

**STATE AGENCY ACTION REPORT  
ON APPLICATION FOR CERTIFICATE OF NEED**

**A. PROJECT IDENTIFICATION**

**1. Applicant/CON Action Number**

**Lifespace Communities, Inc./CON #10329**

100 E. Grand Ave., Suite 200  
Des Moines, Iowa 50309

Authorized Representative: Charles Hall  
(515) 309-4462

**LP Sanford, LLC/CON #10330**

12001 Bluegrass Parkway  
Louisville, Kentucky 40299

Authorized Representative: John Harrison  
(502) 568-7742

**Lutheran Haven Nursing Home and Assisted Living Facility,  
LLC/CON #10331**

2041 West State Road 426  
Oviedo, Florida 32765

Authorized Representative: Linda A. Kirk  
(407) 365-5676

**Palm Garden of Seminole County, LLC/CON #10332**

2033 Main Street, Suite 300  
Sarasota, Florida 34237

Authorized Representative: Robert D. Greene  
(941) 952-9411

**Seminole Lakes NH, LLC/CON #10333**

4042 Park Oaks Blvd., Suite 300  
Tampa, Florida 33610

Authorized Representative: Ronald J. Swartz  
(813) 675-2341

**Seminole SNF, LLC/CON #10334**

1447 West Bexley Park Drive  
Delray Beach, Florida 33445

Authorized Representative: Robert J. Greene  
(954) 684-3416

**Tri-County Nursing & Rehabilitation Center, Inc./CON #10335**

550 East Rollins Street, 6<sup>th</sup> Floor  
Orlando, Florida 32803

Authorized Representative: Diane Godfrey  
(407) 303-9808

**2. Service District/Subdistrict**

District 7/Subdistrict 7-4 (Seminole County)

**B. PUBLIC HEARING**

A public hearing was not requested.

**Letters of Support**

**Lifespace Communities, Inc. (CON #10329)** the Agency received some letters of support submitted by the applicant. The letters were composed by local health care providers.

**LP Sanford, LLC (CON #10330)** the Agency received various letters of support submitted by the applicant. These letters were from members of the medical community, including letters from Ms. Wendy H. Brandon, CEO of Central Florida Regional Hospital and Sandy Yochem, President of the Florida Gerontological Nurses Association.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331):** The Agency received many letters of support submitted by the applicant. The letters were composed by U.S. Congress member the Honorable John L. Mica, current residents and their family members, local health care providers and a church leader.

**Palm Garden of Seminole County, LLC (CON #10332):** The Agency received various letters of support submitted by the applicant. These letters were from members of the medical community, including letters from Ms. Wendy H. Brandon, CEO of Central Florida Regional Hospital and Ms. Shannon Elswick of Leading Edge Healthcare.

**Seminole Lakes NH, LLC (CON #10333):** The Agency received a couple of letters of support submitted by the applicant. Both letters were composed by medical doctors working at a Greystone affiliated facility, The Lodge Health and Rehabilitation Center.

**Seminole SNF, LLC (CON #10334):** The Agency received a few of letters of support submitted by the applicant. These letters included one from Genesis stating its willingness to provide therapy services and another regarding its participation in a study to evaluate the potential for a virtual physician service.

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335):** The Agency received many letters of support submitted by the applicant. The letters were composed by physicians, members of the healthcare community, care planners and a family member of a resident in an Adventist facility.

In general the letters point to the quality of care at Adventist facilities and that such a facility is needed in the tri-county area.

### **C. PROJECT SUMMARY**

**Lifespace Communities, Inc. d/b/a Village on the Green (CON #10329)** hereafter referred to as Village on the Green or the applicant, proposes for the conversion of 30 sheltered nursing home beds to 30 community nursing home beds in Subdistrict 7-4, Seminole County.

Village on the Green is a 60-bed skilled nursing facility (SNF) composed solely of sheltered beds. It is located on the campus of a continuing care retirement community (CCRC).

The applicant operates five healthcare facilities in Florida:

- Abbey Delray
- Abbey Delray South
- Harbour's Edge
- The Waterford
- Village on the Green

The proposed project is a conversion of existing licensed beds and will involve no construction or renovation. The applicant states that the only project costs are those costs associated with the CON process, a total of \$60,750.

The applicant does not wish to accept any conditions for the proposed project.

**LP Sanford, LLC (CON #10330)**, a wholly owned subsidiary of Signature Holdings II LP Holdings (referred to as Signature or the applicant throughout this document), proposes to establish a new 122-bed community nursing home in District 7/Subdistrict 7-4, Seminole County.

Signature currently operates 25 facilities with 3,146 beds in Florida:

- Chautauqua Rehabilitation and Nursing Center
- Signature HealthCARE at The Courtyard
- Signature HealthCARE of North Florida
- Washington Rehabilitation and Nursing Center
- The Bridge at Bay St. Joe
- Surrey Place Care Center
- Signature HealthCARE of Gainesville
- Signature HealthCARE of Orange Park
- Signature HealthCARE of Jacksonville
- Signature HealthCARE of Ormond
- Southern Pines Healthcare Center
- Peninsula Care & Rehabilitation Center
- Signature HealthCARE of Pinellas Park
- Golfview Healthcare Center
- Gulfport Rehabilitation Center
- Heritage Park Care and Rehabilitation Center
- Kenilworth Care and Rehabilitation Center
- Anchor Care and Rehabilitation Center
- Winter Park Care and Rehabilitation Center
- Signature HealthCARE of Port Charlotte
- Signature HealthCARE at College Park
- Signature HealthCARE of Palm Beach
- Golfcrest Healthcare Center
- Signature HealthCARE Center of Waterford
- Signature HealthCARE of Brookwood Gardens

The project involves 76,673 GSF of new construction. The construction cost is \$10,350,855. Total project cost is \$18,189,510. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant does not wish to accept any conditions for the proposed project.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** proposes to add 14 community nursing home beds or a partial award to add two community nursing home beds at Lutheran Haven Nursing Home in Subdistrict 7-4, Seminole County.

Lutheran Haven Nursing Home is a 42-bed skilled nursing facility SNF comprised solely of sheltered beds. It is located on the campus of a CCRC.

The project involves 93,500 GSF of renovation. Total project cost is \$263,344. Project cost includes land, building, equipment, project development and financing.

The applicant proposes to condition the project as shown below:

- The proposed bed expansion will be accomplished within the existing Lutheran Haven Nursing Home facility located on the Lutheran Haven campus, at 1525 Haven Drive, Oviedo, Florida
- Lutheran Haven Nursing Home will provide at least 60 percent of patient days treated in the facility's expanded capacity to combined Medicaid/Medicaid Managed Care/Charity or indigent care patients

**Palm Garden of Seminole County, LLC (CON #10332)**, hereafter referred to as Palm Garden or the applicant throughout this application, proposes to establish a new 120-bed community nursing home in Subdistrict 7-4, Seminole County.

The applicant's immediate operating entity, Palm Garden Healthcare Holdings, Inc., maintains 13 SNFs in Florida:

- Palm Garden of Clearwater, LLC
- Palm Garden of Gainesville, LLC
- Palm Garden of Jacksonville, LLC
- Palm Garden of Largo, LLC
- Palm Garden of Ocala, LLC
- Palm Garden of Orlando, LLC
- Palm Garden of Pinellas, LLC
- Palm Garden of Port St. Lucie
- Palm Garden of Sun City Center, LLC
- Palm Garden of Tampa, LLC
- Palm Garden of Vero Beach, LLC
- Palm Garden of West Palm Beach, LLC
- Palm Garden of Winter Haven

The project involves 70,168 GSF of new construction. The construction cost is \$12,490,013. Total project cost is \$22,378,157. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant proposes to condition the project as shown below:

- A minimum of 20 percent of the 120-bed facility's total annual patient days shall be provided to Medicaid patients

Palm Garden proposes to provide each of the following items at the facility as a condition of its CON:

- HUR smart-zone trainers
- Alter G anti-gravity treadmill
- Game ready compression therapies
- Dynamic stair trainer
- DJO clinical program equipment
- A well-equipped ADL suite to simulate a home environment, including a fully appointed kitchen, laundry room and bedroom suite

**Seminole Lakes NH, LLC (CON #10333)** proposes to establish a new 120-bed community nursing home in Seminole County. Seminole Lakes NH, LLC (also referred to as Seminole Lakes or the applicant throughout this document) will be managed by Greystone Healthcare Management.

Greystone operates 26 SNFs and two ALFs in Florida:

- Alhambra Health and Rehabilitation Center
- Lexington Health and Rehabilitation Center
- Apollo Health and Rehabilitation
- North Rehabilitation Center
- North Beach Rehabilitation Center
- Unity Health and Rehabilitation Center
- Wilton Manors Health & Rehabilitation Center
- Lady Lake Specialty Care Center
- Club Health and Rehabilitation Center
- The Lodge Health and Rehabilitation Center
- Springs of Lady Lake
- Park Meadows Health and Rehabilitation Center
- Greenbriar Health and Rehabilitation Center
- Lehigh Acres Health and Rehabilitation Center
- Sunset Lake Health and Rehabilitation Center
- Village Place Health and Rehabilitation Center
- Carlton Shores Health and Rehabilitation Center
- Ridgecrest Nursing and Rehabilitation Center

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- Rockledge Health and Rehabilitation Center
- Viera Health and Rehabilitation Center
- Citrus Hills Health & Rehabilitation Center
- The Gardens Health & Rehabilitation Center
- Isle Health & Rehabilitation Center
- Riverwood Health & Rehabilitation Center
- Terrance Health & Rehabilitation Center
- Villa Health & Rehabilitation Center
- Woodland Grove Health & Rehabilitation Center
- The Rehabilitation and Health Center of Gahanna

The project involves 83,558 GSF of new construction. The construction cost is \$15,458,230. Total project cost is \$22,877,084. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant does not wish to accept any conditions for the proposed project.

**Seminole SNF, LLC (CON #10334)** an affiliate of Consulate Healthcare (referred to as Consulate or the applicant throughout this document), proposes to establish a new 120-bed community nursing home in Subdistrict 7-4, Seminole County.

The applicant operates 76 SNFs in Florida:

- Bay Breeze Health and Rehabilitation Center
- Baya Pointe Nursing and Rehabilitation Center
- Bayonet Point, Consulate Health Care Of
- Beneva Lakes Healthcare and Rehabilitation Center
- Bradenton Health Care
- Brandon Health and Rehabilitation Center
- Brandon, Consulate Health Care Of
- Brentwood, Health Center at
- Central Park Healthcare & Rehabilitation Center
- Colonial Lakes Health Care
- Coral Bay Healthcare and Rehabilitation Center
- Coral Trace Health Care
- Countryside Rehab and Healthcare Center
- Destin Healthcare and Rehabilitation Center
- Deltona Health Care
- Dolphins View, The Health and Rehabilitation Center
- Emerald Shores Health and Rehabilitation
- Englewood Healthcare and Rehabilitation Center
- Evans Health Care

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- Fletcher Health and Rehabilitation Center
- Fort Pierce Health Care
- Franco Nursing & Rehabilitation Center
- Governors Creek Health and Rehabilitation Center
- Grand Oaks Health and Rehabilitation Center
- Habana Health Care Center
- Harbor Beach Nursing and Rehabilitation Center
- Harts Harbor Health Care Center
- Heritage Healthcare and Rehabilitation Center
- Heritage Healthcare Center at Tallahassee
- Heritage Park Rehabilitation and Healthcare
- Heron Pointe Health and Rehabilitation
- Hillcrest Health Care and Rehabilitation Center
- Island Health and Rehabilitation Center
- Jacksonville, Consulate Health Care Of
- Keystone Rehabilitation and Health Center
- Kissimmee, Consulate Health Care Of
- Lake Mary Health and Rehabilitation Center
- Lake Parker, Consulate Health Care At
- Lakeland, Consulate Health Care Of
- Lakeside Oaks Care Center
- Largo Health and Rehabilitation Center
- Magnolia Health and Rehabilitation Center
- Marshall Health and Rehabilitation Center
- Melbourne, Consulate Health Care Of
- New Port Richey, Consulate Health Care Of
- North Florida Rehabilitation and Specialty Care
- North Fort Myers, Consulate Health Care Of
- Oakbridge Healthcare Center
- Oaktree Healthcare
- Orange Park, Consulate Health Care Of
- Osprey Point Nursing Center
- Palms Rehabilitation and Healthcare Center
- Parks Healthcare and Rehabilitation Center
- Pensacola, Consulate Health Care Of
- Plantation Bay Rehabilitation Center
- Port Charlotte, Consulate Health Care Of
- Renaissance Health and Rehabilitation
- Rio Pinar Health Care
- Rosewood Health and Rehabilitation Center
- Safety Harbor, Consulate Health Care Of
- San Jose Health and Rehabilitation Center
- Sarasota, Consulate Health Care Of



- Sea Breeze Health Care
- Seaview Nursing and Rehabilitation Center
- Shoal Creek Rehabilitation Center
- Spring Hill Health and Rehabilitation Center
- St. Petersburg, Consulate Health Care Of
- Tallahassee, Consulate Health Care Of
- University Hills Health and Rehabilitation
- Vero Beach, Consulate Health Care Of
- Vista Manor
- Wedge Healthcare Center
- West Altamonte, Consulate Health Care At
- West Palm Beach, Consulate Health Care Of
- Winter Haven, Consulate Health Care of
- Wood Lake Health and Rehabilitation Center

The project involves 74,052 GSF of new construction. The construction cost is \$10,351,533. Total project cost is \$18,442,914. Project cost includes land, building, equipment, project development and financing costs.

The applicant proposes to condition the project as shown below:

- The facility will have space for conferences and classrooms in support of community and staff education and training goals
- An EMR system will be included in the new facility and in operation within three months of opening
  - The EMR system will meet Phase 1 of the meaningful use requirements within 24 months
- The applicant will provide all eligible employees the opportunity to complete educational courses with tuition reimbursement, that will support the care center's efforts of providing the highest level of quality care and achieve operational excellence
- The applicant care center will partner with Consulate and serve as a facility for health care professionals to obtain clinical rotations
- A nurse navigator will be employed at the care center and will responsible for overseeing the management of patients' medical needs upon admission to the facility and for up to 60 days following discharge
- Free community health screenings will be offered at least four times per calendar year (CY) to community members, employees, residents and families
- Education programs at Dementia Awareness to improve the independence and quality of life of persons with dementia and their caregivers will be provided at no cost in accordance with state and federal laws

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- The applicant will provide a combination of least 28 percent the first year and 42 percent thereafter, of total patient days to patients who are reimbursed under traditional Medicaid, Managed Medicaid or Long-term Medicaid or uncompensated care
- The applicant will provide space and staffing to support the community's need for Adult Day Care services
- The applicant will provide in-house hemodialysis services
- The applicant will have the capability to operate up to 20 ventilator-capable beds
- The applicant will construct the facility to include Telehealth capabilities in each patient room

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** (herein after referred to as "Tri-County" or the applicant) proposes to establish a new 120-bed community nursing home in Subdistrict 7-4, Seminole County.

The applicant states that it is affiliated with six SNFs in Florida:

- Adventist Care Centers Courtland
- East Orlando Health and Rehab
- Florida Living Nursing Center
- Sunbelt Health and Rehab
- Zephyr Haven Health and Rehab Center
- Zephyrhills Health and Rehab Center

The project involves 85,700 GSF of new construction. The construction cost is \$18,579,000. Total project cost is \$29,498,000. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant proposes to condition the project as shown below:

- Will continue operating the existing 20 respiratory/ventilator and dialysis services beds at Florida Living Nursing Center
- The first floor of Tri-County's proposed facility will include two rooms that are specifically designed and equipped to accommodate bariatric patients who weigh more than 450 lbs.
- In addition to providing a comprehensive array of orthopedic/neurological/pulmonary/cardiac rehabilitation therapy programs for its patients, Tri-County Nursing and Rehabilitation Center, Inc. will also provide a hydrotherapy program in support of its therapy programs
- The proposed facility will have 100 percent private rooms
- At initiation of service, the proposed facility will have access to and be integrated within Adventist Health System's and Adventist Care Centers' existing and operating electronic health information and

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health information exchange system supported by the organization’s HealthMEDX (HMS) Vision health information platform

- The proposed facility will provide up to \$10,000 annually for at least three years to support staff education and/or certification activities in order to assist facility staff to upgrade skills, gain certification or achieve educational advancement
- The proposed facility will provide \$10,000 annually for at least three years to support community health education and community wellness activities in support of the organization’s goal to enhance the health of the entire community

<b>Total GSF and Project Costs of Co-Batched Applicants</b>					
<b>Applicant</b>	<b>CON #</b>	<b>Project</b>	<b>GSF</b>	<b>Costs \$</b>	<b>Cost Per Bed</b>
Lifespace Communities Inc.	10329	Convert 30 sheltered beds in an existing facility	0	\$60,750	\$2,025
LP Sanford LLC	10330	New 122 bed facility	76,673	\$18,189,510	\$149,094
Lutheran Haven Nursing & Assisted Living Facility	10331	Add 14 new community nursing beds to an existing facility	93,500	\$263,344	\$18,810
Lutheran Haven Nursing & Assisted Living Facility	10331P	Add two new community nursing beds to an existing facility	0	\$83,385	\$41,693
Palm Garden of Seminole	10332	New 120 bed facility	70,168	\$22,378,157	\$186,485
Seminole Lakes NH LLC	10333	New 120 bed facility	83,558	\$22,877,084	\$190,226
Seminole SNF LLC	10334	New 120 bed facility	74,052	\$18,442,914	\$153,691
Tri-County Nursing & Rehabilitation Center Inc.	10335	New 120 bed facility	85,700	\$29,498,00	\$245,817

Source: CON applications 10329-10335 and their respective Schedule 1 and 9

**D. REVIEW PROCEDURE**

The evaluation process is structured by the certificate of need review criteria found in Section 408.035, Florida Statutes; and applicable rules of the State of Florida, Chapters 59C-1 and 59C-2, Florida Administrative Code. These criteria form the basis for the goals of the review process. The goals represent desirable outcomes to be attained by successful applicants who demonstrate an overall compliance with the criteria. Analysis of an applicant's capability to undertake the proposed project successfully is conducted by evaluating the responses and data provided in the application, and independent information gathered by the reviewer.

Applications are analyzed to identify strengths and weaknesses in each proposal. If more than one application is submitted for the same type of project in the same district, applications are comparatively reviewed to determine which applicant(s) best meets the review criteria.

Rule 59C-1.010(3)(b), Florida Administrative Code, prohibits any amendments once an application has been deemed complete. The burden of proof to entitlement of a certificate rests with the applicant. As such, the applicant is responsible for the representations in the application. This is attested to as part of the application in the Certification of the Applicant.

As part of the fact-finding, the consultant, Dwight Aldridge analyzed the application with consultation from the financial analyst, Derron Hillman who evaluated the financial data and Said Baniahmad of the Office of Plans and Construction, who reviewed the application for conformance with the architectural criteria.

**E. CONFORMITY OF PROJECT WITH REVIEW CRITERIA**

The following indicate the level of conformity of the proposed project with the criteria and application content requirements found in Florida Statutes, sections 408.035 and 408.037; applicable rules of the State of Florida, Chapter 59C-1 and 59C-2, Florida Administrative Code.

**1. Fixed Need Pool**

- a. Does the project proposed respond to need as published by a fixed need pool? Or does the project proposed seek beds or services in excess of the fixed need pool? Rule 59C-1.008 (2), Florida Administrative Code.**

In Volume 40, Number 193 of the Florida Administrative Register dated October 3, 2014, a fixed need pool of 122 beds was published for Subdistrict 7-4 for the July 2017 Planning Horizon. Subdistrict 7-4 is comprised of Seminole County.

After publication of this fixed need pool, one existing Subdistrict facilities filed exemption requests or filed expedited CON reviews to increase or add community nursing home beds.<sup>1</sup>

<sup>1</sup> E150001 to add 20 community nursing home beds to Florida Living Nursing Center was approved by the Agency on 1/13/2015, but was not included in the fixed need publication published on 10/03/2014 pursuant to the fixed need pool methodology as summarized in 59C-1.036 (4).

As of November 19, 2014, Subdistrict 7-4 had 1,172 licensed and zero approved community nursing home beds. During the 12-month period ending June 30, 2014, Subdistrict 7-4 experienced 92.30 percent utilization at nine existing facilities. Below is a table illustrating nursing home patient days and occupancy within Subdistrict 7-4.

**Seminole County Nursing Home Patient Days and Occupancy July 1, 2013-June 30, 2014**

Facility	Comm. Nursing Home Bed Inventory	Bed Days	Patient Days	Total Occupancy	Medicaid Occupancy
Consulate Health Care at West Altamonte	116	42,340	41,355	97.67%	59.25%
Florida Living Nursing Center	202	73,730	70,387	95.47%	67.16%
Healthcare and Rehab of Sanford	114	41,610	37,755	90.74%	72.41%
Island Lake Center	120	43,800	42,078	96.07%	71.49%
Lake Mary Health and Rehabilitation Center	120	43,800	42,313	96.61%	38.14%
Life Care Center of Altamonte Springs	240	87,600	73,232	83.60%	61.07%
Longwood Health and Rehabilitation Center	120	43,800	41,230	94.13%	69.61%
Lutheran Haven Nursing Home	42	15,330	14,222	92.77%	38.18%
Tuskawilla Nursing and Rehab Center	98	35,770	32,252	90.16%	41.24%
<b>Total</b>	<b>1,172</b>	<b>427,780</b>	<b>394,824</b>	<b>92.30%</b>	<b>60.15%</b>

Source: Florida Nursing Home Bed Need Projections by District and Subdistrict, October 2014 Batching Cycle

The reviewer notes the current and projected population of Subdistrict 7-4, District 7 and the State for the planning horizon.

**Current and Projected Population Growth Rate  
Seminole County, District 7, and Florida  
January 2014 and January 2017**

County	January 1, 2014 Population			January 1, 2017 Population		
	0-64	65+	Total	0-64	65+	Total
Seminole	377,245	59,352	436,597	383,925	64,973	448,898
District 7	2,155,025	336,765	2,491,790	2,253,593	375,201	2,628,794
Florida	15,881,702	3,548,756	19,430,458	16,349,888	3,891,621	20,241,509
County	2014-2017 Increase			2014-2017 Growth Rate		
	0-64	65+	Total	0-64	65+	Total
Seminole	6,680	5,621	12,301	1.77%	9.47%	2.81%
District 7	98,568	38,436	137,004	5.57%	11.41%	5.50%
Florida	468,186	342,865	811,051	2.95%	9.66%	4.17%

Source: Florida Agency for Health Care Administration Population Estimates, September 2013

The community nursing home beds per 1,000 residents for the age 65 and older cohort in the subdistrict are shown below.

