

The Florida Senate Local Funding Initiative Request Fiscal Year 2020-2021

LFIR # 2369

1. **Project Title** Long Acting Injectable Buprenorphine Pilot Program

2. Senate Sponsor Oscar Braynon

3. **Date of Request** 01/14/2020

4. **Project/Program Description**

To implement a pilot program making long-acting injectable Buprenorphine available to individuals suffering from severe opioid use disorders. The target population are the largely indigent, without health insurance, and typically lack enough housing and social supports to manage daily dosing of oral Buprenorphine. This program will net positive results within the community due to increased success rates of the individuals served. This program will also address the need to provide effective treatment for individuals who suffer from severe opioid use disorder by using long-acting injectable Buprenorphine instead of a daily dose of oral Buprenorphine. Long-acting injectable Buprenorphine provides an even more effective option that these individuals can safely utilize. Finally, BARC will provide residential, intensive outpatient and outpatient treatment, depending on individual needs and progress, concurrently with the administration of the long-acting Buprenorphine.

5. State Agency to receive requested funds

Department of Health

State Agency contacted? O Yes

Yes
No

6. Amount of the Nonrecurring Request for Fiscal Year 2020-2021

Type of Funding	Amount	
Operations	158,184	
Fixed Capital Outlay	000	
Total State Funds Requested	158,184	

7. Total Project Cost for Fiscal Year 2020-2021 (including matching funds available for this project)

Type of Funding	Amount	Percentage	
Total State Funds Requested (from question #6)	158184	75.0 %	
Matching Funds			
Federal	00	0 %	
State (excluding the amount of this request)	00	0 %	
Local	52,728	25 %	
Other	00	0 %	
Total Project Costs for Fiscal Year 2020-2021	210,912	100 %	

8. Has this project previously received state funding? • Yes • No

If yes, provide the most recent instance:

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

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

If yes, indicate nonrecurring amount per year.

158,184



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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				
Other Salary and Denents				
Expense/Equipment/ Travel/Supplies/Other				
Consultants/Contracted				
Services/Study				
Operational Costs: Oth	er			
Salary and Benefits				
Expense/Equipment/	- 90 long-acting injectable buprenorphine @ \$1,680 each for a total of \$151,200.	158,184		
Travel/Supplies/Other	- Salary and fringe of 2% for the doctor's time performing assessment and education services totaling \$4,190.13.			
	- Salary and fringe of 5% for nursing time performing assessment and education services (2,793.42)			
Consultants/Contracted				
Services/Study				
Fixed Capital Construc	tion/Major Renovation:			
Construction/Renovation/ Land/Planning				
Engineering				
		158,184		
Total State Funds Requested (must equal total from question #6)				



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11. Program Performance

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

BARC's goal for the community is to help people to overcome obstacles to sobriety, improve patient outcomes, decrease opioid related crime, and reduce healthcare costs. When individuals are not engaged in drug use or alcohol addiction, they are able to be working, which directly puts more money back into the economy and as healthy individuals contributing to the community. They can provide innovation, bigger and better ideas and solutions.

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

These funds will cover the costs of the drug and medical oversight of the client. Broward Addiction Recovery Center will supplement the client care with substance abuse counseling either in a residential or outpatient setting.

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

These funds will cover the costs of the drug and medical oversight of the client. Broward Addiction Recovery Center will supplement the client care with substance abuse counseling either in a residential or outpatient setting.

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

The target population is persons suffering from severe opioid abuse disorder, are largely indigent, without health insurance, and typically lack sufficient housing and social supports to manage daily dosing of oral Buprenorphine. 45 clients are expected to directly benefit from this program.

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

This pilot program will benefit the community as a whole by the increased recovery success rates of persons with substance abuse disorders. Outcomes will be measured by following clients through continuum of care confirming abstinence through urinalysis after six months.

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?

Reduction in approved appropriation.



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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.

В	roward Addiction Re	ecovery Center (BARC)			
Re	equestor Contact	ct Information			
a.	First Name	Jack Last Name Feinberg			
b.	Organization	Broward Addiction Recovery Center (BARC)			
c.	E-mail Address	jfeinberg@broward.org			
d.	Phone Number	(954)357-4830 Ext.			
Re	ecipient Contact	Information			
	-	Broward County Board of County Commissioners			
b.	Municipality and	d County Broward			
c. Organization Type					
For-profit Entity					
	O Non-Profit 5	501(c) (3)			
	O Non-Profit 5	501(c) (4)			
	 Local Entity 	у			
	 University c 	or College			
	Other (pleased)	ase specify)			
d.	First Name	Jack Last Name Feinberg			
e.	E-mail Address j	jfeinberg@broward.org			
f.	Phone Number	(954)3574830			
15. Lobbyist Contact Information					
	-				
	Re a. b. c. d. e. f. c. f. LC a. b.	Requestor Contact a. First Name b. Organization c. E-mail Address d. Phone Number Recipient Contact a. Organization b. Municipality and c. Organization Ty	b. Organization Broward Addiction Recovery Center (BARC) c. E-mail Address jfeinberg@broward.org d. Phone Number (954)357-4830 Ext		

d. Phone Number (850)2243427

Ext.