

STATE AGENCY ACTION REPORT
ON APPLICATIONS FOR CERTIFICATE OF NEED

A. PROJECT IDENTIFICATION

1. Applicant/CON Action Number

Affinity Care of Central Florida LLC/CON application #10685

709 S. Harbor City Blvd., Suite 540
Melbourne, Florida 32901

Authorized Representative: Patti Greenberg
(510) 499-9977

Brevard HMA Hospice, LLC/CON application #10686

7840 Graphics Drive, Suite 100
Tinley Park, Illinois 60477

Authorized Representative: Bryan Niehaus, JD
(708) 478-7030

Empath Hospice, LLC/CON application #10687

5771 Roosevelt Blvd., 610
Clearwater, Florida 33760-3413

Authorized Representative: Rafael J. Sciallo
Chief Executive Officer
(727) 586-4432

Florida Hospice, LLC/CON application #10688

5440 Corporate Drive, Suite 400
Troy, Michigan 48098

Authorized Representative: Justin DeWitte
Chief Executive Officer
(877) 421-0917

MD Care Hospice Inc/CON application #10689

2520 Tamiami Trail N. #30
Nokomis, Florida 34275

Authorized Representative: Marine Khachatryan
Chief Executive Officer
(323) 552-3300

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**Odyssey Healthcare of Marion County, LLC/CON application
#10690**

655 Brawley School Road, Suite 200
 Mooresville, North Carolina 28117

Authorized Representative: Gusti McGee
 VP Regulatory & Licensure Services
 Kindred at Home
 (704) 664-2876

**PruittHealth Hospice – Central Florida, LLC/CON application
#10691**

1626 Jeurgens Court
 Norcross, Georgia 30093

Authorized Representative: Neil L. Pruitt, Jr.
 Chief Executive Officer
 (770) 279-6200

**Seasons Hospice & Palliative Care of Central Florida, LLC/CON
application #10692**

6400 Shafer Court, Suite 700
 Rosemont, Illinois 60018

Authorized Representative: Annemarie Switchulis, RN, MSN
 (248) 928-6312

Serenity Hospice Care Inc/CON application #10693

8678 Stone Harbor Loop
 Bradenton, Florida 34212

Authorized Representative: Abraham Stepanian
 (941) 548-9375

Transitions Intermediate Holdings, LLC/CON application #10694

1551 Bond Street #143
 Naperville, Illinois 60563

Authorized Representative: Jennifer Yarbrough
 Vice President of Strategies
 (224) 760-9011

2. Service District/Subdistrict

Service Area (SA) 6B (Hardee, Highlands, and Polk Counties)

B. PUBLIC HEARING

A public hearing was not held or requested regarding the proposed projects.

Letters of Support

Affinity Care of Central Florida LLC (CON application #10685)

includes a letter of support from Josie Tomkow, State Representative, District 39, Florida House of Representatives. Representative Tomkow's letter cites Affinity's equine therapy, virtual reality and proposed "more service intense" care model as not presently being available and concludes that Affinity "will enhance the quality of services offered". The majority of Affinity's letters echo Representative Tomkow's on the new services (including music therapy by a board-certified therapist and increased admission response time) Affinity will introduce in the SA.

The applicant provides many letters of support in Tab 5 of the application. CON application #10685 breaks down its Tab 5 letters of support into the following categories:

- Skilled Nursing Facilities (SNFs)
 - Intends to contract for services to their residents upon approval
 - Lakeland Nursing and Rehab
 - The Palms of Sebring
 - Lake Wales Wellness and Rehabilitation Center
 - Oak Haven Rehab and Nursing Center
 - Haines City Rehabilitation and Nursing Center
 - Highlands Lake Center

Affinity proposes to develop a community paramedic program with local EMS to reduce unnecessary trips to the ER for hospice patients and includes excerpts from Noah Connell, Battalion Commander, Seminole Tribe of Florida Fire Rescue and three other EMS paramedics from Tampa General's 'Aeromed' flight crew on pages 37-39 of the application. Additional letters are from SA Home Health Agencies, Nurses and Nurse Practitioners.

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Brevard HMA Hospice, LLC (CON application #10686) includes numerous general letters of support in Appendix I beginning on page 298 of the application. These letters are in the following categories:

- Provider Executives/Administrators
- Physicians and Practitioners
- Provider Staff
- State/County/City Government
- Other

The applicant includes letters from Corey Amundsen, Highlands County Emergency Management Coordinator, Debbie Braden, Risk Management Coordinator, Highlands County Board of County Commissioners and Kelly Brooks, General Manager of MTM Transit, LLC which serves two SA counties - Hardee and Highlands. Two letters are from area physicians Daniel Parnassa, MD Sebring Heart Center, PA and Neil Schectman, MD (Lake Placid).

The application includes various excerpts of its support letters on pages 24-25, 43-44, 46 and 82-84. Most of these are from LHC Group staff/executives/board member(s) and organizations that have worked with LHC Group. Several letters were received from SA RNs, paramedics, medical office managers, and assisted living administrators. Several form letters were signed by SA 6B and other SA resident/business personnel.