**Beds per 1,000 Residents Age 65 and Older**

County	Community Beds	2014 Pop. Aged 65+	2014	2017 Pop. Aged 65+	2017
			Beds per 1,000		Beds per 1,000
<b>Seminole</b>	1172	59,352	20	64,973	18
<b>District 7</b>	8,955	336,765	27	375,201	24
<b>Florida</b>	80,050	3,548,756	23	3,891,621	21

Source: Florida Agency for Health Care Administration Population Estimates, September 2013 and Florida Nursing Home Bed Need Projections by District and Subdistrict, October 2014 Batching Cycle

**Lifespace Communities, Inc. (CON #10329)** states that the proposed project will convert 30 existing sheltered nursing home beds saving time and resources to implement the project. The applicant contends that projects that can be implemented quickly can relieve the area’s bed need sooner. The applicant states that the proposed project provides the following advantages:

- Improves access for members of the general public to skilled nursing care by utilizing sheltered beds that only require a change the license status, a ministerial function
- Improves access to quality of skilled nursing care by placing community beds into service at a five-star rated facility
- Promotes competition by only applying for a portion of the total beds needed as published in the fixed need pool--allowing other projects to develop simultaneously with this one
- Provides a financially viable project that can be implemented with minimal costs
- Village on the Green is located in a ZIP Code with a high concentration of persons aged 65+ and there are no other skilled nursing facilities located within the ZIP code

**LP Sanford, LLC (CON #10330)** believes a key service that is needed to improve care deliver in the subdistrict is palliative care skilled nursing services. Signature has designed a 16-bed palliative care unit based on discussions with local hospital case managers and hospices. Dr. Victor Mikhael, a physician at Central Florida Inpatient Medicine (CFIM), states “CFIM has a solid working relationship with Signature HealthCARE...We understand the need for more inpatient palliative care units to better serve our community.” Based on information gathered, the 122 beds in the proposed facility will be allocated to programs as follows:

- 16 beds in a dedicated unit for palliative care patients
- 106 beds for short or long-term care based on needs of the community at any given time

Signature provided data regarding the 2012 hospice patient days for Seminole County. The applicant notes that this data show that residents of Orange County received 7,737 days of inpatient respite and hospice general inpatient care in 2012 (or an average daily census of 21 patients). See the table below.

<b>Seminole County Resident Hospice Data Calendar Year 2012</b>					
	<b>Routine Home Care</b>	<b>Continuous Home Care</b>	<b>Inpatient Respite Care</b>	<b>General Inpatient Care</b>	<b>Total</b>
Days	2,297,961	35,729	4,200	17,875	2,355,765
Percent of Total	97.55%	1.52%	0.18%	0.76%	100.0%

Source: CON application #10330, page 30

The applicant notes that the proposed design of the facility allows the unit to expand by 14 beds without any physical plant changes. Signature asserts that it plans to work with VITAS and other hospices in the greater Orlando area to meet the end of life needs in the greater Orlando area.

Signature states that the proposed 122-bed facility will have all private rooms with a 16-bed dedicated unit for palliative care patients. The reviewer notes that the applicant did not condition the approval of the application to a 16-bed palliative care unit.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** proposes to convert 12 of the existing 16 private rooms in the facility to semi-private use, plus convert the existing small therapy area into a semi-private room, while establishing a new larger relocated therapy area in space currently used as an interior porch within the facility. The applicant states that the proposed expanded nursing home will be an integral part of the larger Lutheran Haven community, offering a full continuum of post-acute/senior living services and facilities-- providing strong continuity of care not only for the Haven community, but also for the residents of greater eastern Seminole County. Lutheran Haven states the need for the proposed project is supported by the following facts:

- Lutheran Haven is a not-for-profit nursing home and will continue to focus its services and program initiatives on meeting community need rather than on maximizing profitability or investor return
- The proposed CON condition of providing at least 60 percent of annual patient days in the nursing home's expanded capacity to combined Medicaid/Managed Care/charity/or indigent patients substantiates the applicant's intent to focus on the provision of needed community care versus maximizing profitability

- Given that Lutheran Haven's most recent occupancy rate (12 months ending June 30, 2014) of 92.7 percent, the data clearly shows that there is need for at least a portion of the subdistrict's additional beds at the Lutheran Haven facility
- The expansion of the existing nursing home will ensure that an expanded continuum of care will be available for Oviedo and eastern Seminole County residents requiring senior/post-acute care services and support

**Palm Garden of Seminole County, LLC (CON #10332)** states it has not yet identified the site on which to construct the proposed facility but anticipates securing a site located within five miles of the City of Lake Mary in Seminole County and likely within the postal ZIP code of 32746. Palm Garden indicates that the proposed facility will have 96 private suites and 12 semi-private suites.

Palm Garden indicates that it has reviewed the bed configuration of the existing nursing homes in Seminole County and found that only 76 of 1,172 community beds in the county are located within private rooms. The applicant states the existing nursing homes were constructed as early as the 1970's and the newest nursing home was constructed in 2001. Palm Garden states they are the superior applicant for the proposed facility based on the following:

- Committed to making the additional investment required to construct predominantly private rooms
- Committed to investing in state-of-the-art therapy facilities, equipment, staffing and clinical programs to address the needs of patients in order to enable them to return home
- Has the commitment and ability to provide both long-term care and high quality skilled nursing and physical, occupational and speech therapy services for short-term patients requiring post-acute care for medically complex conditions
- Committed to providing life enrichment programs for its residents to address their social and spiritual needs
- The award would satisfy the published bed need for Seminole County in the current batching cycle
- Palm Garden states it is not affiliated with any hospital--Palm Garden will have to "prove itself" to area hospitals and physicians by providing high quality services and amenities without being dependent on referrals from an affiliated hospital or any other affiliated provider
- Palm Garden is committed to its mission, vision and statement of Core Values



**Seminole Lakes NH, LLC (CON #10333)** states that the proposed facility will be constructed with a combination of private and semi-private rooms configured in a “culture change” design to better serve the rehabilitation patients in the area. The facility will be staffed with people that possess the clinical expertise to care for residents with a wide range of needs for rehabilitation care. The physical plant design will permit the applicant to have the space and equipment needed for rehabilitation including 6,000+ square feet for the therapy suite with separate areas for physical therapy, speech therapy, and occupational therapy, separate therapy gyms and an occupational therapy track located within one of the exterior courtyards. An interdisciplinary team provides an array of services in accordance with each resident’s care plan.

Seminole Lakes states it will provide both short-term rehabilitation services and long-term care services that will deliver a full range of care to treat and support each patient and resident. The applicant maintains that the proposed facility responds to the statutory criterion of “need” and enhances both access and availability of skilled nursing care within the service area.

The applicant notes that patients who are discharged from the hospital often require short-term care to fully recover. Seminole Lakes states the proposed project will provide the needed care for this patient population by working with each patient to develop a personalized care plan to meet their individual goals and abilities and ultimately help them reach their highest level of functioning and return home. The applicant states the continued high demand and rapid growth of the elderly population necessitates maximizing health care resources. Developing a new, high quality SNF with 120-beds will improve access and availability of skilled nursing and rehabilitative care in Seminole County.

**Seminole SNF, LLC (CON #10334)** provides a detailed analysis of Seminole County resident discharges to SNFs by age cohort, by case mix index (CMI), by payer and as a percent of total discharges for the years 2011-2013 on pages 36 to 40 of CON application #10334.

Seminole SNF reports that resident discharges to SNFs have declined by nearly six percent despite a decline of 0.5 percent in total hospital discharges. The applicant believes that there has been growth in the elderly population in the Subdistrict and the constraints of the supply of nursing home beds are likely to be responsible for this trend. See the table below.

**Discharges from Hospitals in Florida to Medicare and Medicaid SNFs  
for Seminole County Residents: 2011-2013**

Year and Data Element	Discharges	Average CMI
<b>Discharges to SNF</b>		
2011	4,069	1.7873
2012	4,099	1.8526
2013	3,858	1.8464
<b>Total Resident Discharges</b>		
2011	48,298	1.2726
2012	48,578	1.2890
2013	342,290	1.3074
<b>Discharges to SNFs as a percent of total discharges</b>		
2011	8.4%	140.4%
2012	8.4%	143.7%
2013	8.0%	141.1%
<b>Percent Change in Discharges to SNF</b>		
2011-2012	0.7%	3.7%
2012-2013	-5.9%	-0.3%
Annual Average 2011-2013	-2.6%	1.7%

Source: CON application #10334, page 39

Applicant's Note: Total facility discharges includes acute care, hospitals, psychiatric hospitals, rehabilitation hospitals, long-term acute care hospitals and children's hospitals

The applicant indicates that it has the interest, ability and commitment to provide effective solutions for the needs of the Subdistrict. Consulate maintains that the proposed project is needed due to three factors:

- The demographic trends of an aging population whose numbers and growth rates are greater than the total population of other age groups
- The episodes of care requiring inpatient admission which are characterized by more chronic conditions and co-morbidities as well as a higher case mix which is indicative of a higher level of severity of illness
- The requirements of the major payers for SNF and health care services--namely government and managed care organizations--for cost-effective, high quality services

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** is a newly-formed subsidiary of Sunbelt Health Care Centers, Inc. d/b/a Adventist Care Centers (ACC), a Florida-based not-for-profit faith based long-term care organization. The applicant states that the significant growth of the aging population, high occupancy rates in the subdistrict as well as the benefits offered by Tri-County provide additional support for the identified need for the project.

The applicant lists several factors supporting the need for the proposed project:

- As a not-for-profit nursing home, Tri-County will focus its programs/services/investments on community needs rather than investor returns
- With all private beds, in both the long-term and short-term rehabilitation portions of the nursing home--the new facility will ensure that each resident in the facility will have the individual space and privacy needed to support optimal resident care and resident recovery
- The linkage and coordination of care that will be offered by the proposed facility, with a broad range of community providers both within and outside the Adventist Health System, will ensure a full continuum of care is available for Seminole County residents requiring post-acute care support
- ACC has already contracted with all four of the Managed Medicaid Providers servicing facilities in Region 7--American Eldercare, Coventry, Sunshine and United. Once the new facility is opened, ACC will only need to have an addendum to the existing contract to add this new facility in the region
- With a number of facilities still operating three or four bed rooms, the proposed all private room facility investment in the community will provide for a significant enhancement in resident care available and other benefits to local patients

## **2. Agency Rule Preferences**

**Please indicate how each applicable preference for the type of service proposed is met. Chapter 59C-1.036, Florida Administrative Code.**

Chapter 59C-1.036 of the Florida Administrative Code does not contain preferences relative to community nursing home beds nor does the Agency publish specific preferences for these facilities. However, the rule does contain standards the Agency utilizes in assessing an applicant's ability to provide quality care to the residents.

- a. **Geographically Underserved Areas.** In a competitive certificate of need review within the nursing home subdistrict as defined in 59C-2.200, Florida Administrative Code, the Agency shall award a certificate of need if the applicant meets all applicable criteria for a geographically underserved area as specified in subsection 408.032(18), Florida Statutes, and if the applicant meets the applicable statutory certificate of need review criteria specified in section 408.035, Florida Statutes, including bed need according to the relevant bed need formula contained in this rule. If the applicant is awarded a certificate of need based on the provisions of this paragraph, the applicant shall agree that the nursing facility will be located in a county without a nursing facility, or in the center of an area within the subdistrict of a radius of at least 20 miles which meets the definition of a geographically underserved area. The center of the geographically underserved area shall be the proposed nursing home location in the application.

None of the co-batched applications were submitted to remedy a geographically underserved area as defined above.

- b. **Proposed Services.** Applicants proposing the establishment of Medicare-certified nursing facility beds to be licensed under Chapter 400, Florida Statutes, shall provide a detailed description of the services to be provided, staffing pattern, patient characteristics, expected average length of stay, ancillary services, patient assessment tools, admission policies and discharge policies.

**Lifespace Communities, Inc. (CON #10329)** states that it will offer the public a state-of-the-art physical plant and that Village on the Green's skilled nursing care center is Medicare approved, offering both private and semi-private rooms for long and short-term stays. The applicant offers the following services:

- Physical, occupational and speech therapies
- Orthopedic rehabilitation
- Neurological rehabilitation
- Pulmonary rehabilitation
- Medical management
- Palliative care
- Hospice care
- Wound care

The applicant notes that physician orders for the resident's immediate care will be obtained prior to or upon admission. Village on the Green indicates that when admitted, each resident will have physician orders, dietary needs, medications, treatments and preliminary discharge plans reviewed by the Interdisciplinary team and an interim care plan developed within 24 hours of admission. The applicant asserts that discharge plans begin with the initial assessment and that it is the responsibility of the facility to have identified the medically related social service or home based service needs of the resident.

Village of the Green provides detailed admission, interdisciplinary care plan and discharge information on pages 2-4 through 2-7 of CON application #10329.

The applicant's Schedule 7 indicates that the average length of stay (ALOS) for the 30 converted beds will be 27.61 for year one of operations and 27.57 for year two of operations. Schedule 6A shows that no new FTEs will be added for the first or second year of operations.

**LP Sanford, LLC (CON #10330)** states that the proposed facility will be dually certified and will provide rehabilitation services and skilled nursing services for short-term and long-term patients. The applicant notes that the proposed project includes a specialized 16-bed palliative care unit.

Signature notes it will implement an individual care plan for each patient. The care plan will incorporate best practices and evidence-based clinical practice guidelines for each patient.

The applicant states that the proposed facility will provide an array of services, including:

- Physical, occupational and speech therapy
- Pain management
- Wound care
- Hospice/palliative care
- Alzheimer's/dementia care
- Medical management
- Pulmonary, neurological and orthopedic rehab
- Care coordination services

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- Transportation services
- Spirituality services
- Quality of life services
- Advance practice clinician services (credentialed as either nurse practitioner or physician assistant)

Signature states it will provide a 15 passenger van for transportation to and from physician visits as well as transporting patients participating in the applicant's quality of life events.

The applicant indicates a shift in long-term care from the nursing home to the patient's home and has created SNF-based rehabilitation programs to enable patients to return home at a higher functional level. Signature notes that for patients requiring a longer stay in the SNF, the proposed facility will have a physical and humane environment to support and enhance quality of life and dignity.

Signature believes that for all patients in its facilities, improving care coordination is a key strategic goal to improve the patients' experience and outcomes beyond their stay. Signature discusses their TransitionalCARE strategy and how this program has led to a reduction in 30-day hospital remission rates. An overview of this program can be found in Tab 40 of CON application #10330.

The applicant notes that a key service for the proposed facility is palliative care and that the proposed facility will have a 16-bed dedicated palliative care unit. Signature states the implementation of their Palliative Care Program will provide the following:

- Structure and processes of care
- Physical aspects of care
- Psychological and psychiatric aspects
- Social aspects of care
- Spiritual, religious and existential aspects
- Cultural aspects
- Care of the patient at the end of life
- Ethical and legal aspects of care

More information of Signature's Palliative Care Program can be found in Tab 17 of CON application #10330.

The applicant also notes that Signature HomeNow is a subsidiary that provides home health services throughout the state of Florida with 11 branch offices in seven Florida Districts, including District 7. Signature states that all its home health agencies are accredited by Community Health Accreditation Program (CHAP).

Signature indicates that it has the capability to implement the following programs in the proposed facility as the community needs them:

- Accelerate rehabilitation units
- Alzheimer's/dementia Program
- The Signature HealthCARE pulmonary (BreathLIFE) program
- Non-medical home care

The applicant notes that it was founded on three cultural pillars--learning, spirituality and intra-preneurship—with a mission to “revolutionize long-term care”. Signature states that it invests heavily in each pillar with dedicated staff and other resources focused on the pillars as foundational aspects of the organization.

Signature states that it intends to establish contractual arrangements, including transfer agreements, with all relevant health care providers in the community. The applicant indicates that therapy services at the proposed facility will be contracted with Signature Rehab, medical supplies through Medline and pharmacy will be provided through contracts with PharMerica.

The applicant indicates that patients will be assessed (including all bodily systems) upon admission into the facility. Discharge planning will include assessing for safe discharge placement, durable medical equipment, education, self-care and supervision needs. Signature included copies of its admissions, transfer and discharge policies in Tab 19 of CON application #10330.

Signature maintains that it has experience in addressing the need of the non-English speaking community and much of its printed literature is available in Spanish.

The applicant affirms the palliative care program improves the quality of care for hospice patients who require some period of inpatient or inpatient respite care. The applicant also states it is customary for hospices to contract with nursing homes for beds on an as needed basis. Signature indicates that staff is trained to understand the reasons hospice patients require inpatient care

and the hospice philosophy so that they may better work with hospice staff, patients and family members. Signature's palliative care programs can be found in Tab 17 of CON application #10330.

The applicant indicates that patients will be assessed (including all bodily systems) upon admission into the facility. Discharge planning will include assessing for safe discharge placement, durable medical equipment, education, self-care and supervision needs. Signature included copies of its admissions, transfer and discharge policies in Tab 19 of CON application #10330.

Signature maintains that it has experience in addressing the need of the non-English speaking community and much of its printed literature is available in Spanish.

The applicant provides the following table illustrating the projected admissions, patient days, ALOS and ADC for the first two years of operation for the proposed 122-bed facility.

**Projected Admissions, Patient Days, ALOS and ADC**

	<b>Year One (ending 12/31/2017)</b>	<b>Year Two (ending 12/31/2018)</b>
Admissions	196	635
Patient Days	8,221	34,795
Medicare ALOS	30.35	30.35
Medicaid ALOS*	104.86	375.14
ADC	22.5	95.3

\*The applicant notes that after census build-up, the Medicaid ALOS is projected to average 482.57 days

Source: CON application #10330, page 40

The applicant's Schedule 7 indicates that the ALOS will be 41.9 days in year one and 54.80 in year two for the total facility. Schedule 6 illustrates that FTEs for year one (ending December 31, 2017) total 36.9 and total 111.7 for year two (ending December 31, 2018). The proposed project's year one and year two FTEs are shown in the table below.



**CON Action Numbers: 10329-10335**

<b>LP Sanford LLC (CON application #10330) Projected Year One &amp; Year Two Staffing</b>		
	<b>Year One FTEs</b>	<b>Year Two FTEs</b>
<b>Administration</b>		
Administrator	1.0	1.0
Director of Nursing	1.0	1.0
Asst. DON/Transitional Care	0.0	1.6
Admissions Director	0.7	1.0
Bookkeeper/Asst. BOM	0.7	0.9
Medical Records Clerk	0.7	1.0
MDS Coordinator	0.7	1.9
Staff Coordinators	0.8	1.0
Human Resources Coordinator	0.3	1.0
Marketing Director	1.0	1.0
Receptionist	2.1	2.1
Business Ofc Mgr.	0.7	1.0
<b>Nursing</b>		
RNs	3.2	4.3
LPNs	1.8	15.8
Nurses' Aides	10.2	43.3
Trans Aide/Central Supply	18.5	1.7
<b>Dietary</b>		
Dietary Supervisor	0.6	1.0
Cooks	1.3	0.9
Dietician	0.2	3.6
Servers, etc.	1.8	7.8
<b>Social Services</b>		
Social Service Director	1.0	1.9
Activity Director	0.7	1.0
Activities Assistant	0.3	2.0
Other: Chaplain	0.3	1.0
<b>Housekeeping</b>		
Housekeeping Supervision	0.0	1.0
Housekeepers	1.6	6.9
<b>Laundry</b>		
Laundry Aides	0.6	3.0
<b>Plant Maintenance</b>		
Maintenance Supervisor	1.0	1.0
Maintenance Assistance	0.0	0.9
<b>Total</b>	<b>36.9</b>	<b>111.7</b>

Source: CON application #10330, Schedule 6

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** states services currently provided at Lutheran Haven Nursing Home and to be provided in the proposed additional beds include all services required to meet Medicare and Medicaid as well as Agency licensure and certification requirements. Programs, services and treatments are individualized to meet the unique physical, social, emotional and spiritual needs of each resident. The applicant's offered services include:

- Post-operative care
- Pain management
- Wound care management
- I.V./infusion therapy
- Respiratory care
- Occupational and speech therapy
- Specialized nursing staff
- Psychiatrists
- Pastoral care
- Dietitians
- Respite/palliative hospice care
- Physical therapy services
- Social services
- Dermatology
- Podiatry
- Medical supplies and equipment
- Imaging services
- Laboratory services

Lutheran Haven list several amenities in addition to the services provided.

- Private bathroom in each room
- Free wireless internet access
- Televisions for each resident
- Individual phones with direct dial access
- Beauty and barber shop services
- Access to an onsite shop
- A wide variety of programming outside the nursing home
- Free local transportation for shopping, physicians visits
- Closed circuit programming from St. Luke's Lutheran Church

Admission and discharges practices are described on page 19-20 of CON application #10331.

The applicant's Schedule 7 shows an ALOS of 149.77 days in year one and 149.03 in year two for the 14-bed addition. The applicant does not provide a Schedule 7 for solely the 14 bed addition so the reviewer was not able to calculate incremental patient days or admissions. Schedule 6A illustrates FTEs added for year one (ending December 31, 2017) and for year two (ending December 31, 2018) total 6.4 FTEs. The proposed project's year one and year two FTEs are shown in the table below.

<b>Lutheran Haven Nursing Home and Assisted Living Facility, LLC                      (CON # 10331)                      Fourteen Bed Addition                      Projected Year One and Year Two Staffing</b>		
	<b>Year One FTEs</b>	<b>Year Two FTEs</b>
<b>Nursing</b>		
LPNs	1.4	1.4
Nurses' Aides	5.0	5.0
<b>Total</b>	<b>6.4</b>	<b>6.4</b>

Source: CON application #10331, Schedule 6A

The applicant's Schedule 7 shows an ALOS of 157.29 days in year one and year two for the two bed partial award. Schedule 6A illustrates that added FTEs for year one (ending December 31, 2017) and for year two (ending December 31, 2018) total 2.0 FTEs. The proposed project's year one and year two FTEs are shown in the table below.

<b>Lutheran Haven Nursing Home and Assisted Living Facility, LLC                      (CON # 10331)                      Two Bed Addition                      Projected Year One and Year Two Staffing</b>		
	<b>Year One FTEs</b>	<b>Year Two FTEs</b>
<b>Nursing</b>		
Nurses' Aides	2.0	2.0
<b>Total</b>	<b>2.0</b>	<b>2.0</b>

Source: CON application #10331, Schedule 6A

**Palm Garden of Seminole County, LLC (CON #10332)** states it will provide numerous skilled clinical services and specialized rehabilitative specialized therapy services, including:

- Skilled nursing
- I.V. therapy
- Respiratory services
- Wound care
- Medication management and stabilization
- Renal Peritoneal dialysis and hemodialysis
- Pain management
- Diagnosis education
- Different types of pump management
- Colostomy care and education
- Feeding tubes of all types
- Palliative care
- Physical, occupational and speech therapies
- Enteral/parenteral therapy

Palm Garden states that it will offer all of these services following completion of the proposed project. The applicant asserts that the renovated facility will provide the next generation of transitional short-term care while offering round-the-clock clinical support complete with a comprehensive rehabilitation program utilizing a new therapy suite. Further, Palm Garden maintains that it will provide care aimed at complete recovery, beginning the moment a patient is released from the hospital and designed to return the patient home at the earliest possible time while reducing the risk or re-hospitalization. Orthopedic care is discussed along with the applicant's anticipation of developing special clinical programs for other high-acuity patients requiring short-term rehabilitation services, including patients suffering from heart failure, stroke and pulmonary disorders.

The applicant plans implementation of culinary and life enrichment programs including meals provided by a professional chef, restaurant-style. Also, the applicant states that a chapel will be available with services for people of various faiths. In addition to worship and spiritual services, the applicant indicates that musical programs, ice cream socials at the internet café, movies, games and other life enrichment activities will be provided at the proposed facility. The applicant maintains that it will have several ancillary services available to assist residents as the goal of the facility is to appropriately address the physical, emotional, psychosocial, spiritual and psychological needs for each resident.

Palm Garden indicates that the admission assessment enables the physician and Interdisciplinary Team to provide services that meet the needs of each resident and that on a quarterly basis (or with a significant change in condition) various assessments are performed. The applicant presents admission and discharge policies maintaining that the discharge planning process begins at admission with the goal to have all residents obtain and maintain their highest practicable level of function and independence.

The applicant's Schedule 7 indicates that the ALOS will be 40.50 days for year one and 38.23 days for year two of operation. Schedule 6 illustrates that FTEs for year one (ending March 31, 2018) total 93.49 and total 132.70 for year two (ending March 31, 2019). The proposed project's year one and year two FTEs are shown in the table below.

