

**LFIR #3229** 

1.	Project Title	Advanced Opioid Recover	ry Center		
2.	Senate Sponsor	Darryl Rouson			
3.	Date of Request	3/4/2025			
4.	Project/Program Des	scription			
	addressing OUD from rehabilitation services development training.	n a biological, psychological s, medical and mental health	ogram empowers individuals re and social focus. Over 18 mon a services, non-opioid pain mar lency and independence, providuals.	ths, participants rec nagement activities,	ceive holistic and workforce
5.	State Agency to rece	eive requested funds	Department of Children and F	amilies	
	State Agency contac	cted? No			
_					
6.	Amount of the Nonre	ecurring Request for Fisca	ıl Year 2025-2026		
6.	Amount of the Nonre		Il Year 2025-2026	ount	
6.				ount 2,750,000	
6.	Type of Funding				
6.	Type of Funding Operating	ecurring Request for Fisca		2,750,000	
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re	ecurring Request for Fisca		2,750,000 1,250,000 <b>4,000,000</b>	ect)
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re	ecurring Request for Fisca	Amo	2,750,000 1,250,000 <b>4,000,000</b>	ect)
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re Total Project Cost fo Type of Funding	ecurring Request for Fisca	Amo	2,750,000 1,250,000 <b>4,000,000</b> ilable for this proje	ect)
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re Total Project Cost fo Type of Funding	ecurring Request for Fisca equested or Fiscal Year 2025-2026 (in	ncluding matching funds ava	2,750,000 1,250,000 4,000,000 ilable for this proje	ect)
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re Total Project Cost fo Type of Funding Total State Funds Re	ecurring Request for Fisca equested or Fiscal Year 2025-2026 (in	ncluding matching funds ava	2,750,000 1,250,000 4,000,000 ilable for this proje	ect)
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re Total Project Cost fo Type of Funding Total State Funds Re Matching Funds Federal	ecurring Request for Fisca equested or Fiscal Year 2025-2026 (in	Amount 4,000,000	2,750,000 1,250,000 4,000,000 ilable for this proje Percentage 100%	ect)
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re Total Project Cost fo Type of Funding Total State Funds Re Matching Funds Federal	equested or Fiscal Year 2025-2026 (in	Amount 4,000,000	2,750,000 1,250,000 4,000,000 ilable for this proje Percentage 100%	ect)
	Type of Funding Operating Fixed Capital Outlay Total State Funds Re Total Project Cost fo Type of Funding Total State Funds Re Matching Funds Federal State (excluding the a	equested or Fiscal Year 2025-2026 (in	Amount 4,000,000	2,750,000 1,250,000 4,000,000 ilable for this proje Percentage 100%	ect)

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

**Total Project Costs for Fiscal Year 2025-2026** 

No

4,000,000

100%

Fiscal Year	Amount		Specific	Vetoed	
(уууу-уу)	Recurring	Nonrecurring	Appropriation #		

Э.	IS	fut	ture	-year	func	ling	likely	/ to	be	reques	ted?
----	----	-----	------	-------	------	------	--------	------	----	--------	------

Yes

a. If yes, indicate nonrecurring amount per year.

2,500,000

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

AOR Foundation is actively seeking grants and other external funding for its comprehensive opioid recovery program.



10. Status of Construction

### The Florida Senate Local Funding Initiative Request Fiscal Year 2025-2026

**LFIR #3229** 

### Complete questions 10 and 11 for Fixed Capital Outlay Projects

a. What is the current phase of the project?							
○ Planning							
b. Is the project "shovel ready" (i.e permitted)?							
c. What is the estimated start date of construction?	05/30/2025						
d. What is the estimated completion date of construction?	11/28/2025						

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

Ongoing operations and maintenance will be funded by a portion of the reimbursement for wraparound services, which are billable to third party payors such as Medicare, Medicaid and commercial health insurers. We are also actively seeking grant funding for our treatment and recovery program.

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.

TBD. We are still actively seeking a location for the Greater Tampa Bay area for our recovery center. We anticipate leasing a portion of a local acute hospital ward to perform our hospital based procedure.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	The Executive Director of the AOR program will lead a transformative initiative supporting individuals recovering from opioid use disorder. This role oversees program strategy, operations, and partnerships to deliver holistic services, including counseling, medical support, wellness programs, and workforce development. The Executive Director will drive impact by fostering a supportive environment.	160,000
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/ Other	The AOR program requires additional funding to cover critical costs, including medical equipment essential for providing specialized care to participants throughout their recovery journey. Additionally, travel expenses are necessary to support the program's expansion across multiple counties, ensuring staff can deliver services, conduct home monitoring, and provide consistent support.	200,000
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	Critical care staff, 24/7 care model, and additional ancillary staff includes home monitoring specialists to support safety and compliance. Highly skilled medical professionals provide continuous healthcare and specialized recovery services, and wellness facilitators to oversee mental and physical health initiatives. These roles are critical to delivering personalized care.	2,000,000
Expense/Equipment/Travel/Supplies/ Other		0



