



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2024-2025

LFIR # 1298

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

This comprehensive and statewide program, which is highly responsive to state and national priority recommendations, is designed to support Florida's efforts to curb the fast-growing rates of opioid-related addiction and deaths by: (1) Increasing the capacity of Florida's healthcare workforce and delivery system to appropriately prevent and treat opioid misuse and addiction; and (2) Increase community awareness of the risks associated with opioid misuse and addiction.

5. **State Agency to receive requested funds**

State Agency contacted? Yes

6. **Amount of the Nonrecurring Request for Fiscal Year 2024-2025**

Type of Funding	Amount
Operations	1,000,050
Fixed Capital Outlay	0
Total State Funds Requested	1,000,050

7. **Total Project Cost for Fiscal Year 2024-2025 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,000,050	100%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2024-2025	1,000,050	100%

8. **Has this project previously received state funding?** Yes

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	1,000,050	378	No

9. **Is future funding likely to be requested?** Yes

a. **If yes, indicate nonrecurring amount per year.**

b. **Describe the source of funding that can be used in lieu of state funding.**

Support may be derived from state Opioid Trust Fund Settlement dollars.

10. **Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**

No



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If yes, indicate the amount of funds received and what the funds were used for.

Complete questions 11 and 12 for Fixed Capital Outlay Projects

11. Status of Construction

a. What is the current phase of the project?

- Planning
 Design
 Construction
 N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

12. List the owners of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owners of the facility and the entity.

13. Details on how the requested state funds will be expended

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	This position will serve as the point of contact between Florida Alliance for Healthy Communities (FAHC) and the State responsible for ensuring the successful design, implementation, and evaluation of activities associated with an opioid education and training program in all 67 counties. Duties include programmatic & budget oversight; timely submission of accurate financials & progress reports; and assuring exceptional program performance.	15,000
Other Salary and Benefits	A Coordinator will be assigned to establish and monitor sub-awards with multiple regional partners; maintain budget parameters by tracking organizational expenses and expenditures; assure quality control for program deliverables; establish a schedule of fiscal and program-related tasks; and maintain compliance with State reporting requirements.	50,000
Expense/Equipment/Travel/Supplies/Other	General materials (office supplies, travel, printing) needed to support administrative activities, including statewide meetings and conferences.	2,050
Consultants/Contracted Services/Study	Support for independent audit and opioid use disorder experts to serve on a statewide program advisory group for program development, implementation, evaluation, and improvement.	15,000
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Support to lead entity for program implementation, including training costs, equipment and site costs, materials and supplies (including indirect costs not to exceed 10%).	50,000



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Consultants/Contracted Services/Study	Delivery of program-related activities, including trainings, community prevention education, and other efforts at the local level throughout all 67 Florida counties through sub-awards (including indirect costs not to exceed 10%) with 10 regional AHEC Centers and 5 university-based AHEC Programs.	868,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		1,000,050

14. Program Performance

a. What specific purpose or goal will be achieved by the funds requested?

It is the goal of this program to contribute to Florida's efforts to reduce opioid misuse behaviors and opioid-related mortality and morbidity through targeted professional training and community-based educational interventions.

b. What activities and services will be provided to meet the intended purpose of these funds?

- Train primary care and other health professionals to manage or reduce opioid misuse
- Enhance opioid misuse curriculum for health professions students and residents
- Promote evidence-based opioid misuse screening and intervention strategies at underserved sites with limited or non-existent resources
- Prepare Community Health Workers, faith-based organizations, peer counselors, educators, and others, to detect, prevent, and refer to services real or potential instances of opioid misuse

c. What direct services will be provided to citizens by the appropriation project?

- Health professionals and health professions students in training will be more knowledgeable about evidence-based opioid treatment and patient care
- Community Health Workers, peer counselors, faith-based ministries, educators, and service providers will be equipped to detect, intervene with, and refer to services actual or potential instances of opioid misuse

d. Who is the target population served by this project? How many individuals are expected to be served?

Persons with poor mental and/or physical health, physically disable persons, drug users, economically disadvantaged individuals, at-risk youth, LGBTQIA, elderly, college students, jobless persons, and homeless persons. It is estimated that 720 health professionals and 1,105 health professions students from multiple disciplines and 4,010 individuals in rural, medically underserved communities around the state will be served.

e. What is the expected benefit or outcome of this project? What is the methodology by which this outcome will be measured?

AHEC will: 1) Provide systems-based support to at least 25 primary care sites and 25 community-based organizations around the state - particularly in rural and medically underserved communities - to enhance pain management services, reduce the risk of opioid misuse, and identify and treat opioid misuse. AHEC will track systems enhancements at targeted primary care delivery sites and community based organizations. The State will be able to assess increases in treatment outcomes and reductions in opioid misuse morbidity and mortality. 2) Provide community-based education programs to a minimum of 720 health professionals, 1105 health professions students and 4010 individuals throughout the state to increase awareness of the risks of opioid misuse disorder and strategies to appropriately prevent, detect, and intervene in opioid misuse behaviors. Data will be compiled and presented to demonstrate increased participant knowledge of opioid misuse disorders, behaviors, and treatment options.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties for failing to meet deliverables or performance measures provided for the contract?

Reductions in funding per unmet deliverables.

15. Requester Contact Information



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a. First Name Last Name

b. Organization

c. E-mail Address

d. Phone Number Ext.

16. Recipient Contact Information

a. Organization

b. Municipality and County

c. Organization Type

- For Profit Entity
- Non Profit 501(c)(3)
- Non Profit 501(c)(4)
- Local Entity
- University or College
- Other (please specify) 501(c)(6) membership organization

d. First Name Last Name

e. E-mail Address

f. Phone Number

17. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number