W/R: 8:00 AM—5:00 PM, & F/Sat., 8:00 AM—1:00 PM |    |     |       |
| WEBSITE | <a href="https://www.chcfl.org/locations/apopka/">https://www.chcfl.org/locations/apopka/</a> |   |    |     |       |

|         |   |   |    |     |       |
|---------|---|---|----|-----|-------|
| NAME    | Bithlo Community Health Center  |   |    |     |       |
| ADDRESS | 19108 E. Colonial Dr.   |   |    |     |       |
| CITY    | Orlando   | STATE   | FL | ZIP | 32820 |
| PHONE   | 407-905-8827  | HOURS M: 8 AM—6 PM, & T: 8 AM—7 PM, &<br>F: 8:00 AM—1:00 PM, & W/R: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE | <a href="https://www.chcfl.org/locations/bithlo/">https://www.chcfl.org/locations/bithlo/</a> |   |    |     |       |

|         |   |   |    |     |       |
|---------|---|---|----|-----|-------|
| NAME    | Forest City Community Health Center   |   |    |     |       |
| ADDRESS | 7900 Forest City Rd.  |   |    |     |       |
| CITY    | Orlando   | STATE   | FL | ZIP | 32810 |
| PHONE   | 407-905-8827  | HOURS M: 8 AM—6 PM, & T: 8 AM—7 PM, &<br>F: 8:00 AM—1:00 PM, & W/R: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE | <a href="https://www.chcfl.org/locations/forest-city/">https://www.chcfl.org/locations/forest-city/</a> |   |    |     |       |

|         |   |  |    |     |       |
|---------|---|--|----|-----|-------|
| NAME    | Winter Garden Community Health Center   |  |    |     |       |
| ADDRESS | 13275 W. Colonial Dr.   |  |    |     |       |
| CITY    | Winter Garden   | STATE  | FL | ZIP | 34787 |
| PHONE   | 407-905-8827  | HOURS M: 8 AM—6 PM, & T: 8 AM—7 PM, &<br>F: 8 AM-1 PM, & W/R, 8 AM-5 PM, & F/Sat., 8 AM-1 PM |    |     |       |
| WEBSITE | <a href="https://www.chcfl.org/locations/winter-garden/">https://www.chcfl.org/locations/winter-garden/</a> |  |    |     |       |

### Substance Abuse Treatment Centers

|         |   |       |  |     |       |  |
|---------|---|-------|--|-----|-------|--|
| NAME    | Aspire Health—Orange Outpatient Center  |       |  |     |       |  |
| ADDRESS | 1800 Mercy Dr.  |       |  |     |       |  |
| CITY    | Orlando   | STATE | FL   | ZIP | 32808 |  |
| PHONE   | 407-875-3700 ext. 6240  |       | HOURS M-F: 7:15 AM—5:00 PM<br>Sat: 9:00 AM—1:00 PM |     |       |  |
| WEBSITE | <a href="https://aspirehealthpartners.com/programs-and-services/">https://aspirehealthpartners.com/programs-and-services/</a> |       |  |     |       |  |



|         |   |       |                            |     |       |  |
|---------|---|-------|----------------------------|-----|-------|--|
| NAME    | Aspire Health—Medication Assisted Treatment Program   |       |                            |     |       |  |
| ADDRESS | 100 W. Columbia St.   |       |                            |     |       |  |
| CITY    | Orlando   | STATE | FL                         | ZIP | 32806 |  |
| PHONE   | 407407-245-0014 ext. 221  |       | HOURS M-F: 9:00 AM—5:00 PM |     |       |  |
| WEBSITE | <a href="https://aspirehealthpartners.com/programs-and-services/">https://aspirehealthpartners.com/programs-and-services/</a> |       |                            |     |       |  |

|         |   |       |  |     |       |  |
|---------|---|-------|--|-----|-------|--|
| NAME    | Central Florida Treatment Centers—Orlando Clinic  |       |  |     |       |  |
| ADDRESS | 1800 W. Colonial Dr.  |       |  |     |       |  |
| CITY    | Orlando   | STATE | FL   | ZIP | 32804 |  |
| PHONE   | 407-843-0041  |       | HOURS M-F: 6:00 AM—11:00 AM<br>Sat: 7-9:00 AM, Sun 7-8:00 AM |     |       |  |
| WEBSITE | <a href="http://www.methadoneworks.net/orlando-clinic">http://www.methadoneworks.net/orlando-clinic</a> |       |  |     |       |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Orlando Methadone Treatment Center  |  |    |     |       |
| ADDRESS  | 1002 N. Semoran Blvd.   |  |    |     |       |
| CITY     | Orlando   | STATE  | FL | ZIP | 32807 |
| PHONE    | 877-284-7074  | HOURS M-F: 5:00 AM—7:00 PM<br>Sat/Sun: 6:00 –9:00 AM |    |     |       |
| WEBSITE  | <a href="https://newseason.com/clinics/orlando-methadone-treatment-center/">https://newseason.com/clinics/orlando-methadone-treatment-center/</a> |  |    |     |       |
| SERVICES | Medication assisted therapy (methadone, buprenorphine, Suboxone), counseling  |  |    |     |       |

### Support Groups

|         |                                  |       |                |     |       |
|---------|----------------------------------|-------|----------------|-----|-------|
| NAME    | Orlando Hepatitis Support System |       |                |     |       |
| ADDRESS | 5624 Deepdale Dr.                |       |                |     |       |
| CITY    | Orlando                          | STATE | FL             | ZIP | 32821 |
| CONTACT | 407-238-2368                     | HOURS | Call for hours |     |       |
| EMAIL   | peaches54@cfl.rr.com             |       |                |     |       |

### Continuum of Care/ Homeless Services

|          |  |       |                      |     |       |
|----------|--|-------|----------------------|-----|-------|
| NAME     | Homeless Services Network of Central Florida (ask for Martha Are)  |       |                      |     |       |
| ADDRESS  | 4065 L.B. McLeod Road Unit 4065-D  |       |                      |     |       |
| CITY     | Orlando  | STATE | FL                   | ZIP | 32811 |
| PHONE    | 407-893-0133   |       | HOURS Call for hours |     |       |
| WEBSITE  | www.hsncfl.org   |       |                      |     |       |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                      |     |       |

## OSCEOLA COUNTY

|          |   |                            |    |     |  |
|----------|---|----------------------------|----|-----|--|
| NAME     | County Health Department—Nathaly Acosta   |                            |    |     |  |
| ADDRESS  | 16401 SW Farm Rd.   |                            |    |     |  |
| CITY     | Kissimmee   | STATE                      | FL | ZIP |  |
| PHONE    | 407-343-2155  | HOURS M-F: 8:00 AM—5:00 PM |    |     |  |
| WEBSITE  | <a href="http://kissimmee.floridahealth.gov/">http://kissimmee.floridahealth.gov/</a> |                            |    |     |  |
| SERVICES | Hepatitis B and C screening, Hepatitis A and B vaccinations                           |                            |    |     |  |

|       |   |
|-------|---|
| NAME  | DOH Regional Volunteer Coordinator—LaRaine Berkeley |
| PHONE | 407-858-1400 ext. 1161                              |

### Medicaid, Social Security, and Related Services

|          |  |       |    |     |       |
|----------|--|-------|----|-----|-------|
| NAME     | Medicaid Eligibility   |       |    |     |       |
| ADDRESS  | La Mirada Plaza, 3501 W. Vine St., Suite 120   |       |    |     |       |
| CITY     | Kissimmee  | STATE | FL | ZIP | 34741 |
| PHONE    | Medicaid Helpline: 1-866-762-2237  |       |    |     |       |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>For additional local assistance, search ‘Osceola County’ here:<br><a href="https://access-web.dcf.state.fl.us/CPSLookup/search.aspx">https://access-web.dcf.state.fl.us/CPSLookup/search.aspx</a> |       |    |     |       |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Social Security   |   |    |     |       |
| ADDRESS  | 1201 E. Oak St.   |   |    |     |       |
| CITY     | Kissimmee   | STATE   | FL | ZIP | 34744 |
| PHONE    | 1-800-772-1213  | HOURS M/T/R/F: 9:00 AM—4:00 PM, & W: 9 AM—12 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Veterans Services   |  |    |     |       |
| ADDRESS  | 330 N. Beaumont Ave.  |  |    |     |       |
| CITY     | Kissimmee   | STATE  | FL | ZIP | 34741 |
| PHONE    | 407-742-8455  | HOURS M/R/F: 8:00 AM—5:00 PM (walk-ins)<br>W: 8:00—1:30 AM (walk-ins)<br>T: 8:00 AM—5:00 PM (appt. only) |    |     |       |
| WEB      | <a href="http://www.osceola.org/agencies-departments/human-services/veterans-services/">http://www.osceola.org/agencies-departments/human-services/veterans-services/</a> |  |    |     |       |
| SERVICES | Benefits and medical care assistance  |  |    |     |       |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Kissimmee Community Based Outpatient Clinic   |                            |    |     |       |  |
| ADDRESS  | 2285 N. Central Ave.  |                            |    |     |       |  |
| CITY     | Kissimmee   | STATE                      | FL | ZIP | 34741 |  |
| PHONE    | 407-518-5004  | HOURS M-F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.orlando.va.gov/locations/kissimmee.asp">https://www.orlando.va.gov/locations/kissimmee.asp</a> |                            |    |     |       |  |
| SERVICES | Comprehensive care for veterans   |                            |    |     |       |  |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Office of Insurance Regulation  |       |    |     |       |
| ADDRESS  | 400 W. Robinson St., Suite N-401  |       |    |     |       |
| CITY     | Orlando   | STATE | FL | ZIP | 32801 |
| PHONE    | 407-245-0870  |       |    |     |       |
| WEBSITE  | <a href="https://www.floir.com/choices.aspx">https://www.floir.com/choices.aspx</a> |       |    |     |       |
| SERVICES | Find rate information for Medicare supplement and small group health                |       |    |     |       |

## Substance Abuse Treatment Centers

|         |   |       |    |     |       |
|---------|---|-------|----|-----|-------|
| NAME    | Aspire Health—Osceola Outpatient Center   |       |    |     |       |
| ADDRESS | 2540 Michigan Ave.  |       |    |     |       |
| CITY    | Kissimmee   | STATE | FL | ZIP | 34744 |
| PHONE   | 407-846-5285 ext. 241   |       |    |     |       |
| WEBSITE | <a href="https://aspirehealthpartners.com/programs-and-services/">https://aspirehealthpartners.com/programs-and-services/</a> |       |    |     |       |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Mid Florida Metro Treatment Center  |  |    |     |       |
| ADDRESS  | 306 E. Oak St.  |  |    |     |       |
| CITY     | Kissimmee   | STATE  | FL | ZIP | 34744 |
| PHONE    | 877-284-7074  | HOURS M-F: 5:00 AM—1:30 PM<br>Sat/Sun: 6:00 –9:00 AM |    |     |       |
| WEBSITE  | <a href="https://newseason.com/clinics/mid-florida-metro-treatment-center/">https://newseason.com/clinics/mid-florida-metro-treatment-center/</a> |  |    |     |       |
| SERVICES | Medication assisted therapy (methadone, buprenorphine, Suboxone), counseling  |  |    |     |       |

## Continuum of Care/ Homeless Services

|          |  |       |                      |     |       |  |
|----------|--|-------|----------------------|-----|-------|--|
| NAME     | Homeless Services Network of Central Florida (ask for Martha Are)  |       |                      |     |       |  |
| ADDRESS  | 4065 L.B. McLeod Road Unit 4065-D  |       |                      |     |       |  |
| CITY     | Orlando  | STATE | FL                   | ZIP | 32811 |  |
| PHONE    | 407-893-0133   |       | HOURS Call for hours |     |       |  |
| WEBSITE  | www.hsncfl.org   |       |                      |     |       |  |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                      |     |       |  |

