OPIOID ABATEMENT FUNDING REQUEST AND RECOMMENDATION

Recommend	Not Recommend	Modify
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Received From: Marion County Unified CORE Network

Total Funding Request: \$749,999.24

Includes:

• SMA Healthcare: \$330,000.24

Marion County Fire Rescue: \$200,000

Ocala Fire Rescue: \$199,999

Shared Outreach Materials: \$20,000

Attachments:

- Application
- CORE Budget
- CORE Flow Chart

Summary:

The Marion County Coordinated Opioid Recovery (CORE) Network is a partnership between Marion County Fire Rescue (MCFR), Ocala Fire Rescue (OFR), and SMA Healthcare. It provides a 24/7 continuum of care for individuals with substance use disorder (SUD), particularly opioid use disorder, with a strong emphasis on Medication Assisted Treatment (MAT), peer recovery support, and warm handoffs from crisis to long-term care.

Lutheran Services Florida funding for CORE initiatives throughout the state of Florida continue to dwindle, with Lutheran Services Florida only allotting \$250,000 for Marion County CORE services. The Opioid Abatement Committee had the foresight to ensure that Opioid Abatement Funding was set aside for the continuation of this vital program. Ultimately the Lutheran Services Florida pot of funding was awarded to SMA Healthcare to supplement CORE treatment services, while Opioid Abatement Funds will be used to cover the remaining costs of the program.

Marion County Hospital District engaged Marion County Fire Rescue, Ocala Fire Rescue, and SMA Healthcare in June 2025 to begin gathering information for the Unified Marion County Coordinated Opioid Recovery (CORE) program. Marion County Hospital District compiled information on internal processes which served as the basis for the development

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of the Marion County Coordinated Opioid Recovery (CORE) Guidelines (attached to this packet).

The development of the unified CORE process in Marion County has been the result of a strong collaboration between the Marion County Hospital District, Ocala Fire Rescue, Marion County Fire Rescue, and SMA Healthcare. Over the course of several meetings, these partners worked closely to review state guidelines, align best practices, and structure a coordinated response to the opioid crisis. Together, they defined the CORE Network, establishing clear inclusion and exclusion criteria to ensure consistency in service delivery while prioritizing individuals most at risk. This collaborative approach intentionally shifts the focus away from short-term stabilization and symptom management toward long-term treatment and recovery, integrating emergency response, peer navigation, and sustained behavioral health support into a seamless continuum of care. As part of quarterly monitoring, the team will update the CORE Guidelines as needed to improve outcomes and streamline processes.

The proposed CORE Network budget for FY25–26 prioritizes direct service delivery and essential program support. The largest allocation, approximately \$409,000, is dedicated to staffing peer specialists, community paramedics, and clinical staff who form the foundation of the program's 24/7 response and recovery network. An additional \$209,500 supports employee benefits to ensure workforce stability.

Program operations include \$22,511 for travel, primarily for outreach, in-home visits, and follow-ups, and \$20,437 for equipment, largely to support Ocala Fire Rescue. To sustain treatment capacity, \$3,169 is budgeted for medical and pharmacy needs, including buprenorphine, naloxone, and related supplies. Essential operating supplies account for \$31,289 of the overall budget.

Administrative oversight is limited to \$30,000, reflecting a lean approach to overhead, while \$20,000 is dedicated to unified outreach materials that connect at-risk individuals with CORE services.

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Overall, the budget reflects a strong investment in frontline staff and direct care services, with modest allocations for equipment, supplies, and administration to ensure accountability, continuity, and measurable impact.

Recommendation:

Marion County Hospital District respectfully recommends the Marion County Coordinated Opioid Recovery (CORE) Network Program for funding. The initiative is built on an evidence-based design, aligning with best practices for opioid response by integrating EMS, Medication Assisted Treatment (MAT), and peer navigation to support both crisis stabilization and long-term recovery. The program establishes clear, measurable outcomes with time-bound performance goals focused on treatment acceptance, retention, detox completion, and reducing repeat overdoses.

The CORE Network is strengthened by strong community partnerships, with Marion County Fire Rescue, Ocala Fire Rescue, and SMA Healthcare working together to ensure seamless response and continuity of care. Finally, CORE incorporates robust sustainability and monitoring practices, including Mindshare data systems and quarterly reporting, to ensure accountability and continuous improvement.

