



Melinda Hart Alachua County Fire Rescue 911 SE 5th St. Gainesville, FL 32627

RE:

State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088173200

Dear Ms. Hart:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$8,952** for state fiscal year 2016-2017.

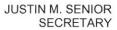
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Corky Young Bay County EMS Divison 700 Highway 2300 Southport, FL 32409

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 010186800

Dear Mr. Young:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$13,187** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Chief Glenn Joseph Boynton Beach Fire Rescue 2080 High Ridge Road Boynton Beach, FL 33436

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400001300

Dear Chief Joseph:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$44,677** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Dennis Neterer Brevard County Fire Rescue 1040 South Florida Avenue Rockledge, FL 32955

RE: S

State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088137600

Dear Mr. Neterer:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$51,926** for state fiscal year 2016-2017.

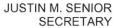
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Marianne Taylor Charlotte County Fire & EMS Department 26571 Airport Road Punta Gorda, FL 33982

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 089925900

Dear Ms. Taylor:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$36,660** for state fiscal year 2016-2017.

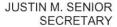
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Juan Cardona City of Coral Springs Fire Department 2801 Coral Springs Drive Coral Springs, FL 33065

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400039100

Dear Mr. Cardona:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$39,286** for state fiscal year 2016-2017.

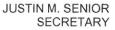
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Stephanie Shimko Delgado City of Hallandale Beach Department of Fire Rescue 121 SW 3rd St Hallandale Beach, FL 33009

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088122800

Dear Ms. Delgado:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$15,812** for state fiscal year 2016-2017.

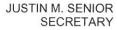
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Pat Flynn City of Hialeah Fire Department 83 E 5th Street Hialeah, FL 33010

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400007200

Dear Mr. Flynn:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$121,513** for state fiscal year 2016-2017.

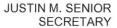
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







April Mitchell
City of Jacksonville Fire and Rescue Department
515 Julia Street
Jacksonville, FL 32202

RE:

State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088104000

Dear Ms. Mitchell:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$219,681** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Kevin Coyle City of Miami Fire Rescue Department 444 SW 2nd Ave Miami, FL 33130-1910

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 087475200

Dear Mr. Coyle:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$202,979** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Todd Draizin City of Sunrise Fire Rescue 10440 W Oakland Park Blvd Sunrise, FL 33351

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088094900

Dear Mr. Draizin:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$44,257** for state fiscal year 2016-2017.

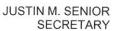
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Percy Sayles City of Tamarac Fire Department 6000 Hiatus Road Tamarac, FL 33321

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400041200

Dear Mr. Sayles:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$23,513** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Michael D. Perry City of Tampa Fire Department 808 E Zack Street Tampa, FL 33602

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 087752200

Dear Mr. Perry:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$27,715** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Tabatha Butcher Collier County EMS Department 8075 Lely Cultural Parkway, Suite 267 Naples, FL 34113

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 089707800

Dear Ms. Butcher:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$35,539** for state fiscal year 2016-2017.

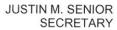
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Paul Vanden Berge Fort Lauderdale Fire Department Rescue 528 NW 2nd Street Fort Lauderdale, FL 33311

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400063300

Dear Mr. Berge:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$170,172** for state fiscal year 2016-2017.

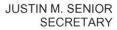
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Toby Witt Hamilton County Ambulance Service 902 US Hwy 41 NW Jasper, FL 32052

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088053100

Dear Mr. Witt:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$3,093** for state fiscal year 2016-2017.

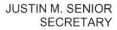
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Kelly Trout Hernando County and Fire Rescue District 60 Veterans Ave Brooksville, FL 34601

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400076500

Dear Ms. Trout:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$11,723** for state fiscal year 2016-2017.

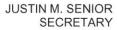
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Irma Muka Hillsborough County Fire Rescue 9450 E Columbus Drive Tampa, FL 33619-2378

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088084100

Dear Ms. Muka:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$210,094** for state fiscal year 2016-2017.

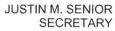
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Christopher Pratt Hollywood Fire Rescue & Beach Safety Department 2741 Stirling Road Hollywood, FL 33312

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088031100

Dear Mr. Pratt:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$68,467** for state fiscal year 2016-2017.

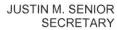
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Kevin Coyle Indian River County Department of Emergency Services 1801 27th Street, Building A Vero Beach, FL 32960

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088224100

Dear Mr. Coyle:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$16,255** for state fiscal year 2016-2017.

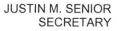
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Karen Hunter Kissimmee Fire Department 101 Church Street, Suite 200 Kissimmee, FL 34741

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 084438100

Dear Ms. Hunter:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$21,419** for state fiscal year 2016-2017.

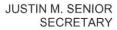
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Dianne Holloway Lake Mary Fire Department 911 Wallace Court Lake Mary, FL 32746

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400105200

Dear Ms. Holloway:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$4,969** for state fiscal year 2016-2017.

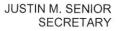
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Kevin Coyle Lee County EMS 14752 Six Mile Cypress Parkway Fort Myers, FL 33912

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088022100

Dear Mr. Coyle:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$24,253** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Timothy Carlson Leon County EMS 911 Easterwood Drive Tallahassee, FL 32311

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400101000

Dear Mr. Carlson:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$43,245** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Kevin Coyle Manatee County Department of Public Safety 2101 47th Terrace East Bradenton, FL 34203

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088030200

Dear Mr. Coyle:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$9,818** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Frank Betancourt Miami Beach Fire Rescue Department 2300 Pinetree Drive Miami Beach, FL 33140

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 087883900

Dear Mr. Betancourt:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$57,752** for state fiscal year 2016-2017.

