

Appropriations Project Request - Fiscal Year 2020-21

For projects meeting the Definition of House Rule 5.14

1. Title of Project: Florida Alliance for Healthy Communities - Opioid Addiction Training and Education Program
2. Date of Submission: 11/06/2019
3. House Member Sponsor: Lawrence McClure
Members Copied:

4. DETAILS OF AMOUNT REQUESTED:

- a. Has funding been provided in a previous state budget for this activity? Yes
If answer to 4a is "No" skip 4b and 4c and proceed to 4d, Col. E
- b. What is the most recent fiscal year the project was funded? 2018-19
- c. Were the funds provided in the most recent fiscal year subsequently vetoed? No
- d. Complete the following Project Request Worksheet to develop your request:

FY:	Input Prior Year Appropriation for this project for FY 2019-20 <i>(If appropriated in 2019-20 enter the appropriated amount, even if vetoed.)</i>			Develop New Funds Request for FY 2020-21 <i>(Requests for additional RECURRING funds are prohibited.)</i>		
Column:	A	B	C	D	E	F
Funds Description:	Prior Year Recurring Funds	Prior Year Nonrecurring Funds	Total Funds Appropriated <i>(Recurring plus Nonrecurring: column A + column B)</i>	Recurring Base Budget <i>(Will equal non-vetoed amounts provided in Column A)</i>	Additional Nonrecurring Request	TOTAL Nonrecurring plus Recurring Base Funds <i>(Will equal the amount from the Recurring base in Column D plus the Additional Nonrecurring Request in Column E.)</i>
Input Amounts:					1,200,000	1,200,000

5. Are funds for this issue requested in a state agency's Legislative Budget Request submitted for FY 2020-21? No
 - 5a. If yes, which state agency?
 - 5b. If no, which is the most appropriate state agency to place an appropriation for the issue being requested? Department of Children and Families
 - 5c. Has the appropriate state agency for administering the funding, if the request were appropriated, been contacted? No
 - 5d. Describe penalties for failing to meet deliverables or performance measures which the agency should provide in its contract to administer the funding if appropriated.
Reduction in funding per unmet deliverable

6. Requester:

- a. Name: Gustavo Saldias, MPH
- b. Organization: Florida Alliance for Healthy Communities
- c. Email: gsaldias@nova.edu
- d. Phone #: (954)262-1588

7. Contact for questions about specific technical or financial details about the project:

- a. Name: Gustavo Saldias, MPH
- b. Organization: Florida Alliance for Healthy Communities
- c. Email: gsaldias@nova.edu
- d. Phone #: (954)262-1588

8. Is there a registered lobbyist working to secure funding for this project?

- a. Name: Amanda Stewart
- b. Firm: Johnston and Stewart Government Strategies
- c. Email: Amanda@johnstonstewart.com
- d. Phone #: (813)404-5216

9. Organization or Name of entity receiving funds:

- a. Name: Florida Alliance for Healthy Communities, Inc.
- b. County (County where funds are to be expended): Statewide
- c. Service Area (Counties being served by the service(s) provided with funding): Statewide

10. What type of organization is the entity that will receive the funds? (Select one)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government
- University or College
- Other (Please describe) The Florida Alliance for Healthy Communities is a 501(c) (6) not-for-profit organization. Funds wil

11. What is the specific purpose or goal that will be achieved by the funds being requested?

Reduce opioid misuse behaviors and opioid-related mortality and morbidity through a wide range of health professional and community-based educational interventions.