**LFIR #3229** 

Consultants/Contracted Services/Study	The AOR program requires contracted services to enhance participant recovery and success. Partnerships with yoga facilities provide pain management and stress relief through specialized programs. Workforce trainers deliver tailored skills training, including resume writing and business preparation, while content developers create effective training materials to support workforce development.	390,000
Fixed Capital Construction/Ma	jor Renovation:	
Construction/Renovation/Land/ Planning Engineering	The AOR program requires funding for critical building and construction costs. This includes acquisition of a 10,000 sq foot facility in Hillsborough County to enhance service delivery and accommodate increased participant needs while providing dedicated spaces for counseling, wellness programs, and workforce training and development.	1,250,000
<b>Total State Funds Requested (</b>	4,000,000	

### 13. Program Performance

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

The AOR program addresses Florida's opioid crisis, where over 7,000 opioid-related deaths occurred in 2022. Florida ranks among the highest for opioid prescriptions and overdoses, with an economic impact of \$6–\$8 billion annually. OUD disproportionately affects the younger population, threatening the state's future workforce, highlighting the urgent need for comprehensive recovery solutions.

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

AOR will increase access to care, expand staff capacity, train personnel in evidence-based practices, and enhance facilities to provide 24/7 care. Activities include securing medical equipment, developing a tailored intake process, forming partnerships for workforce training, and implementing a robust care management system to ensure seamless delivery of wrap-around services.

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

AOR wrap-around services include rehabilitation and counseling to address the root cause of OUD, medical support for recovery oversight, and a yoga program for mental and physical wellness and pain management. Workforce development workshops provide skills like resume writing, interview prep, and business licensing to ensure meaningful employment and reduce relapse and recidivism.

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

The target population is elderly persons, persons with poor mental health, persons with poor physical health, jobless persons, economically disadvantaged persons, at-risk youth, homeless, drug users, currently or formerly incarcerated persons, drug offenders (in criminal justice), veterans. We expect to serve over 800 persons annually.

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

AOR will improve participants' mental health through a combination of counseling and therapeutic practices that focus on emotional healing, stress reduction, mindfulness, and self-awareness. The program will measure mental health improvements through standardized psychological assessments, self-reported surveys, and behavioral observations. Measures: Standardized Psychological Assessments (PHQ-9, GAD-7). Methods: Surveys, observation. Expected Outcome: A decrease in depression and anxiety scores. A reduction in reported symptoms will demonstrate the program's ability to support emotional healing and positively impact the underlying causes of OUD. Also, AOR will help reduce substance abuse in Florida by providing OUD patients with a comprehensive, holistic support system designed to address the root causes of addiction, prevent relapse, and promote long-term recovery. Goal: Reduce substance relapse rates among program participants and increase # of participants who remain in society.

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?

Return of unused funds.



LFIR # 3229

14. Is this project rela	ted to mitigation, respons	se, or recov	ery from a natural disast	ter? No	
a. If Yes, what phas	se best describes the proj	ject?			
☐ Mitigation (red	ucing or eliminating potenti	al loss of life	or property)		
☐ Response (add	dressing the immediate and	d short-term	effects of a natural disaste	∍r)	
□ Recovery (ass	sisting communities return to	o normal ope	rations, including rebuildir	ng damaged in	fastructure)
b. Name of the natu	ural disaster (or Executive	Order # fo	events not under a fede	eral declaratio	on):
15. Has the entity app	olied for or received federa	al assistanc	e for this project?		
☐ Yes, Applied					
☐ Yes, Received					
□ No					
	a anniv				
☐ No, but intends to					
a. If yes, provide th	e FEMA project workshee	et ID#:			
b. Provide the total	project cost listed on the	FEMA proj	ect worksheet:		
16. Has the entity app	olied for or received state	assistance t	for this project (other the	an this reques	st)?
☐ Yes, Applied					
☐ Yes, Received					
□ No					
☐ No, but intends to	o apply				
				a. Daidaa La	Dawaster
Commerce):	e program and state agen	icy (ex. Loca	ai Government Emergen	cy Briage Loa	an, Department of
17. Requester Contact	t Information	1			
a. First Name	Kyle	Last Name	Kwik		
b. Organization	Advanced Opioid Recover	ry Foundatio	<u>1</u>		
c. E-mail Address	kyle@aornow.com				
d. Phone Number	(850)999-3151	Ext.			

18. Recipient Contact Information



**LFIR # 3229** 

a. Organization	Advance	n				
b. Municipality and	d County		]			
c. Organization Ty						
□For Profit Entity						
☑Non Profit 501(d	:)(3)					
□Non Profit 501(d	:)(4)					
□Local Entity						
□University or Co	llege					
□Other (please sp	pecify)					
d. First Name	Kyle		Last Name	Kwik		
e. E-mail Address	kyle@ao	rnow.com				
f. Phone Number	(850)999	-3151	Ext.			
19. Lobbyist Contact I	nformatio	n				
a. Name	None				]	
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.