## PALM BEACH COUNTY

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact—Bari Chowdhury                                       |                            |    |     |       |  |
| ADDRESS  | 851 Ave. P  |                            |    |     |       |  |
| CITY     | Riviera Beach   | STATE                      | FL | ZIP | 33404 |  |
| PHONE    | 561-803-7360, 561-248-2621  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://palmbeach.floridahealth.gov/">http://palmbeach.floridahealth.gov/</a> |                            |    |     |       |  |
| SERVICES | Hepatitis B and C testing   |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department –Delray Beach Health Center                                  |                            |    |     |       |  |
| ADDRESS  | 225 S. Congress Ave.  |                            |    |     |       |  |
| CITY     | Delray Beach  | STATE                      | FL | ZIP | 33445 |  |
| PHONE    | 561-274-3100  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://palmbeach.floridahealth.gov/">http://palmbeach.floridahealth.gov/</a> |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccination   |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department –West Palm Beach Health Center                               |                            |    |     |       |  |
| ADDRESS  | 1150 45 <sup>th</sup> St.   |                            |    |     |       |  |
| CITY     | West Palm Beach   | STATE                      | FL | ZIP | 33407 |  |
| PHONE    |   | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://palmbeach.floridahealth.gov/">http://palmbeach.floridahealth.gov/</a> |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccination   |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact –C.L. Brumback Health Center |                            |    |     |       |  |
| ADDRESS  | 38754 SR 80   |                            |    |     |       |  |
| CITY     | Belle Glade   | STATE                      | FL | ZIP | 33430 |  |
| PHONE    | 561-983-9220  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | http://palmbeach.floridahealth.gov/                           |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccination                                 |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department –Lantana Health Center                                       |                            |    |     |       |  |
| ADDRESS  | 1250 Southwinds Dr.   |                            |    |     |       |  |
| CITY     | Lantana   | STATE                      | FL | ZIP | 33462 |  |
| PHONE    | 561-547-6800  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://palmbeach.floridahealth.gov/">http://palmbeach.floridahealth.gov/</a> |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccination   |                            |    |     |       |  |

|       |  |  |  |  |  |
|-------|--|--|--|--|--|
| NAME  | DOH Regional Volunteer Coordinator—Catherine Jackson |  |  |  |  |
| PHONE | 561-671-4032   |  |  |  |  |

### Medicaid, Social Security, and Related Services

|          |  |       |    |     |       |
|----------|--|-------|----|-----|-------|
| NAME     | Medicaid Eligibility   |       |    |     |       |
| ADDRESS  | 2990 N. Main St.   |       |    |     |       |
| CITY     | Belle Glade  | STATE | FL | ZIP | 33430 |
| PHONE    | Medicaid Helpline: 1-866-762-2237  |       |    |     |       |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |       |    |     |       |

|          |  |       |    |     |       |
|----------|--|-------|----|-----|-------|
| NAME     | Medicaid Eligibility   |       |    |     |       |
| ADDRESS  | 2051 Martin Luther King, Jr. Blvd., Suite 200  |       |    |     |       |
| CITY     | Riviera Beach  | STATE | FL | ZIP | 33404 |
| PHONE    | Medicaid Helpline: 1-866-762-2237  |       |    |     |       |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |       |    |     |       |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Social Security   |   |    |     |       |
| ADDRESS  | 801 Clematis St., Suite 2                               |   |    |     |       |
| CITY     | West Palm Beach   | STATE   | FL | ZIP | 33401 |
| PHONE    | 1-800-772-1213  | HOURS M/T/R/F: 9:00 AM—4:00 PM, & W: 9:00 AM—12:00 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Social Security   |   |    |     |       |
| ADDRESS  | 925 SE 1 <sup>st</sup> St.                              |   |    |     |       |
| CITY     | Belle Glade   | STATE   | FL | ZIP | 33430 |
| PHONE    | 1-800-772-1213  | HOURS M/T/R/F: 9:00 AM—4:00 PM, & W: 9:00 AM—12:00 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Social Security   |   |    |     |       |
| ADDRESS  | 621 NW 43 <sup>rd</sup> St., Suite 400                  |   |    |     |       |
| CITY     | Boca Raton  | STATE   | FL | ZIP | 33487 |
| PHONE    | 1-800-772-1213  | HOURS M/T/R/F: 9:00 AM—4:00 PM<br>W: 9:00 AM—12:00 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |



|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Veterans Services   |  |    |     |       |
| ADDRESS  | 810 Datura St., Suite 350   |  |    |     |       |
| CITY     | West Palm Beach   | STATE  | FL | ZIP | 33401 |
| PHONE    | 561-355-4761  | HOURS M/T/W/F: 8:00 AM—5:00 PM<br>R: 8:00—11:30 AM |    |     |       |
| WEBSITE  | <a href="http://discover.pbcgov.org/communityservices/humanservices/Veterans/Locations.aspx">http://discover.pbcgov.org/communityservices/humanservices/Veterans/Locations.aspx</a> |  |    |     |       |
| SERVICES | Benefits and medical care assistance; appointments preferred, walk-ins welcome  |  |    |     |       |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Veterans Services -South County Office  |  |    |     |       |
| ADDRESS  | 225 S. Congress Ave., 2 <sup>nd</sup> Floor   |  |    |     |       |
| CITY     | Delray Beach  | STATE  | FL | ZIP | 33444 |
| PHONE    | 561-274-1138  | HOURS M/T/W/F: 8:00 AM—5:00 PM<br>R: 8:00—11:30 AM |    |     |       |
| WEBSITE  | <a href="http://discover.pbcgov.org/communityservices/humanservices/Veterans/Locations.aspx">http://discover.pbcgov.org/communityservices/humanservices/Veterans/Locations.aspx</a> |  |    |     |       |
| SERVICES | Benefits and medical care assistance; by appointment only   |  |    |     |       |

|          |   |                              |    |     |       |  |
|----------|---|------------------------------|----|-----|-------|--|
| NAME     | West Palm Beach VA Medical Center   |                              |    |     |       |  |
| ADDRESS  | 7305 N. Military Trail  |                              |    |     |       |  |
| CITY     | West Palm Beach   | STATE                        | FL | ZIP | 33410 |  |
| PHONE    | 561-422-8262, 800-972-8262  | HOURS Daily: 9:00 AM—9:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.westpalmbeach.va.gov/">https://www.westpalmbeach.va.gov/</a> |                              |    |     |       |  |
| SERVICES | Comprehensive healthcare services for veterans                                    |                              |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Boca Raton Community-Based VA Outpatient Clinic   |                            |    |     |       |  |
| ADDRESS  | 901 Meadows Rd.   |                            |    |     |       |  |
| CITY     | Boca Raton  | STATE                      | FL | ZIP | 33433 |  |
| PHONE    | 561-416-8995  | HOURS M-F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Boca_Raton_CBOC.asp">https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Boca_Raton_CBOC.asp</a> |                            |    |     |       |  |
| SERVICES | Comprehensive healthcare services for veterans  |                            |    |     |       |  |

|          |   |                                   |    |     |       |
|----------|---|-----------------------------------|----|-----|-------|
| NAME     | Palm Beach Vet Center   |                                   |    |     |       |
| ADDRESS  | 4996 10 <sup>th</sup> Ave. N, Suite 6   |                                   |    |     |       |
| CITY     | Greenacres  | STATE                             | FL | ZIP | 33463 |
| PHONE    | 561-422-1201  | HOURS Call 561-422-1220 for hours |    |     |       |
| WEBSITE  | <a href="https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Palm_Beach_Vet_Center.asp">https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Palm_Beach_Vet_Center.asp</a> |                                   |    |     |       |
| SERVICES | Comprehensive healthcare services for veterans  |                                   |    |     |       |

|          |   |                      |    |     |       |
|----------|---|----------------------|----|-----|-------|
| NAME     | Delray Beach Community-Based VA Outpatient Clinic   |                      |    |     |       |
| ADDRESS  | 4800 Linton Blvd., Bldg. E, Suite 300   |                      |    |     |       |
| CITY     | Delray Beach  | STATE                | FL | ZIP | 33445 |
| PHONE    | 561-495-1973  | HOURS Call for hours |    |     |       |
| WEBSITE  | <a href="https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Delray_Beach_CBOC.asp">https://www.westpalmbeach.va.gov/WESTPALMBEACH/locations/Delray_Beach_CBOC.asp</a> |                      |    |     |       |
| SERVICES | Comprehensive healthcare services for veterans  |                      |    |     |       |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Jupiter Vet Center  |  |    |     |       |
| ADDRESS  | 6650 W. Indiantown Rd.  |  |    |     |       |
| CITY     | Jupiter   | STATE  | FL | ZIP | 33458 |
| PHONE    | 561-422-1220,<br>877-927-8387   | HOURS M: 7:30 AM—4:30 PM, & T: 7 AM—4:30 PM, W, 7:00 AM—8:00 PM, & R/F: 8:00 AM—4:30 PM<br>Sun: 8:00 AM—4:30 PM (1 <sup>st</sup> Sun./month) |    |     |       |
| WEBSITE  | <a href="https://www.va.gov/directory/guide/facility.asp?ID=5961&amp;dnum=All">https://www.va.gov/directory/guide/facility.asp?ID=5961&amp;dnum=All</a> |  |    |     |       |
| SERVICES | Benefits and medical care assistance  |  |    |     |       |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Office of Insurance Regulation  |       |    |     |       |
| ADDRESS  | 400 N. Congress Ave. Suite 210  |       |    |     |       |
| CITY     | West Palm Beach   | STATE | FL | ZIP | 33401 |
| PHONE    | 561-681-6392  |       |    |     |       |
| WEBSITE  | <a href="https://www.floir.com/choices.aspx">https://www.floir.com/choices.aspx</a> |       |    |     |       |
| SERVICES | Find rate information for Medicare supplement and small group health                |       |    |     |       |

### Community Healthcare Clinics

|         |   |   |    |     |       |  |
|---------|---|---|----|-----|-------|--|
| NAME    | C.L. Brumback Community Health Center—Belle Glade   |   |    |     |       |  |
| ADDRESS | 941 SE 1 <sup>st</sup> St.  |   |    |     |       |  |
| CITY    | Belle Glade   | STATE   | FL | ZIP | 33430 |  |
| PHONE   | 561-996-6156  | HOURS M-F: 8:00 AM—5:00 PM<br>Sat.: 9:00 AM—1:00 PM |    |     |       |  |
| WEBSITE | <a href="http://clbrumbackprimarycareclinics.org/locations/">http://clbrumbackprimarycareclinics.org/locations/</a> |   |    |     |       |  |

|         |   |  |   |    |     |       |
|---------|---|--|---|----|-----|-------|
| NAME    | C.L. Brumback Community Health Center—Delray Beach  |  |   |    |     |       |
| ADDRESS | 225 S. Congress Ave.  |  |   |    |     |       |
| CITY    | Delray Beach  |  | STATE   | FL | ZIP | 33445 |
| PHONE   | 561-642-1000  |  | HOURS M/T/R/F: 8:00 AM—5:00 PM<br>W: 8:00 AM—7:00 PM, Sat., 9:00 AM—1:00 PM |    |     |       |
| WEBSITE | <a href="http://clbrumbackprimarycareclinics.org/locations/">http://clbrumbackprimarycareclinics.org/locations/</a> |  |   |    |     |       |

|         |   |  |   |    |     |       |
|---------|---|--|---|----|-----|-------|
| NAME    | C.L. Brumback Community Health Center—Lake Worth  |  |   |    |     |       |
| ADDRESS | 7408 Lake Worth Rd., Suite 700  |  |   |    |     |       |
| CITY    | Lake Worth  |  | STATE   | FL | ZIP | 33467 |
| PHONE   | 561-642-1000  |  | HOURS M/T/W/F: 8:00 AM—5:00 PM<br>R: 8:00 AM—7:00 PM, Sat., 9:00 AM—1:00 PM |    |     |       |
| WEBSITE | <a href="http://clbrumbackprimarycareclinics.org/locations/">http://clbrumbackprimarycareclinics.org/locations/</a> |  |   |    |     |       |

|         |   |  |                            |    |     |       |
|---------|---|--|----------------------------|----|-----|-------|
| NAME    | C.L. Brumback Community Health Center—West Boca Raton   |  |                            |    |     |       |
| ADDRESS | 23123 SR 7, Suite 108   |  |                            |    |     |       |
| CITY    | Boca Raton  |  | STATE                      | FL | ZIP | 33428 |
| PHONE   | 561-642-1000  |  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE | <a href="http://clbrumbackprimarycareclinics.org/locations/">http://clbrumbackprimarycareclinics.org/locations/</a> |  |                            |    |     |       |