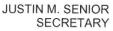
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Scott Mendelsberg Miami-Dade County Fire Rescue 9300 NW 41st Street Doral, FL 33178-2414

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 083899301

Dear Mr. Mendelsberg:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$1,011,192** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Alex Morales Orange County Fire Rescue EMS Bureau 6590 Amory Court Winter Park, FL 32792

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400038200

Dear Mr. Morales:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$189,979** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Chief Roderick Williams Orlando Fire Department 78 West Central Boulevard Orlando, FL 32801

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 003655700

Dear Chief Williams:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$204,109** for state fiscal year 2016-2017.

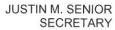
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Christie Dyer Kilcoyne Osceola County Fire Dept 2586 Partin Settlement Road Kissimmee, FL 34744

RE:

State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 089085500

Dear Ms. Kilcoyne:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$87,556** for state fiscal year 2016-2017.

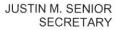
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely.

Tom Wallace, Bureau Chief, Medicaid Program Finance







Michael Martz Palm Beach County Fire Rescue 405 Pike Road West Palm Beach, FL 33411

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400028500

Dear Mr. Martz:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$358,022** for state fiscal year 2016-2017.

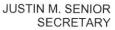
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







John Penick Pembroke Pines Fire Rescue 9500 Pines Blvd. Bldg B Pembroke Pines, FL 33024

RE:

State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 085063200

Dear Mr. Penick:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$20,428** for state fiscal year 2016-2017.

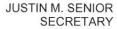
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Jodie Sechler Pinellas County EMS Authority dba Sunstar 12490 Ulmerton Road, Room 213 Largo, FL 33774

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 087678000

Dear Ms. Sechler:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$8,563** for state fiscal year 2016-2017.

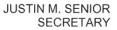
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







James H. Wilson Plant City Fire Rescue 604 E. Alexander Street Plant City, FL 33563

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400087100

Dear Mr. Wilson:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$15,275** for state fiscal year 2016-2017.

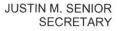
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Joey Rowe Polk County Board of County Commissioners 2470 Clower Lane Bartow, FL 33830

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088015900

Dear Mr. Rowe:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$92,317** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Frank Galgano Pompano Beach Fire Rescue 100 West Atlantic Blvd Pompano Beach, FL 33060

RE:

State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400002100

Dear Mr. Galgano:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$29,573** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Randy Sherman Riviera Beach Fire Department 600 West Blue Heron Blvd Riviera Beach, FL 33404

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400021800

Dear Mr. Sherman:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$39,851** for state fiscal year 2016-2017.

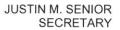
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Shawn Treloar Sanford Fire Department 150 Bush Boulevard Sanford, FL 32773-6706

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400047100

Dear Mr. Treloar:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$22,697** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Ryan Switzer Seminole County EMS/Fire Rescue Division 900 Minnesota Ave St. Cloud, FL 34769

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400046300

Dear Mr. Switzer:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$60,014** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Lisa Thompson St. Cloud Fire Rescue 5160 NW Milner Drive Port St. Lucie, FL 34983

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088499500

Dear Ms. Thompson:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$17,609** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Kevin Coyle St. Lucie County Fire District 1303 William Clark Avenue Sanford, FL 32771

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 088065500

Dear Mr. Coyle:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$105,441** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Robert E. Weech The Sheriff of Broward County Florida 2601 West Broward Blvd Fort Lauderdale, FL 33312

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400042100

Dear Mr. Weech:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$194,537** for state fiscal year 2016-2017.

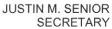
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







William Ackerman The Town of Davie Fire Rescue 6901 Orange Drive Davie, FL 33314

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 400051000

Dear Mr. Ackerman:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$28,562** for state fiscal year 2016-2017.

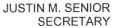
I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Lori Padgett West Palm Beach Fire Rescue 500 North Dixie Highway West Palm Beach, FL 33401

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 087867700

Dear Ms. Padgett:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$65,960** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance







Richard Rodriguez Winter Park Fire-Rescue 343 West Canton Ave Winter Park, FL 32789

RE: State Fiscal Year 2016 - 2017

Public Emergency Medical Transportation Additional Payment

Medicaid Number: 003458200

Dear Mr. Rodriguez:

Your facility has been determined eligible to receive the associated payment for state fiscal year (SFY) 2016-2017 pursuant to proviso language in Section 32, Laws of Florida General Appropriations Act for SFY 2017-2018.

The enclosed payment (enclosed, if not electronically transferred) plus any previous payments for this fiscal year represents 100% of your annual appropriation of **\$14,423** for state fiscal year 2016-2017.

I would like to take this opportunity to thank you for your ongoing commitment to Medicaid beneficiaries and indigent persons in Florida. Your contributions to the provision of adequate and appropriate health care to Floridians in need are truly appreciated.

If you have any questions regarding the above, please call T. K. Feehrer or Ryan Perry of my staff at (850) 412-4131.

Sincerely,

Tom Wallace, Bureau Chief, Medicaid Program Finance

