



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2025-2026

LFIR # 1581

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

**4. Project/Program Description**

FESP is comprised of 5 independent, non-profit epilepsy organizations serving the entire state of Florida. These non-profits provide an extensive range of vital services in local communities for individuals with epilepsy and their families. Core services provided by the legislative program are case management, medical services and prevention and education services. These lifesaving activities help prevent epilepsy in the general population and improves the quality of life for over 500,000 Floridians (including 88,000 children) living with epilepsy while saving the State of Florida money and resources by vastly reducing emergency room visits. The program is proven with 90% of patients reporting fewer emergency room visits once enrolled in the the FESP. There has been an over 93% decline in the FESP Seat Belt Trust Fund (\$1.3M less) since 2013-2014 and a cumulative cost of living shortfall over 11 years totaling \$5.6M. Both creating hardship for Floridians affected by epilepsy.

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

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

| Type of Funding                    | Amount           |
|------------------------------------|------------------|
| Operating                          | 1,000,000        |
| Fixed Capital Outlay               | 0                |
| <b>Total State Funds Requested</b> | <b>1,000,000</b> |

**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)       | 1,000,000        | 18%         |
| <b>Matching Funds</b>                                |                  |             |
| Federal  | 500,000          | 9%          |
| State (excluding the amount of this request)         | 3,168,234        | 57%         |
| Local  | 400,000          | 7%          |
| Other  | 500,000          | 9%          |
| <b>Total Project Costs for Fiscal Year 2025-2026</b> | <b>5,568,234</b> | <b>100%</b> |

8. Has this project previously received state funding?
- If yes, provide the most recent instance:

| Fiscal Year<br>(YYYY-YY) | Amount    |              | Specific<br>Appropriation # | Vetoed |
|--------------------------|-----------|--------------|-----------------------------|--------|
|                          | Recurring | Nonrecurring |                             |        |
| 2024-25                  | 3,168,234 | 976,364      | 446                         | No     |

9. Is future-year 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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Florida Epilepsy Service Providers annually seek funds to diligently augment state funding from grantors, individuals, and other government agencies. The nonrecurring amount requested is to replace drastic cuts in the Epilepsy Seat Belt Trust Fund over the past 11 years representing a 93% reduction in collections (\$1,332,831) since 2014 coupled with appropriation cuts over the last 10 years for a cumulative shortfall of almost \$12M.

## 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  |
|---|--|---------|
| <b>Administrative Costs:</b>                        |  |         |
| Executive Director/Project Head Salary and Benefits | 11% of the funds requested will be used towards administrative staff salaries for five epilepsy nonprofit providers including 14% benefits plus taxes.   | 114,770 |
| Other Salary and Benefits                           |  | 0       |
| Expense/Equipment/Travel/Supplies/Other             |  | 0       |
| Consultants/Contracted Services/Study               |  | 0       |
| <b>Operational Costs</b>                            |  |         |
| Salary and Benefits                                 | 55% of the funding will expand staffing - Case Managers who work directly with clients and their families and Prevention and Education Coordinators who educate families, employers, police, school, nurses and the community at large.  | 547,688 |
| Expense/Equipment/Travel/Supplies/Other             | 13% of the funding will provide offices, office equipment and supplies, printed and online educational materials, travel for program staff to attend health fairs, online and in-person presentations, and outreach to the community at large about epilepsy prevention and first aid. | 131,855 |



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|  |   |                  |
|--|---|------------------|
| Consultants/Contracted Services/Study                                  | 21% of funding will pay doctors and hospitals across the state at vastly reduced rates for medical visits and diagnostic testing for patients economically qualified. Negotiated rates with medical professionals treats a single patients for approximately \$851 annually plus in-kind donations for a total of \$1100 per patient per year. AHCA 2021 ED visits for epilepsy was at an average statewide \$11,256. | 205,687          |
| <b>Fixed Capital Construction/Major Renovation:</b>                    |   |                  |
| Construction/Renovation/Land/Planning Engineering                      |   | 0                |
| <b>Total State Funds Requested (must equal total from question #6)</b> |   | <b>1,000,000</b> |

**13. Program Performance**

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

The funds will provide epilepsy prevention education, early intervention, medical treatment, school trainings, support services, mental health services, referrals and on-going case management to improve the quality of life for the over 500,000 Floridians living with epilepsy and their families while simultaneously saving the State of Florida money and valuable resources. 90% of patients will report fewer emergency room visits once enrolled in the FESP compared to 2.5 visits prior to enrollment. AHCA 2023 reports the average statewide cost for an epilepsy ED visit cost \$12,315 per visit. In comparison, FESP negotiated rates with medical professionals treats a single patient for approximately \$851 annually plus in-kind donations for a total of \$1,100 per patient per year. FESP's services save the state of Florida more than \$123 million annually in hospital costs alone.

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

Medical and diagnostic services, individualized case management, prescription medication assistance, support groups, self- management programs, basic life needs and family support services for over 4,000 individuals with a diagnosis of epilepsy as well as epilepsy prevention and education for the families and patients with epilepsy and the community at large.

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

Medical visits and all diagnostic services including EEG's and MRI's, individualized case management, prescription medication assistance, support groups, mental health services, education and family support services. In addition, epilepsy education has been expanded to provide the community at large with a large focus on public schools since the passing of the 2023 Care of Students with Epilepsy or Seizure Disorders Legislation (HB173 & SB 340).

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

Over 500,000 Floridians with epilepsy and their families as well as educating the Florida community at large about epilepsy prevention and seizure first aid.

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

Benefit: Reduced emergency room visits; improved seizure management measured through an annual client survey.  
 Benefit: Patients will have better understanding and control of their seizures measured through an annual client survey.  
 Benefit: Improved seizure control for many means job and education opportunities measured through an annual client survey.

**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?**

Current Department of Health contracts afford monthly fiscal penalties for any epilepsy service provider not meeting the required deliverables and performance measures of the contract. Deliverables and performance measures are determined annually based on income received for services.

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

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



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- 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:**

**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**

|                          |  |                  |  |
|--------------------------|--|------------------|--|
| <b>a. First Name</b>     | <input style="width: 95%;" type="text" value="Karen"/>   | <b>Last Name</b> | <input style="width: 95%;" type="text" value="Egozi"/> |
| <b>b. Organization</b>   | <input style="width: 100%;" type="text" value="Epilepsy Alliance Florida on behalf of the Florida Epilepsy Services Programs (FESP)"/> |                  |  |
| <b>c. E-mail Address</b> | <input style="width: 100%;" type="text" value="kegozi@eafla.org"/>   |                  |  |
| <b>d. Phone Number</b>   | <input style="width: 80%;" type="text" value="(786)999-2316"/>   | <b>Ext.</b>      | <input style="width: 15%;" type="text"/>               |

**18. Recipient Contact Information**

|                        |   |
|------------------------|---|
| <b>a. Organization</b> | <input style="width: 85%;" type="text" value="Epilepsy Florida, Inc. DBA Epilepsy Alliance Florida"/> |
|------------------------|---|



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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

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.*