|         |   |                            |    |     |       |
|---------|---|----------------------------|----|-----|-------|
| NAME    | C.L. Brumback Community Health Center—Jupiter   |                            |    |     |       |
| ADDRESS | 411 W. Indiantown Rd.   |                            |    |     |       |
| CITY    | Jupiter   | STATE                      | FL | ZIP | 33458 |
| PHONE   | 561-642-1000  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE | <a href="http://clbrumbackprimarycareclinics.org/locations/">http://clbrumbackprimarycareclinics.org/locations/</a> |                            |    |     |       |

|         |   |   |    |     |       |  |
|---------|---|---|----|-----|-------|--|
| NAME    | C.L. Brumback Community Health Center—Lantana   |   |    |     |       |  |
| ADDRESS | 1250 Southwinds Dr.   |   |    |     |       |  |
| CITY    | Lantana   | STATE   | FL | ZIP | 33462 |  |
| PHONE   | 561-642-1000  | HOURS T/W/R/F: 8:00 AM—5:00 PM<br>M: 8:00 AM—7:00 PM, Sat., 9:00 AM—1:00 PM |    |     |       |  |
| WEBSITE | <a href="http://clbrumbackprimarycareclinics.org/locations/">http://clbrumbackprimarycareclinics.org/locations/</a> |   |    |     |       |  |

|         |   |   |    |     |       |  |
|---------|---|---|----|-----|-------|--|
| NAME    | C.L. Brumback Community Health Center—West Palm Beach   |   |    |     |       |  |
| ADDRESS | 1150 45 <sup>th</sup> St.   |   |    |     |       |  |
| CITY    | West Palm Beach   | STATE   | FL | ZIP | 33407 |  |
| PHONE   | 561-642-1000  | HOURS M/W/R/F: 8:00 AM—5:00 PM<br>T: 8:00 AM—7:00 PM, Sat., 9:00 AM—1:00 PM |    |     |       |  |
| WEBSITE | <a href="http://clbrumbackprimarycareclinics.org/locations/">http://clbrumbackprimarycareclinics.org/locations/</a> |   |    |     |       |  |

|         |                          |  |    |     |       |
|---------|--------------------------|--|----|-----|-------|
| NAME    | FoundCare –Palm Springs  |  |    |     |       |
| ADDRESS | 2330 S. Congress Ave.    |  |    |     |       |
| CITY    | West Palm Beach          | STATE  | FL | ZIP | 33407 |
| PHONE   | 561-472-2466             | HOURS M/F: 8:00 AM—5:00 PM, & T/W/R, 8:00 AM—8:00 PM, Sat: 8:00 AM—1:00 PM |    |     |       |
| WEBSITE | http://www.foundcare.org |  |    |     |       |

|         |                          |                            |    |     |       |  |
|---------|--------------------------|----------------------------|----|-----|-------|--|
| NAME    | FoundCare –Boynton Beach |                            |    |     |       |  |
| ADDRESS | 1901 S. Congress Ave.    |                            |    |     |       |  |
| CITY    | Boynton Beach            | STATE                      | FL | ZIP | 33426 |  |
| PHONE   | 561-472-2466             | HOURS M-F: 8:30 AM—5:00 PM |    |     |       |  |
| WEBSITE | http://www.foundcare.org |                            |    |     |       |  |

|         |                          |                            |    |     |       |  |
|---------|--------------------------|----------------------------|----|-----|-------|--|
| NAME    | FoundCare –Belle Glade   |                            |    |     |       |  |
| ADDRESS | 1500 NW Ave. L., Suite A |                            |    |     |       |  |
| CITY    | Belle Glade              | STATE                      | FL | ZIP | 33430 |  |
| PHONE   | 561-996-7059             | HOURS M-F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE | http://www.foundcare.org |                            |    |     |       |  |

|         |                             |  |    |     |       |  |
|---------|-----------------------------|--|----|-----|-------|--|
| NAME    | FoundCare –North Palm Beach |  |    |     |       |  |
| ADDRESS | 840 N. US Hwy 1             |  |    |     |       |  |
| CITY    | North Palm Beach            | STATE  | FL | ZIP | 33408 |  |
| PHONE   | 561-776-8300                | HOURS M-F: 8:30 AM—5:00 PM<br>Sat./Sun. by appointment |    |     |       |  |
| WEBSITE | http://www.foundcare.org    |  |    |     |       |  |

### Substance Abuse Treatment Centers

|          |   |       |    |     |       |  |
|----------|---|-------|----|-----|-------|--|
| NAME     | Hanley Center at Origins  |       |    |     |       |  |
| ADDRESS  | 933 45 <sup>th</sup> St.  |       |    |     |       |  |
| CITY     | West Palm Beach   | STATE | FL | ZIP | 33407 |  |
| PHONE    | 844-250-9212  | HOURS |    |     |       |  |
| WEBSITE  | <a href="https://www.originsrecovery.com/locations-staff/florida-hanley-center-origins/">https://www.originsrecovery.com/locations-staff/florida-hanley-center-origins/</a> |       |    |     |       |  |
| SERVICES | Residential primary addiction treatment   |       |    |     |       |  |

|         |   |   |    |     |       |  |
|---------|---|---|----|-----|-------|--|
| NAME    | Central Florida Treatment Centers               |   |    |     |       |  |
| ADDRESS | 3155 Lake Worth Rd.                             |   |    |     |       |  |
| CITY    | Palm Springs                                    | STATE   | FL | ZIP | 33461 |  |
| PHONE   | 561-439-8440                                    | HOURS M-F: 5:30 AM—10:00 AM<br>Sat/ Sun, 7:00—9:00 AM |    |     |       |  |
| WEBSITE | http://www.methadoneworks.net/lake-worth-clinic |   |    |     |       |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | West Palm Beach Metro Treatment Center  |  |    |     |       |
| ADDRESS  | 1497 Forest Hill Blvd.  |  |    |     |       |
| CITY     | Lake Clarke Shores  | STATE  | FL | ZIP | 33406 |
| PHONE    | 877-284-7074  | HOURS M-F, 5:00 AM—1:30 PM<br>Sat/Sun, 6:00 –9:00 AM |    |     |       |
| WEBSITE  | <a href="https://newseason.com/clinics/west-palm-beach-treatment-center/">https://newseason.com/clinics/west-palm-beach-treatment-center/</a> |  |    |     |       |
| SERVICES | Medication-assisted treatment (methadone, buprenorphine, suboxone), counseling  |  |    |     |       |

### Support Groups

|         |   |   |    |     |       |  |
|---------|---|---|----|-----|-------|--|
| NAME    | Hepatitis Support Group at Boca Raton Community Hospital  |   |    |     |       |  |
| ADDRESS | 800 Meadows Rd.   |   |    |     |       |  |
| CITY    | Boca Raton  | STATE                                     | FL | ZIP | 33486 |  |
| PHONE   | 561-394-8996  | HOURS First Tuesday of the month, 7:00 pm |    |     |       |  |
| WEBSITE | <a href="http://www.hepatitiscentral.com/hcv/support/fl/bocaraton/">http://www.hepatitiscentral.com/hcv/support/fl/bocaraton/</a> |   |    |     |       |  |

### Continuum of Care/ Homeless Services

|          |  |       |                      |     |       |  |
|----------|--|-------|----------------------|-----|-------|--|
| NAME     | Palm Beach County Division of Human Services (ask for Sonya McNair)  |       |                      |     |       |  |
| ADDRESS  | 810 Datura Street, Suite 350   |       |                      |     |       |  |
| CITY     | West Palm Beach  | STATE | FL                   | ZIP | 33401 |  |
| PHONE    | 561-355-4772   |       | HOURS Call for hours |     |       |  |
| WEBSITE  | www.homelesscoalitionpbc.org   |       |                      |     |       |  |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                      |     |       |  |

## PASCO COUNTY

|          |  |                        |    |     |       |  |
|----------|--|------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact                               |                        |    |     |       |  |
| ADDRESS  | 33845 SR 54  |                        |    |     |       |  |
| CITY     | Wesley Chapel  | STATE                  | FL | ZIP | 33543 |  |
| PHONE    | 813-780-0740   | HOURS T/R/F: 8 AM—5 PM |    |     |       |  |
| WEBSITE  | http://pasco.floridahealth.gov/                                |                        |    |     |       |  |
| SERVICES | Hepatitis A and B vaccines, Hepatitis testing; Hep C Treatment |                        |    |     |       |  |

|          |   |                      |    |     |       |
|----------|---|----------------------|----|-----|-------|
| NAME     | County Health Department  |                      |    |     |       |
| ADDRESS  | 13941 15 <sup>th</sup> St.  |                      |    |     |       |
| CITY     | Dade City   | STATE                | FL | ZIP | 33525 |
| PHONE    | 352-521-1450  | HOURS M-R: 8 AM—5 PM |    |     |       |
| WEBSITE  | <a href="http://pasco.floridahealth.gov/">http://pasco.floridahealth.gov/</a> |                      |    |     |       |
| SERVICES | Hepatitis A and B vaccines, Hepatitis testing; Hep C Treatment                |                      |    |     |       |

|          |  |                      |    |     |       |  |
|----------|--|----------------------|----|-----|-------|--|
| NAME     | County Health Department                                       |                      |    |     |       |  |
| ADDRESS  | 10841 Little Road  |                      |    |     |       |  |
| CITY     | New Port Richey  | STATE                | FL | ZIP | 34654 |  |
| PHONE    | 727-861-5260   | HOURS M-F: 8 AM—5 PM |    |     |       |  |
| WEBSITE  | http://pasco.floridahealth.gov/                                |                      |    |     |       |  |
| SERVICES | Hepatitis A and B vaccines, Hepatitis testing; Hep C Treatment |                      |    |     |       |  |

|       |   |  |  |  |  |
|-------|---|--|--|--|--|
| NAME  | DOH Regional Volunteer Coordinator—Joyce Coufal |  |  |  |  |
| PHONE | 352-589-6424 ext. 2265                          |  |  |  |  |



## Medicaid, Social Security, and Related Services

|          |  |                       |    |     |       |  |
|----------|--|-----------------------|----|-----|-------|--|
| NAME     | Medicaid Eligibility   |                       |    |     |       |  |
| ADDRESS  | 9550 US 19 Highway North, Suite 201-A  |                       |    |     |       |  |
| CITY     | Port Richey  | STATE                 | FL | ZIP | 34668 |  |
| PHONE    | 1-866-762-2267 (Customer Call Center)  | HOURS 8:00 AM—5:00 PM |    |     |       |  |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |                       |    |     |       |  |

|         |                        |  |    |     |       |
|---------|------------------------|--|----|-----|-------|
| NAME    | Social Security Office |  |    |     |       |
| ADDRESS | 36630 Adair Rd.        |  |    |     |       |
| CITY    | Dade City              | STATE                                      | FL | ZIP | 33525 |
| PHONE   | 800-772-1213           | HOURS M/T/R/F: 9 AM—4 PM<br>W: 9 AM –12 PM |    |     |       |

|         |                        |  |    |     |       |
|---------|------------------------|--|----|-----|-------|
| NAME    | Social Security Office |  |    |     |       |
| ADDRESS | 8661 Citizens Drive    |  |    |     |       |
| CITY    | New Port Richey        | STATE                                      | FL | ZIP | 34654 |
| PHONE   | 800-772-1213           | HOURS M/T/R/F: 9 AM—4 PM<br>W: 9 AM –12 PM |    |     |       |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Human & Veterans Services                       |                            |    |     |       |  |
| ADDRESS  | 8620 Galen Wilson Boulevard                     |                            |    |     |       |  |
| CITY     | Port Richey                                     | STATE                      | FL | ZIP | 34668 |  |
| PHONE    | 727-847-2411 (Human)<br>727-834-3282 (Veterans) | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| SERVICES | Medicaid assistance, VA benefits                |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | New Port Richey Outpatient Clinic   |                            |    |     |       |  |
| ADDRESS  | 9912 Little Road  |                            |    |     |       |  |
| CITY     | New Port Richey   | STATE                      | FL | ZIP | 34654 |  |
| PHONE    | 727-869-4100  | HOURS M-F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.tampa.va.gov/locations/New_Port_Richey_OPC.asp">https://www.tampa.va.gov/locations/New_Port_Richey_OPC.asp</a> |                            |    |     |       |  |
| SERVICES | Primary care services for veterans  |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Zephyrhills CBOC (Veterans Clinic)  |                            |    |     |       |  |
| ADDRESS  | 6937 Medical View Lane  |                            |    |     |       |  |
| CITY     | Zephyrhills   | STATE                      | FL | ZIP | 33541 |  |
| PHONE    | 727-869-4100  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.tampa.va.gov/locations/Zephyrhills_CBOC.asp">https://www.tampa.va.gov/locations/Zephyrhills_CBOC.asp</a> |                            |    |     |       |  |
| SERVICES | Primary care services for veterans  |                            |    |     |       |  |

|          |   |                            |    |     |       |
|----------|---|----------------------------|----|-----|-------|
| NAME     | Office of Insurance Regulation—Tampa Service Office                                 |                            |    |     |       |
| ADDRESS  | 5309 East Fowler Ave.   |                            |    |     |       |
| CITY     | Tampa   | STATE                      | FL | ZIP | 33617 |
| PHONE    | Toll free—1-877-693-5236  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE  | <a href="https://www.flair.com/choices.aspx">https://www.flair.com/choices.aspx</a> |                            |    |     |       |
| SERVICES | Find rate information for Medicare supplement and small group health                |                            |    |     |       |