12. Provide specific details on how funds will be spent. (Select all that apply)

Spending Category	Description	Nonrecurring (Should equal 4d, Col. E) Enter "0" if request is zero for the category
Administrative Costs:		
<input checked="" type="checkbox"/> a. Executive Director/Project Head Salary and Benefits	Part-time position at lead entity responsible for directing statewide planning and implementation, development and submission of progress reports to agency, monitoring budgets, and serving as main communications liaison with state agency.	15,000
<input checked="" type="checkbox"/> b. Other Salary and Benefits	Part-time coordinator to establish sub-awards, manage finances, perform quality assurance monitoring of deliverables, and manage reporting requirements to agency.	50,000
<input checked="" type="checkbox"/> c. Expense/Equipment/Travel/Supplies/Other	General miscellaneous costs (office supplies, travel, printing) to support administrative activities, including statewide meetings and conferences.	5,000
<input checked="" type="checkbox"/> d. Consultants/Contracted Services/Study	Support for content experts to serve on a statewide program advisory committee for program development, implementation, and evaluation.	10,000

Operational Costs:		
<input type="checkbox"/> e. Salaries and Benefits		
<input checked="" type="checkbox"/> f. Expenses/Equipment/Travel/Supplies/Other	Support to lead entity for program implementation, including training costs, equipment and site costs, materials and supplies (including indirect costs not to exceed 10%).	20,000
<input checked="" type="checkbox"/> g. Consultants/Contracted Services/Study	Sub-awards (including indirect costs not to exceed 10%) with 10 regional AHEC Centers and 4 university-based AHEC Programs for implementation of program related activities, including trainings, community prevention education, and other effort at the local level throughout all 67 Florida counties.	1,100,000
Fixed Capital Construction/Major Renovation:		
<input type="checkbox"/> h. Construction/Renovation/Land/Planning Engineering		
TOTAL		1,200,000

13. For the Fixed Capital Costs requested with this issue (In Question 12, category “h. Fixed Capital Outlay” was selected), what type of ownership will the facility be under when complete? (Select one correct option)

- For Profit
- Non Profit 501(c) (3)
- Non Profit 501(c) (4)
- Local Government (e.g., police, fire or local government buildings, local roads, etc.)
- State agency owned facility (For example: college or university facility, buildings for public schools, roads in the state transportation system, etc.)
- Other (Please describe)

14. Is the project request an information technology project?

No

15. Is there any documented show of support for the requested project in the community including public hearings, letters of support, major organizational backing, or other expressions of support?

Yes

15a. Please Describe:

This comprehensive and statewide program is highly responsive to several important recommendations made by a multidisciplinary panel of eight experts appearing before the Senate Health Policy Committee Workshop on the Opioid Addiction on October 10, 2017.

16. Has the need for the funds been documented by a study, completed by an independent 3rd party, for the area to be served?

Yes

16a. Please Describe:

Schnell, M., Currie, J. Addressing the Opioid Epidemic: Is There a Role of Physician Education? August 2017, National Bureau of Economic Research (NBER) working paper No. 23645. (<http://www.nber.org/papers/w23645>)

17. Will the requested funds be used directly for services to citizens?

Yes

17a. What are the activities and services that will be provided to meet the purpose of the funds?

Provide opioid-related training to current and future health care professionals; promote evidence-based opioid addiction case management strategies at primary care facilities; provide community-based opioid prevention education and information dissemination.

17b. Describe the direct services to be provided to the citizens by the funding requested.

Provide opioid-related training to current and future health care professionals; promote evidence-based opioid addiction case management strategies at primary care facilities; provide community-based opioid prevention education and information dissemination.

17c. Describe the target population to be served (i.e., "the majority of the funds requested will serve these target populations or groups.").

Select all that apply to the target population:

- Elderly persons
- Persons with poor mental health
- Persons with poor physical health
- Jobless persons

- Economically disadvantaged persons
- At-risk youth
- Homeless
- Developmentally disabled
- Physically disabled
- Drug users (in health services)
- Preschool students
- Grade school students
- High school students
- University/college students
- Currently or formerly incarcerated persons
- Drug offenders (in criminal Justice)
- Victims of crime
- General (The majority of the funds will benefit no specific group)
- Other (Please describe)

17d. How many in the target population are expected to be served?