**CON Action Numbers: 10329-10335**

<b>Palm Garden of Seminole County (CON application #10332) Projected Year One &amp; Year Two Staffing</b>		
	<b>Year One FTEs</b>	<b>Year Two FTEs</b>
<b>Administration</b>		
Executive Director	1.0	1.0
Administrative Assistant	1.0	1.0
BOM	1.0	1.0
Assistant BOM	1.0	1.0
Receptionist-Weekday	1.5	1.5
Receptionist-Weekend	0.40	0.4
<b>Nursing Administration</b>		
DON	1.0	1.0
ADON	1.0	1.0
MDS Coordinator	3.0	3.0
In service Director	1.0	1.0
Ward Clerk	2.0	2.0
Central Supply	1.0	1.0
Medical Records	2.0	2.0
<b>Nursing</b>		
Unit Manager-Weekday	1.25	2.0
Unit Manager-Weekend	0.25	0.4
RN-Weekday	3.50	5.0
RN-Weekend	1.68	2.40
LPN-Weekday	8.08	13.0
LPN-Weekend	3.23	5.2
Aides	32.15	55.0
<b>Transportation</b>		
Driver-Weekday	0.6	0.6
Driver-Weekend	0.4	0.4
<b>Dietary</b>		
Director	1.0	1.0
Cooks-Weekday	1.58	2.0
Cooks-Weekend	0.63	0.8
Server-Weekday	3.25	5.0
Server-Weekend	1.30	2.0
<b>Activities &amp; Recreation</b>		
Director	1.0	1.0
Assistant	2.0	2.0
<b>Social Services</b>		
Social Service Director	1.0	1.0
Social Service Assistant	2.0	2.0
Admissions Director	1.0	1.0
Admissions Assistant	1.0	1.0
<b>Housekeeping</b>		
Director	1.0	1.0
Housekeeper-Weekday	4.5	7.0
<b>Laundry</b>		
Laundry Aides	2.17	3.0
<b>Plant Maintenance</b>		
Maintenance Supervisor	1.0	1.0
Maintenance Assistance	1.0	1.0
<b>Total</b>	<b>93.49</b>	<b>132.70</b>

Source: CON application #10332, Schedule 6

**Seminole Lakes NH, LLC (CON #10333)** states it will focus on addressing both short and long-term needs. Seminole Lakes notes that with increased fragility and chronic conditions as well as higher intensity services--nursing homes have increased the skill levels of staff with concomitant increases in costs. Greystone ensures that the most state-of-the-art equipment, technology and therapies will be utilized at the proposed facility.

The applicant affirms that Greystone will also make significant investments in staff training and development to ensure that residents and patients will receive the best and highest levels of care.

Seminole Lakes states that the following services will be offered at the proposed facility:

- Physical, occupational and speech therapy
- Post-surgical care
- Wound care
- I.V. therapy
- HIV care
- Hospice care
- Palliative care
- Respite care
- Diabetes care
- Dialysis services
- Tracheotomy care
- Outpatient rehabilitation
- Pain management
- Lymphedema therapy
- Restorative nursing program
- Customized pressure support systems
- Infectious disease treatment
- Oncology/cancer care
- Psychological services
- Registered dietician services
- Individual meal planning, including Kosher meals upon request

The applicant indicates that other services and amenities that will be offered at the proposed facility include:

- Structured weekly activities
- Pet therapy
- 100 percent electric beds
- Multi-lingual staff
- Beauty/barber shop
- Whirlpool spa

Seminole Lakes indicates that a preliminary plan of care will be developed within the first 24 hours of admission with a care plan developed within seven day of completion of comprehensive assessment. The applicant notes that each care plan will include measurable objectives and timetables to meet the resident's needs and will utilize an interdisciplinary team.

The applicant discusses its admission and discharge policies and provides excerpts from Greystone's Operational Policy and Procedure Manual in Exhibit 2-1, 2-3 and 2-4 of CON application #10333. Seminole Lakes states that as residents' and patients' needs change, Greystone will endeavor to meet these needs. The applicant indicates that it will be focused on addressing both their short and long-term needs and will endeavor to be at the forefront of the continually changing healthcare environment to ensure that residents/patients receive the most advanced treatments and the best care.

The applicant's Schedule 7 indicates that the ALOS will be 29.42 days for year one and 29.27 days for year two of operation. Schedule 6 illustrates that FTEs for year one (ending December 31, 2018) total 117.9 and total 151.8 for year two (ending December 31, 2019). The proposed project's year one and year two FTEs are shown in the table below.

**CON Action Numbers: 10329-10335**

<b>Seminole Lakes NH, LLC (CON application #10333) Projected Year One &amp; Year Two Staffing</b>		
	<b>Year One FTEs</b>	<b>Year Two FTEs</b>
<b>Administration</b>		
Administrator	1.0	1.0
Director of Nursing	1.0	1.0
Bookkeeper	1.0	1.0
Secretary	1.5	1.9
Medical Records Clerk	1.4	2.0
Other: HR Marketing	4.1	5.3
<b>Nursing</b>		
RNs	9.9	13.2
LPNs	11.1	15.0
Nurses' Aides	36.9	50.6
Other	4.5	5.0
<b>Ancillary</b>		
Physical Therapist	10.2	12.5
Speech Therapist	1.3	1.8
Occupational Therapist	5.2	7.1
Other	2.2	2.9
<b>Dietary</b>		
Dietary Supervisor	1.4	1.4
Cooks	3.8	4.7
Dietary Aides	5.7	7.1
<b>Social Services</b>		
Social Service Director	1.0	1.0
Activity Director	1.0	1.0
Activities Assistant	1.0	1.7
<b>Housekeeping</b>		
Housekeeping Supervision	1.0	1.0
Housekeepers	5.9	7.0
<b>Laundry</b>		
Laundry Aides	3.9	4.7
<b>Plant Maintenance</b>		
Maintenance Supervisor	1.0	1.0
Maintenance Assistance	1.0	1.0
<b>Total</b>	<b>117.9</b>	<b>151.8</b>

Source: CON application #10333, Schedule 6

**Seminole SNF, LLC (CON #10334)** states that the proposed facility will participate in both the Medicare and Medicaid programs to promote access to all potential patients. The applicant indicates that a comprehensive array of nursing, therapeutic, restorative, and palliative services will be available in order to care for the short and long-term needs of patients and residents.

The applicant asserts that given the need for higher acuity services for skilled nursing patients, the proposed facility will focus on several core programs and services as described below:

- Neurological and stroke care
- Orthopedic care



- Post cardiac care
- Pulmonary care
- Wound care
- Medically complex
- Physical therapy
- Occupational therapy
- Speech therapy
- Respiratory therapy

Seminole SNF asserts that its parent company Consulate has identified 13 of its SNFs as indicators of the need for this CON application based on the following rationale:

- Proximity to the applicable subdistrict for this application
- The distribution of patients in terms of severity or acuity represents a higher skill mix
- Higher levels of Medicare and Medicare Managed Care patients

The applicant states earlier in the application that these 13 centers have enhanced their scope of services to respond to the current need of acute care hospital patients as reflected by case managers, discharge planners and physicians. Consulate notes that these 13 facilities have experienced a high patient acuity in terms of increased:

- Numbers of ventilator-dependent patients
- Numbers of patients of dialysis
- Hours per patient day for nursing and therapy
- Patient age

The reviewer notes that of the identified Consulate 13 facilities (Tab 5 of CON application #10334), only Franco Nursing and Rehabilitation lists “ventilator dependent” as a special program and service on FloridaHealthFinder.gov. In addition, the reviewer notes that there is no mention of ventilator-capable beds in the architectural narrative except to say that oxygen and medical gases will be plumbed into approximately 10 to 20 rooms (to be determined later).

The reviewer notes that Schedule 6 indicates that therapy FTEs will be outsourced to a third-party and will be reflected in the appropriate department on Schedule 8, “respiratory and other ancillaries” are listed for \$41,156 for year one (approximately \$2 per patient day) but not specifically denoted at all for year two.

Seminole SNF indicates that the ALOS used for the development of the projected patient days in Schedule 5 and 7 are based on the recent Consulate Florida 13 and listed below by the major payer categories. The reviewer notes that the applicant did not provide projected admissions in Schedule 7.

**Orange SNF, ALOS by Payer**

<b>Payer</b>	<b>ALOS in Days</b>
Medicare	32.3
Managed Care: Commercial, Managed Medicare and Managed Medicaid	20
Private	49
Medicaid	284

Source: CON application #102334, page 26

The applicant maintains that Consulate’s Interdisciplinary Team meets with the patient and family within 72 hours of admission to discuss and develop a plan to meet their health care and discharge goals. Seminole SNF asserts that the purpose of its Resident Centered Program is to educate the resident, family member or loved one on their specific clinical care plan and that goals are set with follow up meetings as needed.

Seminole SNF states that Journey Home, Consulate’s discharge planning program, begins at admission. The applicant asserts that Consulate realizes every patient is unique, requiring an individualized care plan.

Schedule 6 illustrates that FTEs for year one (ending 2017) total 83.50 and total 94.50 for year two (ending 2018). The proposed project’s year one and year two FTEs are shown in the table below. The reviewer notes that the applicant did not state which month year one and two ended.

**CON Action Numbers: 10329-10335**

<b>Seminole SNF, LLC (CON application #10334) Projected Year One &amp; Year Two Staffing</b>		
	<b>Year One FTEs</b>	<b>Year Two FTEs</b>
<b>Administration</b>		
Administrator	1.0	1.0
Director of Nursing	1.0	1.0
Admissions Director	1.0	1.0
Bookkeeper	1.0	1.0
Secretary	1.5	1.5
Medical Records Clerk	1.0	1.0
Other: Central Supply	1.0	1.0
<b>Physicians</b>		
Medical Director	1.0	1.0
<b>Nursing</b>		
RNs	3.0	6.0
LPNs	9.0	9.0
Nurses' Aides	34.0	42.0
Other Nursing Administration	13.0	13.0
<b>Social Services</b>		
Social Service Director	2.0	2.0
Activity Director	2.0	2.0
Activities Assistant	4.0	4.0
Other: Admission/Case Mgmt	3.0	3.0
<b>Plant Maintenance</b>		
Maintenance Supervisor	1.0	1.0
Maintenance Assistance	3.0	3.0
Security	1.0	1.0
<b>Total</b>	<b>83.50</b>	<b>94.50</b>

Source: CON application #10334, Schedule 6

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)**

states that the proposed 120-bed, 85,700 square foot state-of-the-art facility will incorporate many innovative design features that provide residents privacy, dignity, the ability to provide a person-centered mode of care and offer substantial advantages to residents and their families compared with other nursing homes including:

- All private and spacious rooms
- Neighborhood and household design
- Dedicated bariatric rooms
- Hydrotherapy and state-of-the-art rehabilitation and therapy
- Exterior courtyards
- Regional architectural exterior design

The applicant states that other services and amenities that will provide support, comfort and security include the following:

- Comprehensive rehabilitation available seven days a week and my include physical therapy, occupation therapy, and speech therapy
- Outpatient therapy services

- Post-operative care
- Orthopedic recovery program
- Pain management
- Wound management
- Intravenous therapy
- Individualized nutrition program
- Fiberoptic Endoscopic Evaluation of Swallow or FEES (in-house)
- VitalStim
- Psychiatry and psychological services
- Social services and discharge planning
- Chaplaincy and spiritual services
- Recreational activities

Tri-County asserts that it will provide a wide variety of specialty programs including a Sub-Acute Transitional Program, Comprehensive Orthopedic Rehabilitation Program, Alzheimer's/Behavioral Management Program and other services for the medically-complex patients such as wound care, infusion therapy, restorative program, pain management and heart failure program.

Tri-County indicates that other services, amenities and activities will include:

- Free wireless internet access in all rooms
- Internet Café available to all residents
- Flat screen televisions
- Individual phone with direct dial numbers
- Beauty and barber shop services
- Fine dining program
- Walking program
- Pet therapy
- Music therapy
- Touch therapy
- Sensory stimulus therapy
- Reality orientation
- Community outings
- Arts and crafts
- Gardening
- Sewing
- Bingo
- Coffee hour
- Films/movies

The applicant maintains that approval of the proposed facility will serve the unmet needs of Seminole County by expanding provision of the core ACC services in a state-of-the-art facility while enabling ACC to continue to offer and expand services for the most difficult to place, medically-complex residents in its existing facilities.

Tri-County ensures that each individual seeking assistance is treated at the most appropriate level of care and has options along the continuum of care to meet his or her unique needs. The applicant indicates that this goal is accomplished through pre-admission screening, appropriateness reviews, care plans and discharge planning. The applicant provides additional information and resources in appendix 14 and 15 of CON application #10335.

The applicant states that ACC partners with several educational programs and supports the funding of educational programs as to encourage staff to remain at the facility while upgrading skills, training and certifications-all with the anticipated goal of providing enhanced patient care to the facility's residents.

Tri-County indicates that the ALOS for the proposed facility is bi-modal and dependent upon whether a patient is treated in the long-term care of the sub-acute care portion of the facility. The applicant states that the ALOS is expected to be in the one year or greater range for patients in the long-term care portion. The applicant notes that the expected ALOS for traditional Medicare patients is 28 days and for Medicare HMO patients it is 14 days.

Schedule 7 indicates that the ALOS for the total facility will be 51.94 days in year one and 60.45 in year two. Schedule 6 illustrates that FTEs for year one (ending April 30, 2018) total 66.4 and total 137.6 for year two (ending April 30, 2019). The proposed project's year one and year two FTEs are shown in the table below.

**CON Action Numbers: 10329-10335**

<b>Tri-County Nursing &amp; Rehabilitation Center (CON application #10335) Projected Year One &amp; Year Two Staffing</b>		
	<b>Year One FTEs</b>	<b>Year Two FTEs</b>
<b>Administration</b>		
Administrator	1.0	1.0
Director of Nursing	1.0	1.0
Admissions Director	1.0	1.0
Bookkeeper	0.7	1.0
Secretary	1.0	1.0
Medical Records Clerk	1.0	1.0
Other: Central Supply	0.7	1.0
<b>Nursing</b>		
RNs	7.4	12.0
LPNs	6.3	20.4
Nurses' Aides	22.0	56.2
Other: MDS/Staff Scheduling	1.9	3.0
<b>Ancillary</b>		
Physical Therapist	3.0	6.0
Speech Therapist	1.0	2.0
Occupational Therapist	2.0	4.0
Other	0.5	1.0
<b>Dietary</b>		
Dietary Supervisor	1.0	1.0
Cooks	2.8	2.8
Dietary Aides	2.1	5.6
<b>Social Services</b>		
Social Service Director	1.0	1.0
Activity Director	1.0	1.0
Other	1.2	3.0
<b>Housekeeping</b>		
Housekeepers	3.8	5.6
<b>Laundry</b>		
Laundry Aides	1.8	4.0
<b>Plant Maintenance</b>		
Maintenance Supervisor	1.0	1.0
Maintenance Assistance	0.2	1.0
<b>Total</b>	<b>66.4</b>	<b>137.6</b>

Source: CON application #10335, Schedule 6A.

**c. Quality of Care. In assessing the applicant's ability to provide quality of care pursuant to s. 408.035 (1) (c), Florida Statutes, the agency shall evaluate the following facts and circumstances:**

- 1. Whether the applicant has had a Chapter 400, Florida Statutes, nursing facility license denied, revoked or suspended within the 36 months prior to the current application.**

**Lifespace Communities, Inc. (CON #10329) and Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331) state that they are existing facilities and have**

not had a nursing facility license denied, revoked or suspended within the 36 months prior to the current application.

**LP Sanford LLC (Con #10330), Seminole Lakes NH, LLC (CON #10333), Seminole SNF, LLC (CON #10334) and Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** state that they are newly created entities and therefore have not had a nursing facility license denied, revoked or suspended within the 36 months prior to the current application.

**Palm Garden of Seminole County, LLC (CON #10332)** did not respond to this rule criterion. The reviewer notes that the applicant is a newly created entity and therefore this criterion does not apply.

- 2. Whether the applicant has had a nursing facility placed into receivership at any time during the period of ownership, management or leasing of a nursing facility in the 36 months prior to the current application?**

**Lifespace Communities, Inc. (CON #10329) and Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** state that they are existing facilities and have not had a nursing facility license denied, revoked or suspended within the 36 months prior to the current application.

**LP Sanford LLC (Con #10330), Seminole Lakes NH, LLC (CON #10333), Seminole SNF, LLC (CON #10334) and Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** state that they are newly created entities and therefore have not had a nursing facility placed into receivership.

**Palm Garden of Seminole County, LLC (CON #10332)** did not respond to this rule criterion. The reviewer notes that the applicant is a newly created entity and therefore this criterion does not apply.

3. **The extent to which the conditions identified within subparagraphs 1 and 2 threatened or resulted in direct significant harm to the health, safety or welfare of the nursing facility residents.**

**Lifespace Communities, Inc. (CON #10329), LP Sanford LLC (Con #10330), Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331) Seminole Lakes NH, LLC (CON #10333), Seminole SNF, LLC (CON #10334) and Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** indicate that this provision is not applicable.

**Palm Garden of Seminole County, LLC (CON #10332)** did not respond to this rule criterion. The reviewer notes that this provision is not applicable as nothing was identified above.

4. **The extent to which the conditions identified within subparagraph 3 were corrected within the time frames allowed by the appropriate state agency in each respective state and in a manner satisfactory to the Agency.**

**Lifespace Communities, Inc. (CON #10329), LP Sanford LLC (CON #10330), Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331) Seminole Lakes NH, LLC (CON #10333), Seminole SNF, LLC (CON #10334) and Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** indicate that this provision is not applicable.

**Palm Garden of Seminole County, LLC (CON #10332)** did not respond to this rule criterion. The reviewer notes that this provision is not applicable as nothing was identified above.

5. **Rule 59C-1.036 (4) (f) Harmful Conditions. The Agency shall question the ability of the applicant to provide quality of care within any nursing facility when the conditions identified in the subparagraph (e) 1 and (e) 2 result in the direct, significant harm to the health, safety or welfare of a nursing facility resident, and were not corrected within the time frames allowed by the appropriate state agency in each respective state and in a manner satisfactory with the Agency.**



**Lifespace Communities, Inc. (CON #10329), LP Sanford LLC (Con #10330), Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331) Seminole Lakes NH, LLC (CON #10333), Seminole SNF, LLC (CON #10334) and Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** indicate that this provision is not applicable, since there have been no violations.

**Palm Garden of Seminole County, LLC (CON #10332)** did not respond to this rule criterion. The reviewer notes that this provision is not applicable as nothing was identified above.

- d. **Rule 59C-1.036 (5) Utilization Reports. Within 45 days after the end of each calendar quarter, facilities with nursing facility beds licensed under Chapter 400, Florida Statutes shall report to the Agency, or its designee, the total number of patient days, which occurred in each month of the quarter, and the number of such days that were Medicaid patient days.**

**Lifespace Communities, Inc. (CON #10329), LP Sanford LLC (CON #10330), Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331) Seminole Lakes NH, LLC (CON #10333), Seminole SNF, LLC (CON #10334) and Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** state that they will provide the required data to the applicable local health council and to the Agency.

**Palm Garden of Seminole County, LLC (CON #10332)** did not respond to this rule criterion.

**3. Statutory Review Criteria**

- a. **Is need for the project evidenced by the availability, quality of care, accessibility and extent of utilization of existing health care facilities and health services in the applicants' service area? ss. 408.035 (1)(b) and (e), Florida Statutes.**

There are 71 licensed community nursing homes with a total of 8,955 community nursing home beds in District 7. Subdistrict 7-4 is composed of Seminole County and has nine licensed community nursing

homes with a total of 1,172 community nursing home beds.<sup>2</sup> The subdistrict averaged 92.30 percent total occupancy for the 12-month period ending June 30, 2014.

**Lifespace Communities, Inc. (CON #10329)** states that the conversion of sheltered to community beds provides the greatest flexibility and assures the public of access to a nursing center that is not entirely open to members of the general public. The reviewer notes that the applicant currently holds an exemption that allows up to 30 beds to be utilized by the public. The applicant indicates that as a Gold Seal and five-star rated nursing center, Village of the Green seeks to expand its mission to the public by permanently making 30 beds or half of its licensed bed complement available to the general public and not restricting the beds to only those persons having continuing care contracts.

Village on the Green states it is located in a ZIP code with a high concentration of persons aged 65+ and notes there are no other SNFs located within the ZIP code. The applicant states the western portion of Seminole County abuts northwest Orange County and the area of Apopka with its northern border abutting Lake County. A map is provided on page 3-3 of CON application #10329. The applicant ensures that approval of the proposed project will increase the numbers of persons served. The applicant states treatments will be available for a variety of disorders and conditions addressing the needs of persons for both long-term and short-term nursing rehabilitation and restorative care. Village of the Green contends that this project promotes greater accessibility of skilled nursing beds in Seminole County.

In regards to utilization, the applicant states eight of the nine community nursing homes are occupied at 90 percent or above and provides a chart to showing utilization at each facility in District 7, Subdistrict 7-4.

<sup>2</sup> The reviewer notes that the subdistrict also has a tenth facility, Village On The Green, which has 60 sheltered beds.

**Nursing Home Resident Days and Occupancy Rates by Facility  
District 7, Subdistrict 7-4, July 1, 2013 through June 30, 2014**

<b>Seminole County Facilities</b>	<b>Comm. Beds</b>	<b>Bed Days</b>	<b>Resident Days</b>	<b>Facility Occup.</b>
Consulate Health Care at West Altamonte	116	42,340	41,355	97.7%
Florida Living Nursing Center	202	73,730	70,387	95.5%
Healthcare and Rehab of Sanford	114	41,610	37,755	90.7%
Island Lake Center	120	43,800	42,078	96.1%
Lake Mary Health and Rehabilitation Center	120	43,800	42,313	96.6%
Life Care Center of Altamonte Springs	240	87,600	73,232	83.6%
Longwood Health and Rehabilitation Center	120	43,800	41,230	94.1%
Lutheran Haven Nursing Home	42	15,330	14,222	92.8%
Tuskawilla Nursing and Rehab Center	98	35,770	32,252	90.2%
Village on the Green	0	0	0	0
<b>Subdistrict 7-4</b>	<b>1,172</b>	<b>427,780</b>	<b>394,824</b>	<b>92.3%</b>

AHCA publication, Florida Nursing Home Bed Need projections by District and Subdistrict July 1, 2013 to June 30, 2014

The applicant indicates that it is accessible to Medicare Program participants and will provide a range of therapeutic services for both long-term and short-term residents. The applicant provides projected utilization by payer indicating that it presumes Medicare and self-pay as the usual experience with the facility.

**Projected Utilization at Village on the Green, 30 Community Beds Forecast for Years One and Two**

<b>Payer</b>	<b>Year One Days</b>	<b>Year Two Days</b>	<b>Percent of Days</b>
Medicare	5,884	5,928	64.0%
Self-Pay	3,309	3,335	36.0%
<b>Total</b>	<b>9,193</b>	<b>9,263</b>	<b>100.0%</b>
<b>Occupancy</b>	<b>83.95%</b>	<b>84.59%</b>	
<b>Payer</b>	<b>Year One Admits</b>	<b>Year Two Admits</b>	
Medicare	269	271	
Self-Pay	64	65	
<b>Total</b>	<b>333</b>	<b>336</b>	

Source: CON application #10329 page 3-7

**LP Sanford, LLC (CON #10330)** states that Seminole County’s elderly population is expected to grow by 20 percent between 2014 and 2019, a rate faster than the state of Florida (18 percent). The applicant presents Subdistrict 7-4 nursing home occupancy data for July 1, 2013 to June 30, 2014, noting that subdistrict average occupancy is 92.30, District 7’s average occupancy is 89.52 percent and the State’s average occupancy is 87.35 percent. Signature states it will locate the facility in Seminole County to better serve the growing demand in the community.