MARION COUNTY HOSPITAL DISTRICT OPIOID ABATEMENT FUNDING APPLICATION

A) Applicant Information:

	Organi	organization: Marion County Fire Rescue, Ocala Fire Rescue, and SMA Healthcare Inc			
	Contac	ct Name:Position:			
	Addres	ss:City:			
	Zip Co	de:Telephone:			
	Email:				
	Date o	f Application:			
B)	Progra	Program/Project General Questions: (attach additional sheets if necessary)			
	1.	Total Program/Project Cost:	\$750,000.00		
	2.	Amount of funding requested from the Opioid Abatement Settlement	\$ <u>750,000.00</u>		
	3.	CORE & PEER priority list: The proposed grant funding will be used to strengthen and expand the Coordinated Opioid Recovery (CORE) Network in Marion County through staffing, service expansion, outreach, and infrastructure enhancements.			
	4.				

This proposal requests opioid abatement funding to support personnel



(peer navigators, paramedics), medication (buprenorphine), training, and data collection infrastructure needed to maintain and expand CORE services. The CORE Network has already achieved notable outcomes in treatment retention, detox completion, and reductions in repeat overdoses. Continued support will ensure Marion County maintains momentum in reversing the impacts of opioid misuse.

5. Which community/communities in Marion County will be served? Marion County, Florida is experiencing a severe opioid crisis, with high overdose rates and growing demand for immediate treatment and recovery support. In 2024, EMS responded to 2,068 overdose incidents in Marion County. So far this year, an estimated 118 county residents are suspected to have experienced an overdose, underscoring the urgent and ongoing need for comprehensive intervention. The Coordinated Opioid Recovery (CORE) Network plays a vital role in addressing this public health emergency by connecting individuals to lifesaving interventions and long-term recovery support

Limited access to primary and behavioral healthcare—especially among uninsured residents—has led to overuse of emergency services for non-urgent needs, many related to substance use and chronic conditions. To address these systemic gaps, the CORE Network offers in-home assessments, hospital discharge follow-ups, homeless outreach, and care coordination, focusing on high-risk and underserved populations.

This grant will support an integrated network of services—including Medication Assisted Treatment (MAT), therapy, peer support, and recovery navigation—delivered through a partnership between Marion County Fire Rescue, Ocala Fire Rescue, and SMA Behavioral Healthcare. Their collaborative model, including Florida's first Overdose Alert System, ensures rapid response and timely linkage to detox and outpatient care for those affected by opioid use disorder.

- 6. Where will the Program/Project health services be delivered and what format? Through a partnership between Ocala Fire Rescue, Marion County Fire Rescue, and SMA Healthcare, the program provides 24/7 response to overdoses, immediate initiation of treatment (including buprenorphine), and connection to long-term care. Services include in-home assessments, care coordination, and linkage to Medication Assisted Treatment (MAT), therapy, peer support, and other health and social services.
- 7. Who specifically in your organization will deliver the Program/Project services?



MAT Treatment (SMA Healthcare)
PEER Navigators (SMA Healthcare)
Community Paramedics (OFR/MCFR)
Medical Oversight (OFR/MCHR/SMA)

- 8. Will volunteers be involved? NO
- What is your agencies policy on Level II background screening employees and volunteers? All agencies require Level II background screening
- 11. Are there other collaborators involved in the Program/Project?

 Yes. Lutheran Services Florida has committed \$250,000 dollars to the Marion County CORE Network specifically to funding treatment with SMA Healthcare.
- 12. How do you plan to gather your health improvement statistics and measurements results from services you provide under this grant?