Empath Hospice, LLC (CON application #10687) provides a large number of letters of support in the applicant's Exhibit K. These letters endorse the proposal and are from a wide range of health organizations, social service organizations, leaders of various religious, racial and ethnic groups, other entities, and individuals. These include:

- Hospitals - BayCare Health System
- Other health care providers
- Physicians also BayCare Health System
- Outreach organizations
- Business leaders

Melissa M. Thibodeau, Executive Director of Heartland Rural Health Network, Inc. cites her organization's serving rural residents of the SA's three counties (two others outside the SA), its collaboration with Empath to serve Hardee County residents by utilizing Community Health Workers and Empath's "committing to being one of our

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Consortium partners for this grant”. She also states “we are in talks about potentially starting a joint venture...using Empath’s mobile outreach vans with their social worker and LPN to better serve” Hardee County’s Hispanic population.

Empath provides excerpts of its support letters in various sections of CON application #10687.

Florida Hospice, LLC (CON application #10688) provides 32 letters of support in total under Appendix A. One letter was received by the Agency directly. All but two of the letters are from persons residing out of SA 6B or out of state supporters. The two service area letters were from Tom Phillips, Executive Director, Citrus Connection, a Polk County public transit company and Jason W. Brown, President, One Night of Gospel, a religious fundraiser.

MD Care Hospice Inc (CON application #10689) did not include any letters of support and none were received directly to the Agency.

Odyssey Healthcare of Marion County, LLC (CON application #10690) has 12 letters of support in Exhibit 4. The letters are mainly from out of service area supporters and include current health care employees, home healthcare, care coaches, religious groups, businesses, current employees, and residents.

Dr. Paul Vargas Rivera, Medical Director, We Care Family Physicians, a local physician, indicates he has worked with the SA 6B hospices and feels that they are weak in meeting the needs of the Latino community, veterans, the homeless and the prison populations.

Reverend Izora Bullock, Founder/President LIFE Limbs, Certified Community Health Worker and Health and Wellness Educator, cites programs Odyssey will offer and concludes “Polk Countians will see an improved level of hospice care” with the Odyssey’s CON approval.

Jim Keough, Regional Vice President and Interim Regional President, Humana Central North Florida Region, indicates SA 6B’s Humana members will benefit from the full scope of home care services Kindred will provide.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) offers what appears to be a single redacted handwritten testimonial (a PDF version) concerning PruittHealth respiratory therapy services at one of PruittHealth’s non-Florida hospices (Figures 33 and 34 on pages 52 and 53 of the application). There is only one Letter of Support found in the applicant’s Exhibit 34. This is a general letter of support from Sydney Shaw, Unit Manager of Oaks at Avon SNF in Highlands County.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) offers numerous letters of support from the SA 6B area and out of area provided in Tab 10 this application. These are comprised of nursing homes, assisted living facilities, educators, nurses, religious organizations, retirement communities, healthcare organizations, and businesses. These include among others: Bindu Raju, MD, MBA, SFHM, AdventHealth Sebring/Lake Placid/Wauchula, Vice President of Medical Affairs, Chief Medical Officer states that AdventHealth is working on finalizing an agreement for the palliative program in Sebring.

Bob McNeilly, Executive Director Heartland Food Bank - Highlands County states “there is not a hospice provider in our district” that is assisting in meeting the “great need in our community with food insecurity, homelessness and veteran homelessness”. He states “we need organizations like Seasons Hospice for collaboration” and that should Seasons be approved, “I would like to partner with them and share their resources with the agencies we serve”.

Ana Rivera de Ramos, President, PR Hispanic Chamber of Commerce Polk County, states “there is a great need for resources for the Hispanic community”. She cites Seasons focus on reaching the Hispanic community, plan to hire Spanish speaking nurses and aides and interest to help the community with resources and education. Further, that her organization would “gladly collaborate with” Seasons.

Becky Colon, Administrator Valencia Hills Health & Rehabilitation Center states Season’s proposed services “would provide things to our patients and families that are over and above what current (6B) providers in our area are offering. She also states should Seasons be approved, “our facility would be willing to discuss the possibility of entering a general in-patient contract to help fulfill the need of placing patients somewhere other than their home, if needed”.

Laura Lee Gwinn, Homeless Coalition of Polk County, Inc. states Seasons proposed homeless assistance program “would mean a great deal to our organization and those in the service area”.

Serenity Hospice Care Inc (CON application #10693) did not include any letters of support and none were received directly to the Agency.

Transitions Intermediate Holdings, LLC (CON application #10694) includes 10 support letters between pages 53 and 54 of the application). None of these indicated having originated in Florida, most indicated an Illinois address.

C. PROJECT SUMMARY

The applicants are proposing to establish a new hospice program in SA 6B in response to published need.

Affinity Care of Central Florida LLC (CON application #10685), a Florida Limited Liability Company, referenced as Affinity Central Florida, or the applicant. The applicant states that Continuum Care Hospice and Affinity Health Management have the same leadership team. Continuum Care Hospice was founded in 2013, and has hospice programs in five states: Florida, New Jersey, Ohio, Virginia, and Washington.