## Community Healthcare Clinics or Health Centers

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Premier Community HealthCare Group  |   |    |     |       |  |
| ADDRESS  | 37913 Church Ave  |   |    |     |       |  |
| CITY     | Dade City   | STATE   | FL | ZIP | 33525 |  |
| PHONE    | 352-518-2000 or 727-645-4185  | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |    |     |       |  |
| WEBSITE  | https://premierhc.org/  |   |    |     |       |  |
| SERVICES | Hepatitis A/B vaccines, hepatitis testing; takes insured/uninsured (pay on sliding scale) |   |    |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Hudson Family Health Center (Premier Community Healthcare)  |   |    |     |       |  |
| ADDRESS  | 11611 Denton Ave.   |   |    |     |       |  |
| CITY     | Hudson  | STATE   | FL | ZIP | 34667 |  |
| PHONE    | 352-518-2000 or 727-645-4185  | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://premierhc.org/">https://premierhc.org/</a>                                       |   |    |     |       |  |
| SERVICES | Hepatitis A and B vaccines, hepatitis testing; takes insured and uninsured (pay on sliding scale) |   |    |     |       |  |

|          |   |                           |    |     |       |  |
|----------|---|---------------------------|----|-----|-------|--|
| NAME     | Lacoochee Family Health Center (Premier Community Healthcare)                                     |                           |    |     |       |  |
| ADDRESS  | 27944 Pasco Ave # B   |                           |    |     |       |  |
| CITY     | Dade City   | STATE                     | FL | ZIP | 33525 |  |
| PHONE    | 352-518-2000 or 727-645-4185  | HOURS W: 7:00 AM –4:00 PM |    |     |       |  |
| WEBSITE  | https://premierhc.org/  |                           |    |     |       |  |
| SERVICES | Hepatitis A and B vaccines, hepatitis testing; takes insured and uninsured (pay on sliding scale) |                           |    |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | New Port Richey Family Health Center  |   |    |     |       |  |
| ADDRESS  | 2114 Seven Springs Blvd.  |   |    |     |       |  |
| CITY     | Trinity   | STATE   | FL | ZIP | 34655 |  |
| PHONE    | 352-518-2000 or 727-645-4185  | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://premierhc.org/">https://premierhc.org/</a>                                       |   |    |     |       |  |
| SERVICES | Hepatitis A and B vaccines, hepatitis testing; takes insured and uninsured (pay on sliding scale) |   |    |     |       |  |

|          |   |       |   |     |       |  |
|----------|---|-------|---|-----|-------|--|
| NAME     | Zephyrhills Family Health Center  |       |   |     |       |  |
| ADDRESS  | 37920 Medical Arts Ct.  |       |   |     |       |  |
| CITY     | Zephyrhills   | STATE | FL  | ZIP | 33541 |  |
| PHONE    | 352-518-2000 or 727-645-4185  |       | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |     |       |  |
| WEBSITE  | <a href="https://premierhc.org/">https://premierhc.org/</a>                                       |       |   |     |       |  |
| SERVICES | Hepatitis A and B vaccines, hepatitis testing; takes insured and uninsured (pay on sliding scale) |       |   |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Good Samaritan Health Clinic of Pasco, Inc.   |   |    |     |       |  |
| ADDRESS  | 5334 Aspen St.  |   |    |     |       |  |
| CITY     | New Port Richey   | STATE   | FL | ZIP | 34652 |  |
| PHONE    | 727-848-7789  | HOURS M: 10:00 AM–4:00 PM<br>T: 10:00 AM—5:30 PM<br>(closed daily from 12:00—1:00 PM) |    |     |       |  |
| WEBSITE  | http://goodsamclinic.org  |   |    |     |       |  |
| SERVICES | Hepatitis C treatment; must meet poverty guidelines to be a patient; \$5 donation/visit |   |    |     |       |  |

|          |   |  |   |    |     |       |
|----------|---|--|---|----|-----|-------|
| NAME     | West Coast Infectious Disease   |  |   |    |     |       |
| ADDRESS  | 8607 Easthaven Ct., Suite 101   |  |   |    |     |       |
| CITY     | New Port Richey   |  | STATE   | FL | ZIP | 34655 |
| PHONE    | 727-669-6800  |  | HOURS M-R: 8:30 AM –4:30 PM<br>F: 8:30 AM—4:00 PM |    |     |       |
| WEBSITE  | https://www.westcoastid.com/  |  |   |    |     |       |
| SERVICES | Hepatitis A and B vaccines, hepatitis treatment; takes insured and uninsured (pay on sliding scale) |  |   |    |     |       |

|          |  |   |    |     |       |  |
|----------|--|---|----|-----|-------|--|
| NAME     | Dr. Saeed Ahmed—Gastroenterologist   |   |    |     |       |  |
| ADDRESS  | 2050 Ashley Oaks Circle  |   |    |     |       |  |
| CITY     | Wesley Chapel  | STATE   | FL | ZIP | 33544 |  |
| PHONE    | 813-994-4800   | HOURS M: 3:00 PM –4:30 PM<br>T: 1:00 PM –4:30 PM<br>R: 8:30 AM—11:30 AM |    |     |       |  |
| SERVICES | Hepatitis A and B vaccines, hepatitis treatment; takes insured and uninsured (self-pay-\$160 initial visit and \$80 for each subsequent visit) |   |    |     |       |  |

|          |  |                        |    |     |       |
|----------|--|------------------------|----|-----|-------|
| NAME     | Love the Golden Rule, Inc. <sup>1</sup> and HepatitisMain <sup>2</sup> |                        |    |     |       |
| ADDRESS  | 721 Dr. Martin Luther King, Jr. St. South                              |                        |    |     |       |
| CITY     | St. Petersburg   | STATE                  | FL | ZIP | 33705 |
| PHONE    | 727-228-1650 <sup>1</sup> , 727-228-1670 <sup>2</sup>                  | HOURS 8:00 AM –4:30 PM |    |     |       |
| WEBSITE  | lovethegoldenrule.com                      hepatitismain.com           |                        |    |     |       |
| SERVICES | Hepatitis treatment for uninsured patients; \$50 per office visit      |                        |    |     |       |

## Substance Abuse Treatment Centers

|          |   |       |  |     |       |
|----------|---|-------|--|-----|-------|
| NAME     | Operation PAR   |       |  |     |       |
| ADDRESS  | 7720 Washington St., Suite 103  |       |  |     |       |
| CITY     | Port Richey   | STATE | FL   | ZIP | 34652 |
| PHONE    | 727-816-1200  |       | HOURS 5:30 AM –11:00 AM,<br>SAT/SUN: 6:30 AM –10:00 AM |     |       |
| WEBSITE  | <a href="https://www.operationpar.org/pasco">https://www.operationpar.org/pasco</a> |       |  |     |       |
| SERVICES | Methadone clinic  |       |  |     |       |

|          |   |       |  |     |       |
|----------|---|-------|--|-----|-------|
| NAME     | Westcare  |       |  |     |       |
| ADDRESS  | 6636 Rowan Road   |       |  |     |       |
| CITY     | New Port Richey   | STATE | FL   | ZIP | 34653 |
| PHONE    | 727-846-0757  |       | HOURS M-W: 10:00 AM –8:00 PM,<br>R: 2:00 PM –8:00 PM |     |       |
| WEBSITE  | <a href="https://www.westcare.com">https://www.westcare.com</a> |       |  |     |       |
| SERVICES | Outpatient; drug court; veteran’s treatment court               |       |  |     |       |

|          |   |       |                             |     |       |
|----------|---|-------|-----------------------------|-----|-------|
| NAME     | Westcare  |       |                             |     |       |
| ADDRESS  | 6719 Gall Blvd., Suite 100                        |       |                             |     |       |
| CITY     | Zephyrhills                                       | STATE | FL                          | ZIP | 33540 |
| PHONE    | 727-483-2153                                      |       | HOURS M-F: 8:00 AM –5:00 PM |     |       |
| WEBSITE  | https://www.westcare.com                          |       |                             |     |       |
| SERVICES | Outpatient; drug court; veteran’s treatment court |       |                             |     |       |

|          |   |       |   |     |       |  |
|----------|---|-------|---|-----|-------|--|
| NAME     | Morton Plant North Bay Hospital- Recovery Center  |       |   |     |       |  |
| ADDRESS  | 21808 State Road 54   |       |   |     |       |  |
| CITY     | Lutz  | STATE | FL  | ZIP | 33549 |  |
| PHONE    | 813-428-6100  |       | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |     |       |  |
| SERVICES | Inpatient psychiatric unit; nursing care for adults w/ behavioral disorders/ addictions |       |   |     |       |  |

|          |                                 |       |   |     |       |  |
|----------|---------------------------------|-------|---|-----|-------|--|
| NAME     | Lovehouse Mission Hope House    |       |   |     |       |  |
| ADDRESS  | 37603 Tall Pines Dr             |       |   |     |       |  |
| CITY     | Zephyrhills                     | STATE | FL  | ZIP | 33542 |  |
| PHONE    | 813-783-1642                    |       | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |     |       |  |
| SERVICES | Drug Addiction Treatment Center |       |   |     |       |  |

|          |                             |   |    |     |       |  |
|----------|-----------------------------|---|----|-----|-------|--|
| NAME     | Pathfinder Counseling, Inc. |   |    |     |       |  |
| ADDRESS  | 37816 Fl-54                 |   |    |     |       |  |
| CITY     | Zephyrhills                 | STATE   | FL | ZIP | 33542 |  |
| PHONE    | 844-452-4597                | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |    |     |       |  |
| SERVICES | Addiction Treatment Center  |   |    |     |       |  |

|          |  |   |    |     |       |  |
|----------|--|---|----|-----|-------|--|
| NAME     | North Tampa Behavioral Health Hospital |   |    |     |       |  |
| ADDRESS  | 29910 FL-56                            |   |    |     |       |  |
| CITY     | West Chapley                           | STATE   | FL | ZIP | 33543 |  |
| PHONE    | 813-452-4597                           | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |    |     |       |  |
| SERVICES | Drug Addiction Treatment Center        |   |    |     |       |  |

|          |   |       |   |     |       |  |
|----------|---|-------|---|-----|-------|--|
| NAME     | BayCare Behavioral Health- Doris Cook Smith Counseling Center |       |   |     |       |  |
| ADDRESS  | 14527 7 <sup>th</sup> St.                                     |       |   |     |       |  |
| CITY     | Dade City   | STATE | FL  | ZIP | 33523 |  |
| PHONE    | 352-521-1474  |       | HOURS M-R: 8:00 AM –6:00 PM<br>F: 8:00 AM—5:00 PM |     |       |  |
| SERVICES | Drug Addiction Treatment Center                               |       |   |     |       |  |

