



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2019-2020

LFIR#: 1637

1. Title of Project: NSU Health: Clinic-Based Service Outreach

2. Senate Sponsor: Lauren Book

3. Date of Submission: 02/15/2019

4. Project/Program Description:

NSU is requesting \$7.5 million to enhance our clinical operations:

- Increase the number of extenders at the clinics;
- Provide stipends to students who relocate to rural areas of the state to participate in clinical rotations;
- Increase clinical supervision opportunities;
- Provide additional health, vision, and dental screenings to school-aged children, elderly, and veterans, and provide follow up services and/or referrals to specialists;
- Increase access to our recently implemented patient portal to provide greater opportunities for patients to become better informed of their health care outcomes; and
- Continue the robust program of primary care and training sites for students and residents.

5. State Agency to receive requested funds : Department of Health

State Agency Contacted? No

6. Amount of the Nonrecurring Request for Fiscal Year 2019-2020

Type of Funding	Amount
Operations	7,500,000
Fixed Capital Outlay	
Total State Funds Requested	7,500,000

7. Total Project Cost for Fiscal Year 2019-2020 (including matching funds available for this project)

Type of Funding	Amount	Percent
Total State Funds Requested (from question #6)	7,500,000	100.00%
Federal	0	0.00%
State (excluding the amount of this request)	0	0.00%
Local	0	0.00%
Other	0	0.00%
Total Project Costs for Fiscal Year 2019-2020	7,500,000	100.0%

8. Has this project previously received state funding? No

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	NonRecurring		

9. Is future-year funding likely to be requested? Yes



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a. If yes, indicate non-recurring amount per year. \$7,500,000

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits		
Other Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study		
Operational Costs:		
Salary and Benefits		
Expense/Equipment/Travel/Supplies/Other		
Consultants/Contracted Services/Study	Increase the number of extenders at the clinics; provide stipends to students who relocate to rural areas of the state to participate in clinical rotations; increase clinical supervision opportunities; provide additional health, vision, and dental screenings to school-aged children, elderly, and veterans, and provide follow up services and/or referrals to specialists; increase access to our recently implemented patient portal to provide greater opportunities for patients; etc.	7,500,000
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		
Total State Funds Requested (must equal total from question #6)		7,500,000

11. Program Performance:

- a. **What is the specific purpose or goal that will be achieved by the funds requested?**
 Improve health care access through screenings and follow-up services to targeted populations of school-aged children, elderly, veterans, and low-income individuals.
- b. **What are the activities and services that will be provided to meet the intended purpose of these funds?**
 Well health screenings, vision screenings, dental screenings, follow-up health care services, and referrals to specialists through NSU's network of clinics.
- c. **What are the direct services to be provided to citizens by the appropriations project?**
 Health care screenings and direct primary care.
- d. **Who is the target population served by this project? How many individuals are expected to be served?**



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School-aged children, elderly, veterans, and low-income populations. Over 800 individuals will be served with this funding.

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

Improved health care and well health of identified populations. Number of screenings and referrals for services.

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?

Recoupment and withholding of funds.

12. The owner(s) of the facility to receive, directly or indirectly, any fixed capital outlay funding. Include the relationship between the owner(s) of the facility and the entity.

N/A

13. Requestor Contact Information:

- a. **Name:** George Hanbury
- b. **Organization:** Nova Southeastern University
- c. **E-mail Address:** Hanbury@nova.edu
- d. **Phone Number:** (954)542-6275

14. Recipient Contact Information:

- a. **Organization:** Nova Southeastern University
- b. **County:** Broward
- c. **Organization Type:**
 - For Profit
 - Non Profit 501(c) (3)
 - Non Profit 501(c) (4)
 - Local Entity
 - University or College
 - Other (Please specify)
- d. **Contact Name:** Sandra Harris
- e. **E-mail Address:** sharris@panzamaurer.com
- f. **Phone Number:** (850)681-0980

15. Lobbyist Contact Information

- a. **Name:** Brian Ballard
- b. **Firm Name:** Ballard Partners
- c. **E-mail Address:** Ballard@ballardfl.com
- d. **Phone Number:** (850)850-5770