- < 25
- 25-50
- 51-100
- 101-200
- 201-400
- 401-800
- >800

18. What benefits or outcomes will be realized by the expenditure of funds requested? (Select each Benefit/Outcome that applies)

Benefit or Outcome	Provide a specific measure of the benefit or outcome	Describe the method for measuring level of benefit
<input type="checkbox"/> Improve physical health		
<input checked="" type="checkbox"/> Improve mental health	AHEC staff will provide technical support to over 30 behavioral/mental health treatment and primary care sites to enhance their capacity to identify and treat opioid abuse and	AHEC will track systems enhancements at all targeted behavioral/mental health and primary care delivery sites. State will be able to assess increase in positive

	addiction.	addiction treatment outcomes and overall reduction in opioid overdose mortality.
<input type="checkbox"/> Enrich cultural experience		
<input type="checkbox"/> Improve agricultural production/promotion/education		
<input type="checkbox"/> Improve quality of education		
<input type="checkbox"/> Enhance/preserve/improve environmental or fish and wildlife quality		
<input checked="" type="checkbox"/> Protect the general public from harm (environmental, criminal, etc.)	AHEC staff will provide community-based educational programs for over 5,000 individuals throughout the state to increase awareness about the risks of opioid abuse, as well as on strategies to appropriately prevent, detect, and intervene opioid abuse behaviors.	State will be able to measure increased awareness of and reduction in the incidence of opioid addictive behaviors and mortality.
<input type="checkbox"/> Improve transportation conditions		
<input type="checkbox"/> Increase or improve economic activity		
<input type="checkbox"/> Increase tourism		
<input type="checkbox"/> Create specific immediate job opportunities		
<input type="checkbox"/> Enhance specific individual's economic self sufficiency		
<input type="checkbox"/> Reduce recidivism		
<input checked="" type="checkbox"/> Reduce substance abuse	HEC staff will: (a) provide 1,500 health professionals and health professions students from multiple disciplines with training oriented	State will be able to measure reductions in the prevalence of opioid addiction, and the number of emergency overdose treatment and

	towards reducing the incidence of opioid abuse, and (b) deliver preventive education programs for over 5,000 individuals in high opioid overuse risk areas throughout the state to increase awareness about the risks of opioid abuse, as well as on strategies to appropriately detect the early signs of and intervene when opioid abuse behaviors are apparent.	mortality rates arising from opioid abuse.
<input type="checkbox"/> Divert from Criminal/Juvenile justice system		
<input type="checkbox"/> Improve wastewater management		
<input type="checkbox"/> Improve stormwater management		
<input type="checkbox"/> Improve groundwater quality		
<input type="checkbox"/> Improve drinking water quality		
<input type="checkbox"/> Improve surface water quality		
<input type="checkbox"/> Other (Please describe):		

19. Provide the total cost of the project for FY 2020-21 from all sources of funding (Enter "0" if amount is zero):

Type of Funding	Amount	Percent of Total	Are the other sources of funds guaranteed in writing?
1. Amount Requested from the State in this Appropriations Project Request:	1,200,000	100.0%	N/A
2. Federal:	0	0.0%	No
3. State: (Excluding the requested Total Amount in #4d, Column F)	0	0.0%	No

4. Local:	0	0.0%	No
5. Other:	0	0.0%	No
TOTAL	1,200,000	100%	

20. Is this a multi-year project requiring funding from the state for more than one year?

Yes

20a. How much state funding would be requested after 2020-21 over the next 5 years?

- <1M
- 1-3M
- >3-10M
- >10M

20b. How many additional years of state support do you expect to need for this project?

- 1 year
- 2 years
- 3 years
- 4 years
- >= 5 years

20c. What is the total project cost for all years including all federal, local, state, and any other funds? Select the single answer which best describes the total project cost. If funds requested are for ongoing services or for recurring activities, select "ongoing activity".

- Ongoing activity – no total cost
- <1M
- 1-3M
- >3-10M
- >10M