|          |                                 |                     |    |     |       |  |
|----------|---------------------------------|---------------------|----|-----|-------|--|
| NAME     | Spring Gardens Recovery         |                     |    |     |       |  |
| ADDRESS  | 8213 Cessna Dr                  |                     |    |     |       |  |
| CITY     | Spring Hill                     | STATE               | FL | ZIP | 34606 |  |
| PHONE    | 866-591-0162                    | HOURS Open 24 hours |    |     |       |  |
| SERVICES | Drug Addiction Treatment Center |                     |    |     |       |  |

|          |   |                     |    |     |       |
|----------|---|---------------------|----|-----|-------|
| NAME     | Ace Opportunities                                     |                     |    |     |       |
| ADDRESS  | 6009 High St  |                     |    |     |       |
| CITY     | New Port Richey                                       | STATE               | FL | ZIP | 34653 |
| PHONE    | 727-776-5336  | HOURS Open 24 hours |    |     |       |
| SERVICES | Drug Addiction Treatment Center; Transitional Housing |                     |    |     |       |

|          |   |       |                     |     |       |  |
|----------|---|-------|---------------------|-----|-------|--|
| NAME     | Rockland Treatment Center                             |       |                     |     |       |  |
| ADDRESS  | 5319 Grand Blvd                                       |       |                     |     |       |  |
| CITY     | New Port Richey                                       | STATE | FL                  | ZIP | 34652 |  |
| PHONE    | 727-220-2422  |       | HOURS Open 24 hours |     |       |  |
| SERVICES | Drug Addiction Treatment Center; Transitional Housing |       |                     |     |       |  |



|          |   |                     |    |     |       |
|----------|---|---------------------|----|-----|-------|
| NAME     | Sober Solutions, Inc.                                 |                     |    |     |       |
| ADDRESS  | 8056 Old County Rd 54                                 |                     |    |     |       |
| CITY     | New Port Richey                                       | STATE               | FL | ZIP | 34653 |
| PHONE    | 727-372-2010  | HOURS Open 24 hours |    |     |       |
| SERVICES | Drug Addiction Treatment Center; Transitional Housing |                     |    |     |       |

|          |   |       |                     |     |       |  |
|----------|---|-------|---------------------|-----|-------|--|
| NAME     | Rockland Treatment Center                             |       |                     |     |       |  |
| ADDRESS  | 5319 Grand Blvd                                       |       |                     |     |       |  |
| CITY     | New Port Richey                                       | STATE | FL                  | ZIP | 34652 |  |
| PHONE    | 727-220-2422  |       | HOURS Open 24 hours |     |       |  |
| SERVICES | Drug Addiction Treatment Center; Transitional Housing |       |                     |     |       |  |

|          |                                 |                     |    |     |       |
|----------|---------------------------------|---------------------|----|-----|-------|
| NAME     | Novus Medical Detox Center      |                     |    |     |       |
| ADDRESS  | 9270 Royal Palm Ave             |                     |    |     |       |
| CITY     | New Port Richey                 | STATE               | FL | ZIP | 34654 |
| PHONE    | 727-33-8586                     | HOURS Open 24 hours |    |     |       |
| SERVICES | Drug Addiction Treatment Center |                     |    |     |       |

|          |  |   |    |     |       |  |
|----------|--|---|----|-----|-------|--|
| NAME     | BayCare Behavioral Health- Community Recovery Center |   |    |     |       |  |
| ADDRESS  | 6040 Indiana Ave                                     |   |    |     |       |  |
| CITY     | New Port Richey                                      | STATE   | FL | ZIP | 34653 |  |
| PHONE    | 727-816-1836   | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |    |     |       |  |
| SERVICES | Mental health services                               |   |    |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | BayCare Behavioral Health- King Helie Adult Treatment Center/ Integrat. Stabliz. Unit |   |    |     |       |  |
| ADDRESS  | 8002 King Helie Blvd.   |   |    |     |       |  |
| CITY     | New Port Richey   | STATE   | FL | ZIP | 34653 |  |
| PHONE    | 727-841-4430  | HOURS M: 7:00 AM –7:00 PM<br>T-F: 7:00 AM—4:00 PM |    |     |       |  |
| SERVICES | Mental health services  |   |    |     |       |  |

### Support Groups

|          |  |       |    |     |       |
|----------|--|-------|----|-----|-------|
| NAME     | Narcotics Anonymous (NA) Meetings  |       |    |     |       |
| ADDRESS  | Meetings in New Port Richey, Holiday Hudson, Port Richey, Zephyrhills, Dade City |       |    |     |       |
| CITY     | New Port Richey  | STATE | FL | ZIP | 34653 |
| WEBSITE  | WWW.NA.ORG/MEETINGSEARCH   |       |    |     |       |
| SERVICES | Meetings/ support group  |       |    |     |       |

|             |                                    |  |  |  |  |
|-------------|------------------------------------|--|--|--|--|
| NAME        | Alcoholics Anonymous (AA) Meetings |  |  |  |  |
| WEST PASCO: | 727-847-0777                       |  |  |  |  |
| EAST PASCO: | 813-933-9722                       |  |  |  |  |

### Continuum of Care/ Homeless Services

|          |  |       |                      |     |       |  |
|----------|--|-------|----------------------|-----|-------|--|
| NAME     | Coalition for the Homeless of Pasco County (ask for Don Anderson)  |       |                      |     |       |  |
| ADDRESS  | 5652 Pine Street   |       |                      |     |       |  |
| CITY     | New Port Richey  | STATE | FL                   | ZIP | 34655 |  |
| PHONE    | 727-842-8605   |       | HOURS Call for hours |     |       |  |
| WEBSITE  | www.pascohomelesscoalition.org   |       |                      |     |       |  |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                      |     |       |  |

## PINELLAS COUNTY

|          |  |                      |    |     |       |  |
|----------|--|----------------------|----|-----|-------|--|
| NAME     | County Health Department Contact—Kyle Olle                             |                      |    |     |       |  |
| ADDRESS  | 205 Dr. Martin Luther King St., North                                  |                      |    |     |       |  |
| CITY     | St. Petersburg   | STATE                | FL | ZIP | 33701 |  |
| PHONE    | 727-824-6932   | HOURS M-F: 8 AM—5 PM |    |     |       |  |
| WEBSITE  | http://pinellas.floridahealth.gov/                                     |                      |    |     |       |  |
| SERVICES | Hepatitis A and B vaccines (by appt. only), call 352-540-6800 for cost |                      |    |     |       |  |

### Medicaid, Social Security, and Related Services

|          |  |                       |    |     |       |  |
|----------|--|-----------------------|----|-----|-------|--|
| NAME     | Medicaid Eligibility   |                       |    |     |       |  |
| ADDRESS  | 11351 Ulmerton Rd., Suite 130 (Mary Grizzle Building)  |                       |    |     |       |  |
| CITY     | Largo  | STATE                 | FL | ZIP | 33778 |  |
| PHONE    | 1-866-762-2237 (Customer Call Center)  | HOURS 8:00 AM—5:00 PM |    |     |       |  |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |                       |    |     |       |  |

|          |   |                       |    |     |       |  |
|----------|---|-----------------------|----|-----|-------|--|
| NAME     | Vocational Rehabilitation   |                       |    |     |       |  |
| ADDRESS  | Sebring Building, 525 Mirror Lake Dr.   |                       |    |     |       |  |
| CITY     | St. Petersburg  | STATE                 | FL | ZIP | 33701 |  |
| PHONE    | 1-866-762-2237 (Customer Call Center)   | HOURS 8:00 AM—5:00 PM |    |     |       |  |
| SERVICES | Federal-state program that helps people with physical or mental disabilities get or keep a job. |                       |    |     |       |  |

|         |                        |   |    |     |       |  |
|---------|------------------------|---|----|-----|-------|--|
| NAME    | Social Security Office |   |    |     |       |  |
| ADDRESS | 2340 Drew Rd.          |   |    |     |       |  |
| CITY    | Clearwater             | STATE                                     | FL | ZIP | 33765 |  |
| PHONE   | 800-772-1213           | HOURS M/T/R/F: 9 AM—4 PM<br>W: 9 AM–12 PM |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Veterans Services (VA Affairs Department)   |                            |    |     |       |  |
| ADDRESS  | 2189 Cleveland St. Suite 263  |                            |    |     |       |  |
| CITY     | Clearwater  | STATE                      | FL | ZIP | 33765 |  |
| PHONE    | 727-464-8460  | HOURS M-F: 7:30 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="http://www.pinellascounty.org/veterans">http://www.pinellascounty.org/veterans</a> |                            |    |     |       |  |
| SERVICES | Assists veterans and their families access benefits, like healthcare                        |                            |    |     |       |  |

|          |  |                            |    |     |       |  |
|----------|--|----------------------------|----|-----|-------|--|
| NAME     | Veterans Services  |                            |    |     |       |  |
| ADDRESS  | 501 First Ave. North, Suite 514                                      |                            |    |     |       |  |
| CITY     | St. Petersburg   | STATE                      | FL | ZIP | 33701 |  |
| PHONE    | 727-582-7828   | HOURS M-F: 7:30 AM—4:30 PM |    |     |       |  |
| WEBSITE  | http://www.pinellascounty.org/veterans                               |                            |    |     |       |  |
| SERVICES | Assists veterans and their families access benefits, like healthcare |                            |    |     |       |  |

|          |  |   |    |     |       |  |
|----------|--|---|----|-----|-------|--|
| NAME     | Veterans Services  |   |    |     |       |  |
| ADDRESS  | 301 S. Disston Ave.  |   |    |     |       |  |
| CITY     | Tarpon Springs   | STATE   | FL | ZIP | 34689 |  |
| PHONE    | 727-524-4410 x 7694  | HOURS M-F: 7:30 AM—4:30 PM<br>By appt. only R |    |     |       |  |
| WEBSITE  | http://www.pinellascounty.org/veterans                               |   |    |     |       |  |
| SERVICES | Assists veterans and their families access benefits, like healthcare |   |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Human Services  |                            |    |     |       |  |
| ADDRESS  | 2189 Cleveland St., Suite 230   |                            |    |     |       |  |
| CITY     | Clearwater  | STATE                      | FL | ZIP | 33765 |  |
| PHONE    | 727-464-4200  | HOURS M-F: 7:30 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="http://www.pinellascounty.org/humanservices/default.htm">http://www.pinellascounty.org/humanservices/default.htm</a> |                            |    |     |       |  |
| SERVICES | Assists residents in obtaining access to medical care, medical homes  |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Human Services  |                            |    |     |       |  |
| ADDRESS  | 647 1 <sup>st</sup> Ave., North   |                            |    |     |       |  |
| CITY     | St. Petersburg  | STATE                      | FL | ZIP | 33701 |  |
| PHONE    | 727-464-4200  | HOURS M-F: 7:30 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="http://www.pinellascounty.org/humanservices/default.htm">http://www.pinellascounty.org/humanservices/default.htm</a> |                            |    |     |       |  |
| SERVICES | Assists residents in obtaining access to medical care, medical homes  |                            |    |     |       |  |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Office of Insurance Regulation—Tampa Service Office                                 |       |    |     |       |
| ADDRESS  | 5309 East Fowler Ave.   |       |    |     |       |
| CITY     | Tampa   | STATE | FL | ZIP | 33617 |
| PHONE    | Toll free—1-877-693-5236  | HOURS |    |     |       |
| WEBSITE  | <a href="https://www.floir.com/choices.aspx">https://www.floir.com/choices.aspx</a> |       |    |     |       |
| SERVICES | Find rate information for Medicare supplement and small group health                |       |    |     |       |

