



# The Florida Senate

## Local Funding Initiative Request

### Fiscal Year 2021-2022

LFIR # 1156

1. **Project Title**

2. **Senate Sponsor**

3. **Date of Request**

4. **Project/Program Description**

The objective of the state funding initiative is to support and enhance collaboration amongst institutions throughout Florida to significantly advance high-quality HIV/AIDS research. In an effort to better understand, prevent, and treat HIV infection and AIDS associated malignancies, in response to the health needs of Florida's citizens, state funding invests in pilot grants aimed at developing a vaccine against HIV/AIDS and an ultimate cure for HIV/AIDS. Most recently, one of our state pilot awardees received a R21 grant to expand on research findings that led to the cure of AIDS in a monkey, now known as the 'Miami Monkey.' These findings have formed the basis for a \$30M collaborative NIH grant application to develop an HIV/AIDS cure strategy that can be tested in humans.

5. **State Agency to receive requested funds**

**State Agency contacted?**

6. **Amount of the Nonrecurring Request for Fiscal Year 2021-2022**

Type of Funding	Amount
Operations	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 2021-2022 (including matching funds available for this project)**

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	1,000,000	8%
<b>Matching Funds</b>		
Federal	10,681,898	89%
State (excluding the amount of this request)	250,000	2%
Local	0	0%
Other	100,000	1%
<b>Total Project Costs for Fiscal Year 2021-2022</b>	<b>12,031,898</b>	<b>100%</b>

8. **Has this project previously received state funding?**

Fiscal Year (yyyy-yy)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2020-21	0	1,000,000	476	No

9. **Is future 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.**

Florida's investment drives innovative and patient-driven research that has made our researchers more successful at garnering competitive federal grants towards ending the epidemic. We are always seeking and competing for funding to support these efforts.



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**10. Has the entity requesting this project received any federal assistance related to the COVID-19 pandemic?**

**If yes, indicate the amount of funds received and what the funds were used for.**

**11. 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		0
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
<b>Operational Costs: Other</b>		
Salary and Benefits	Research unit operational staff including lab manager, study coordinators, and other support staff salary and benefits.	313,000
Expense/Equipment/Travel/Supplies/Other	HIV Cure laboratory supplies, chemicals, and equipment. Operating costs for clinical research unit at Jackson Memorial Hospital.	271,000
Consultants/Contracted Services/Study	Funds awarded as pilot grants and HIV Cure Research Symposium.	416,000
<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>

**12. Program Performance**

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

The objective of the state funding initiative is to support and enhance high quality HIV/AIDS research in response to the health needs of Florida citizens. In an effort to better understand, prevent, and treat HIV infection and AIDS associated malignancies, state funding invests in pilot grants aimed at developing a vaccine against HIV/AIDS and an ultimate cure for HIV/AIDS. The support for patient-based research has made researchers more successful at garnering competitive federal grants towards ending the epidemic.

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

Support innovative research leading to a cure for HIV/AIDS and AIDS vaccine developments. State funds will be spent on pilot grant projects to allow researchers to develop innovative lines of research and be more competitive for federal grants. In addition, funding supports the clinical research unit at Jackson Memorial Hospital.

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

Funding supports a research Unit at Jackson Memorial Hospital which facilitates inclusion of underrepresented individuals in clinical research studies that provide access to cutting edge therapies. This research unit currently provides crucial research samples to over 33 studies as of March 2020.

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

HIV/AIDS infected population in Florida. Over 800 individuals are expected to be served.

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



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This project will look to improve healthcare outcomes for the community, while increasing patient enrollment for clinical studies and providing greater accessibility to innovative medications and therapies. The methodology deployed involves measuring federal grants awarded to researchers that have received pilot grants from the HIV/AIDS Institute. Pilot awards provide an opportunity for researchers to explore innovative strategies towards developing a cure and vaccine for HIV/AIDS.

**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 the contract?**

Subject to the penalties put forth by the Florida Department of Health.

**13. 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.**

Not Applicable



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#### 14. Requestor Contact Information

a. First Name  Last Name

b. Organization

c. E-mail Address

d. Phone Number  Ext.

#### 15. Recipient Contact Information

a. Organization

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

#### 16. Lobbyist Contact Information

a. Name

b. Firm Name

c. E-mail Address

d. Phone Number