



RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

Corky Young
Bay County EMS Division
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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

**RE: 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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp





RICK SCOTT
GOVERNOR

JUSTIN M. SENIOR
SECRETARY

June 30, 2017

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

TW:rp

