



The Florida Senate

Local Funding Initiative Request

Fiscal Year 2026-2027

LFIR # 1056

1. Project Title

2. Senate Sponsor

3. Date of Request

4. Project/Program Description

Promise Fund is advancing a scalable model of community-based healthcare that reduces breast and cervical cancer mortality by breaking down barriers to care. Through outreach, education, and Promise Fund Navigation, women are connected to timely screening, diagnosis, and treatment. Since launching, we have established a county-wide Promise Fund Navigator Network, partnered with local health providers and hospitals, and co-located lifesaving screening and diagnostic services at federally qualified health centers. Today, our Navigators serve women across Palm Beach County including rural communities such as the Glades ensuring access to care close to home.

5. State Agency to receive requested funds

State Agency contacted?

6. Amount of the Nonrecurring Request for Fiscal Year 2026-2027

Type of Funding	Amount
Operating	425,000
Fixed Capital Outlay	0
Total State Funds Requested	425,000

7. Total Project Cost for Fiscal Year 2026-2027 (including matching funds available for this project)

Type of Funding	Amount	Percentage
Total State Funds Requested (from question #6)	425,000	50%
Matching Funds		
Federal	0	0%
State (excluding the amount of this request)	425,000	50%
Local	0	0%
Other	0	0%
Total Project Costs for Fiscal Year 2026-2027	850,000	100%

8. Has this project previously received state funding?

If yes, provide the most recent instance:

Fiscal Year (YYYY-YY)	Amount		Specific Appropriation #	Vetoed
	Recurring	Nonrecurring		
2023-24	0	425,000		No

9. Is future-year 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.



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Complete questions 10 and 11 for Fixed Capital Outlay Projects

10. Status of Construction

a. What is the current phase of the project?

☐ Planning ☐ Design ☐ Construction ☐ N/A

b. Is the project "shovel ready" (i.e permitted)?

c. What is the estimated start date of construction?

d. What is the estimated completion date of construction?

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

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.

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

Spending Category	Description	Amount
Administrative Costs:		
Executive Director/Project Head Salary and Benefits	Director of Patient Navigation (\$122,800) - Provides leadership, oversight, and coordination of the Promise Fund Navigator Network to ensure women receive timely access to care. Lead Promise Fund Navigator (\$70,800) - Guides and supports a team of Navigators while directly assisting women in overcoming barriers to screening, diagnosis, and treatment.	193,600
Other Salary and Benefits		0
Expense/Equipment/Travel/Supplies/Other		0
Consultants/Contracted Services/Study		0
Operational Costs		
Salary and Benefits	Promise Fund Navigators (\$180,000)- Provide outreach, education, and 1-on-1 support to ensure women receive timely breast and cervical cancer screening, diagnosis, and treatment. Serving as trusted guides, they break down barriers such as cost, transportation, language, and fear, while connecting women to local providers and community resources. Navigators coordinate appointments, facilitate follow-up care, and collaborate with healthcare partners to deliver seamless, culturally sensitive naviga	210,400
Expense/Equipment/Travel/Supplies/Other	\$5,000 - Printing of Outreach and Educational Materials for Promise Fund Navigation Programs (flyers, brochures, posters, fact sheets) \$16,000 - Supplies for Outreach and Community Engagement (Branded educational giveaways such as reusable water bottles, tote bags, pens to be distributed at community and screening events to reinforce health messaging and increase program visibility and tables, chairs, tents, signage, clipboards)	21,000



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Consultants/Contracted Services/Study		0
Fixed Capital Construction/Major Renovation:		
Construction/Renovation/Land/Planning Engineering		0
Total State Funds Requested (must equal total from question #6)		425,000

13. Program Performance

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

Promise Fund is seeking support to expand our breast and cervical cancer screening and navigation program because when cancer is found early, women live longer, healthier lives and communities save millions. Survival rates soar to nearly 99% for breast cancer and 95% for cervical cancer when detected at early stages. The difference is not only life-changing, it is cost-saving: the National Institutes of Health reports that the 24-month cost of treating Stage I breast cancer averages \$43,530, compared to \$223,568 for Stage IV. Investing in early detection and navigation is a proven, high-impact strategy that saves lives, strengthens families, and protects the state's resources.

