



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2021-2022

LFIR # 1055

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

4. Project/Program Description

Provide expanded primary care to improve the health status and reduce the health spending for the uninsured and underinsured in DeSoto, Manatee, and Sarasota counties by implementing a care coordination model of care with the goal of reducing inpatient hospital stays, re-admissions, and high cost utilization.

5. State Agency to receive requested funds
- State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2021-2022

Type of Funding	Amount
Operations	2,000,000
Fixed Capital Outlay	0
Total State Funds Requested	2,000,000

7. Total Project Cost for Fiscal Year 2021-2022 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	2,000,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	0	0%
Local	0	0%
Other	2,000,000	50%
Total Project Costs for Fiscal Year 2021-2022	4,000,000	100%

8. Has this project previously received state funding?

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2019-20	0	2,000,000	443	No

9. Is future funding likely to be requested?

- a. If yes, indicate nonrecurring amount per year.
- b. Describe the source of funding that can be used in lieu of state funding.
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10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?

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



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May 2020 - \$1,927,309 for Paycheck Protection Program.
March to May 2020 - \$5,649,931 for PPE, testing supplies, cover lost revenue and salaries of employees directly involved in detecting, preventing, diagnosing and responding to COVID19.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs: Other		
Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other	Direct service to patients based on a unit cost	2,000,000
Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		2,000,000

12. Program Performance

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

Provide expanded primary care access to improve health status and reduce health care spending for the uninsured and under-insured residents of DeSoto, Manatee, Hardee and Sarasota counties.
The services will include comprehensive care coordination to reduce hospital re-admissions as well as reduce inappropriate use of the emergency room and patient adherence to care.

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

Provide preventative and sick visits to the uninsured and under-insured while reducing inpatient re-admissions through effective care coordination.

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

Citizens will be provided access to medical services to provide preventative services, manage chronic conditions, and provide the support of care coordinators to control escalating health care costs and reduce hospital re-admission rates.

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

Uninsured and under-insured to include Medicaid recipients.
It is anticipated in excess of 800 patients 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?

The state will benefit from reduced health spending and the communities will benefit from improved health status of the uninsured and under-insured.
Meeting required contract deliverables - required number of patients served and visits provided.
Service delivery sites are operational and open to the target population.

f. What are the suggested penalties that the contracting agency may consider in addition to its standard penalties



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for failing to meet deliverables or performance measures provided for the contract?

Funding adjustment based on deliverables not met.

- 13. 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.**

Not applicable



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14. Requestor Contact Information

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

15. 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

16. Lobbyist Contact Information

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