### Community Healthcare Clinics or Health Centers

|          |  |                            |    |     |       |  |
|----------|--|----------------------------|----|-----|-------|--|
| NAME     | Community Health Centers of Pinellas   |                            |    |     |       |  |
| ADDRESS  | 5523 Roosevelt Blvd.   |                            |    |     |       |  |
| CITY     | Clearwater   | STATE                      | FL | ZIP | 33760 |  |
| PHONE    | 727-824-8181   | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.chcpinellas.org/">https://www.chcpinellas.org/</a>  |                            |    |     |       |  |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |                            |    |     |       |  |

|          |  |   |    |     |       |  |
|----------|--|---|----|-----|-------|--|
| NAME     | Community Health Centers of Pinellas   |   |    |     |       |  |
| ADDRESS  | 707 Druid Rd East  |   |    |     |       |  |
| CITY     | Clearwater   | STATE   | FL | ZIP | 33756 |  |
| PHONE    | 727-824-8181   | HOURS M-W: 7:30 AM—8:00 PM<br>R-F: 7:30 AM –5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.chcpinellas.org/">https://www.chcpinellas.org/</a>  |   |    |     |       |  |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |   |    |     |       |  |

|          |  |                            |    |     |       |  |
|----------|--|----------------------------|----|-----|-------|--|
| NAME     | Community Health Centers of Pinellas   |                            |    |     |       |  |
| ADDRESS  | 1721 Main St.  |                            |    |     |       |  |
| CITY     | Dunedin  | STATE                      | FL | ZIP | 34698 |  |
| PHONE    | 727-824-8181   | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.chcpinellas.org/">https://www.chcpinellas.org/</a>  |                            |    |     |       |  |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |                            |    |     |       |  |

|          |  |                            |    |     |       |
|----------|--|----------------------------|----|-----|-------|
| NAME     | Community Health Centers of Pinellas   |                            |    |     |       |
| ADDRESS  | 12420 130 <sup>th</sup> Ave, North   |                            |    |     |       |
| CITY     | Largo  | STATE                      | FL | ZIP | 33774 |
| PHONE    | 727-824-8181   | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE  | <a href="https://www.chcpinellas.org/">https://www.chcpinellas.org/</a>  |                            |    |     |       |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |                            |    |     |       |

|          |  |  |    |     |       |  |
|----------|--|--|----|-----|-------|--|
| NAME     | Community Health Centers of Pinellas   |  |    |     |       |  |
| ADDRESS  | 7550 43 <sup>rd</sup> St., North   |  |    |     |       |  |
| CITY     | Pinellas Park  | STATE  | FL | ZIP | 33781 |  |
| PHONE    | 727-824-8181   | HOURS M & F, 8:00 AM—6:00 PM<br>T/W/R: 8:00 AM—8:00 PM<br>Sat, 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.chcpinellas.org/">https://www.chcpinellas.org/</a>  |  |    |     |       |  |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |  |    |     |       |  |

|          |  |   |    |     |       |
|----------|--|---|----|-----|-------|
| NAME     | Community Health Centers of Pinellas at Johnnie Ruth Clarke  |   |    |     |       |
| ADDRESS  | 1344 22 <sup>nd</sup> St., South   |   |    |     |       |
| CITY     | St. Petersburg   | STATE   | FL | ZIP | 33712 |
| PHONE    | 727-824-8181   | HOURS M & R, 7:30 AM—8:00 PM<br>T & W, 7:30 AM—7:00 PM<br>F, 7:30 AM—5 PM, & Sat, 8 AM—4 PM |    |     |       |
| WEBSITE  | <a href="https://www.chcpinellas.org/">https://www.chcpinellas.org/</a>  |   |    |     |       |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |   |    |     |       |

|          |  |                            |    |     |       |  |
|----------|--|----------------------------|----|-----|-------|--|
| NAME     | Community Health Centers of Pinellas   |                            |    |     |       |  |
| ADDRESS  | 612 Dr. Martin Luther King, Jr. St. North  |                            |    |     |       |  |
| CITY     | St. Petersburg   | STATE                      | FL | ZIP | 33701 |  |
| PHONE    | 727-824-8181   | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.chcpinellas.org/">https://www.chcpinellas.org/</a>  |                            |    |     |       |  |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |                            |    |     |       |  |

|          |  |  |  |    |     |       |
|----------|--|--|--|----|-----|-------|
| NAME     | Community Health Centers of Pinellas   |  |  |    |     |       |
| ADDRESS  | 247 S. Huey Ave.   |  |  |    |     |       |
| CITY     | Tarpon Springs   |  | STATE  | FL | ZIP | 34689 |
| PHONE    | 727-824-8181   |  | HOURS M/T/R/F: 8:00 AM—5:00 PM<br>W: 8:00 AM—8:00 PM |    |     |       |
| WEBSITE  | https://www.chcpinellas.org/   |  |  |    |     |       |
| SERVICES | Hepatitis vaccination and testing; referred out to a specialist for treatment<br>Takes uninsured (pay be sliding scale) and Medicaid |  |  |    |     |       |

### Substance Abuse Treatment Centers

|          |   |                       |    |     |       |  |
|----------|---|-----------------------|----|-----|-------|--|
| NAME     | Operation PAR –Largo Campus Outpatient  |                       |    |     |       |  |
| ADDRESS  | 13800 66 <sup>th</sup> St., North   |                       |    |     |       |  |
| CITY     | Largo   | STATE                 | FL | ZIP | 33774 |  |
| PHONE    | 1-888-727-6398  | HOURS 8:30 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.operationpar.org/pinellas">https://www.operationpar.org/pinellas</a> |                       |    |     |       |  |
| SERVICES | Outpatient services   |                       |    |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Operation PAR –Medication Assisted Patient Services   |   |    |     |       |  |
| ADDRESS  | 6150 150 <sup>th</sup> Ave. North   |   |    |     |       |  |
| CITY     | Clearwater  | STATE   | FL | ZIP | 33760 |  |
| PHONE    | 727-507-4673  | HOURS 5:30 AM—3:00 PM,<br>Sat/Sun: 6:30 AM—10:00 AM |    |     |       |  |
| WEBSITE  | <a href="https://www.operationpar.org/pinellas">https://www.operationpar.org/pinellas</a>       |   |    |     |       |  |
| SERVICES | Suboxone (\$350 1 <sup>st</sup> month, \$150/month thereafter), methadone (covered by Medicaid) |   |    |     |       |  |



|          |   |                       |    |     |       |  |
|----------|---|-----------------------|----|-----|-------|--|
| NAME     | Operation PAR –COSA Outpatient Services   |                       |    |     |       |  |
| ADDRESS  | 2000 4 <sup>th</sup> St. South  |                       |    |     |       |  |
| CITY     | St. Petersburg  | STATE                 | FL | ZIP | 34689 |  |
| PHONE    | 1-888-727-6398  | HOURS 8:30 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.operationpar.org/pinellas">https://www.operationpar.org/pinellas</a> |                       |    |     |       |  |
| SERVICES | Outpatient services   |                       |    |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Bay Area Treatment Center   |   |    |     |       |  |
| ADDRESS  | 8800 49th St. North, Suite 106  |   |    |     |       |  |
| CITY     | Pinellas Park   | STATE   | FL | ZIP | 33762 |  |
| PHONE    | 727-544-0044  | HOURS M-F: 5:00 AM—6:00 PM<br>S/S: 5:30—9:30 AM |    |     |       |  |
| WEBSITE  | <a href="https://newseason.com/clinics/bay-area-treatment-center/">https://newseason.com/clinics/bay-area-treatment-center/</a> |   |    |     |       |  |
| SERVICES | Medical maintenance; self-pay, \$16-21/dose; soon to accept Medicaid  |   |    |     |       |  |

|          |   |  |    |     |       |  |
|----------|---|--|----|-----|-------|--|
| NAME     | St. Petersburg Metro Treatment Center   |  |    |     |       |  |
| ADDRESS  | 1919 N. Pinellas Park Ave.  |  |    |     |       |  |
| CITY     | Tarpon Springs  | STATE  | FL | ZIP | 34689 |  |
| PHONE    | 727-547-5200  | HOURS M-F: 5:00 AM—12:00 PM<br>S/S: 5:30—9:30 AM |    |     |       |  |
| WEBSITE  | <a href="https://newseason.com/clinics/st-petersburg-metro-treatment-center/">https://newseason.com/clinics/st-petersburg-metro-treatment-center/</a> |  |    |     |       |  |
| SERVICES | Medical maintenance; self-pay, \$16-21/dose; intake 2x/week   |  |    |     |       |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Tampa Metro Treatment Center  |  |    |     |       |
| ADDRESS  | 7207 N. Nebraska Ave.   |  |    |     |       |
| CITY     | Tampa   | STATE                                      | FL | ZIP | 33604 |
| PHONE    | 813-236-1182  | HOURS M-F: 5 AM—1:30 PM, S/S: 5:30—9:30 AM |    |     |       |
| WEBSITE  | <a href="https://newseason.com/clinics/tampa-metro-treatment-center/">https://newseason.com/clinics/tampa-metro-treatment-center/</a> |  |    |     |       |
| SERVICES | Medical maintenance; self-pay, \$16-21/dose; intake M-F   |  |    |     |       |

|          |   |                |    |     |       |
|----------|---|----------------|----|-----|-------|
| NAME     | Agency for Community Treatment Services   |                |    |     |       |
| ADDRESS  | 2214 E. Henry Ave.  |                |    |     |       |
| CITY     | Tampa   | STATE          | FL | ZIP | 33610 |
| PHONE    | 813-246-4899  | HOURS 24 Hours |    |     |       |
| WEBSITE  | http://www.actsfl.org/outpatient-services.html  |                |    |     |       |
| SERVICES | Outpatient detox recovery; medication management services; medication assisted therapies; accepts insurance and self-pay on sliding scale |                |    |     |       |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Agency for Community Treatment Services (Adult Addiction Receiving Facility)                                |   |    |     |       |  |
| ADDRESS  | 4612 N. 56 <sup>TH</sup> St.  |   |    |     |       |  |
| CITY     | Tampa   | STATE                                   | FL | ZIP | 33610 |  |
| PHONE    | 813-246-4899  | HOURS M-R: 9 AM –5 PM, F: 7:30 AM -5 PM |    |     |       |  |
| WEBSITE  | <a href="http://www.actsfl.org/outpatient-services.html">http://www.actsfl.org/outpatient-services.html</a> |   |    |     |       |  |
| SERVICES | Aftercare services; recovery support; outpatient assessment   |   |    |     |       |  |

|          |                                      |       |                              |     |       |  |
|----------|--------------------------------------|-------|------------------------------|-----|-------|--|
| NAME     | Love the Golden Rule (With Dr. Bob)  |       |                              |     |       |  |
| ADDRESS  | 3000 1 <sup>st</sup> Ave N           |       |                              |     |       |  |
| CITY     | Saint Petersburg                     | STATE | FL                           | ZIP | 33713 |  |
| PHONE    | 727-826-0700                         |       | HOURS: M-F: 8:00 AM –4:30 PM |     |       |  |
| SERVICES | Primary care and infectious disease; |       |                              |     |       |  |

|          |   |                      |    |     |       |
|----------|---|----------------------|----|-----|-------|
| NAME     | Agency for Community Treatment Services   |                      |    |     |       |
| ADDRESS  | 2214 E. Henry Ave.  |                      |    |     |       |
| CITY     | Tampa   | STATE                | FL | ZIP | 33610 |
| PHONE    | 813-246-4899  | HOURS: Open 24 Hours |    |     |       |
| WEBSITE  | <a href="http://www.actsfl.org/outpatient-services.html">http://www.actsfl.org/outpatient-services.html</a>                               |                      |    |     |       |
| SERVICES | Outpatient detox recovery; medication management services; medication assisted therapies; accepts insurance and self-pay on sliding scale |                      |    |     |       |

## Support Groups

|          |   |       |    |     |       |  |
|----------|---|-------|----|-----|-------|--|
| NAME     | Suncoast Hep C Friends, Inc.  |       |    |     |       |  |
| ADDRESS  | 3301- 58 Avenue North Lot 39  |       |    |     |       |  |
| CITY     | St. Petersburg  | STATE | FL | ZIP | 33714 |  |
| PHONE    | Randall Owen: 727-564-2983  | HOURS |    |     |       |  |
| WEBSITE  | <a href="https://www.facebook.com/Suncoast-Hep-C-Friends-216588651689950/">https://www.facebook.com/Suncoast-Hep-C-Friends-216588651689950/</a> |       |    |     |       |  |
| SERVICES | Local support contact for people needing information about living with HCV.   |       |    |     |       |  |

|         |   |       |       |     |       |  |
|---------|---|-------|-------|-----|-------|--|
| NAME    | Hepatitis Main Liver Support Line at Love the Golden Rule |       |       |     |       |  |
| ADDRESS | 721 Dr. Martin Luther King, Jr. St. South                 |       |       |     |       |  |
| CITY    | St. Petersburg  | STATE | FL    | ZIP | 33701 |  |
| PHONE   | 727-228-1670  |       | HOURS |     |       |  |
| EMAIL   | hepatitismain@yahoo.com                                   |       |       |     |       |  |

|          |   |       |    |     |       |  |
|----------|---|-------|----|-----|-------|--|
| NAME     | Hepatitis Support                                       |       |    |     |       |  |
| ADDRESS  | St. Anthony’s Hospital, 1200 7 <sup>th</sup> Ave. North |       |    |     |       |  |
| CITY     | St. Petersburg  | STATE | FL | ZIP | 33701 |  |
| EMAIL    | <u>chrisburri@aol.com</u> , Chris Burridge              |       |    |     |       |  |
| SERVICES | Meets every 3 <sup>rd</sup> Wednesday at 6:00 pm        |       |    |     |       |  |

