



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1113

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

UF Health has launched a network of Mobile Stroke Treatment Units (MSTU) throughout the state of Florida (in Alachua County, Duval County and Sumter County). The impact of the UF Health MSTU extends to both the intended audience, stroke patients, and the general community in which it operates. By providing immediate care and treatment to stroke patients, the MSTU significantly reduces the time it takes to make an accurate stroke diagnosis and administer time-sensitive therapies. This rapid intervention can save critical moments, minimize long-term disability, and improve clinical outcomes for stroke patients. The launch of the MSTU network represents a major advancement in stroke care in Florida, demonstrating UF Health's commitment to enhancing patient care efforts and preserving brain function.

5. State Agency to receive requested funds

State Agency contacted? Yes

6. Amount of the Nonrecurring Request for Fiscal Year 2025-2026

| Type of Funding | Amount |
|------------------------------------|------------------|
| Operating | 5,000,000 |
| Fixed Capital Outlay | 0 |
| Total State Funds Requested | 5,000,000 |

7. Total Project Cost for Fiscal Year 2025-2026 (including matching funds available for this project)

| Type of Funding | Amount | Percentage |
|--|------------------|-------------|
| Total State Funds Requested (from question #6) | 5,000,000 | 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 2025-2026 | 5,000,000 | 100% |

8. Has this project previously received state funding? Yes

If yes, provide the most recent instance:

| Fiscal Year (yyyy-yy) | Amount | | Specific Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
| | Recurring | Nonrecurring | | |
| 2024-25 | 0 | 10,000,000 | | No |

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

a. If yes, indicate nonrecurring amount per year.

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1113

Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. 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?

e. What funding stream will be used for ongoing operations and maintenance of the project?

11. 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.

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

| Spending Category | Description | Amount |
|--|---|------------------|
| Administrative Costs: | | |
| Executive Director/Project Head Salary and Benefits | Statewide system leader and local site directors across UF Health | 525,000 |
| Other Salary and Benefits | | 0 |
| Expense/Equipment/Travel/Supplies/Other | | 0 |
| Consultants/Contracted Services/Study | | 0 |
| Operational Costs | | |
| Salary and Benefits | UF Health's MSTU crew (stroke trained registered nurse and CT technologist) and the Stroke Neurologist's time | 2,000,000 |
| Expense/Equipment/Travel/Supplies/Other | Equipment, supplies, medications to operate the ambulance | 825,000 |
| Consultants/Contracted Services/Study | EMS partnering agency staff (paramedic and EMT) | 1,650,000 |
| Fixed Capital Construction/Major Renovation: | | |
| Construction/Renovation/Land/Planning Engineering | | 0 |
| Total State Funds Requested (must equal total from question #6) | | 5,000,000 |

13. Program Performance

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

Improved stroke care throughout the state resulting in enhanced patient outcomes (such as increase in patient treatment with intravenous thrombolytics, shorter inpatient hospital length of stay, more patients discharged directly to home, increased functional ability).

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



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1113

Automatic dispatch of the Mobile Stroke Treatment Unit to bring expert stroke care to the field, allowing for more timely diagnosis and treatment of acute stroke patients. Additionally, the MSTU has implemented "direct to" pathways bringing the patient to the definitive care directly from the ambulance (such as direct admission to the endovascular suite for emergent brain surgery or direct admission to the Neuro-medicine Intensive Care Unit post treatment on the MSTU).

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

More rapid diagnosis and treatment of acute stroke patients - saving critical moments to minimize long-term disability and improve clinical outcomes for stroke patients.

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

Citizens in Alachua County, Duval County and Sumter County with the ability to serve as a resource for the citizens in the surrounding rural counties. The UF Health Mobile Stroke Program has the ability to impact 13,000 stroke hospitalizations annually.

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

Improved stroke care metrics and patient outcome measures. The Mobile Stroke Program tracks stroke care measures for every patients admitted to the MSTU for the acute stroke work up (time to labs completed, time to CT completed, time to acute interventions provided). Additionally, the Mobile Stroke Program measures disability as the time of stroke presentation as well as disability at the time of discharge and 90 day post stroke - this is measured by the Modified Rankin Scale (mRS) Score. Both the stroke care metrics and the patient's mRS will allow us to measure stroke patient outcomes in a clear and meaningful way.

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?

Penalties would be not receiving funding if we are not achieving the performance measure we set forth.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- Mitigation (reducing or eliminating potential loss of life or property)
- Response (addressing the immediate and short-term effects of a natural disaster)
- Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1113

16. Has the entity applied for or received state assistance for this project (other than this request)?

- Yes, Applied
- Yes, Received
- No
- No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name **Last Name**

b. Organization

c. E-mail Address

d. Phone Number **Ext.**

18. 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 **Ext.**

19. Lobbyist Contact Information

a. Name

b. Firm Name



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2025-2026

LFIR # 1113

c. E-mail Address

d. Phone Number

The information provided will be posted to the Florida Senate website for public viewing if sponsored by a Senator.