Signature notes that it currently operates one skilled nursing facility within District 7, Subdistrict 7-2 (Winter Park Care & Rehab) and another facility in neighboring Subdistrict 7-1 (Anchor Care and Rehab).

Signature believes that palliative care is a key service that needs to be improved in the Subdistrict. The applicant states the palliative care unit within the proposed 122 bed facility will have all private rooms.

Signature states that it has added services beyond its nursing homes with a specialized operating unit to provide care coordination services in the community to improve continuity of care. The applicant contends that this makes it a highly valued provider with unique capabilities that are welcomed additions to an acute care system’s network. Signature maintains that implementation of these programs will have a positive impact on patient experience and clinical outcomes for patients in the Subdistrict. The applicant states that the following specialized operating units and capabilities will be available at the proposed facility:

- Nurse practitioner service
- The Signature HealthCARE Wound Program
- Home health skilled services

The applicant included a DVD of videos about Signature facilities, culture, values and amenities. Signature asserts that the phrase “quality of life” is all-encompassing and integrates not only clinical care, but spiritual, mental and emotional. The applicant maintains that it takes the time and effort to “shirk” the restraints of traditional nursing home activities programming in favor of something much more diverse, vibrant and tailored to the specific desires of its residents. Signature states that this is the fourth consecutive year where patients have been taken on an annual vacation. The applicant indicates that its robust quality of life programming exists to keep patients active while delivering dynamic activities tailored to their individual wants and needs.

Signature presents the following utilization data for the proposed facility.

**Projected Admissions, Patient Days, ALOS and ADC**

	<b>Year One (ending 12/31/2017)</b>	<b>Year Two (ending 12/31/2018)</b>
Admissions	196	635
Patient Days	8,221	34,795
Medicare ALOS	30.35	30.35
Medicaid ALOS*	104.86	375.14
ADC	22.5	95.3

\*The applicant notes that after census build-up, the Medicaid ALOS is projected to average 482.57 days  
Source: CON application #10330, page 40

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** states that the number of patients waiting to be admitted to the facility when spaces becomes available ranges from two to eight (averaging 4.6 patients per month) during the first three quarters of 2014.

The applicant indicates it had an occupancy rate of 92.77 percent for the 12 months ending June 30, 2014. Lutheran Haven notes that occupancy rose from 95 percent to 97 percent from the first to second quarter of 2014—illustrating a need for additional beds to be established at the Lutheran Haven facility. The applicant provides utilization data for the subdistrict, indicating that these facilities had a 93.16 occupancy rate for the six months ending June 30, 2014. Lutheran Haven asserts that the utilization of existing nursing homes within Subdistrict 7-4 supports the development of the proposed bed addition.

The reviewer created the following chart from applicant’s Schedule 7 regarding the proposed 54-bed facility.

**Lutheran Haven Nursing Home Forecasted Utilization  
54-Bed Facility**

	<b>Year One</b>	<b>Year Two</b>
Total Admissions	124	130
Total Patient Days	18,571	19,374
Occupancy	90.86%	94.79%

Source: CON application #10331, Schedule 7

The reviewer created the following chart from applicant’s Schedule 7 regarding the proposed 42 bed facility.

**Lutheran Haven Nursing Home Forecasted Utilization  
42-Bed Facility**

	<b>Year One</b>	<b>Year Two</b>
Total Admissions	97	97
Total Patient Days	15,257.39	15,257
Occupancy	95.00%	95.00%

Source: CON application #10331, Schedule 7

**Palm Garden of Seminole County, LLC (CON #10332)** presents the occupancy rate of the community nursing homes located in Seminole County by ZIP Code, occupancy rate and number of private rooms. Palm Garden asserts that the occupancy rate at Watercrest Care Center is an anomaly and not generally representative of the area. The applicant emphasizes that there are only two private rooms in the applicant’s service area (the City of Lake Mary).

<b>Occupancy Rates for Skilled Nursing Facilities by ZIP Code Proposed Service Area</b>			
<b>Facility</b>	<b>Zip Code</b>	<b>Occupancy Rate</b>	<b>Private Rooms</b>
Lake Mary Health and Rehab Center	32746	96.61%	2
Lutheran Haven Nursing Home	32765	92.77%	16
Tuskawilla Nursing and Rehab Center	32708	90.16%	8
Consulate Health and Rehab Center	32714	97.67%	8
Life Care Center of Altamonte Springs	32701	83.60%	20
Florida Living Nursing Center	32703	95.47%	6
Longwood Health and Rehabilitation Center	32750	94.47%	0
Island Lake Center	32750	96.07%	14
Health and Rehab of Sanford	32771	90.74%	2
<b>Subdistrict 7-4 (Seminole County) Totals</b>		<b>92.30</b>	<b>76</b>

Source: CON application #10332, page 46,

The applicant asserts that while the City of Lake Mary is one of the smaller cities in the county in terms of population, the Zip code area surrounding Lake Mary is projected to be the fourth most populous Zip code area in the county by 2017. The applicant presents population data in Table 4, noting that the 7.1 percent population growth rate for the City of Lake Mary between 2010 and 2013 significantly exceeded the state, the county and all other cities (except Oviedo). The reviewer notes that the chart does not provide the growth rate for the county or the state.

Palm Garden indicates that the percentage of persons 65+ in Lake Mary, 14.1 percent of the population, exceeded the county and was tied for second among cities. The applicant asserts that the Lake Mary vicinity is the preferred location for a new community nursing facility in Seminole County.

The applicant submitted the following considerations to the Agency that should be looked at in evaluating approval in Subdistrict 7-4:

- An otherwise qualified applicant that is not already an operator or an affiliate of an operator of a nursing facility in Seminole County should receive preference over an applicant that already operates or is affiliated with an operator of one or more facilities in the county
- The Agency should give preference to an applicant that seeks to develop a limited number of new facilities in the CON batching cycle rather than “spreading itself thin” by applying for numerous CONs
- The selected applicant should have the ability and commitment to provide both long-term care and short-term post-acute care
- A qualified applicant that is independent of a hospital system should receive preference over an applicant that is affiliated with a hospital system

The reviewer created the following chart from applicant’s Schedule 7 regarding the proposed utilization of the facility.

**Palm Garden of Aventura, LLC Forecasted Utilization**

	<b>Year One</b>	<b>Year Two</b>
<b>Total Admissions</b>	622	1,098
<b>Total Patient Days</b>	25,190	41,975
<b>Occupancy</b>	57.5%	95.8%

Source: CON application #10332, Schedule 7

**Seminole Lakes NH, LLC (CON #10333)** states that Subdistrict 7-4, Seminole County presently has 1,172 licensed community beds or 19.7 licensed SNF beds per 1,000 elderly persons aged 65 years and older, which given the population growth, will decrease to 17.7 SNF beds per 1,000 elderly persons by July 2017 without the addition of 122 beds. Seminole Lakes states that with the addition of 122 community beds to Subdistrict 7-4, the proposed project will improve access and availability of both quality short-term rehabilitation and long-term care services. The applicant contends that as this elderly population continues to grow, the existing number of nursing facilities in the county, which are highly utilized, will be unable to keep up with population growth. See the table below.

<b>Availability of Skilled Nursing Beds in Subdistrict 7-4 District 7 and Florida 2014-2017</b>									
<b>Region</b>	<b>2014</b>			<b>2017 with Adding Beds</b>			<b>2017 without Adding Beds</b>		
	<b>Pop 65+</b>	<b>SNF Beds</b>	<b>Beds per 1,000</b>	<b>Pop 65+</b>	<b>SNF Beds</b>	<b>Beds per 1,000</b>	<b>Pop 65+</b>	<b>SNF beds</b>	<b>Beds per 1,000</b>
<b>Subdistrict 7-4</b>	59,352	1,172	19.7	66,124	1,294	19.6	66,124	1,1172	17.7
<b>District 7</b>	342,237	8,955	26.2	382,329	9,556	25.0	382,329	8,955	23.4
<b>Florida</b>	3,595,188	80,050	22.3	3,956,602	83,165	21.0	3,956,602	80,050	20.2

Source: CON Application #10333, page 7 Schedule B, Section E1

Seminole Lakes states that the proposed project will ensure residents requiring long-term care or rehabilitation following an acute care hospital stay have access to a quality facility. The applicant states that the proposed facility will improve access by:

- Adding a new facility to an area with already high demand, as evidenced by high utilization rates at exiting nursing home facilities and a rapidly growing elderly population
- Increasing the availability of high quality long-term care and rehabilitation services so patients are able to return home and re-hospitalization are reduced

Seminole Lakes notes its association with Greystone which manages 28 total facilities in Florida. The applicant maintains that Greystone is dedicated to improving the quality of care standards at their facilities, consistently invests in upgrades/renovations to facilities and engages

staff in quality improvements initiatives and education. Seminole Lakes asserts that by tailoring care to patients with similar needs, a higher level of service and higher staffing ratios can be implemented efficiently to establish a viable program with excellent results for those it serves.

Using Agency population data, Seminole Lakes states that for the most recent 12 months ending June 30, 2014 nursing facilities in Subdistrict 7-4 reported 394,824 patient days of care, for an average daily census (ADC) of 1,082 and an average occupancy rate of 92.30 percent—a use rate of 6,652 patient days per 1,000 persons aged 65+. The applicant states that using this use rate and applying it to the July 1, 2017 population age 65+ population results in occupancy rate of 93.13 percent even with the addition of the 122 beds. The applicant provides projected utilization statistics for the service area. See the table below.

**Projected Subdistrict 7-4, Seminole County Patient Days July 2017**

<b>District 7-4 Statistics</b>	<b>Values</b>
District 7-4 Actual Patient Days 2014	394,824
Average Daily Census 2014	1,082
Actual Number of Community Nursing Beds 2014	1,172
Average Occupancy 2014	92.30%
July 1, 2014 Population 65+	59,352
District 7-4 Use Rate (patient days per 1,000) 2014	6,652
July 1, 2017 Project Population 65+	66,124
District 7-4 Use Rate (patient days per 1,000) 2014	6,652
Projected 2017 Patient Days	439,873
Projected 2017 Average Daily Census	1,205
Projected Number of Community Nursing Beds with additional 218 beds 2017	1,294
Projected 2017 Occupancy in 3,852 beds	93.13%

Source: CON application # 10333 page 12 Schedule B

The reviewer notes that based on the applicant’s Schedule 7, projected utilization for the proposed 122-bed facility is 30,069 patient days and 41,245 in the first two years of operation, resulting in 68.65 percent and 94.17 percent occupancy.

The applicant indicates that another component of access addresses whether or not there are any economic barriers with respect to obtaining care. Seminole Lakes maintains that it will care for all patients, regardless of payor source and will be dually certified. The reviewer created the following chart from the applicant’s Schedule 7 regarding the proposed facility. The reviewer notes that the year two percentages actually add up to 99.99 percent.



**Seminole Lakes NH, LLC, Payer Mix**

	<b>Year One Ending 12/31/2018</b>	<b>Year Two Ending 12/31/2019</b>
Medicare	38.37%	37.17%
Medicaid	34.01%	34.51%
Other Managed Care	14.32%	15.04%
Self-Pay	6.90%	7.08%
Other Payers	6.40%	6.19%
Total	100%	100%

Source: CON application #10333, Schedule 7

**Seminole SNF, LLC (CON #10334)** indicates that the service area for the proposed project is Seminole County. Seminole SNF, LLC states that there are 10 community nursing homes with 1,172 licensed beds in the county. The applicant maintains that Seminole County’s ratio of 19.7 beds per 1,000 population 65+ is higher than the statewide average of 22.3 beds per 1,000 65+. Seminole SNF provides a comparative analysis of historical and projected growth for the age population cohorts of 65-75, 75-84 and 85+, indicating the following major observations:

- Seminole County’s population of elderly in the age cohorts 65-75, 75-84, and 85+ increased at a faster rate than District 7 and Florida for the 2010 to 2014 time frame
- Seminole County’s population of elderly in the age cohorts 65-75, 75-84 and 85+ is also projected to increase at a greater rate than District 7 and Florida for the 2014-2019 time frame

Seminole SNF provides utilization data for community nursing home beds in the subdistrict, district and Florida on page 35 of CON application #10334, indicating the following major observations:

- Licensed beds in the subdistrict have been the same for the past two years
- Patient days decreased slightly in the subdistrict by -0.2 percent per year from FY 2011-2014 but increased slightly from FY 2013 to FY 2014
- The subdistrict’s occupancy rate has been steady at 92 percent over the past three years
- The subdistrict’s occupancy rate is slightly higher than the State’s rate
- Medicaid occupancy in the subdistrict has remained steady, at about 60 percent, over the past three years and about the same as the State

The applicant contends that for the same three year period, the case mix index (CMI) values for Seminole County patients discharged from a hospital to a SNF were 140 to 144 percent higher than the CMI for all patients discharged from a hospital, documenting the higher severity levels of SNF patients relative to total patients (CON application #10334, page 40, Exhibit 5).

Seminole SNF emphasizes that 13 of Consulate’s Florida SNFs have experienced a higher patient acuity in terms of increased:

- Number of ventilator dependent patients
- Number of patients on dialysis
- Hours per patient day for nursing and therapy (e.g. PT, OT, respiratory and speech)
- Patient age (i.e. older)
- Number of patients with chronic illnesses that are clinically complex

The applicant states that the Consulate Florida 13 that have taken the lead in responding to these recent trends already have some of the elements of resources required to care for the higher medically complex patients. The applicant indicates that as such, their utilization experience is valuable in assessing the need for new skilled nursing beds in this area as well. Seminole SNF reports that total occupancy rates at the Consulate Florida 13 SNFs range from 90 to 95 percent.

The applicant states that the ALOS for Medicare patients at the Consulate Florida 13 is slightly lower than the overall average for all SNFs in the respective “home county.” The applicant contends that although such patients generally have a higher acuity level upon admission to a SNF compared to all patients, the Florida Consulate 13 are able to discharge such patients 13 to 14 percent sooner than other nursing homes. See the table below.

**ALOS for Medicare Patients at the Consulate Florida 13 SNFs**

Primary Condition at Admission	Consulate Florida 13	Average for all SNFs in the “Home” County	All SNFs in Florida	Variance of the Consulate Florida 13 to	
				Average for all SNFs in “Home” County	All SNFs in Florida
Alzheimer’s Disease	30.27	33.38	33.59	-10.3%	-11.0%
Back Problems	25.67	28.44	26.52	-10.8%	-3.3%
Infectious Diseases	26.90	27.84	26.88	-3.5%	0.1%
Major Joint Replacement	30.50	31.98	32.05	-4.9%	-5.1%
Neurological Disorders	29.05	29.32	28.72	-0.9%	1.1%
Pulmonary Disease	24.33	26.78	25.90	-10.1%	-6.4%
Stroke	29.29	33.22	33.55	-13.4%	-14.6%

Applicant’s Note: “Home County” refers to the county in which the Consulate Florida 13 facility is located  
 Source: CON application #10334, page 45

Seminole SNF includes an analysis of Medicare readmission rates to acute care hospitals for the Consulate Florida 13. The applicant concludes that the Consulate Florida 13 had an all-cause readmission rate of 21.2 percent compared to a 21.6 percent rate statewide for all SNFs in Florida. Seminole SNF notes that seven of the 13 reported readmission rates are lower than the state rate leaving five that had readmission rates higher than the state rate. The applicant notes that Franco Nursing and Rehabilitation Center in Miami-Dade County was excluded from the Consulate Florida 13 group because of the unique characteristics of patients in its ventilator-assistance program. The reviewer notes that the applicant conditioned approval of the project to “the capability to operate up to 20 ventilator-capable rooms”—it is unclear whether this analysis provided by the applicant is applicable to the proposed project.

The applicant provides a comparative analysis of key demographic and resident hospital utilization metrics for Subdistrict 7-4. The applicant notes the following point based on the utilization data for community nursing home beds in the subdistrict:

- Licensed beds in the subdistrict have been the same for the past two years
- Existing SNFs in the subdistrict are utilized at 90 percent during the most recent six months of data reported by the Agency
- The 75+ and 85+ age cohorts of population are projected to increase at faster rates of growth than the total population and this population is responsible for approximately 60 percent of all patients discharges from hospitals
- Case mix index values of patients admitted to SNFs from hospitals are higher than all patients discharged from hospitals
- Medicare and Medicare Managed Care account for approximately 80 percent of all admissions to SNFs from hospitals
- The proposed project is responsive to the anticipated needs for the service area

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** states that the proposed nursing facility will assist in ensuring Seminole County residents have greater access to ACC’s broad range of services. The applicant states ACC facilities are highly accessible and accept a wide range of residents—some of which are not accepted by other nursing homes in the area. Residents accepted by ACC include those:

- 21 years of age and above
- With vancomycin-resistant enterococci (VRE) and methicillin-resistant staphylococcus aureus (MRSA)

- Requiring I.V. therapy, including those with peripheral line catheter, patient controlled analgesia (PCA) pump and midline catheter
- Requiring gastric tubes
- With HIV infection
- With Hepatitis B
- Requiring Buck's traction
- Bariatric patients weighing less than 450 pounds
- Residents with colostomies, ileostomies and ureostomies

Tri-County believes the approval of the proposed project will increase accessibility to its high quality special program and services including acute transitional rehabilitation and skilled nursing care, long-term skilled nursing/custodial care and specialty services, such as the Orthopedic Program and Congestive Heart Failure Program, as well as increase capacity within ACC facilities to accommodate the significant unserved demand for nursing home beds.

The applicant notes that high levels of obesity are a significant problem in Seminole County and have increased significantly since 2002. Tri-County provides data showing that the percentage of Seminole County residents who are considered obese increased to 26.4 percent in 2010—only slightly below the Florida statewide rate. The applicant asserts that in order to address this need, it has conditioned approval of the proposed project on the inclusion of two rooms specifically designed and equipped to provide access to bariatric patients.

The applicant states the proposed Tri-County facility will offer enhanced continuity of care and the development of seamless continuum of acute to post-acute care. Tri-County contends that it is in a unique position to provide their residents with an extremely high level of interconnectivity with other providers and level of care through its EMR system. The applicant contends that this system will allow it to offer connectivity and ability to share medical record information electronically with other providers--something most other nursing homes will not be capable of offering.

Tri-County will use ACC's INTERACT Program, which provides a comprehensive quality improvement program. Tri-County will also utilize ACC's Step It Up Program which increases staff awareness of residents for frequent falls. Information for each program can be found in Appendix 4 and 5 of CON application #10335.

The applicant states that although occupancy rates have also been consistently high in Subdistrict 7-4, occupancy rates for ACC facilities

have been even greater between 2011 and year-to-date 2014--over 96 percent. The applicant indicates that ACC's high utilization is one indicator demonstrating the high quality and accessibility of its wide range of services.

<b>Average Occupancy Rates Adventist Care Centers in District 7 2011 through Year-to-Date 2014</b>					
<b>Facility</b>	<b>County</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>
Florida Living Nursing Center	Seminole	97.8%	97.0%	96.0%	96.0%
<b>Subdistrict 7-4 Total</b>	<b>Seminole</b>	<b>93.3%</b>	<b>92.0%</b>	<b>91.3%</b>	<b>93.1%</b>
Adventist Care Centers Courtland	Orange	96.5%	96.4%	95.4%	95.8%
East Orlando Health & Rehab Center	Orange	96.3%	96.0%	96.0%	96.8%
Sunbelt Health & Rehab Center- Apopka	Orange	96.6%	96.3%	96.6%	96.4%
<b>ACC- Orange County Average</b>	<b>Orange</b>	<b>96.5%</b>	<b>96.2%</b>	<b>96.0%</b>	<b>96.4%</b>
<b>Subdistrict 7-2 Total</b>	<b>Orange</b>	<b>81.9%</b>	<b>89.8%</b>	<b>90.3%</b>	<b>90.2%</b>

Source: CON application #10335 page 17

The utilization assumptions reflect that the proposed facility will address an unmet community need and achieve a ramp up census during the initial two years of operation. In reference to projected utilization, Tri-County states the following:

- Total patient days for the first 12 months of operation are projected at 13,992, yielding a year one occupancy rate of 31.8 percent which reflects the initial build-up of census
- Total patient days in year two are projected at 40,864 yielding an occupancy rate of 93.3 percent
- The projected ALOS is 28 days for Medicare patients, 14 days for Medicare HMO, and 500 days for Medicaid and private pay patients

The reviewer created the following charts from the applicant's Schedule 7.

**Tri-County Nursing and Rehabilitation  
Forecasted Utilization  
Total 120-Bed Facility**

	<b>Year One</b>	<b>Year Two</b>
<b>Total Admissions</b>	268	647
<b>Total Patient Days</b>	13,922	40,864
<b>Occupancy</b>	31.79%	93.30%

Source: CON application #10335, Schedule 7

- b. **Does the applicant have a history of providing quality of care? Has the applicant demonstrated the ability to provide quality of care? Is the applicant a Gold Seal Program nursing facility that is proposing to add beds to an existing nursing home? ss. 408.035 (1) (c) and (j), Florida Statutes.**

**Lifespace Communities, Inc. (CON #10329)** states it is a five-star rated facility having been awarded by the Governor's Panel on Excellence in Long-Term Care a "Gold Seal in recognition of demonstrated excellence in long-term care over a sustained period" for the period November 24, 2012-November 23, 2014. The facility remains a Gold Seal facility as its status has been extended to June 30, 2016. The applicant states as the "Gold Seal" award and recognition subsections attest, Village on the Green has been developed and is operated to achieve the highest standard of care. A detailed description of Village on the Green's Quality of Care program is provided on pages 4-2 through 4-8 of CON application #10329.

Village on the Green is a Gold Seal Program and is not on the Nursing Home Watch List. The most recent Agency inspection indicates that Village on the Green received an overall five-star rating out of a possible five stars. The Agency's Nursing Home Guide was last updated November 2014. Village on the Green had no substantiated complaints during November 19, 2011 to November 19, 2014.

Agency records indicate that Lifespace is affiliated with and operates four SNFs in Florida:

- Abbey Delray
- Abbey Delray South
- Harbour's Edge
- The Waterford

Agency complaint records indicate that the affiliated nursing homes (including the applicant) associated with the parent company, for the three-year period ending November 19, 2014, had one substantiated complaint in the complaint category of quality of care/treatment.

**LP Sanford, LLC (CON #10330)** states that it does not have a history of providing quality of care because it is a newly formed entity for the purposes of filing this CON application. The applicant asserts that its parent company is an experienced provider of long-term care.

Signature notes that within the past year, two dozen facilities were named to U.S. News and World Report's list of the nation's 'Best Nursing Homes.' The applicant indicates that it was named one of Modern

Healthcare’s ‘Best Places to Work.’ The applicant reports that 59 percent of the 25 facilities Signature operates in Florida are either four or five star rated by the CMS five star quality rating system. See the table below.