## Continuum of Care/ Homeless Services

|          |  |       |                         |     |       |  |
|----------|--|-------|-------------------------|-----|-------|--|
| NAME     | Pinellas County Homeless Leadership Board (ask for Susan Myers)  |       |                         |     |       |  |
| ADDRESS  | 647 1 <sup>st</sup> Avenue, North  |       |                         |     |       |  |
| CITY     | St. Petersburg   | STATE | FL                      | ZIP | 34655 |  |
| PHONE    | 727-842-8605   |       | HOURS    Call for hours |     |       |  |
| WEBSITE  | www.pascohomelesscoalition.org   |       |                         |     |       |  |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                         |     |       |  |

## POLK COUNTY

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact—Kyle Olle or JoAnne Lamb   |                            |    |     |       |  |
| ADDRESS  | 1255 Brice Blvd.  |                            |    |     |       |  |
| CITY     | Bartow  | STATE                      | FL | ZIP | 33830 |  |
| PHONE    | 863-578-2227  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | http://polk.floridahealth.gov/                              |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccinations; Hepatitis B and C screening |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department –Auburndale Clinic                                 |                            |    |     |       |  |
| ADDRESS  | 1805 Hobbs Rd.  |                            |    |     |       |  |
| CITY     | Auburndale  | STATE                      | FL | ZIP | 33823 |  |
| PHONE    | 863-519-7910  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://polk.floridahealth.gov/">http://polk.floridahealth.gov/</a> |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccinations; Hepatitis B and C screening                 |                            |    |     |       |  |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department –Lakeland Clinic                                   |                            |    |     |       |  |
| ADDRESS  | 3241 Lakeland Hills Blvd.   |                            |    |     |       |  |
| CITY     | Lakeland  | STATE                      | FL | ZIP | 33805 |  |
| PHONE    | 863-519-7910  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://polk.floridahealth.gov/">http://polk.floridahealth.gov/</a> |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccinations; Hepatitis B and C screening                 |                            |    |     |       |  |

|       |  |  |  |  |  |  |
|-------|--|--|--|--|--|--|
| NAME  | DOH Regional Volunteer Coordinator— Mariely M. Perez |  |  |  |  |  |
| PHONE | 863-519-7900 ext. 11013                              |  |  |  |  |  |

## Medicaid, Social Security, and Related Services

|          |  |       |    |     |       |
|----------|--|-------|----|-----|-------|
| NAME     | Medicaid Eligibility   |       |    |     |       |
| ADDRESS  | 200 N. Kentucky Ave., 1 <sup>st</sup> floor  |       |    |     |       |
| CITY     | Lakeland   | STATE | FL | ZIP | 33801 |
| PHONE    | Medicaid Helpline: 1-866-762-2237  |       |    |     |       |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |       |    |     |       |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Social Security Office                                  |   |    |     |       |
| ADDRESS  | 550 Commerce Dr.  |   |    |     |       |
| CITY     | Lakeland  | STATE                                     | FL | ZIP | 33813 |
| PHONE    | 1-800-772-1213  | HOURS M/T/R/F: 9 AM—4 PM, & W, 9 AM—12 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |

|          |   |   |    |     |       |
|----------|---|---|----|-----|-------|
| NAME     | Social Security Office                                  |   |    |     |       |
| ADDRESS  | 1395 NW Havendale Blvd.                                 |   |    |     |       |
| CITY     | Winter Haven  | STATE                                     | FL | ZIP | 33881 |
| PHONE    | 1-800-772-1213  | HOURS M/T/R/F: 9 AM—4 PM, & W, 9 AM—12 PM |    |     |       |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Veterans Services (Human Services Division)   |                            |    |     |       |  |
| ADDRESS  | 1290 Golfview Ave.  |                            |    |     |       |  |
| CITY     | Bartow  | STATE                      | FL | ZIP | 33830 |  |
| PHONE    | 863-534-5200  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.polk-county.net/human-services/veteran-services">https://www.polk-county.net/human-services/veteran-services</a> |                            |    |     |       |  |
| SERVICES | Benefits and medical care assistance  |                            |    |     |       |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Lakeland Vet Center   |  |    |     |       |
| ADDRESS  | 1370 Ariana St.   |  |    |     |       |
| CITY     | Lakeland  | STATE  | FL | ZIP | 33803 |
| PHONE    | 863-284-0841, 877-927-8387  | HOURS M-R: 7:30 AM—6:00 PM<br>F: 8:00 AM—4:30 PM |    |     |       |
| WEBSITE  | <a href="https://www.va.gov/directory/guide/facility.asp?ID=6360&amp;dnum=All">https://www.va.gov/directory/guide/facility.asp?ID=6360&amp;dnum=All</a> |  |    |     |       |
| SERVICES | Benefits and medical care assistance  |  |    |     |       |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Lakeland Community Based VA Outpatient Clinic   |                            |    |     |       |  |
| ADDRESS  | 4237 S. Pipkin Rd.  |                            |    |     |       |  |
| CITY     | Lakeland  | STATE                      | FL | ZIP | 33811 |  |
| PHONE    | 863-7012470   | HOURS M-F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.tampa.va.gov/locations/Lakeland_CBOC.asp">https://www.tampa.va.gov/locations/Lakeland_CBOC.asp</a> |                            |    |     |       |  |
| SERVICES | Comprehensive healthcare for veterans   |                            |    |     |       |  |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Office of Insurance Regulation  |       |    |     |       |
| ADDRESS  | 5309 Easy Fowler Ave.   |       |    |     |       |
| CITY     | Tampa   | STATE | FL | ZIP | 33617 |
| PHONE    | 813-987-6741  |       |    |     |       |
| WEBSITE  | <a href="https://www.floir.com/choices.aspx">https://www.floir.com/choices.aspx</a> |       |    |     |       |
| SERVICES | Find rate information for Medicare supplement and small group health                |       |    |     |       |

### Community Health Clinics

|         |   |  |    |     |       |
|---------|---|--|----|-----|-------|
| NAME    | Central Florida Health Care—Lakeland  |  |    |     |       |
| ADDRESS | 1129 N. Missouri Ave.   |  |    |     |       |
| CITY    | Lakeland  | STATE  | FL | ZIP | 33805 |
| PHONE   | 863-413-5600  | HOURS M-R: 7:30 AM-6PM, & F/Sat., 7:30 AM-5 PM |    |     |       |
| WEBSITE | <a href="http://www.cfhconline.org/lakeland">http://www.cfhconline.org/lakeland</a> |  |    |     |       |

|         |   |  |    |     |       |
|---------|---|--|----|-----|-------|
| NAME    | Central Florida Health Care—Winter Haven  |  |    |     |       |
| ADDRESS | 1514 First St., North   |  |    |     |       |
| CITY    | Winter Haven  | STATE  | FL | ZIP | 33881 |
| PHONE   | 863-292-4280  | HOURS M-R: 7:30 AM-6PM, & F/Sat., 7:30 AM-5 PM |    |     |       |
| WEBSITE | <a href="http://www.cfhconline.org/winterhaven">http://www.cfhconline.org/winterhaven</a> |  |    |     |       |

|          |  |       |                        |     |       |  |
|----------|--|-------|------------------------|-----|-------|--|
| NAME     | Love the Golden Rule, Inc. <sup>1</sup> and HepatitisMain <sup>2</sup>   |       |                        |     |       |  |
| ADDRESS  | 721 Dr. Martin Luther King, Jr. St. South                                |       |                        |     |       |  |
| CITY     | St. Petersburg   | STATE | FL                     | ZIP | 33705 |  |
| PHONE    | 727-228-1650 <sup>1</sup> , 727-228-1670 <sup>2</sup>                    |       | HOURS 8:00 AM –4:30 PM |     |       |  |
| WEBSITE  | lovethgoldenrule.com                      hepatitismain.com              |       |                        |     |       |  |
| SERVICES | Hepatitis screening and treatment for uninsured patients; \$50 per visit |       |                        |     |       |  |

|         |                                 |  |    |     |       |  |
|---------|---------------------------------|--|----|-----|-------|--|
| NAME    | Lakeland Volunteers in Medicine |  |    |     |       |  |
| ADDRESS | 1021 Lakeland Hills Blvd.       |  |    |     |       |  |
| CITY    | Lakeland                        | STATE  | FL | ZIP | 33805 |  |
| PHONE   | 863-688-5846                    | HOURS M, 8:00 AM—2:00 PM<br>T-F, 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE | https://www.lvim.net            |  |    |     |       |  |

|          |   |       |    |     |       |
|----------|---|-------|----|-----|-------|
| NAME     | Polk Healthcare Plan, Polk County Human Services  |       |    |     |       |
| ADDRESS  | 330 W. Church St.   |       |    |     |       |
| CITY     | Bartow  | STATE | FL | ZIP | 33831 |
| PHONE    | 863-533-1111  |       |    |     |       |
| WEBSITE  | <a href="https://www.polk-county.net/health-services/polk-healthcare-plan">https://www.polk-county.net/health-services/polk-healthcare-plan</a> |       |    |     |       |
| SERVICES | A healthcare plan for those who do not qualify for Medicaid or cannot afford marketplace insurance plans  |       |    |     |       |

|         |  |       |                          |     |       |  |
|---------|--|-------|--------------------------|-----|-------|--|
| NAME    | WeCare of Central Florida                  |       |                          |     |       |  |
| ADDRESS | 205 Farnol St., SW                         |       |                          |     |       |  |
| CITY    | Winter Haven                               | STATE | FL                       | ZIP | 33880 |  |
| PHONE   | 863-662-4227                               |       | HOURS M: 9:00 AM—4:00 PM |     |       |  |
| WEBSITE | http://www.wecarecentralflorida.org        |       |                          |     |       |  |
| EMAIL   | info@wecarecentralflorida.org (preferable) |       |                          |     |       |  |