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

Promise Fund Navigators carry out a comprehensive set of activities to ensure women can access and complete lifesaving care. They guide women through the healthcare system with cultural sensitivity, facilitate scheduling and referrals, and ensure timely follow-up for abnormal findings and treatment. Navigators provide women's health education to individuals and groups, assist with financial and insurance barriers, and arrange transportation when needed. They track interventions and outcomes, use community data to identify uninsured and underinsured women, and build strong relationships with local organizations and institutions. By collaborating with community groups and healthcare providers, Promise Fund Navigators increase awareness, remove barriers, and connect women to timely breast and cervical health services.

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

Promise Fund Navigators break down barriers to care for low-income women in Palm Beach County by providing multilingual navigation and personalized support. They connect women to mammograms, diagnostic mammograms, Pap and HPV tests, and when needed, timely cancer diagnostics and treatment. Navigators ensure each participant has a medical home, assess social determinants of health, and make referrals to critical health and social services. They also provide translation, transportation assistance, and insurance eligibility guidance to remove obstacles that delay care. By delivering one-on-one and group education on breast and cervical cancer risk factors and the importance of regular screenings, Promise Fund Navigators empower women with knowledge while ensuring access to lifesaving services and optimal health outcomes.

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

Promise Fund focuses on women who are uninsured, underinsured, and women of color which are populations disproportionately impacted by breast and cervical cancer. Black women experience the highest cervical cancer mortality rates and are 40% more likely to die from breast cancer than White women. Hispanic women are most likely to develop cervical cancer and face higher rates of late-stage breast cancer diagnoses. Through our program, more than 800 women will receive Promise Fund Navigation to connect them with timely screening, diagnosis, and treatment, while over 500 additional women will benefit from outreach and education.

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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Project Outcome:

Reduced deaths from late-stage breast and cervical cancer, with cost savings for Florida taxpayers.

Promise Fund Navigator Data to Track:

- Number of participants connected to a Primary Care Provider (PCP)
- Number of referrals for early detection screenings (mammogram, Pap, HPV)
- Number of participants navigated to recommended diagnostic services
- Number of participants diagnosed with cancer referred to treatment services
- Number of participants receiving interpretation/translation assistance for language barriers
- Number of participants referred to transportation resources
- Number of uninsured and underinsured participants assisted with accessing financial programs for care

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?

If our organization fails to meet deliverables or performance measures, we are committed to accountability and continuous improvement. In addition to standard penalties, we are prepared to submit a performance improvement plan with measurable outcomes, defined timelines, and a formal review process. We will also engage in regular check-ins with the contracting agency to demonstrate progress and ensure corrective actions are achieved.

14. Is this project related to mitigation, response, or recovery from a natural disaster?

a. If Yes, what phase best describes the project?

- ☐ Mitigation (reducing or eliminating potential loss of life or property)
- ☐ Response (addressing the immediate and short-term effects of a natural disaster)
- ☐ Recovery (assisting communities return to normal operations, including rebuilding damaged infrastructure)

b. Name of the natural disaster (or Executive Order # for events not under a federal declaration):

15. Has the entity applied for or received federal assistance for this project?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No
- ☐ No, but intends to apply

a. If yes, provide the FEMA project worksheet ID#:

b. Provide the total project cost listed on the FEMA project worksheet:

16. Has the entity applied for or received state assistance for this project (other than this request)?

- ☐ Yes, Applied
- ☐ Yes, Received
- ☐ No



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☐ No, but intends to apply

a. If yes, specify the program and state agency (ex. Local Government Emergency Bridge Loan, Department of Commerce):

17. Requester Contact Information

a. First Name Last Name
b. Organization
c. E-mail Address
d. Phone Number Ext.

18. 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 Ext.

19. Lobbyist Contact Information

a. Name
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.