**Signature HealthCARE Florida Facilities**

<b>Subdistrict</b>	<b>5 Star</b>	<b>4 Star</b>	<b>3 Star</b>	<b>2 Star</b>	<b>1 Star</b>	<b>Total</b>
All Florida Facilities	234	182	110	128	33	687
Signature Florida Facilities	34%	26%	16%	19%	5%	100%
	10	4	3	6	1	24
Florida Percentage	42%	17%	13%	25%	4%	100%
Subdistrict 1-3	1	0	0	0	0	1
Subdistrict 2-1	3	0	0	0	0	3
Subdistrict 2-3	1	0	0	0	0	1
Subdistrict 3-1	0	0	1	0	0	1
Subdistrict 3-2	0	0	0	1	0	1
Subdistrict 4-2	1	1	0	0	0	2
Subdistrict 4-4	0	0	0	1	0	1
Subdistrict 5-1	1	0	0	0	0	1
Subdistrict 5-2	2	0	0	0	1	3
Subdistrict 6-2	0	0	0	1	0	1
Subdistrict 6-4	0	0	0	1	0	1
Subdistrict 7-1	1	0	0	0	0	1
Subdistrict 7-2	0	1	0	0	0	1
Subdistrict 8-1	0	0	0	1	0	1
Subdistrict 8-5	0	0	0	1	0	1
Subdistrict 9-4	0	0	1	0	0	1
Subdistrict 10	0	0	1	0	0	1
Subdistrict 11-1	0	2	0	0	0	2
<b>Totals</b>	<b>10</b>	<b>4</b>	<b>3</b>	<b>6</b>	<b>1</b>	<b>24</b>

Source: CON application #10330, page 49

Signature states that the proposed facility will implement the same corporate policies, procedures and quality assurance program that have proven effective in existing operations. Signature states that it has placed a strong emphasis on evaluating, measuring and managing the medical services provided at SNFs. The applicant notes that this type of full-time clinical attention is uncommon in the senior care industry and has expanded the admission criteria to include more complex conditions.

Signature states that it is in the process of redesigning the Quality Assurance Performance Plan (QAPI) to incorporate the new CMS guidance. The applicant states that it has established a QAPI Steering Committee and is formulating plans for tracking, trending and communication of performance improvement activities for global use.

The applicant asserts that it promotes and protects the rights of each patient and places a strong emphasis on individual dignity and self-determination. Signature indicates that prior to having direct-care responsibilities for residents, staff must have appropriate in-service training on resident rights.

Signature notes that it does not hold any accreditations as its compliance program assures appropriateness of care and quality patient outcomes. The applicant indicates that the compliance team responds quickly and effectively if there are any deviations from required standards or if targeted outcomes are not met at all times. Signature states that Compliance and Satisfaction Assessments are monitored monthly for all facilities.

Agency complaint records indicate that the affiliated nursing homes associated with the parent company, for the three-year period ending November 19, 2014, had 54 substantiated complaints at 17 of its 25 facilities. A single complaint can encompass multiple complaint categories. The substantiated complaint categories are listed below:

<b>Nursing Homes affiliated with Signature Holdings II, LLC</b>	
<b>Complaint Category</b>	<b>Number Substantiated</b>
Quality of Care/Treatment	26
Resident/Patient/Client Rights	9
Resident/Patient/Client Assessment	9
Administration/Personnel	8
Nursing Services	5
Physical Environment	4
Admission, Transfer and Discharge Rights	3
Resident/Patient Client Abuse	3
Dietary Services	1
Misappropriation of Property	1
Infection Control	1
Quality of Life	1
Billing/Refunds	1

Source: Florida Agency for Healthcare Administration Complaint Records

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** an existing facility that states it employs various methods to evaluate and improve care and services on an ongoing basis.

Examples of these include:

- Through an active QAPI program, Lutheran Haven evaluates optional methodologies to reduce the incidence of fall, prevent skin breakdown, eliminate infections and assure optimal nutritional intake.
- The medical director evaluates need for outbound care for each case to eliminate unnecessary hospitalization.
- Lutheran Haven uses Interact to identify residents at risk
- Through membership in Leading Age, Lutheran Haven is able to evaluate quality of care indices against our historical data, and those of other nursing homes locally, statewide and nationally. The applicant states this provides the opportunity to identify opportunities for improvement and track and trend care indicators.
- Lutheran Haven states to be an active participant in the National Nursing Home Quality Care Collaborative.



The applicant does note that it was put on conditional status from October 30, 2013 to November 18, 2013 and that the issue related to a situation that has been resolved with all deficiencies corrected. Lutheran Haven asserts that it took immediate and aggressive measures to assure similar incidents would be avoided in the future.

Lutheran Haven is not a Gold Seal Program and is currently on the Nursing Home Watch List. The most recent Agency inspection indicates that Lutheran Haven received an overall two-star rating out of a possible five stars. The Agency's Nursing Home Guide was last updated November 2014. Lutheran Haven Nursing Home had one substantiated complaint during November 19, 2011 to November 19, 2014 in quality of care/treatment.

**Palm Garden of Seminole County, LLC (CON #10332)** notes its participation in the INTERACT™ Program, a stated quality improvement program to help nurse aides and other direct-care staff at long-term care facilities to identify, evaluate and manage acute changes in residents' medical conditions. According to the applicant, the program's goal is to safely manage clinical situations on site whenever possible, and thus avoid the substantial health risks and costs associated with preventable hospital admissions.

Palm Garden indicates that the ability to provide quality of care is further evidenced and ensured by its quality of care programs, including:

- Manager on duty program
- Customer care program
- Standards of care process
- Seventy-two hour meeting
- Grievance process
- Residents and family councils
- Quality assurance process

Agency complaint records indicate that the affiliated nursing homes associated with the parent company, for the three-year period ending November 19, 2014, had 39 substantiated complaints at 13 facilities. A single complaint can encompass multiple complaint categories. The substantiated complaint categories are listed below:

<b>Nursing Homes affiliated with Palm Garden Group</b>	
<b>Complaint Category</b>	<b>Number Substantiated</b>
Quality of Care/Treatment	12
Administration/Personnel	9
Resident/Patient/Client Rights	6
Physical Environment	5
Resident/Patient/Client Assessment	4
Resident/Patient/Client Abuse	4
Infection Control	2
Unqualified Personnel	2
Nursing Services	2
Admission, Transfer & Discharge Rights	2
Physician Services	1
Falsification of Records/Reports	1
Billing/Refunds	1

Source: Florida Agency for Healthcare Administration Complaint Records

**Seminole Lakes NH, LLC (CON #10333)** indicates that the proposed facility will be managed by an experienced nursing home operator, as parent company Greystone currently runs 26 successful SNFs in Florida. Seminole Lakes maintains that as a testament to quality, nine Greystone Healthcare Management facilities were awarded the Bronze Award for Outstanding Quality Care from the American Health Care Association and National Center for Assisted Living (AHCA/NCAL) in 2012 and two other facilities were awarded the same honor in 2013. The applicant states that all Greystone facilities have high occupancy rates, provide the best services for all their patients and have a reputation of providing the highest quality of care.

The applicant states that it has taken advantage of the Florida Health Care Association (FHCA) Quality Credentialing Program. The FHCA’s credentialing process includes an internal and external review process of quality issues. Copies of Greystone’s Quality Improvement Programs, Risk Management/Quality Assurance Standards and Guidelines and Quarterly Systems Review Forms are included in Exhibit 4-3 of CON application #10333.

The applicant also explains its commitment to voluntary quality improvement programs that guide Greystone facilities. Seminole Lakes states that Greystone has developed and implemented organization-specific programs, beyond those required by law, to promote the delivery of quality care. The applicant asserts that it will be guided by these voluntary programs, which include:

- Believed balanced assessment
- Operation Make a Difference
- Care line
- Greystone Culture of CARE
- Focus leveling monitoring steps

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- Quality assurance/risk management standards and guidelines
- Dining with distinction
- Resident council

The applicant provides a summary of Greystone’s Quality Assurance and Performance Improvement Plan in Exhibit 4-11 of CON application #10333.

Agency complaint records indicate that the affiliated nursing homes associated with the parent company, for the three-year period ending November 19, 2014, had 143 substantiated complaints at 26 facilities. A single complaint can encompass multiple complaint categories. The substantiated complaint categories are listed below:

<b>Nursing Homes affiliated with Greystone</b>	
<b>Complaint Category</b>	<b>Number Substantiated</b>
Quality of Care/Treatment	65
Resident/Patient/Client Assessment	13
Administration/Personnel	12
Physical Environment	11
Resident/Patient/Client Rights	9
Nursing Services	7
Admission, Transfer & Discharge Rights	5
Infection Control	4
Resident/Patient/Client Abuse	4
Unqualified Personnel	4
Dietary Services	3
Falsification of Records/Reports	3
Physician Services	2
Billing Refunds	1
State Licensure	1

Source: Florida Agency for Health Care Administration Complaint Records

**Seminole SNF, LLC (CON #10334)** states it is a newly created entity developed for the purpose of submitting this CON application and does not hold a license for a nursing facility. The applicant indicates its response is submitted in regard to its ultimate management company Consulate.

The applicant maintains that at the core of all its policies, procedures and programs are Quality Assurance and Quality Improvement (QA/QI) structures as well as Root Cause Analysis (RCA). Seminole SNF declares that Consulate’s efforts to continuously improve quality of care and patient outcomes have been incorporated into nine best practice programs. The applicant provides Exhibit 12: Best Practices At-A-Glance on pages 50 to 51 of CON application #10334.

Seminole SNF declares that four of Consulate’s care centers in Florida have met the criteria and are eligible to submit an application to the Agency to become a Gold Seal Facility. The reviewer notes these four

facilities are not currently Gold Seal Facilities per Floridahealthfinder.gov.

The applicant provides a detailed discussion of each of the following programs and policies related to quality of care:

- Consulate is organized to focus on quality of care
- Policies and procedures affecting quality of care
- The use of quality of care data at Consulate
- Quality of care for patients
- Quality initiatives in programs and services
- Awards and recognition of Consulate’s care centers
- Quality of Consulate’s staff

Agency complaint records indicate that the affiliated nursing homes associated with the parent company, for the three-year period ending November 19, 2014, had 411 substantiated complaints at 76 facilities. A single complaint can encompass multiple complaint categories. The substantiated complaint categories are listed below:

<b>Nursing Homes affiliated with Consulate or CMC III</b>	
<b>Complaint Category</b>	<b>Number Substantiated</b>
Quality of Care/Treatment	221
Resident/Patient/Client Rights	83
Administration/Personnel	64
Nursing Services	48
Resident/Patient/Client Assessment	45
Physical Environment	35
Infection Control	25
Admission, Transfer, & Discharge Rights	24
Dietary Services	22
Resident/Patient/Client Abuse	13
Resident/Patient/Client Neglect	8
Physician Services	6
Falsification of Records/Reports	4
Misappropriation of Property	4
State Licensure	4
Billing/Refunds	2
Life Safety Code	1
Quality of Life	1
Unqualified Personnel	1

Source: Florida Agency for Health Care Administration Complaint Records

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)**

notes that although it is a newly formed entity, ACC has strong and successful experience operating nursing homes in Florida and other states. The applicant includes ACC quality of care policies/procedures and guidelines in Appendix 16 of CON application #10335.

The applicant provides the following table illustrating its quality rankings for Florida and for Medicare.

**Adventist Care Centers Florida Facility Quality Summary  
December 2014 Reports**

<b>Facility</b>	<b>City</b>	<b>Beds</b>	<b>Florida</b>	<b>Medicare</b>
Sunbelt Health and Rehab Center	Apopka	120	Four Stars	Four Stars
East Orlando Health and Rehab	Orlando	120	Two Stars	Three Stars
Adventist Care Center-Courtland	Orlando	120	Three Stars	Three Stars
Florida Living Nursing Center	Apopka	222*	One Star	One Star
Zephyr Haven Health and Rehab	Zephyrhills	120	Three Stars	Three Stars
Zephyrhills Health and Rehab	Zephyrhills	115	Five Stars	Five Stars

\*The reviewer notes that the applicant incorrectly reported the number of licensed beds for this facility--which should be 202 beds according to FloridaHealthFinder.gov  
Source: CON application #10335, page 70

Tri-County points out that the one Adventist facility that has not been rated at least at the average level is Florida Living. Tri-County states that Florida Living has a large active tracheotomy/ventilator program and the largest specialized memory support unit in Seminole County—resulting in greater challenges than other nursing homes. The applicant notes that the above rating for Florida Living is primarily due to survey deficiencies from 2012. Tri-County asserts that a new administrator was put in place in early 2013 and the facility has improved substantially in its survey results. Tri-County notes that Florida Living has recently been named a Bronze Award recipient from the National Quality Award Program. The applicant contends that this significant improvement in survey history demonstrates ACC’s commitment to ensuring and improving quality and regulatory compliance.

The applicant asserts that coordination of care is a crucial component of providing quality care. Tri-County notes that Adventist Health System has implemented EMRs, developed iNetwork and begun participating in and connecting to the statewide Florida Health Information Exchange. The applicant anticipates that all Adventist Health System facilities will have implemented these programs by 2015 and that the proposed facility will have all of the EMR and interconnectivity capabilities of other ACC facilities upon its opening.

Agency complaint records indicate that the affiliated nursing homes associated with the parent company, for the three-year period ending November 19, 2014, had 14 substantiated complaints at five of its six facilities. A single complaint can encompass multiple complaint categories. The substantiated complaint categories are listed below:

<b>Nursing Homes affiliated with Adventist</b>	
<b>Complaint Category</b>	<b>Number Substantiated</b>
Quality of Care/Treatment	10
Administration/Personnel	1
Dietary Services	1
Physical Environment	1
State Licensure	1

Source: Florida Agency for Healthcare Administration Complaint Records

- c. **What resources, including health manpower, management personnel and funds for capital and operating expenditures, are available for project accomplishment and operation? ss. 408.035 (1)(d), Florida Statutes.**

**Lifespace Communities, Inc. (CON #10329):**

**Analysis:**

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund the project. The analysis of the short and long-term position is intended to provide some level of objective assurance on the likelihood that funding will be available. The stronger the short-term position, the more likely cash on hand or cash flows could be used to fund the project. The stronger the long-term position, the more likely that debt financing could be achieved if necessary to fund the project. We also calculate working capital (current assets less current liabilities) a measure of excess liquidity that could be used to fund capital projects.

Historically we have compared all applicant financial ratios regardless of type to bench marks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a particular CON project it is a reasonable proxy for health care related entities. The below is an analysis of the audited financial statements of the Applicant, and where the two short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

<b>Lifespace Communities, Inc.</b>		
	<b>Dec-13</b>	<b>Dec-12</b>
Current Assets	\$187,799,000	\$164,067,000
Total Assets	\$743,306,000	\$705,587,000
Current Liabilities	\$64,446,000	\$54,994,000
Total Liabilities	\$842,605,000	\$793,023,000
Net Assets	(\$99,299,000)	(\$87,436,000)
Total Revenues	\$200,977,000	\$194,611,000
Excess of Revenues Over Expenses	(\$12,294,000)	\$1,190,000
Cash Flow from Operations	\$30,123,000	\$54,979,000
<b>Short-Term Analysis</b>		
Current Ratio (CA/CL)	2.9	3.0
Cash Flow to Current Liabilities (CFO/CL)	46.74%	99.97%
<b>Long-Term Analysis</b>		
Long-Term Debt to Net Assets (TL-CL/NA)	-783.7%	-844.1%
Total Margin (ER/TR)	-6.12%	0.61%
<b>Measure of Available Funding</b>		
Working Capital	\$123,353,000	\$109,073,000

Position	Strong	Good	Adequate	Moderately Weak	Weak
Current Ratio	above 3	3 - 2.3	2.3 - 1.7	1.7 - 1.0	< 1.0
Cash Flow to Current Liabilities	>150%	150%-100%	100% - 50%	50% - 0%	< 0%
Debt to Equity	0% - 10%	10%-35%	35%-65%	65%-95%	> 95% or < 0%
Total Margin	> 12%	12% - 8.5%	8.5% - 5.5%	5.5% - 0%	< 0%

**Capital Requirements and Funding:**

The applicant indicates on Schedule 2 capital projects totaling \$135,750 which includes this project and routine capital. The applicant indicates on Schedule 3 of its application that funding for the project will be provided by cash on hand. The applicant is converting 30 existing sheltered nursing beds. Therefore, minimal costs are projected for this CON. The only cost associated with this CON is project development cost and fees totaling \$60,750. Cash and cash equivalents was \$34,330,000, cash flow from operations was \$30,123,000, and working capital was \$30,123,000 as of 12/31/13, per the Audited Financial Statements.

**Conclusion:**

Funding for this project should be available as needed.

**LP Sanford, LLC (CON #10330):**

**Analysis:**

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund the project. The analysis of the short and long-term position is intended to provide some level of objective assurance on the likelihood that funding will be available. The stronger the short-term position, the more likely cash on hand or cash flows could be used to fund the project. The stronger the long-term position, the more likely that debt financing could be achieved if necessary to fund the project. We also calculate working capital (current assets less current liabilities) a measure of excess liquidity that could be used to fund capital projects.

Historically we have compared all applicant financial ratios regardless of type to bench marks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a particular CON project it is a reasonable proxy for health care related entities. The below is an analysis of the audited financial statements of Omega Healthcare Investors, Inc., (3<sup>rd</sup> party) and where the two short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

<b>Omega Healthcare Investors, Inc.</b>		
	<b>Dec-13</b>	<b>Dec-12</b>
Current Assets	\$150,120,000	\$126,891,000
Total Assets	\$3,462,216,000	\$2,982,005,000
Current Liabilities	\$5,000,000	\$0
Total Liabilities	\$2,162,113,000	\$1,970,676,000
Net Assets	<b>\$1,300,103,000</b>	<b>\$1,011,329,000</b>
Total Revenues	\$418,714,000	\$350,460,000
Excess of Revenues Over Expenses	\$172,521,000	\$120,698,000
Cash Flow from Operations	\$279,949,000	\$208,271,000
<b>Short-Term Analysis</b>		
Current Ratio (CA/CL)	30.0	N/A
Cash Flow to Current Liabilities (CFO/CL)	5598.98%	N/A
<b>Long-Term Analysis</b>		
Long-Term Debt to Net Assets (TL-CL/NA)	165.9%	194.9%
Total Margin (ER/TR)	41.20%	34.44%
<b>Measure of Available Funding</b>		
Working Capital	<b>\$145,120,000</b>	<b>\$126,891,000</b>



**CON Action Numbers: 10329-10335**

<b>Position</b>	<b>Strong</b>	<b>Good</b>	<b>Adequate</b>	<b>Moderately Weak</b>	<b>Weak</b>
Current Ratio	above 3	3 - 2.3	2.3 - 1.7	1.7 – 1.0	< 1.0
Cash Flow to Current Liabilities	>150%	150%-100%	100% - 50%	50% - 0%	< 0%
Debt to Equity	0% - 10%	10%-35%	35%-65%	65%-95%	> 95% or < 0%
Total Margin	> 12%	12% - 8.5%	8.5% - 5.5%	5.5% - 0%	< 0%

**Capital Requirements and Funding:**

The applicant provided a development stage audit. The audit indicates that the applicant has no assets, liabilities, net worth and no revenue. The applicant indicates on Schedule 2 capital projects totaling \$18,239,510 which includes this project. The applicant indicates on Schedule 3 of its application that funding for the project will be provided by non-related company financing. The applicant’s parent company currently has seven CON applications under review including this one. The applicant provided a letter from Omega committing to funding this project. Omega submitted their audited financial statements as proof of available funding. Overall, Omega has a strong financial position and is likely to either fund through existing capital or raise the capital necessary to meet the commitments set forth in various CON applications in this batching cycle. The applicant also submitted a letter of consideration from Capital One Commercial Banking, showing a revolving line of credit of \$30,000,000 which was scheduled to mature on December 31, 2015. Capital One stated in its letter that it was processing a three year extension of the maturity through December 21, 2017.

**Conclusion:**

Funding for this project should be available as needed.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331):**

**Analysis:**

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund the project. The analysis of the short and long-term position is intended to provide some level of objective assurance on the likelihood that funding will be available. The stronger the short-term position, the more likely cash on hand or cash flows could be used to fund the project. The

**CON Action Numbers: 10329-10335**

stronger the long-term position, the more likely that debt financing could be achieved if necessary to fund the project. We also calculate working capital (current assets less current liabilities) a measure of excess liquidity that could be used to fund capital projects.

Historically we have compared all applicant financial ratios regardless of type to bench marks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a particular CON project it is a reasonable proxy for health care related entities. The below is an analysis of the audited financial statements of the Parent, and where the two short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

<b>Lutheran Haven, Inc. &amp; Subs</b>		
	<b>Aug-13</b>	<b>Aug-12</b>
Current Assets	\$5,482,756	\$5,195,821
Total Assets	\$28,506,948	\$28,066,361
Current Liabilities	\$276,036	\$207,086
Total Liabilities	\$12,414,788	\$12,302,829
Net Assets	\$16,092,160	\$15,763,532
Total Revenues	\$8,740,638	\$9,130,118
Excess of Revenues Over Expenses	\$273,967	\$1,052,802
Cash Flow from Operations	\$1,312,294	\$1,193,704
<b>Short-Term Analysis</b>		
Current Ratio (CA/CL)	19.9	25.1
Cash Flow to Current Liabilities (CFO/CL)	475.41%	576.43%
<b>Long-Term Analysis</b>		
Long-Term Debt to Net Assets (TL-CL/NA)	75.4%	76.7%
Total Margin (ER/TR)	3.13%	11.53%
<b>Measure of Available Funding</b>		
Working Capital	\$5,206,720	\$4,988,735

<b>Position</b>	<b>Strong</b>	<b>Good</b>	<b>Adequate</b>	<b>Moderately Weak</b>	<b>Weak</b>
Current Ratio	above 3	3 - 2.3	2.3 - 1.7	1.7 - 1.0	< 1.0
Cash Flow to Current Liabilities	>150%	150%-100%	100% - 50%	50% - 0%	< 0%
Debt to Equity	0% - 10%	10%-35%	35%-65%	65%-95%	> 95% or < 0%
Total Margin	> 12%	12% - 8.5%	8.5% - 5.5%	5.5% - 0%	< 0%

**Capital Requirements and Funding:**

The applicant indicates on Schedule 2 capital projects totaling \$263,344 which includes this project. The applicant indicates on Schedule 3 of its application that funding for the project will be provided by cash on hand. Cash and cash equivalents was \$4,578,116, cash flow from operations was \$1,312,294 and working capital was \$5,206,720 as of 8/31/13, per the Audited Financial Statements. The applicant did not have current assets or current liabilities broken out. Therefore, staff had to make a determination on these amounts.

**Conclusion:**

Funding for this project should be available as needed.

**Analysis:** (Partial Request)

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund the project. The analysis of the short and long-term position is intended to provide some level of objective assurance on the likelihood that funding will be available. The stronger the short-term position, the more likely cash on hand or cash flows could be used to fund the project. The stronger the long-term position, the more likely that debt financing could be achieved if necessary to fund the project. We also calculate working capital (current assets less current liabilities) a measure of excess liquidity that could be used to fund capital projects.

Historically we have compared all applicant financial ratios regardless of type to bench marks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a particular CON project it is a reasonable proxy for health care related entities. The below is an analysis of the audited financial statements of the Parent, and where the two short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

<b>Lutheran Haven, Inc. &amp; Subs</b>		
	<b>Aug-15</b>	<b>Aug-15</b>
Current Assets	\$5,482,756	\$5,195,821
Total Assets	\$28,506,948	\$28,066,361
Current Liabilities	\$276,036	\$207,086
Total Liabilities	\$12,414,788	\$12,302,829
Net Assets	<b>\$16,092,160</b>	<b>\$15,763,532</b>
Total Revenues	\$8,740,638	\$9,130,118
Excess of Revenues Over Expenses	\$273,967	\$1,052,802
Cash Flow from Operations	\$1,312,294	\$1,193,704
<b>Short-Term Analysis</b>		
Current Ratio (CA/CL)	19.9	25.1
Cash Flow to Current Liabilities (CFO/CL)	475.41%	576.43%
<b>Long-Term Analysis</b>		
Long-Term Debt to Net Assets (TL-CL/NA)	75.4%	76.7%
Total Margin (ER/TR)	3.13%	11.53%
<b>Measure of Available Funding</b>		
Working Capital	<b>\$5,206,720</b>	<b>\$4,988,735</b>

<b>Position</b>	<b>Strong</b>	<b>Good</b>	<b>Adequate</b>	<b>Moderately Weak</b>	<b>Weak</b>
Current Ratio	above 3	3 - 2.3	2.3 - 1.7	1.7 - 1.0	< 1.0
Cash Flow to Current Liabilities	>150%	150%-100%	100% - 50%	50% - 0%	< 0%
Debt to Equity	0% - 10%	10%-35%	35%-65%	65%-95%	> 95% or < 0%
Total Margin	> 12%	12% - 8.5%	8.5% - 5.5%	5.5% - 0%	< 0%

**Capital Requirements and Funding:**

The applicant indicates on Schedule 2 capital projects totaling \$83,385 which includes this project. The applicant indicates on Schedule 3 of its application that funding for the project will be provided by cash on hand. Cash and cash equivalents was \$4,578,116, cash flow from operations was \$1,312,294 and working capital was \$5,206,720 as of 8/31/13, per the Audited Financial Statements. The applicant did not have current assets or current liabilities broken out. Therefore, staff had to make a determination on these amounts.