## Substance Abuse Treatment Centers

|          |  |       |  |     |       |
|----------|--|-------|--|-----|-------|
| NAME     | Lakeland Centres Clinic                  |       |  |     |       |
| ADDRESS  | 3506 Lakeland Hills Blvd.                |       |  |     |       |
| CITY     | Lakeland                                 | STATE | FL   | ZIP | 33804 |
| PHONE    | 863-687-9900                             |       | HOURS M-F 6:00 AM—2:00 PM,<br>Sat: 7-9:00 AM, Sun: 8-9:00 AM |     |       |
| WEBSITE  | http://www.lakelandmethadoneclinic.com/  |       |  |     |       |
| SERVICES | Methadone maintenance treatment facility |       |  |     |       |

|         |   |       |    |     |       |
|---------|---|-------|----|-----|-------|
| NAME    | Peace River Residential Treatment Center/Bartow Crisis Campus           |       |    |     |       |
| ADDRESS | 1255 Golfview Ave.  |       |    |     |       |
| CITY    | Bartow  | STATE | FL | ZIP | 33830 |
| PHONE   | 863-519-3744, 800-627-5906  |       |    |     |       |
| WEBSITE | <a href="http://peacerivercenter.org/">http://peacerivercenter.org/</a> |       |    |     |       |

|         |   |       |    |     |       |
|---------|---|-------|----|-----|-------|
| NAME    | Peace River Substance Use Treatment Services                            |       |    |     |       |
| ADDRESS | 1835 N. Gilmore Ave.  |       |    |     |       |
| CITY    | Lakeland  | STATE | FL | ZIP | 33805 |
| PHONE   | 863-248-3311  |       |    |     |       |
| WEBSITE | <a href="http://peacerivercenter.org/">http://peacerivercenter.org/</a> |       |    |     |       |

|         |   |  |  |  |  |
|---------|---|--|--|--|--|
| NAME    | Alcoholics Anonymous  |  |  |  |  |
| PHONE   | 863-688-0211, 863-687-9275 (24/7 hotline)   |  |  |  |  |
| WEBSITE | <a href="http://www.heartlandintergroup.org/">http://www.heartlandintergroup.org/</a> |  |  |  |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Tri-County Human Services –Lakeland   |  |    |     |       |
| ADDRESS  | 5421 US Hwy 98, South   |  |    |     |       |
| CITY     | Highland City   | STATE  | FL | ZIP | 33846 |
| PHONE    | 863-701-7373  | WALK-IN HOURS<br>T: 8:00 AM—1:00 PM, W: 10:00—11:00 AM |    |     |       |
| WEBSITE  | <a href="https://tchsonline.org/medication-assisted-treatment/">https://tchsonline.org/medication-assisted-treatment/</a> |  |    |     |       |
| SERVICES | Medication assisted treatment   |  |    |     |       |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Tri-County Human Services –Winter Haven   |  |    |     |       |
| ADDRESS  | 650 Ave. K, NW  |  |    |     |       |
| CITY     | Winter Haven  | STATE  | FL | ZIP | 33881 |
| PHONE    | 863-294-7900  | WALK-IN HOURS<br>T: 8:00 AM—1:00 PM, & W: 10 AM—12:00 PM |    |     |       |
| WEBSITE  | <a href="https://tchsonline.org/medication-assisted-treatment/">https://tchsonline.org/medication-assisted-treatment/</a> |  |    |     |       |
| SERVICES | Medication assisted treatment   |  |    |     |       |

|          |   |                            |    |     |       |
|----------|---|----------------------------|----|-----|-------|
| NAME     | Tri-County Human Services –RASUW Center for Women   |                            |    |     |       |
| ADDRESS  | 2725 Hwy 60, East   |                            |    |     |       |
| CITY     | Bartow  | STATE                      | FL | ZIP | 33830 |
| PHONE    | 863-533-5860  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE  | <a href="https://tchsonline.org/the-rasuw-center-for-women/">https://tchsonline.org/the-rasuw-center-for-women/</a> |                            |    |     |       |
| SERVICES | Residential substance abuse and mental health services  |                            |    |     |       |

### Support Groups

|          |   |       |                                    |     |       |  |
|----------|---|-------|------------------------------------|-----|-------|--|
| NAME     | Hepatitis Support Group at Lakeland Regional Medical Center |       |                                    |     |       |  |
| ADDRESS  | 2112 Lakeland Hills Blvd.                                   |       |                                    |     |       |  |
| CITY     | Lakeland  | STATE | FL                                 | ZIP | 33805 |  |
| PHONE    | 863-688-0540  |       | HOURS Third Tuesday/month, 6:00 pm |     |       |  |
| EMAIL    | johnsonnurse2@yahoo.com                                     |       |                                    |     |       |  |
| SERVICES | Meets in Room 201; contact-Terra North                      |       |                                    |     |       |  |

### Continuum of Care/ Homeless Services

|          |  |       |                         |     |       |  |
|----------|--|-------|-------------------------|-----|-------|--|
| NAME     | Homeless Coalition of Polk County (ask for Laura Lee Gwinn)  |       |                         |     |       |  |
| ADDRESS  | 328 W Highland Drive   |       |                         |     |       |  |
| CITY     | Lakeland   | STATE | FL                      | ZIP | 33813 |  |
| PHONE    | 863-687-8386   |       | HOURS    Call for hours |     |       |  |
| WEBSITE  | www.polkhomeless.org   |       |                         |     |       |  |
| SERVICES | Educate, advocate and eliminate homelessness; housing relocation/stabilization/ street outreach, coordinated entry/ rapid rehousing/ homeless prevention; utility assistance |       |                         |     |       |  |

## PUTNAM COUNTY

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | County Health Department Contact—Donna Lynn or Kena Foster  |                            |    |     |       |  |
| ADDRESS  | 2801 Kennedy St.  |                            |    |     |       |  |
| CITY     | Palatka   | STATE                      | FL | ZIP | 32177 |  |
| PHONE    | 386-326-3200 ext. 3276                                      | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | http://putnam.floridahealth.gov/                            |                            |    |     |       |  |
| SERVICES | Hepatitis A and B vaccinations; Hepatitis B and C screening |                            |    |     |       |  |

|       |  |  |  |  |  |  |
|-------|--|--|--|--|--|--|
| NAME  | DOH Regional Volunteer Coordinator—Lori Thompson |  |  |  |  |  |
| PHONE | 904-588-8307                                     |  |  |  |  |  |

### Medicaid, Social Security, and Related Services

|          |  |       |    |     |       |  |
|----------|--|-------|----|-----|-------|--|
| NAME     | Medicaid Eligibility   |       |    |     |       |  |
| ADDRESS  | 5000-1 Norwood Ave.  |       |    |     |       |  |
| CITY     | Jacksonville   | STATE | FL | ZIP | 32208 |  |
| PHONE    | Medicaid Helpline: 1-866-762-2237  |       |    |     |       |  |
| SERVICES | Apply online: <a href="http://www.myflorida.com/accessflorida/">http://www.myflorida.com/accessflorida/</a><br>Find local assistance here: <a href="https://access-web.dcf.state.fl.us/CPSLookup/search.asp">https://access-web.dcf.state.fl.us/CPSLookup/search.asp</a> |       |    |     |       |  |

|          |   |   |    |     |       |  |
|----------|---|---|----|-----|-------|--|
| NAME     | Social Security Office                                  |   |    |     |       |  |
| ADDRESS  | 210 N. Palmetto Ave.                                    |   |    |     |       |  |
| CITY     | Daytona Beach   | STATE                                     | FL | ZIP | 32114 |  |
| PHONE    | 1-866-762-2237  | HOURS M/T/R/F: 9 AM—4 PM, & W: 9 AM—12 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.ssa.gov/">https://www.ssa.gov/</a> |   |    |     |       |  |
| SERVICES | Assistance with Social Security benefits                |   |    |     |       |  |

|          |   |  |       |    |     |       |
|----------|---|--|-------|----|-----|-------|
| NAME     | Veterans Services –Main Office  |  |       |    |     |       |
| ADDRESS  | 2509 Crill Ave.   |  |       |    |     |       |
| CITY     | Palatka   |  | STATE | FL | ZIP | 32177 |
| PHONE    | 386-329-0327  | HOURS M-F: 8:30 AM—5 PM (closed 12-1 pm)<br>Interlachen office: T: 2-4:30 pm by appt.<br>Crescent City office: T: 2-4:15 pm by appt. |       |    |     |       |
| WEBSITE  | <a href="http://www.putnam-fl.com/bocc/index.php/county-departments/departments-j-z/veterans-services">http://www.putnam-fl.com/bocc/index.php/county-departments/departments-j-z/veterans-services</a> |  |       |    |     |       |
| SERVICES | Benefits and medical care assistance  |  |       |    |     |       |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Palatka Community Based Outpatient Clinic   |                            |    |     |       |  |
| ADDRESS  | 400 N. SR 19, Suite 48  |                            |    |     |       |  |
| CITY     | Palatka   | STATE                      | FL | ZIP | 32177 |  |
| PHONE    | 386-329-8800  | HOURS M-F: 8:00 AM—4:30 PM |    |     |       |  |
| WEBSITE  | <a href="https://www.northflorida.va.gov/locations/jacksonville.asp">https://www.northflorida.va.gov/locations/jacksonville.asp</a> |                            |    |     |       |  |
| SERVICES | Comprehensive healthcare for veterans   |                            |    |     |       |  |

|          |   |       |    |     |       |  |
|----------|---|-------|----|-----|-------|--|
| NAME     | Office of Insurance Regulation  |       |    |     |       |  |
| ADDRESS  | 955 Orange Ave., Suite E  |       |    |     |       |  |
| CITY     | Daytona Beach   | STATE | FL | ZIP | 32114 |  |
| PHONE    | 386-254-3920  |       |    |     |       |  |
| WEBSITE  | <a href="https://www.floir.com/choices.aspx">https://www.floir.com/choices.aspx</a> |       |    |     |       |  |
| SERVICES | Find rate information for Medicare supplement and small group health                |       |    |     |       |  |

## Community Health Clinics

|         |   |       |    |     |       |
|---------|---|-------|----|-----|-------|
| NAME    | Mobile Health Outreach Ministry   |       |    |     |       |
| CITY    | Jacksonville  | STATE | FL | ZIP | 32210 |
| PHONE   | 904-308-7911  |       |    |     |       |
| WEBSITE | <a href="https://www.jaxhealth.com/about-us/outreach-ministries/mobile-health-outreach-ministry/">https://www.jaxhealth.com/about-us/outreach-ministries/mobile-health-outreach-ministry/</a> |       |    |     |       |

|          |   |  |                            |    |     |       |
|----------|---|--|----------------------------|----|-----|-------|
| NAME     | Azalea Health   |  |                            |    |     |       |
| ADDRESS  | 306 Union Ave.  |  |                            |    |     |       |
| CITY     | Crescent City   |  | STATE                      | FL | ZIP | 32112 |
| PHONE    | 386-698-1232  |  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |
| WEBSITE  | http://azahealth.org/crescent-city/   |  |                            |    |     |       |
| SERVICES | Accepts Medicare, Medicaid, and private insurance; sliding fee available for qualified patients. Hepatitis B and C testing and Hepatitis A and B vaccination. |  |                            |    |     |       |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Azalea Health   |                            |    |     |       |  |
| ADDRESS  | 1213 Florida 20   |                            |    |     |       |  |
| CITY     | Interlachen   | STATE                      | FL | ZIP | 32148 |  |
| PHONE    | 386-684-4914  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | http://azahealth.org/interlachen/   |                            |    |     |       |  |
| SERVICES | Accepts Medicare, Medicaid, and private insurance; sliding fee available for qualified patients. Hepatitis B and C testing and Hepatitis A and B vaccination. |                            |    |     |       |  |

|          |   |  |    |     |       |
|----------|---|--|----|-----|-------|
| NAME     | Azalea Health   |  |    |     |       |
| ADDRESS  | 1302 River St.  |  |    |     |       |
| CITY     | Palatka   | STATE  | FL | ZIP | 32177 |
| PHONE    | 386-328-8371  | HOURS M-R, 8:00 AM—7:00 PM<br>F, 8:00 AM—5:00 PM |    |     |       |
| WEBSITE  | http://azahealth.org/palatka/   |  |    |     |       |
| SERVICES | Accepts Medicare, Medicaid, and private insurance; sliding fee available for qualified patients. Hepatitis B and C testing and Hepatitis A and B vaccination. |  |    |     |       |

|          |   |                            |    |     |       |  |
|----------|---|----------------------------|----|-----|-------|--|
| NAME     | Azalea Health   |                            |    |     |       |  |
| ADDRESS  | 405 Elm St.   |                            |    |     |       |  |
| CITY     | Welaka  | STATE                      | FL | ZIP | 32193 |  |
| PHONE    | 386-467-3171  | HOURS M-F: 8:00 AM—5:00 PM |    |     |       |  |
| WEBSITE  | <a href="http://azahealth.org/welaka/">http://azahealth.org/welaka/</a>   |                            |    |     |       |  |
| SERVICES | Accepts Medicare, Medicaid, and private insurance; sliding fee available for qualified patients. Hepatitis B and C testing and Hepatitis A and B vaccination. |                            |    |     |       |  |

### Continuum of Care/ Homeless Services

|          |   |       |                      |     |       |  |
|----------|---|-------|----------------------|-----|-------|--|
| NAME     | United Way of North Central Florida (ask for Mona Gil de Gibaja)          |       |                      |     |       |  |
| ADDRESS  | 6031 NW 1 <sup>st</sup> Place   |       |                      |     |       |  |
| CITY     | Gainesville   | STATE | FL                   | ZIP | 32607 |  |
| PHONE    | 352-331-2800  |       | HOURS Call for hours |     |       |  |
| WEBSITE  | <a href="http://www.unitedwayncfl.org/">http://www.unitedwayncfl.org/</a> |       |                      |     |       |  |
| SERVICES | Education, health and financial stability opportunities                   |       |                      |     |       |  |