



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2020-2021

LFIR # 1211

1. **Project Title**
2. **Senate Sponsor**
3. **Date of Request**

4. **Project/Program Description**

Mental Health Services at the Steven A. Cohen Military Family Clinic at Aspire Health Partners will provide critical expansion of behavioral health services for veterans and their families regardless of discharge status. For all too many, these individuals live life coping with trauma and mental health issues related to their military service. Aspire will provide evidenced based, culturally appropriate, person centered therapy for mental health issues including depression, anxiety, post-traumatic stress, adjustment issues, anger, grief and loss, family issues, transition challenges, relationship problems, and children's behavioral problems. Services will include assessment, case management, outpatient psychiatric, and telehealth treatment. Aspire will target post 9/11 veterans and their families who cannot access veteran benefits. Services will be provided to veterans and their families living in Orange, Seminole, Osceola, Brevard and Lake Counties.

5. **State Agency to receive requested funds**
- State Agency contacted?     Yes     No

6. **Amount of the Nonrecurring Request for Fiscal Year 2020-2021**

Type of Funding	Amount
Operations	<input style="width: 80%;" type="text" value="750,000"/>
Fixed Capital Outlay	<input style="width: 80%;" type="text" value="000"/>
<b>Total State Funds Requested</b>	<b>750,000</b>

7. **Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	<input style="width: 80%;" type="text" value="750000"/>	<input style="width: 80%;" type="text" value="100.0"/> %
<b>Matching Funds</b>		
Federal	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
State (excluding the amount of this request)	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
Local	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
Other	<input style="width: 80%;" type="text" value="00"/>	<input style="width: 80%;" type="text" value="0"/> %
<b>Total Project Costs for Fiscal Year 2020-2021</b>	<b>750,000</b>	<b>100</b> %

8. **Has this project previously received state funding?**     Yes     No

If yes, provide the most recent instance:

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>	<input style="width: 100%;" type="text"/>

9. **Is future-year funding likely to be requested?**     Yes     No

If yes, indicate nonrecurring amount per year.



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**10. Details on how the requested state funds will be expended**

Spending Category	Description	Amount
<b>Administrative Costs:</b>		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits	Includes prorated amount of Agency Exec. staff, HR, Accounting, Quality Mgmt., Payroll, etc. and related fringe benefits.	75,000
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
<b>Operational Costs: Other</b>		
Salary and Benefits	Program Director, Licensed/Credentialed Therapists, Case Managers, Support Staff, Outreach Staff, Communication Manager.	565,000
Expense/Equipment/Travel/Supplies/Other	Computers, secure internet connections, product licenses, staff travel, supplies, transportation.	100,000
Consultants/Contracted Services/Study	Training and evidenced based protocol.	10,000
<b>Fixed Capital Construction/Major Renovation:</b>		
Construction/Renovation/Land/Planning Engineering		
<b>Total State Funds Requested (must equal total from question #6)</b>		<b>750,000</b>



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#### 11. Program Performance

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

Aspire Health Partners will provide behavioral health services for post 9/11 veterans regardless of discharge status, and their families including outreach, assessment, case management, outpatient, and telehealth treatment to promote recovery, reduce relapse and increase functionality. Aspire will serve all veterans including those from the National Guard and Reserves, and their families. Services are designed to help individuals and family members address a variety of mental health issues including depression, anxiety, post-traumatic stress, adjustment issues, anger, grief and loss, family issues, transition challenges, relationship problems, and children's behavioral problems. The goal is to support veterans and their families as they begin their next mission: healthy and happy lives and Getting Back To Better.

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

Aspire Health Partners will provide assessment, case management, outpatient, and telehealth treatment services as described in Ch. 65D-30 and in accordance with the Commission on Accreditation of Rehabilitative Facilities (CARF) accrediting standards.

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

Aspire Health Partners will provide behavioral health services, including assessment, case management, outpatient, and telehealth treatment, for post 911 veterans and their families. Aspire will use best practices available including the following Evidence-Based Practices: Cognitive Behavioral Therapy (CBT), Cognitive Behavioral Therapy for Insomnia (CBT-I), Prolonged Exposure Therapy (PE), and Cognitive Processing Therapy (CPT). Services will be provided in individual and group settings, as well via telehealth for clients unable to go to the clinic.

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

Aspire Health Partners will serve post 9/11 veterans and their families coping with a variety of mental health issues including depression, anxiety, post-traumatic stress, adjustment issues, anger, grief and loss, family issues, transition challenges, relationship problems and children's behavioral problems. Aspire will serve all targeted veterans including those from the National Guard and Reserves, and their families, regardless of discharge status. Aspire will target post 9/11 veterans and their families. Services will be provided to veterans and their families statewide, but will focus on those living in Orange, Seminole, Osceola, Brevard and Lake Counties. Aspire will serve a minimum of 150 individuals each year.

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

The benefit is to promote recovery, reduce relapse and increase functionality among individuals with mental health, substance use and co-occurring disorders. The proposed outcomes and methodology are: 1) 75% increase in medication adherence among individuals with mental health disorders; 2) 75% receiving outpatient and telehealth behavioral health services for at least 120 days will demonstrate improved functioning; 3) 50% reduction in frequency and intensity of acute care commitments / hospitalizations / criminal justice involvement. Outcomes will be measured through: Daily / Monthly data collection; Monthly / Quarterly trends analysis. Goal measured Quarterly / Annually for attainment.

##### 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 in the contract?

Suggested penalties will be those outlined in the executed contract. We do not anticipate this to be an issue as we fully expect to meet contract performance measures.



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12. **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.**

N/A

13. **Requestor Contact Information**

- a. First Name  Last Name
- b. Organization
- c. E-mail Address
- d. Phone Number  Ext.

14. **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)
- d. First Name  Last Name
- e. E-mail Address
- f. Phone Number

15. **Lobbyist Contact Information**

- a. Name
- b. Firm Name
- c. E-mail Address
- d. Phone Number  Ext.