**Conclusion:**

Funding for this project should be available as needed.

**Palm Garden of Seminole County, LLC (CON #10332):**

**Analysis:**

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund the project. The analysis of the short and long-term position is intended to provide some level of objective assurance on the likelihood that funding will be available. The stronger the short-term position, the more likely cash on hand or cash flows could be used to fund the project. The stronger the long-term position, the more likely that debt financing could be achieved if necessary to fund the project. We also calculate working capital (current assets less current liabilities) a measure of excess liquidity that could be used to fund capital projects.

Historically we have compared all applicant financial ratios regardless of type to bench marks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a particular CON project it is a reasonable proxy for health care related entities. The applicant provided audited financial statements for Parkwood Properties, Inc. and Subsidiaries, its parent company, where the short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

<b>Parkwood Properties, Inc. &amp; Subs</b>		
	<b>Dec-13</b>	<b>Dec-12</b>
Current Assets	\$23,286,646	\$39,185,719
Total Assets	\$98,611,295	\$85,927,327
Current Liabilities	\$402,231	\$976,492
Total Liabilities	\$93,390,787	\$76,125,239
Net Assets	<b>\$5,220,508</b>	<b>\$9,802,088</b>
Total Revenues	\$19,225,037	\$18,796,895
Excess of Revenues Over Expenses	\$6,935,004	\$11,189,032
Cash Flow from Operations	\$8,912,593	\$14,642,113
<b>Short-Term Analysis</b>		
Current Ratio (CA/CL)	57.9	40.1
Cash Flow to Current Liabilities (CFO/CL)	2215.79%	1499.46%
<b>Long-Term Analysis</b>		
Long-Term Debt to Net Assets (TL-CL/NA)	1781.2%	766.7%
Total Margin (ER/TR)	36.07%	59.53%
<b>Measure of Available Funding</b>		
Working Capital	<b>\$22,884,415</b>	<b>\$38,209,227</b>

**CON Action Numbers: 10329-10335**

<b>Position</b>	<b>Strong</b>	<b>Good</b>	<b>Adequate</b>	<b>Moderately Weak</b>	<b>Weak</b>
Current Ratio	above 3	3 - 2.3	2.3 - 1.7	1.7 – 1.0	< 1.0
Cash Flow to Current Liabilities	>150%	150%-100%	100% - 50%	50% - 0%	< 0%
Debt to Equity	0% - 10%	10%-35%	35%-65%	65%-95%	> 95% or < 0%
Total Margin	> 12%	12% - 8.5%	8.5% - 5.5%	5.5% - 0%	< 0%

**Capital Requirements and Funding:**

The applicant provided a development stage audit. The audit indicates that the applicant has no assets, liabilities, net worth, or revenue. The applicant indicates on Schedule 2 capital projects totaling \$22,438,157 which includes this project and capital budget. The applicant provided a letter from UBS Financial Services, Inc. showing over \$10 million in a securities account and \$6.8 million available from a revolving credit line. Additionally, the applicant provided letters of interest from Capital One Bank, Regions Bank, Community and Southern Bank and BBVA Compass to provide financing for the project (All but BBVA have existing or prior lending relationship with the parent). Although not a firm commitment to lend, these letters of interest document a history of lending to the parent organization. Based on the table above, the applicant also has sufficient working capital and operating cash flow to fund the entire capital budget.

The parent has letters of financial commitment to fund or acquire funding on three CONs in this batching cycle (10296, 10332, and 10345). The combined capital projects for these three CONs totals \$35 million. Although leveraged, the parent has strong operating ratios making debt repayment more likely. Funding for all three CONs is likely but not guaranteed.

**Conclusion:**

Funding for this project and the applicant’s entire capital budget should be available as needed.

**Seminole Lakes NH, LLC (CON #10333):**

**Analysis:**

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund the project. The analysis of the short and long-term position is intended

to provide some level of objective assurance on the likelihood that funding will be available. The stronger the short-term position, the more likely cash on hand or cash flows could be used to fund the project. The stronger the long-term position, the more likely that debt financing could be achieved if necessary to fund the project. We also calculate working capital (current assets less current liabilities) a measure of excess liquidity that could be used to fund capital projects.

Historically we have compared all applicant financial ratios regardless of type to bench marks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a particular CON project it is a reasonable proxy for health care related entities. The below is an analysis of the audited financial statements of Greystone Healthcare Holdings II, LLC, (3<sup>rd</sup> party) and where the two short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

<b>Greystone Healthcare Holdings II, LLC</b>	
	<b>Dec-13</b>
Current Assets	\$7,528,748
Total Assets	\$39,337,343
Current Liabilities	\$22,208,936
Total Liabilities	\$41,842,348
Net Assets	(\$2,505,005)
Total Revenues	\$46,905,292
Excess of Revenues Over Expenses	(\$258,138)
Cash Flow from Operations	\$2,242,483
<b>Short-Term Analysis</b>	
Current Ratio (CA/CL)	0.3
Cash Flow to Current Liabilities (CFO/CL)	10.10%
<b>Long-Term Analysis</b>	
Long-Term Debt to Net Assets (TL-CL/NA)	-783.8%
Total Margin (ER/TR)	-0.55%
<b>Measure of Available Funding</b>	
Working Capital	(\$14,680,188)

**CON Action Numbers: 10329-10335**

<b>Position</b>	<b>Strong</b>	<b>Good</b>	<b>Adequate</b>	<b>Moderately Weak</b>	<b>Weak</b>
Current Ratio	above 3	3 - 2.3	2.3 - 1.7	1.7 – 1.0	< 1.0
Cash Flow to Current Liabilities	>150%	150%-100%	100% - 50%	50% - 0%	< 0%
Debt to Equity	0% - 10%	10%-35%	35%-65%	65%-95%	> 95% or < 0%
Total Margin	> 12%	12% - 8.5%	8.5% - 5.5%	5.5% - 0%	< 0%

**Capital Requirements and Funding:**

The applicant provided a development stage audit. The audit indicates that the applicant has very little assets, liabilities, net worth and no revenue. The applicant indicates on Schedule 2 capital projects totaling \$22,877,084 which includes this project. The applicant indicates on Schedule 3 of its application that funding for the project will be provided by cash on hand (\$4,575,414) and non-related company financing (Greystone Healthcare Holdings II, LLC). The applicant's parent company currently has six CON applications under review including this one. The applicant provided a letter from Greystone committing to fund this project. Greystone submitted their Audited Financial Statements as proof of available funding. As of 12/31/2013 Greystone Healthcare Holdings II, LLC had minimally sufficient cash and cash flow from operations to fund the cash on hand reported on Schedule 3 for all the proposed projects. The Private Bank provided a letter of interest. A letter of interest does not constitute a firm commitment to lend. With that in mind, the parent's negative equity position could limit additional borrowing.

**Conclusion:**

Funding for this project is in question.

**Seminole SNF, LLC (CON #10334):**

**Analysis:**

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund the project. The applicant is a development stage company, meaning there is no operational data to be analyzed for the purposes of this review. The applicant indicated that funding will be provided by a third-party source.



**Capital Requirements and Funding:**

The applicant provided a development stage audit. The audit indicates that the applicant has very little assets, liabilities, net worth and no revenue. The applicant indicates on Schedule 2 capital projects totaling \$18,442,914 which includes this project. The applicant indicates on Schedule 3 of its application that funding for the project will be provided cash on hand of \$40,000 and by non-related company financing. The applicant's parent company currently has six CON applications under review including this one. The applicant provided a letter from Mainstreet Investments indicating a commitment to fund this project. The applicant provided audited financial statements of Mainstreet affiliates (Mainstreet Asset Management, Inc. and Mainstreet Property Group, LLC). The letter was specific to this project and in general mentioned funding 50 projects in 2015. Mainstreet is cited as a funding source for several CONs in this batching cycle. Mainstreet is not a traditional bank or lender but rather is in the business of funding and acquiring funding from various investors, lenders, and various Real Estate Investment Trusts (REITs) to build facilities and lease and or sell them to operators of healthcare facilities. To that point, a letter of interest was provided by PNC Real Estate to provide funding for upcoming Mainstreet projects (it should be noted that a letter of interest is not considered a firm commitment to lend).

The structure and nature of these type of entities makes it difficult to determine ability to fund any given project due to both the complexity and variety of funding options and the turnover of projects. However, this is not an uncommon method of funding skilled nursing facility construction and operation. We reviewed the Mainstreet affiliated audits and the primary entity appears to be sound and has been in existence for over 10 years. While the letter of interest from PNC cannot be relied on as a commitment, the letter did acknowledge a preexisting lending relationship that supports the business conducted by Mainstreet as described in its commitment letter and audits. Based on that analysis, it is likely that Mainstreet would be able to fund this project.

**Conclusion:**

Funding for this project is not guaranteed but appears likely.

**Tri-County Nursing & Rehabilitation Center, Inc. (CON #10335)**

**Analysis:**

The purpose of our analysis for this section is to determine if the applicant has access to the funds necessary to fund this and all capital projects. Our review includes an analysis of the short and long-term position of the applicant, parent, or other related parties who will fund

the project. The analysis of the short and long-term position is intended to provide some level of objective assurance on the likelihood that funding will be available. The stronger the short-term position, the more likely cash on hand or cash flows could be used to fund the project. The stronger the long-term position, the more likely that debt financing could be achieved if necessary to fund the project. We also calculate working capital (current assets less current liabilities) a measure of excess liquidity that could be used to fund capital projects.

Historically we have compared all applicant financial ratios regardless of type to bench marks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a particular CON project it is a reasonable proxy for health care related entities. The below is an analysis of the audited financial statements of Adventist Health System (Parent) and where the two short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

<b>Adventist Health System</b>		
	<b>Dec-13</b>	<b>Dec-12</b>
Current Assets	\$5,711,434,000	\$5,066,359,000
Total Assets	\$11,708,294,000	\$10,645,095,000
Current Liabilities	\$1,424,876,000	\$1,277,318,000
Total Liabilities	\$5,387,886,000	\$4,889,188,000
Net Assets	<b>\$6,320,408,000</b>	<b>\$5,755,907,000</b>
Total Revenues	\$7,666,256,000	\$7,345,338,000
Excess of Revenues Over Expenses	\$578,241,000	\$507,786,000
Cash Flow from Operations	\$1,153,648,000	\$978,176,000
<b>Short-Term Analysis</b>		
Current Ratio (CA/CL)	<b>4.0</b>	<b>4.0</b>
Cash Flow to Current Liabilities (CFO/CL)	<b>80.96%</b>	<b>76.58%</b>
<b>Long-Term Analysis</b>		
Long-Term Debt to Net Assets (TL-CL/NA)	<b>62.7%</b>	<b>62.8%</b>
Total Margin (ER/TR)	<b>7.54%</b>	<b>6.91%</b>
<b>Measure of Available Funding</b>		
Working Capital	<b>\$4,286,558,000</b>	<b>\$3,789,041,000</b>

<b>Position</b>	<b>Strong</b>	<b>Good</b>	<b>Adequate</b>	<b>Moderately Weak</b>	<b>Weak</b>
Current Ratio	above 3	3 - 2.3	2.3 - 1.7	1.7 – 1.0	< 1.0
Cash Flow to Current Liabilities	>150%	150%-100%	100% - 50%	50% - 0%	< 0%
Debt to Equity	0% - 10%	10%-35%	35%-65%	65%-95%	> 95% or < 0%
Total Margin	> 12%	12% - 8.5%	8.5% - 5.5%	5.5% - 0%	< 0%

**Capital Requirements and Funding:**

The applicant provided a development stage audit. The audit indicates that the applicant has very little assets, liabilities, net worth, and no revenue. The applicant indicates on Schedule 2 capital projects totaling \$88,664,000 which includes this project, CON 10323, and CON 10335. The applicant indicates on Schedule 3 of its application that funding for the project will be provided by Adventist Health System. The applicant’s parent company currently has four CON applications under review including this one totaling \$114,750,000. The applicant provided a letter from Adventist Health System committing to funding this project. Adventist submitted their Audited Financial Schedules as proof of available funding. As indicated above, Adventist Health System has 4.3 billion dollars in working capital. Therefore, funds should be available as needed.

**Conclusion:**

Funding for this project should be available as needed.

- d. What is the immediate and long-term financial feasibility of the proposal? ss. 408.035 (1) (f), Florida Statutes.**

**Lifespace Communities, Inc. (CON #10329):**

**Analysis:**

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant’s profitability projections and, ultimately, whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected skilled nursing facilities with similar Medicaid utilizations to the

utilization projected by the applicant on a per patient day basis (PPD). Comparison group data was adjusted for inflation to match the second year projection (inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	6,252,000	337	1,841	505	278
Total Expenses	6,101,700	329	1,762	480	330
Operating Income	150,300	8	176	26	-173
Operating Margin	2.40%		<b>Comparative Group Values</b>		
	Days	Percent	Highest	Median	Lowest
Occupancy	18,527	84.60%	97.64%	91.30%	33.72%
Medicaid	0	0.00%	29.81%	20.69%	2.05%
Medicare	5,928	32.00%	66.46%	35.09%	6.50%

The applicant nursing home is part of a Continuing Care Retirement Community (CCRC). A CCRC is made up of residential units, an assisted living facility, and a nursing home and is regulated as a type of insurance arrangement. The idea is that CCRC residents buy into the community and transition through life from residential, to assisted living, and finally to skilled nursing. Skilled nursing is also available for rehabilitation to residents.

CCRCs are regulated by the Florida Office of Insurance Regulation (OIR). OIR requires CCRCs to maintain a minimum liquid reserve and file financial statements on a regular basis. The existence of a Certificate of Authority issued by OIR and maintenance of a minimum liquid reserve indicates stability of the CCRC. The applicant CCRC has both.

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, the applicant’s projected staffing meets this requirement.

The projected NRPD and profit fall within the group range and are considered reasonable. CPD is slightly below the lowest value in the control group. Expenses may be slightly understated. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

**Conclusion:**

This project appears to be financially feasible as part of the larger CCRC model.

**LP Sanford, LLC (CON #10330):**

**Analysis:**

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant’s profitability projections and, ultimately, whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected skilled nursing facilities with similar Medicaid utilizations to the utilization projected by the applicant on a per patient day basis (PPD). Comparison group data was adjusted for inflation to match the second year projection (inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	11,932,319	343	467	362	281
Total Expenses	11,563,634	332	464	355	295
Operating Income	368,685	11	29	10	-29
Operating Margin	3.09%		<b>Comparative Group Values</b>		
	Days	Percent	Highest	Median	Lowest
Occupancy	34,796	78.14%	99.48%	88.96%	62.35%
Medicaid/MDCD HMO	13,607	39.11%	50.03%	45.97%	30.87%
Medicare	11,160	32.07%	58.06%	36.42%	17.01%

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement.

The projected NRPD, CPD, and profit fall within the group range and are considered reasonable. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

**Conclusion:**

This project appears to be financially feasible based on the projections provided by the applicant.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC  
(CON #10331):**

**Analysis:**

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant's profitability projections and, ultimately, whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected skilled nursing facilities with similar Medicaid utilizations to the utilization projected by the applicant on a per patient day basis (PPD). Comparison group data was adjusted for inflation to match the second year projection (inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	5,622,409	290	401	306	216
Total Expenses	5,039,937	260	446	301	203
Operating Income	582,472	30	115	6	-38
Operating Margin	10.36%		<b>Comparative Group Values</b>		
	Days	Percent	Highest	Median	Lowest
Occupancy	19,374	94.78%	98.91%	90.01%	66.81%
Medicaid/MDCD HMO	11,625	60.00%	69.63%	60.04%	50.73%
Medicare	4,106	21.19%	35.62%	21.14%	3.38%

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, the applicant’s projected staffing meets this requirement.

The projected NRPD, CPD, and profit fall within the group range and are considered reasonable. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

**Conclusion:**

This project appears to be financially feasible based on the projections provided by the applicant.

**Analysis:** (Partial Request)

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant’s profitability projections and, ultimately, whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected skilled nursing facilities with similar Medicaid utilizations to the utilization projected by the applicant on a per patient day basis (PPD).

**CON Action Numbers: 10329-10335**

Comparison group data was adjusted for inflation to match the second year projection (inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	5,130,579	336	479	328	239
Total Expenses	4,567,318	299	479	320	215
Operating Income	563,261	37	115	15	-113
Operating Margin	10.98%		Comparative Group Values		
	Days	Percent	Highest	Median	Lowest
Occupancy	15,257	95.00%	98.91%	90.40%	66.81%
Medicaid/MDCD HMO	7,665	50.24%	60.04%	49.48%	40.10%
Medicare	3,234	21.19%	49.89%	22.12%	0.00%

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, the applicant’s projected staffing meets this requirement.

The projected NRPD, CPD, and profit fall within the group range and are considered reasonable. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

**Conclusion:**

This project appears to be financially feasible based on the projections provided by the applicant.

**Palm Garden of Seminole County, LLC (CON #10332):**

**Analysis:**

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant’s profitability projections and, ultimately, whether profitability is achievable for this project. Our



analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected skilled nursing facilities with similar Medicaid utilizations to the utilization projected by the applicant on a per patient day basis (PPD). Comparison group data was adjusted for inflation to match the second year projection (inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	17,349,600	413	502	451	313
Total Expenses	15,944,872	380	499	415	342
Operating Income	1,404,728	33	54	33	-25
Operating Margin	8.10%		<b>Comparative Group Values</b>		
	Days	Percent	Highest	Median	Lowest
Occupancy	41,975	95.83%	99.86%	91.31%	60.95%
Medicaid/MDCD HMO	8,760	20.87%	29.95%	22.37%	12.57%
Medicare	23,725	56.52%	85.89%	59.23%	7.73%

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, the applicant meets this requirement.

There is a math error on Schedule 7 for both years. Therefore, staff had to make a determination on what amount to use for total revenue.

The projected NRPD, CPD, and profit fall within the group range and are considered reasonable. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

**Conclusion:**

This project appears to be financially feasible based on the projections provided by the applicant.

**Seminole Lakes NH, LLC (CON #10333):**

**Analysis:**

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant’s profitability projections and, ultimately, whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected skilled nursing facilities with similar Medicaid utilizations to the utilization projected by the applicant on a per patient day basis (PPD). Comparison group data was adjusted for inflation to match the second year projection (inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	16,224,051	393	599	414	291
Total Expenses	14,241,808	345	580	395	275
Operating Income	1,982,243	48	54	13	-58
Operating Margin	12.22%		<b>Comparative Group Values</b>		
	Days	Percent	Highest	Median	Lowest
Occupancy	41,245	94.17%	99.86%	92.53%	60.95%
Medicaid/MDCD HMO	14,235	34.51%	39.88%	33.87%	20.84%
Medicare	15,330	37.17%	72.34%	46.86%	3.79%

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement.

The projected NRPD, CPD, and profit fall within the group range and are considered reasonable. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

**Conclusion:**

This project appears to be financially feasible based on the projections provided by the applicant.

**Seminole SNF, LLC (CON #10334):**

**Analysis:**

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant's profitability projections and ultimately whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected skilled nursing facilities with similar Medicaid utilizations to the utilization projected by the applicant on a per patient day basis (PPD). Comparison group data was adjusted for inflation to match the second year projection (Inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	14,119,876	356	581	368	255
Total Expenses	13,924,956	351	563	360	267
Operating Income	194,920	5	112	9	-64
Operating Margin	1.38%		<b>Comparative Group Values</b>		
	Days	Percent	Highest	Median	Lowest
Occupancy	39,703	90.65%	99.58%	92.71%	75.37%
Medicaid/MDCD HMO	17,073	43.00%	50.02%	41.97%	29.95%
Medicare	18,980	47.80%	61.01%	35.64%	3.48%

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, neither the nursing assistant staffing, nor the nursing staffing meet this requirement. The projected nursing assistant staffing is 2.2 hours, which is less than the 2.5 hour requirement. The projected nursing staffing is 0.79 hours, which is less than the 1.0 hour requirement.

The projected NRPD, CPD, and profit fall within the group range and are considered reasonable. However, the total cost appears understated due to the lack of sufficient staffing as outlined above. Therefore, the overall profitability of the nursing home appears to be overstated.

**Conclusion:**

This project appears to be financially feasible based on the projections provided by the applicant.

**Tri-County Nursing & Rehabilitation Center, Inc. (CON #10335):**

**Analysis:**

The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant’s profitability projections and, ultimately, whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported on Medicaid cost reports (2012 and 2013 cost report years). For our comparison group, we selected

skilled nursing facilities with similar Medicaid utilizations to the utilization projected by the applicant on a per patient day basis (PPD). Comparison group data was adjusted for inflation to match the second year projection (inflation factor was based on the new CMS Market Basket Price Index as published in the 3rd Quarter 2014, Health Care Cost Review).

NRPD, CPD, and profitability or operating margin that fall within the group range are considered reasonable projections. Below is the result of our analysis.

	PROJECTIONS PER APPLICANT		COMPARATIVE GROUP VALUES PPD		
	Total	PPD	Highest	Median	Lowest
Net Revenues	12,631,581	309	511	344	258
Total Expenses	11,761,515	288	419	336	231
Operating Income	870,066	21	112	8	-64
Operating Margin	6.89%		<b>Comparative Group Values</b>		
	Days	Percent	Highest	Median	Lowest
Occupancy	40,864	93.30%	99.58%	92.40%	68.34%
Medicaid/MDCD HMO	22,244	54.43%	59.95%	52.34%	40.10%
Medicare	15,060	36.85%	47.76%	26.65%	2.63%

**Staffing:**

Section 400.23(3)(a)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.5 hours of direct care per resident per day and a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day. Based on the information provided in Schedule 6, the applicant’s projected staffing meets this requirement.

The projected NRPD, CPD, and profit fall within the group range and are considered reasonable. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

**Conclusion:** This project appears to be financially feasible based on the projections provided by the applicant.

- e. **Will the proposed project foster competition to promote quality and cost-effectiveness? ss. 408.035 (1)(e) and (g), Florida Statutes.**

**Analysis:**

The type of competition that would result in increased efficiencies, service, and quality is limited in health care. Cost-effectiveness through

competition is typically achieved via a combination of competitive pricing that forces more efficient cost to remain profitable and offering higher quality and additional services to attract patients from competitors. Since Medicare and Medicaid are the primary payers in the nursing home industry, price-based competition is limited. With a large portion of the revenue stream essentially fixed on a per patient basis, the available margin to increase quality and offer additional services is limited. In addition, competitive forces truly do not begin to take shape until existing business' market share is threatened. The publication of need in this area suggests that there is an unmet and untapped customer base for a new entrant to absorb. Since nursing home services are limited to available beds and the need formula suggest excess capacity in the market to fill those beds, the impact on market share would be limited. The combination of the existing health care system's barrier to price-based competition via fixed price payers and the existence of unmet need in the District limits any significant gains in cost-effectiveness and quality that would be generated from competition. In addition, this project is converting a relatively small number of beds within the district resulting in no new beds to the district.