 Opioid settlement funds will be used to implement CORE Networks. A required component of the state's opioid settlement is to use an evidence-based data collection process to analyze the effectiveness of substance use abatement. The opioid settlement states that the State and local governments shall receive and report expenditures, service utilization data, demographic information, and national outcome measures. In addition to the Performance Objectives listed below the state will require the following from all recipients of Opioid Abatement Funds:
 - a. Demographic info on all patients identified as CORE clients
 - b. Number of individuals served
 - c. Services provided
 - d. Diagnosis
 - e. Cost associated with Service

C) Overarching Goals of Program

Performance Objectives for the CORE Network can be found in Appendix B to the Grant Agreement. The Performance Objectives are as follows:

- a. Warm Handoff to Peer Recovery Specialist
 - By June 2026, track and document all SUD-presenting individuals encountered by CORE partners and ensure that at least **80% receive a warm handoff** to a Peer Recovery Specialist at SMA Healthcare within **1 hour of identification**.
- b. Treatment Acceptance Post-Referral
 - By June 2026, develop a tracking system to monitor the number of SUD-presenting individuals



referred by hospitals, EMS, law enforcement, and other CORE partners. Set a target of at least 50% acceptance of treatment services during the initial pilot year, with ongoing adjustments as baseline data is finalized.

c. Detox/Withdrawal Management Completion

By June 2026, maintain or improve the current detox/withdrawal management completion rate of 80% (309 out of 377 clients) at SMA Healthcare. Performance will be reviewed quarterly, with a goal of sustaining an 80% or higher completion rate among all individuals entering detox services.

d. Enrollment and Retention in MAT (Medication-Assisted Treatment)

By June 2026, sustain the current Medication-Assisted Treatment (MAT) program retention rate of 80% for clients remaining enrolled for 90 days or more at SMA Healthcare. Performance will be monitored quarterly to ensure continued success and to identify any emerging barriers to long-term engagement.

e. Engagement with PEER RECOVERY Specialists

By June 2026, maintain or improve the current rate of **64**% of individuals who remain engaged in a lower level of care (including outpatient services, peer support, or community-based recovery programs) for **90 days or more** following higher-intensity treatment. Ongoing efforts will focus on supporting engagement and reducing barriers to continued participation.

f. Reduction in Repeat EMS/ER Involvement

Using existing overdose and EMS response data as a baseline, achieve a 15% reduction in repeat EMS calls and emergency room visits involving individuals engaged in recovery services by June 2026.

- g. # of calls received to the CORE Overdose Hotline number
- h. # of field contacts made
- i. # of Emergency Department contacts made
- i. # of PEER Contacts
- k. # of patients that accept CORE services
- **l.** # of CORE patients that enter Detox
- m. # of CORE clients served in MAT
- n. # and percentage of repeat field encounters within 6 months and 12 months
- o. # and percentage of repeat ER visits related to substance use or overdose
- p. Time from referral to MAT and engagement in MAT
- q. # of inductions made in the field/Emergency Department

D) Proposed Budget for your Program. You will also have to complete a Budget Narrative in Mindshare.

Budget is attached



E) Required Grant Application attachments

The following documents must be submitted and attached to this grant application:

- (a) Your prior year's federal income tax return.
- (b) If your organization is exempt from federal taxation, a copy of your IRS determination letter and a copy of your most recent IRS Form 990.
- (c) Your most recent year end profit and loss statement and balance sheet for your organization.
- (d) Your most recent profit and loss statement and balance sheet for your organization for the current year.
- (e) Your organization's conflict of interest policy.
- (f) Proof of your organization's active corporate registration status in the State of your incorporation.
- (g) The name and address of your primary bank and the wiring instructions in the event your organization is awarded a grant hereunder.
- (h) Certificate of Liability Insurance listing the Marion County Hospital District as additional insured.
- (i) Disaster plan procedure.
- (j) Job descriptions and credentials for personnel included in MCHD budget request.
- (k) Organization licensing and accreditation certificates, copies of monitors, corrective action plans if applicable, and resolution of corrective action plan if applicable.

MARION COUNTY CORE PARTNER 2025/2026 PROJECTED BUDGET						
CATEGORY	MARION COUNTY FIRE RESCUE	OCALA FIRE RESCUE	SMA			
STAFFING	\$148,798.40	\$112,053.00	\$115,064.29			
BENEFITS	\$41,201.31	\$58,507.74	\$105,363.02			
TRAVEL		\$9,000.00	\$13,511.00			
EQUIPMENT		\$2,500.00	\$0.00			
MEDICAL AND PHARMACY	\$3,000.00		\$169.00			
OPERATING SUPPLIES	\$7,000.00	\$17,937.00	\$24,287.94			
OTHER SUPPORT COSTS			\$41,605.00			
ADMINISTRATION			\$30,000.00			
TOTAL	\$200,000	\$199,998	\$330,000.24			