**Conclusion:**

These projects are not likely to have a material impact on competition to promote quality and cost-effectiveness.

- f. Are the proposed costs and methods of construction reasonable? Do they comply with statutory and rule requirements? ss. 408.035 (1) (h), Florida Statutes; Ch. 59A-4, Florida Administrative Code.**

**Lifespace Communities, Inc. (CON #10329):** The Office of Plans and Construction notes that the codes and standards regulating the design and construction of skilled nursing facilities are the same for beds licensed as sheltered beds and community beds.

It is the position of the Office of Plans and Construction that a review of the architectural submissions for this project is unnecessary since the existing nursing beds have already been reviewed and approved by the Agency for use as skilled nursing beds in accordance with F.S. 400.232 and F.A.C. 59A-4.133.

The reviewer notes that any modifications or alterations of the physical plant due to a conversion would need to be reviewed by the Office of Plans and Construction.

**LP Sanford, LLC (CON #10330):** The applicant has submitted all information and documentation necessary to demonstrate compliance with the architectural review criteria. The cost estimate for the proposed project provided in Schedule 9, Table A and the project completion forecast provided in Schedule 10 appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

The plans submitted with this application were schematic in detail with the expectation that they will be necessarily revised and refined prior to being submitted for full plan review. The architectural review of this application shall not be construed as an in-depth effort to determine complete compliance with all applicable codes and standards. The final responsibility for facility compliance ultimately rests with the applicant owner. Approval from the Agency for Health Care Administration's Office of Plans and Construction is required before the commencement of any construction.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331):** The Office of Plans and Construction notes that the codes and standards regulating the design and construction of skilled nursing facilities are the same for beds licensed as sheltered beds and community beds.

It is the position of the Office of Plans and Construction that a review of the architectural submissions for this project is unnecessary since the existing nursing beds have already been reviewed and approved by the Agency for use as skilled nursing beds in accordance with F.S. 400.232 and F.A.C. 59A-4.133.

The reviewer notes that any modifications or alterations of the physical plant due to a conversion would need to be reviewed by the Office of Plans and Construction.

**Palm Garden of Seminole County, LLC (CON #10332):** The applicant has submitted all information and documentation necessary to demonstrate compliance with the architectural review criteria. The cost estimate for the proposed project provided in Schedule 9, Table A and the project completion forecast provided in Schedule 10 appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

The plans submitted with this application were schematic in detail with the expectation that they will be necessarily revised and refined prior to being submitted for full plan review. The architectural review of this application shall not be construed as an in-depth effort to determine complete compliance with all applicable codes and standards. The final responsibility for facility compliance ultimately rests with the applicant owner. Approval from the Agency for Health Care Administration's Office of Plans and Construction is required before the commencement of any construction.

**Seminole Lakes NH, LLC (CON #10333):** The applicant has submitted all information and documentation necessary to demonstrate compliance with the architectural review criteria. The cost estimate for the proposed project provided in Schedule 9, Table A and the project completion forecast provided in Schedule 10 appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

The plans submitted with this application were schematic in detail with the expectation that they will be necessarily revised and refined prior to being submitted for full plan review. The architectural review of this application shall not be construed as an in-depth effort to determine complete compliance with all applicable codes and standards. The final responsibility for facility compliance ultimately rests with the applicant owner. Approval from the Agency for Health Care Administration's Office of Plans and Construction is required before the commencement of any construction.

**Seminole SNF, LLC (CON #10334):** The applicant has submitted all information and documentation necessary to demonstrate compliance with the architectural review criteria. The cost estimate for the proposed project provided in Schedule 9, Table A and the project completion forecast provided in Schedule 10 appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

The plans submitted with this application were schematic in detail with the expectation that they will be necessarily revised and refined prior to being submitted for full plan review. The architectural review of this application shall not be construed as an in-depth effort to determine complete compliance with all applicable codes and standards. The final



responsibility for facility compliance ultimately rests with the applicant owner. Approval from the Agency for Health Care Administration’s Office of Plans and Construction is required before the commencement of any construction.

**Tri-County Nursing & Rehabilitation Center, Inc. (CON #10335):** The applicant has submitted all information and documentation necessary to demonstrate compliance with the architectural review criteria. The cost estimate for the proposed project provided in Schedule 9, Table A and the project completion forecast provided in Schedule 10 appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

The plans submitted with this application were schematic in detail with the expectation that they will be necessarily revised and refined prior to being submitted for full plan review. The architectural review of this application shall not be construed as an in-depth effort to determine complete compliance with all applicable codes and standards. The final responsibility for facility compliance ultimately rests with the applicant owner. Approval from the Agency for Health Care Administration’s Office of Plans and Construction is required before the commencement of any construction.

- g. Does the applicant have a history of and propose the provision of health services to Medicaid patients and the medically indigent? Does the applicant propose to provide health services to Medicaid patients and the medically indigent? ss. 408.035 (1) (i), Florida Statutes.**

A five-year history of Medicaid patient days and occupancy for the subdistrict, district and state is provided in the table below.

**Medicaid Patient Days & Medicaid Occupancy in Subdistrict 7-4,  
District 7 and Florida**

<b>Medicaid Patient Days</b>					
<b>Facility/Area</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Seminole County	237,334	240,607	242,549	238,495	235,885
District 7	1,664,492	1,762,965	1,771,754	1,768,611	1,758,966
Florida	15,411,373	15,530,575	15,612,015	15,733,318	15,700,197
<b>Medicaid Occupancy</b>					
<b>Facility/Area</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>
Seminole County	60.34%	60.84%	60.78%	60.61%	60.31%
District 7	59.92%	60.05%	60.18%	60.26%	60.04%
Florida	61.26%	61.33%	61.56%	61.85%	61.66%

Source: Florida Nursing Home Bed Need Projections by District and Subdistrict, October 2014 Batching Cycle

**Lifespace Communities, Inc. (CON #10329)** states Village on the Green is a CCRC with an extension to offer skilled nursing care to the general public in 30 beds. The applicant states the facility’s ongoing highly rated services which bears the Governor’s Gold Seal rating in addition to other recognitions creates an advantage for the public to seek admission. The applicant indicates continued request for admissions is beneficial because it opens access, yet deters them because of the limit on beds that must managed between sheltered and community residents.

Village on the Green states the facility is not a participant in Medicaid at the present time. The applicant states, with the implementation of statewide Medicaid Managed Care, the designation of Medicaid may be irrelevant to the overall payers. Managed care will continue to be relevant to the retirees who have pensions and who will be covered by a myriad of payers. Village on the Green contends the future has evolved to remove the distinction of Medicare and for the most part as well as Medicaid. The applicant concludes that Managed care is the payer which encompasses a myriad of insurers that will write policies of long-term which cover the scope of care.

The reviewer created the following chart which shows the projected Medicaid, Medicare, Managed Care and self-pay admissions for year one and year two of the proposed project.

**Projected Admissions and Patient Days Year One and Two  
Village on the Green  
Proposed 30-Bed Conversion**

Payer	Year One			Year Two		
	Admissions	Patient Days	Percent of Days	Admissions	Patient Days	Percent of Days
Medicare	269	5,884	64.0%	271	5,928	64.0%
Self-Pay	64	3,309	36.0%	65	3,335	36.0%
<b>Total</b>	<b>333</b>	<b>9,193</b>	<b>100%</b>	<b>336</b>	<b>9,263</b>	<b>100%</b>

Source: CON application #10329, Schedule 7

**Projected Admissions and Patient Days Year One and Two  
Village on the Green  
Total Facility**

Payer	Year One			Year Two		
	Admissions	Patient Days	Percent of Days	Admissions	Patient Days	Percent of Days
Medicare	269	5,884	32.0%	271	5,928	32.0%
Life Care Contract	177	9,194	50.0%	179	9,264	50.0%
Self-Pay	64	3,309	16.0%	65	3,335	16.0%
<b>Total</b>	<b>510</b>	<b>18,387</b>	<b>100%</b>	<b>515</b>	<b>18,527</b>	<b>100%</b>

Source: CON application #10329, Schedule 7

The applicant’s Schedule 7 indicates that Medicaid and self-pay represent 0.0 percent and 36.0 percent of year one and 0.0 percent and 36.0 percent of year two annual total patient days for the proposed 30-bed conversion.

**LP Sanford, LLC (CON #10330)** states that Signature operates 25 facilities in Florida and has a long history of providing skilled nursing care to Medicaid patients. The applicant states that its 2014 average Florida Medicaid occupancy percentage was 64 percent. The reviewer notes that the applicant did not include a time period for this data or a source.

The reviewer compiled the following Medicaid occupancy data for Signature HealthCARE’s Florida facilities for July 1, 2013 through June 2014. The reviewer notes that for these facilities, the average Medicaid occupancy percentage was 67.14 percent. See the table below.

**Signature HealthCARE Florida Medicaid Occupancy  
July 1, 2013-June 30, 2014**

<b>Facility Name</b>	<b>Medicaid Days</b>	<b>Total Days</b>	<b>Medicaid Occupancy</b>
Anchor Care and Rehabilitation Center	25,195	37,961	66.37%
Chautauqua Rehabilitation and Nursing Center	30,346	49,497	61.31%
Golfview Healthcare Center	9,660	17,018	56.76%
Golfcrest Healthcare Center	13,721	22,584	60.76%
Gulfport Rehabilitation Center	1,463	3,419	42.79%
Heritage Park Care and Rehabilitation Center	28,967	41,340	70.07%
Kenilworth Care and Rehabilitation Center	14,375	28,744	50.01%
Peninsula Care and Rehabilitation Center	28,971	40,650	71.27%
Signature HealthCARE at College Park	17,466	25,881	67.49%
Signature HealthCARE at The Courtyard	28,977	41,442	69.92%
Signature HealthCARE Center of Waterford	54,676	73,715	74.17%
Signature HealthCARE of Brookwood Gardens	34,453	48,471	66.95%
Signature HealthCARE of Gainesville	22,075	36,952	59.74%
Signature HealthCARE of Jacksonville	43,221	53,454	80.86%
Signature HealthCARE of North Florida	42,417	55,741	76.10%
Signature HealthCARE of Orange Park	21,921	35,154	62.36%
Signature HealthCARE of Ormond	8,091	18,729	43.20%
Signature HealthCARE of Palm Beach	19,454	36,630	53.11%
Signature HealthCARE of Pinellas Park	24,584	40,542	60.64%
Signature HealthCARE of Port Charlotte	32,566	49,761	65.44%
Southern Pines Healthcare Center	20,240	32,822	61.67%
Surrey Place Care Center	13,345	20,625	64.70%
The Bridge at Bay St. Joe	29,172	40,071	72.80%
Washington Rehabilitation and Nursing Center	45,035	56,084	85.36%
Winter Park Care and Rehabilitation Center	20,594	32,530	63.31%
<b>Total</b>	<b>630,985</b>	<b>939,817</b>	<b>67.14%</b>

Source: Florida Nursing Home Bed Need Projections by District and Subdistrict, October 2014 Batching Cycle

The applicant states that the proposed project will continue to serve the needs of the Medicaid population. The applicant provides the following payer forecast for the first two years of operation of the proposed facility, indicating it is based on historical utilization of the applicant’s affiliates

and other similarly-sized facilities within the subdistrict. Signature notes that it expects that the proposed new facility will attract many Medicare and privately insured patients for short-term rehabilitation resulting in a lower percentage of Medicaid patients in its initial years of operation than that of existing Signature facilities. See the table below.

**Projected Admissions and Patient Days Year One and Two  
for LP Sanford, LLC**

Payer	Year One			Year Two		
	Admissions	Patient Days	Percent of Days	Admissions	Patient Days	Percent of Days
Medicare	129	3,925	47.7%	357	10,840	31.2%
Medicaid	19	2,011	24.5%	36	13,607	39.1%
Self-Pay	6	646	7.9%	27	2,999	8.6%
Insurance/HMO	28	542	6.8%	161	3,196	9.2%
Other/Hospice	14	1,097	13.3%	54	4,154	11.9%
<b>Total</b>	<b>196</b>	<b>8,221</b>	<b>100</b>	<b>635</b>	<b>34,795</b>	<b>100.0</b>

Source: CON application #10330 page 59

The applicant’s Schedule 7 indicates that Medicaid and self-pay represent 24.5 percent and 7.9 percent of year one and 39.1 percent and 8.6 percent of year two annual total patient days.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** asserts that it currently provides care to all patient groups, including Medicare, Medicaid, and medically indigent patients. The proposed bed addition will expand Lutheran Haven’s ability to continue to provide care to all of these populations.

The reviewer created the following chart which shows the project Medicaid, Medicare, Managed Care and self-pay admissions for year one and year two of the proposed project to add 14 beds. The reviewer notes that the percentages for year two total 100.01 percent in the full award and the patient days do not necessarily add up for the partial award.

**Projected Admissions and Patient Days Year One and Two  
Lutheran Haven Nursing Home  
54-Bed Facility**

Payer	Year One			Year Two		
	Admissions	Patient Days	Percent of Days	Admissions	Patient Days	Percent of Days
Medicare	95	3,559	19.16%	99	5,712	19.16%
Medicare HMO	7	378	2.04%	8	594	2.05%
Medicaid	5	11,143	60.00%	5	11,625	60.00%
Self-Pay	17	3,491	18.80%	18	3,643	18.80%
<b>Total</b>	<b>124</b>	<b>18,571</b>	<b>100%</b>	<b>130</b>	<b>19,374</b>	<b>100%</b>

Source: CON application #10331 Schedule 7

**Projected Admissions and Patient Days Year One and Two  
Lutheran Haven Nursing Home  
42-Bed Facility**

Payer	Year One			Year Two		
	Admissions	Patient Days	Percent of Days	Admissions	Patient Days	Percent of Days
Medicare	75	3,234	21.19%	75	3,233.61	21.19%
Medicare HMO	5	343.39	2.25%	5	343.39	2.25%
Medicaid	4	7,665	50.24%	4	7,665	50.24%
Self-Pay	13	4,015	26.32%	13	4,015	26.32%
<b>Total</b>	<b>97</b>	<b>15,257.39</b>	<b>100%</b>	<b>97</b>	<b>15,257</b>	<b>100%</b>

Source: CON application #10331 Schedule 7

The applicant’s Schedule 7 indicates that Medicaid and self-pay represent 60.00 percent and 18.80 percent of year one and year two annual total patient days for the proposed 14-bed addition. The applicant’s Schedule 7 indicates that Medicaid and self-pay represent 50.24 percent and 26.32 percent of year one and year two annual total patient days for the proposed two-bed addition.

**Palm Garden of Seminole County, LLC (CON #10332)** the applicant states that it has no history of operations and has not yet had an opportunity to provide health services to Medicaid patients or the medically indigent.

Palm Garden proposes that a minimum of 20 percent of the 120-bed facility’s total annual patient days shall be provided to Medicaid patients. Palm Garden projects that many of the facility’s beds, including most of the beds located in private rooms, will be needed and used by patients requiring short-term rehabilitation and skilled nursing services for which Medicare and private payors will be the primary sources of reimbursement. The applicant states that not all of the facility’s beds will be used by short-term patients, and Palm Garden anticipates that the facility also will provide care for long-term patients for which Medicaid is the payor.

The reviewer created the following chart which shows the project Medicaid, Medicare, Managed Care and self-pay admissions for year one and year two of the proposed project.

**Projected Admissions and Patient Days Year One and Two  
Palm Garden Seminole**

Payer	Year One			Year Two		
	Admissions	Patient Days	Percent of Days	Admissions	Patient Days	Percent of Days
Medicare	568	15,185	60.3%	887	23,725	56.5%
Medicaid	5	5,220	20.7%	8	8,760	20.9%
Self-Pay	5	3,888	15.4%	7	5,475	13.0%
Managed Care	44	897	3.6%	196	4,015	9.6%
<b>Total</b>	<b>622</b>	<b>25,190</b>	<b>100%</b>	<b>1098</b>	<b>41,975</b>	<b>100%</b>

Source: CON application #10332 Schedule 7

The applicant’s Schedule 7 indicates that Medicaid and self-pay represent 20.7 percent and 15.4 percent, respectively, of year one and 20.9 percent and 13.0 percent, respectively, of year two annual total patient days.

**Seminole Lakes NH, LLC (CON #10333)** provides Greystone’s most recent three years total facility utilization and Medicaid utilization to show the historical demand of Medicaid patients at Greystone facilities in Florida. The applicant reports its overall percent Medicaid occupancy at 57.89 percent, 56.51 percent and 55.94 percent for FY 2012, FY 2013 and FY 2014, respectively.

The applicant insists that its data demonstrate that the majority of Greystone facilities have over half of total patient days accounted for by Medicaid patients. Seminole Lakes indicates that for each of the past three FYs, there have been more than 558,000 Medicaid patient days at Greystone facilities, with 56 to 58 percent of patient days accounted for by Medicaid patients.

The applicant provides the following table below reflecting the projected patient days by payor for Seminole Lakes. Seminole Lakes affirms that there will not be any economic barriers to obtaining care.

**Projected Patient Days by Payor for Seminole Lakes**

Payor	Percent of Total Patient Days	
	Year 1	Year 2
Medicare	38.37%	37.17%
Medicaid	34.01%	34.51%
Managed Care	14.32%	15.04%
Other Payers	6.40%	6.19%
Self-Pay	6.90%	7.08%

Source: CON application # 10333 page 4, Schedule B

The reviewer compiled the following Medicaid occupancy data for Greystone Florida facilities for July 1, 2013 to June 30, 2014. See the table below.

**Greystone Florida Medicaid Occupancy  
July 1, 2013-June 30, 2014**

<b>Facility Name</b>	<b>Medicaid Days</b>	<b>Total Patient Days</b>	<b>Medicaid Occupancy</b>
Alhambra Health and Rehabilitation Center	10,913	20,860	52.30%
Apollo Health and Rehabilitation Center	19,859	33,518	59.25%
Carlton Shores Health and Rehabilitation Center	13,768	36,151	38.08%
Citrus Hills Health and Rehabilitation Center	30,326	43,258	71.44%
Club Health and Rehabilitation Center at The Villages	24,265	39,549	61.35%
The Gardens Health and Rehabilitation Center	20,641	38,570	53.52%
Greenbriar Rehabilitation and Nursing Center	8,240	21,596	38.16%
Isle Health and Rehabilitation Center	22,985	38,801	59.24%
Lady Lake Specialty Care Center	17,532	47,343	37.03%
Lehigh Acres Health and Rehabilitation Center	19,555	35,539	55.02%
Lexington Health and Rehabilitation Center	54,248	27,995	51.61%
The Lodge Health and Rehabilitation Center	19,066	33,511	56.89%
North Beach Rehabilitation Center	18,036	33,099	54.49%
North Rehabilitation Center	4,998	14,012	35.67%
Park Meadows Health and Rehabilitation Center	31,532	47,630	66.20%
Ridgecrest Nursing and Rehabilitation Center	25,100	46,601	53.86%
Riverwood Health and Rehabilitation Center	27,430	42,300	64.85%
Rockledge Health and Rehabilitation Center	15,865	35,422	44.79%
Sunset Lake Health and Rehabilitation Center	18,924	41,145	45.99%
Terrace Health and Rehabilitation Center	23,109	43,014	53.72%
Unity Health and Rehabilitation Center	85,135	97,534	87.29%
Viera Health and Rehabilitation Center	7,990	32,482	24.60%
Villa Health and Rehabilitation Center	25,790	43,305	59.55%
Village Place Health and Rehabilitation Center	17,050	33,898	50.30%
Wilton Manors Health and Rehabilitation Center	24,761	47,555	52.07%
Woodland Grove Health and Rehabilitation Center	24,447	42,604	57.45%
<b>Total</b>	<b>611,565</b>	<b>1,017,292</b>	<b>53.26%</b>

Source: Florida Nursing Home Bed Need Projections by District and Subdistrict, October 2014 Batching Cycle

The applicant’s Schedule 7 indicates that Medicaid and self-pay represent 34.01 percent and 6.90 percent, respectively, of year one and 34.51 percent and 7.08 percent, respectively, of year two annual total patient days.

Seminole Lakes concludes that it will continue to care for all patients, regardless of payer source. The applicant states that patients whose incomes are below a means test are eligible for care to be covered by Medicaid and the new facility will be dually certified for both Medicaid and Medicare.

**Seminole SNF, LLC (CON #10334)** notes that it is a newly created entity developed for the purpose of submitting this CON application and does not hold a license for a nursing facility. The applicant maintains that Consulate owns or operates 80 care centers in Florida and has identified 13 of its SNFs as indicators for the need for this CON application and project. The applicant states that utilization data from the Agency’s fixed need pool back-up reports for the aforementioned Consulate Florida 13 are presented as Attachment 5 and a summary of the data regarding occupancy rates for total patients and Medicaid patients is shown as

Exhibit Eight of CON application #10334. The reviewer confirms these data in the Agency’s *Florida Nursing Home Bed Need Projections by District and Subdistrict* publications for the October 2012, 2013 and 2014 Batching Cycles. However, the applicant includes annual change columns that cannot be confirmed by the reviewer.

The applicant summarizes the major observations of this data:

- The total occupancy rate at the Consulate Florida 13 SNFs of 96.2 percent is higher than the State’s rate of 87.3 percent
- The Medicaid occupancy rate of eight of the 13 Consulate care centers is higher than the State’s rate of 62.1 percent, but on a total basis, Medicaid occupancy at the Consulate Florida 13 of 52.9 percent is lower than the State’s figure
- For the 11 months of January to November 2014, the 80 consulate care centers provided approximately 2 million days of care to Medicaid patients
- Nevertheless, the utilization data documents that Consulate care centers are available, and utilized by Medicaid and medically indigent persons

The reviewer compiled the following Medicaid occupancy data for the Consulate 13 facilities for July 1, 2013 through June 2014. The reviewer notes that for these facilities, the average Medicaid occupancy percentage was 52.99 percent. See the table below.

**Consulate 13, Florida Medicaid Occupancy  
July 1, 2013-June 30, 2014**

<b>Facility Name</b>	<b>Medicaid Days</b>	<b>Total Days</b>	<b>Medicaid Occupancy</b>
Baya Pointe Nursing & Rehabilitation Center	17,060	30,261	56.38%
Brandon Health & Rehabilitation Center	14,957	42,669	35.05%
Consulate Health Care of Brandon	23,437	42,520	55.12%
Consulate Health Care of Jacksonville	22,577	40,378	55.91%
Fletcher Health & Rehabilitation Center	27,427	42,084	65.17%
Grand Oaks Health & Rehabilitation Center	17,800	42,347	42.03%
Consulate Health Care of Kissimmee	27,222	43,116	63.14%
Lake Mary Health & Rehabilitation	16,138	42,313	37.14%
Franco Nursing & Rehabilitation	30,127	41,198	73.13%
Oakbridge Health Care	19,338	42,364	45.65%
Osprey Point Nursing Home	11,269	20,649	54.57%
Consulate Health Care at West Altamonte	24,501	41,355	59.25%
North Florida Rehabilitation & Specialty Care	41,933	19,439	46.36%
Total	293,786	490,693	52.99%

Source: Florida Nursing Home Bed Need Projections by District and Subdistrict, October 2014 Batching Cycle

Seminole SNF projects that the two key payer groups identified by this Agency rule preference are self-pay and Managed Medicaid Care. See the table below.



**Seminole SNF, LLC Medicaid**

<b>Payer</b>	<b>Percent of Total Patient Days</b>	
	<b>Year One</b>	<b>Year Two</b>
Medicaid Managed Care	35.5%	43.0%
Self-Pay	8.0%	9.2%
Total	43.5%	52.2%

Source: CON application #10334, page 80

The applicant’s Schedule 7 indicates that Medicaid and self-pay represent 35.5 and 8.0 percent, respectively, of year one and 43.0 percent and 9.2 percent, respectively, of year two annual total patient days.

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** is a new entity and has no history but states that its parent company ACC, has a history of providing care to Medicare, Medicaid, and medically indigent patients. Tri-County affirms that ACC facilities are highly accessible and accept a wide range of residents--some of which are not accepted by other nursing homes in the area, including low income residents and medically-complex residents. As an ACC facility and faith-based not-for-profit organization, Tri-County states it will be equally accessible to all people, including the elderly, low income, racial and ethnic minorities, women, handicapped persons and other underserved groups.

The applicant maintains that ACC Florida facilities provided between 54 and 68 percent of total patient days to Medicaid patients during the six months ending June 2014. Tri-County notes that the percentage of average census of charity patients increased from 3.9 percent to 4.8 percent from 2011 through year-to-date 2014 in Central Florida ACC facilities. See the tables below.

**Adventist Care Centers Florida  
Percentage of Medicaid Days  
Six Months Ending June 2014**

Facility	County	Beds	% Medicaid Days
Sunbelt Health & Rehab Center-Apopka	Orange	120	54.7%
Adventist Care Centers Courtland	Orange	120	53.6%
East Orlando Health & Rehab Center	Orange	120	59.2%
Florida Living Nursing Center	Seminole	222	66.3%
Zephyr Haven Health & Rehab Center	Pasco	120	67.9%
Zephyrhills Health & Rehab Center	Pasco	115	53.75

<b>Average Daily Census of Charity/Indigent Residents Aventis Care Centers In Orlando Area 2011 through Year-to-Date 2014</b>				
	2011	2012	2013	2014
Charity/Indigent Average Daily Census	21	23	28	26
Average Daily Census	545	542	539	541
<b>Charity/Indigent as % of ADC</b>	<b>3.9%</b>	<b>4.2%</b>	<b>5.2%</b>	<b>4.8%</b>

Source: CON application 10334 page 19 Schedule B

The reviewer compiled the following Medicaid occupancy data for Adventist operated Florida facilities for July 1, 2013 to June 30, 2014. See the table below.

**Adventist Operated Facilities, Florida Medicaid Occupancy  
July 1, 2013 to June 30, 2014**

Facility	Medicaid Days	Total Days	Medicaid Occupancy
Sunbelt Health and Rehab Center	23,432	42,193	55.54%
East Orlando Health and Rehab	24,798	42,283	58.65%
Adventist Care Center-Courtland	23,215	41,485	55.96%
Florida Living Nursing Center	70,387	47,269	67.16%
Zephyr Haven Health and Rehab Center	29,074	42,125	69.02%
Zephyrhills Health and Rehab Center	19,237	35,979	53.47%
<b>Total</b>	<b>190,143</b>	<b>251,334</b>	<b>59.97%</b>

Source: Florida Nursing Home Bed Need Projections by District and Subdistrict, October 2014 Batching Cycle

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 50.8 percent and 12.3 percent, respectively, in year one and 54.4 percent and 8.7 percent, respectively, in year two.

**F. SUMMARY**

**Lifespace Communities, Inc. d/b/a Village on the Green**

(CON #10329) proposes for the conversion of 30 sheltered nursing home beds to 30 community nursing home beds in Subdistrict 7-4, Seminole County.

Village on the Green is a 60-bed SNF composed solely of sheltered beds. It is located on the campus of a CCRC. The reviewer notes that the applicant was granted an exemption beginning on April 1, 2013 that

allowed the facility to open 30 sheltered beds up to the public for a five-year period. The reviewer notes that the proposed project would allow all of the facility's currently licensed beds to be open to the public until April 1, 2018.

The applicant operates five SNFs in Florida.

The proposed project is a conversion of existing licensed beds and will involve no construction or renovation. The applicant states that the only project costs are those costs associated with the CON process, a total of \$60,750.

The applicant does not wish to accept any conditions for the proposed project.

**LP Sanford, LLC (CON #10330)** a wholly owned subsidiary of Signature proposes to establish a new 122-bed community nursing home in Subdistrict 7-4, Seminole County.

Signature currently operates 25 facilities (in 18 nursing home subdistricts) with 3,146 beds in Florida.

The project involves 76,673 GSF of new construction. The construction cost is \$10,350,855. Total project cost is \$18,189,510. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant does not wish to accept any conditions for the proposed project.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** proposes to add 14 community nursing home beds or a partial award to add two community nursing home beds to Lutheran Haven Nursing Home in Subdistrict 7-4, Seminole County.

Lutheran Haven Nursing Home is a 42-bed skilled nursing facility SNF composed solely of sheltered beds. It is located on the campus of a CCRC.

The project involves renovation cost of 93,500 GSF. Total project cost is \$263,344. Project cost includes land, building, equipment, project development and financing.

The applicant proposes two conditions on its Schedule C.

**Palm Garden of Seminole County, LLC (CON #10332)** proposes to establish a new 120-bed community nursing home in Subdistrict 7-4, Seminole County.

The applicant's immediate operating entity, Palm Garden Healthcare Holdings, Inc., maintains 13 SNFs in Florida.

The project involves 70,168 GSF of new construction. The construction cost is \$12,490,013. Total project cost is \$22,378,157. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant proposes two conditions on its Schedule C.

**Seminole Lakes NH, LLC (CON #10333)** proposes to establish a new 120-bed community nursing home in Seminole County. Seminole Lakes will be managed by Greystone Healthcare Management.

Greystone operates 26 SNFs and two ALFs in Florida.

The project involves 83,558 GSF of new construction. The construction cost is \$15,458,230. Total project cost is \$22,877,084. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant does not wish to accept any conditions for the proposed project.

**Seminole SNF, LLC (CON #10334)** an affiliate of Consulate Healthcare proposes to establish a new 120-bed community nursing home in District 7/Subdistrict 7-4, Seminole County.

The applicant operates 76 SNFs in Florida.

The project involves 74,052 GSF of new construction. The construction cost is \$10,351,533. Total project cost is \$18,442,914. Project cost includes land, building, equipment, project development and financing costs.

The applicant proposes twelve conditions on its Schedule C.

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** proposes to establish a new 120-bed community nursing home in District 7/Subdistrict 7-4, Seminole County.

The applicant is affiliated with six SNFs in Florida.

The project involves 85,700 GSF of new construction. The construction cost is \$18,579,000. Total project cost is \$29,498,000. Project cost includes land, building, equipment, project development, financing and start-up costs.

The applicant proposes seven conditions on its Schedule C.

**Need:**

In Volume 40, Number 193 of the Florida Administrative Register dated October 3, 2014, a fixed need pool of 122 beds was published for Subdistrict 7-4 for the July 2017 Planning Horizon.

As of November 19, 2014, Subdistrict 7-4 had 1,172 licensed and zero approved community nursing home beds. During the 12-month period ending June 30, 2014, Subdistrict 7-4 experienced 92.30 percent utilization at nine existing facilities.

**Lifespace Communities, Inc. (CON #10329)** states that the proposed project will convert 30 existing sheltered nursing home beds at Village on the Green, a 60-bed nursing home (with 60 sheltered nursing beds). The applicant states this project achieves benefits through converting 30 existing sheltered nursing home beds to community beds without delay, thus saving time and resources to implement the project. The applicant contends that projects that can be implemented quickly can relieve the area's bed need sooner. The applicant states the proposed project provides the following advantages

- Improves access for members of the general public to skilled nursing care by utilizing sheltered beds that only by licensure change can be placed into service within the time required to change the license status, a ministerial function
- Improves access to quality of skilled nursing care by placing community beds into service at a five star rated facility
- Promotes competition by only applying for a portion of the total beds needed as published in the fixed need pool, allowing other projects to develop simultaneously with this one
- Provides a financially viable project that can be implemented with minimal costs
- Village on the Green is located in a ZIP code with a high concentration of persons aged 65 and older and there are no other skilled nursing facilities located within the ZIP code.

**LP Sanford, LLC (CON #10330)** believes a key service that is needed to improve care deliver in the subdistrict is palliative care skilled nursing services. Signature states that the proposed 122-bed facility will have all private rooms with a 16-bed dedicated unit for palliative care patients.

Signature provided data regarding the 2012 hospice patient days for Seminole County. The applicant notes that this data show that residents of Seminole County received 7,737 days of inpatient respite and hospice general inpatient care in 2012 (or an average daily census of 21 patients). The applicant notes the proposed design of the facility allows the unit to expand by 14 beds without any physical plant changes. Signature asserts that it plans to work with VITAS and other hospices in the greater Orlando area to meet the end of life needs in the greater Orlando area.

The applicant predicts that the proposed facility will have 196 admissions and an ADC of 22.5 in year one (2017) and 635 admissions and an ADC of 95.3 in year two (2018). The applicant's Schedule 7 indicates that the ALOS will be 41.9 days in year one and 54.80 in year two for the total facility.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331)** proposes to convert 12 of the existing 16 private rooms in the facility to semi-private use, plus convert the existing small therapy area into a semi-private room, while establishing a new larger relocated therapy area in space currently used as an interior porch within the facility. The applicant states the proposed expanded nursing home will be an integral part of the larger Lutheran Haven community, offering a full continuum of post-acute/senior living services and facilities-- providing strong continuity of care not only for the Haven community, but also for the residents of greater eastern Seminole County. Lutheran Haven states the need for the proposed project is supported by the following facts:

- Lutheran Haven is a not-for-profit nursing home and will continue to focus its services and program initiatives on meeting community need rather than on maximizing profitability or investor return
- The proposed CON condition of providing at least 60 percent of annual patient days in the nursing home's expanded capacity to combined Medicaid/Managed Care/charity/or indigent patients substantiates the applicant's intent to focus on the provision of needed community care versus maximizing profitability
- Given that Lutheran Haven's most recent occupancy rate (12 months ending June 30, 2014) of 92.7 percent, the data clearly shows that there is need for at least a portion of the subdistrict's additional beds at the Lutheran Haven facility

- The expansion of the existing nursing home will ensure that an expanded continuum of care will be available for Oviedo and eastern Seminole County residents requiring senior/post-acute care services and support

The applicant's Schedule 7 shows an ALOS of 149.77 days in year one and 149.03 in year two for the 14-bed addition. The applicant does not provide a Schedule 7 solely for the 14-bed addition so the reviewer was not able to calculate incremental patient days or admissions. The applicant's Schedule 7 shows an ALOS of 157.29 days in year one and year two for the two bed partial award.

**Palm Garden of Seminole County, LLC (CON #10332)** states it has not yet identified the site on which to construct the proposed facility but anticipates securing a site located within five miles of the City of Lake Mary. Palm Garden states that the proposed facility will have 96 private suites and 12 semi-private suites.

Palm Garden indicates that it has reviewed the bed configuration of the existing nursing homes in Seminole County and found only 76 of 1,172 community beds in the county are located within private rooms. The applicant states the existing nursing homes were constructed as early as the 1970's and the newest nursing home was constructed in 2001. Palm Garden states they are the superior applicant for the propose facility based on the following:

- Committed to making the additional investment required to construct predominantly private rooms
- Committed to investing in state-of-the-art therapy facilities, equipment, staffing, and clinical programs to address the needs of patients in order to enable them to return home
- Has the commitment and ability to provide both long-term care and high quality skilled nursing and physical, occupational and speech therapy services for short-term patients requiring post-acute care for medically complex conditions
- Committed to providing life enrichment programs for its residents to address their social and spiritual needs
- The award would satisfy the published bed need for Seminole County in the current batching cycle
- Palm Garden states it is not affiliated with any hospital--Palm Garden will have to "prove itself" to area hospitals and physicians by providing high quality services and amenities without being dependent on referrals from an affiliated hospital or any other affiliated provider
- Palm Garden is committed to its mission, vision and statement of Core Values

The applicant's Schedule 7 indicates that the ALOS will be 40.50 days for year one and 38.23 days for year two of operation.

**Seminole Lakes NH, LLC (CON #10333)** states the facility will be constructed with a combination of private and semi-private rooms configured in a "culture change" design to better serve the rehabilitation patients in the area. The physical plant design will permit the applicant to have the space and equipment needed for rehabilitation including 6,000+ square feet for the therapy suite with separate areas for physical therapy, speech therapy, and occupational therapy, separate therapy gyms and an occupational therapy track located within one of the exterior courtyards. An interdisciplinary team provides an array of services in accordance with each resident's care plan.

Seminole Lakes states it will provide both short-term rehabilitation services and long-term care services that will deliver full range of care to treat and support each patient and resident. The applicant maintains that the proposed facility responds to the statutory criterion of "need" and enhances both access and availability of skilled nursing care within the service area.

The applicant notes that patients who are discharged from the hospital often require short-term care to fully recover. Seminole Lakes states the proposed project will provide the needed care for this patient population by working with each patient to develop a personalized care plan to meet their individual goals and abilities and ultimately help them reach their highest level of functioning and return home. The applicant states the continued high demand and rapid growth of the elderly population necessitates maximizing health care resources. Developing a new, high quality skilled nursing facility with 120 beds will improve access and availability of skilled nursing and rehabilitative care in Seminole County.

The applicant's Schedule 7 indicates that ALOS will be 29.42 days for year one and 29.27 days for year two of operation.

**Seminole SNF, LLC (CON #10334)** indicates there are three significant factors underlying the fixed need pool projection:

- The demographic trends of an aging population whose numbers and growth rates are greater than the total population of other age groups
- The episodes of care requiring inpatient admission are characterized by more chronic conditions and co-morbidities as well as a higher case mix which is indicative of a higher level of severity of illness



- The requirements of the major payers for SNF and health care services, namely government and managed care organizations, for cost-effective, high quality services

The applicant indicates that the ALOS used for the development of the projected patient days in Schedule 5 and 7 are based on the recent Consulate Florida 13 and listed below by the major payer categories. The reviewer notes that the applicant did not provide projected admissions in its Schedule 7.

**Seminole SNF, ALOS by Payer**

<b>Payer</b>	<b>ALOS in Days</b>
Medicare	32.3
Managed Care: Commercial, Managed Medicare and Managed Medicaid	20
Private	49
Medicaid	284

Source: CON application #10334, page 26

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** states that the significant growth of the aging population, high occupancy rates in the subdistrict as well as the benefits offered by Tri-County provide additional support for the identified need for the project.

The applicant lists several factors supporting the need for the proposed project:

- As a not-for-profit nursing home, Tri-County will focus its programs/services/investments on community needs rather than investor returns
- With all private beds, in both the long-term and short-term rehabilitation portions of the nursing home--the new facility will ensure that each resident in the facility will have the individual space and privacy needed to support optimal resident care and resident recovery
- The linkage and coordination of care that will be offered by the proposed facility, with a broad range of community providers both within and outside the Adventist Health System, will ensure a full continuum of care is available for Seminole County residents requiring post-acute care support
- ACC has already contracted with all four of the Managed Medicaid Providers servicing facilities in Region 7--American Eldercare, Coventry, Sunshine and United. Once the new facility is opened, ACC will only need to have an addendum to the existing contract to add this new facility in the region
- With a number of facilities still operating three or four bed rooms, the proposed all private room facility investment in the community will provide for a significant enhancement in resident care available and other benefits to local patients

Tri-County indicates that the ALOS for the proposed facility is bi-modal and dependent upon whether a patient is treated in the long-term care of the sub-acute care portion of the facility. The applicant states that the ALOS is expected to be in the one year or greater range for patients in the long-term care portion. The applicant notes that the expected ALOS for traditional Medicare patients is 28 days and for Medicare HMO patients it is 14 days. Schedule 7 indicates that the ALOS for the total facility will be 51.94 days in year one and 60.45 in year two.

**Quality of Care:**

Each of the applicants described their ability to provide quality care.

**Lifespace Communities, Inc. (CON #10329):** Village on the Green is a Gold Seal facility with no substantiated complaints. The most recent Agency inspection indicates that Lutheran Haven received an overall five-star rating out of a possible five stars. Village on the Green had no substantiated complaints during November 19, 2011 to November 19, 2014.

The applicant's controlling interest had one substantiated complaints at its five Florida skilled nursing facilities during November 19, 2011 to November 19, 2014.

**LP Sanford, LLC (CON #10330):** The applicant's controlling interest had 54 substantiated complaints at 17 of its 25 Florida SNFs during November 19, 2011 to November 19, 2014.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331):** Lutheran Haven is not a Gold Seal Program and is currently on the Nursing Home Watch List. The most recent Agency inspection indicates that Lutheran Haven received an overall two-star rating out of a possible five stars. Lutheran Haven Nursing Home had one substantiated complaints during November 19, 2011 to November 19, 2014 in quality of care/treatment.

**Palm Garden of Seminole County, LLC (CON #10332) :** Agency complaint records indicate that the affiliated nursing homes associated with the parent company, for the three-year period ending November 19, 2014, had 39 substantiated complaints at 13 facilities.

**Seminole Lakes NH, LLC (CON #10333):** Affiliated nursing homes associated with the parent company had 143 substantiated complaints at 26 facilities during November 19, 2011 to November 19, 2014.

**Seminole SNF, LLC (CON #10334):** The applicant's controlling interest had 411 substantiated complaints at its 76 Florida SNFs during November 19, 2011 to November 19, 2014.

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)**  
The applicant's controlling interest had 14 substantiated complaints at five of its six Florida SNFs during November 19, 2011 to November 19, 2014.

**Financial Feasibility/Availability of Funds:**

**Lifespace Communities, Inc. (CON #10329):** Funding for this project should be available as needed. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement. This project appears to be financially feasible as part of the larger CCRC model.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**LP Sanford, LLC (CON #10330):** Funding for this project should be available as needed. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement. This project appears to be financially feasible based on the projections provided by the applicant.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331):** Funding for this project should be available as needed. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement. This project appears to be financially feasible based on the projections provided by the applicant.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**Partial Award-** Funding for this project should be available as needed. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement. This project appears to be financially feasible based on the projections provided by the applicant.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**Palm Garden of Seminole County, LLC (CON #10332):** Funding for this project and the applicant's entire capital budget should be available as needed. Based on the information provided in Schedule 6, the applicant meets this requirement. This project appears to be financially feasible based on the projections provided by the applicant.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**Seminole Lakes NH, LLC (CON #10333):** Funding for this project is in question. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement. This project appears to be financially feasible based on the projections provided by the applicant.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**Seminole SNF, LLC (CON #10334):** Funding for this project is not guaranteed but appears likely. Based on the information provided in Schedule 6, neither the nursing assistant staffing, nor the nursing staffing meet this requirement. The projected nursing assistant staffing is 2.2 hours, which is less than the 2.5 hour requirement. The projected nursing staffing is 0.79 hours, which is less than the 1.0 hour requirement. This project appears to be financially feasible based on the projections provided by the applicant.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335):** Funding for this project should be available as needed. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement. This project appears to be financially feasible based on the projections provided by the applicant.

This project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

**Medicaid/Charity Care:**

**Lifespace Communities, Inc. (CON #10329)** does not propose to condition project approval to a percentage of Medicaid days.

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 0.0 percent and 36.0 percent of year one and 0.0 percent and 36.0 percent of year two annual total patient days for the proposed 30-bed conversion.

**LP Sanford, LLC (CON #10330)** does not propose to condition project approval to a percentage of Medicaid days.

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 24.5 percent and 7.9 percent of year one and 39.1 percent and 8.6 percent of year two annual total patient days.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331):** Lutheran Haven Nursing Home will provide at least 60 percent of patient days treated in the facility's expanded capacity (+2 and +14 beds) to combined Medicaid/Medicaid Managed Care/Charity or indigent care patients

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 60.0 percent and 18.8 percent of year one and 60.0 percent and 18.8 percent of year two annual total patient days.

**Palm Garden of Seminole County, LLC (CON #10332)** proposes to condition project approval to 20 percent of the 120-bed facility's total annual patient days being provided to Medicaid patients.

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 20.7 percent and 15.4 percent, respectively, of year one and 20.9 percent and 13.0 percent, respectively, of year two annual total patient days.

**Seminole Lakes NH, LLC (CON #10333)** does not propose to condition project approval to a percentage of Medicaid days.

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 34.01 percent and 6.90 percent, respectively, of year one and 34.51 percent and 7.08 percent, respectively, of year two annual total patient days.

**Seminole SNF, LLC (CON #10334)** proposes to condition project approval to 28.0 percent in the first year and 42.0 annually thereafter of the 120-bed facility's total annual patient days being provided to Medicaid patients.

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 35.5 and 8.0 percent, respectively, of year one and 43.0 percent and 9.2 percent, respectively, of year two annual total patient days.

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335)** does not propose to condition project approval to a percentage of Medicaid days.

The applicant's Schedule 7 indicates that Medicaid and self-pay represent 50.8 percent and 12.3 percent, respectively, of year one and 54.4 percent and 8.7 percent, respectively, of year two annual total patient days.

### **Architectural**

**Lifespace Communities, Inc. (CON #10329):** The Office of Plans and Construction notes that the codes and standards regulating the design and construction of skilled nursing facilities are the same for beds licensed as sheltered beds and community beds. Therefore, a review of the architectural submissions for this project was deemed unnecessary as the existing nursing beds have already been reviewed and approved by the Agency for use as skilled nursing beds in accordance with Florida Statutes 400.232 and Florida Administrative Code 59A-4.133.

**LP Sanford, LLC (CON #10330):** The cost estimate and the project completion forecast appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

**Lutheran Haven Nursing Home and Assisted Living Facility, LLC (CON #10331):** The Office of Plans and Construction notes that the codes and standards regulating the design and construction of skilled nursing facilities are the same for beds licensed as sheltered beds and community beds. Therefore, a review of the architectural submissions for this project was deemed unnecessary as the existing nursing beds have already been reviewed and approved by the Agency for use as skilled nursing beds in accordance with Florida Statutes 400.232 and Florida Administrative Code 59A-4.133.

**Palm Garden of Seminole County, LLC (CON #10332):** The cost estimate and the project completion forecast appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

**Seminole Lakes NH, LLC (CON #10333):** The cost estimate and the project completion forecast appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

**Seminole SNF, LLC (CON #10334):** The cost estimate and the project completion forecast appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

**Tri-County Nursing and Rehabilitation Center, Inc. (CON #10335):** The cost estimate and the project completion forecast appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have a significant impact on either construction costs or the proposed completion schedule.

**G. RECOMMENDATION**

Approve CON #10329 to add 30 community nursing home beds through the conversion of 30 sheltered nursing home beds in District 7, Subdistrict 4, Seminole County. The total project cost is \$60,750.

Approve CON #10331 to add 14 community nursing home beds in District 7, Subdistrict 4, Seminole County. The total project cost is \$263,344. The project involves 93,500 GSF of renovation.

CONDITION:

- The proposed bed expansion will be accomplished within the existing Lutheran Haven Nursing Home facility located on the Lutheran Haven campus, at 1525 Haven Drive, Oviedo, Florida
- Lutheran Haven Nursing Home will provide at least 60 percent of patient days treated in the facility's expanded capacity to combined Medicaid/Medicaid Managed Care/Charity or indigent care patients

Deny CON #10330 CON #10331P, CON #10332, CON #10333,  
CON #10334 and CON #10335.



**AUTHORIZATION FOR AGENCY ACTION**

Authorized representatives of the Agency for Health Care Administration adopted the recommendation contained herein and released the State Agency Action Report.

DATE: \_\_\_\_\_

\_\_\_\_\_  
Marisol Fitch  
**Health Services and Facilities Consultant Supervisor**  
**Certificate of Need**