Affinity has two Florida operational hospice affiliates - Continuum Care of Sarasota LLC (SA 8D - licensed 6/18/2021) and Continuum Care of Broward LLC (SA 10 - licensed 11/5/2020) and two CON-approved pending licensure - Affinity Care of Manatee County (CON #10651) and Continuum Care of Miami-Dade LLC (CON #10658).

In this batching cycle, Affinity Care also proposes to establish a new hospice program in SA 9C.

The applicant expects issuance of license in April 2022 and initiation of service in May 2022.

Total project cost which includes equipment, project development and start-up costs, is projected to be \$362,825.

Pursuant to project approval, Affinity Care of Central Florida LLC offers the following Schedule C conditions:

Clinical Specialty Programs

1. Enhance Hospice Utilization for Black and Hispanic Minorities

- The Applicant will open a second office in Highlands County during the first year of operation to enhance access and availability of end of life care for the growing Hispanic and Black minority cohorts in Highlands County representing 33 percent of that county's total population. The two office locations will be geographically accessible to Hardee County.
- The Applicant's hospice care team will be representative of the minority community and bilingual. This team will include, at a minimum, a nurse, social worker and chaplain.
- A designated community relations representative will be appointed to take the lead on minority outreach initiatives whereby this individual will regularly meet with hospice appropriate patients and answer any and all questions they or their caregivers may have about hospice and Affinity Care to optimize early enrollment in hospice to enhance quality of life for terminal patients while reducing unnecessary re-hospitalizations.
- The Applicant will partner with existing community organizations and resources that service the Black and Hispanic communities throughout the Service Area such as but not limited to federally qualified health clinics, local churches and community centers, to educate on the benefits of hospice.

2. EMS Community Paramedic Program

- The Applicant will develop and initiate a community paramedic program in coordination with local EMS providers, during year two.
- The Applicant will provide funding to local EMS providers for community paramedics, beginning in year two.
- The Applicant will provide education and training of community paramedics on the program and criteria.

3. Affinity Alzheimer's and Dementia Care

- The Applicant will implement the Affinity Alzheimer's and Dementia Care program which was designed to bring the latest innovations in end-of-life care to Alzheimer's and dementia patients and their caregivers.
- All staff will be required to complete 2.5 hours of Continuing Education Units (CEUs) covering evidence based protocols for behavioral symptoms, in addition to Florida's minimum requirement.
- All patients in this program will be provided with music therapy and a textile box.
- The Applicant will offer a specifically tailored caregiver support group for those with loved ones battling Alzheimer's and dementia.
- Affinity Care will work with area facilities, such as nursing homes, who have patients with dementia, to educate their clinical staff on treatment criteria and programs.

4. Affinity Pulmonary Care

- The Applicant will offer the Affinity Pulmonary Care to improve end-of-life care for patients suffering from pulmonary diagnosis. The Applicant will increase the awareness among healthcare providers and Service Area 6B residents about hospice care for patients confronted with pulmonary diseases.
- The Applicant will employ a respiratory therapist upon certification who will manage the patient's respiratory plan of care and provide respiratory related education to the patient, their family and to the hospice team and the community.
- The Applicant will collaborate with a community Pulmonologists and other pulmonary care professionals on an ongoing basis to assist in patient assessments, education and provision of services.

5. Affinity Cardiac Care

- The Applicant will implement the Affinity Cardiac Care program designed to improve the end-of-life care for patients suffering from end stage cardiac diseases along with increasing the awareness among healthcare providers and Service Area 6B residents on the importance of hospice care for patients confronted with end stage cardiac disease.
- All Affinity Central Florida staff will be provided specialized education on the management of end stage cardiac patients.
- The Applicant will collaborate with community Cardiologists and other cardiac professionals on an ongoing basis to assist in patient assessments, education and provision of services.

6. Continuum Palliative Resources

- The Applicant will implement its Continuum Palliative Resources program within six months of receiving its Medicare certification. This will provide patients with relief from symptoms and pain, supporting the best quality of life, before the patient terminates treatment and qualifies for hospice. This will significantly improve the perception of hospice, repair the negative image hospice historically has amongst minorities and help to develop an end of life care plan designed for the individual. Combined, the approach to hospice treatment, education and outreach, staffing with culturally like personnel and providing palliative care as a pathway or bridge to hospice, the Applicant will be lifting up the lower minority penetration rates for both Blacks and Hispanics.
- The Applicant will conduct community education on advance care planning (i.e. living wills, durable power of attorney, review of 5 wishes document).
- The Applicant will provide physician-led palliative care services including social work and chaplaincy, either within facilities or in the patient's place of residence.

7. Veterans Outreach Program

- The Applicant will implement its Veterans outreach program, We Honor Veterans, once certified and will strive to achieve Level 5 certification to increase and improve the quality of care program for Veterans in Hardee, Highlands and Polk Counties.

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- The Applicant will designate one of its hospice liaisons to carry out all Veterans outreach initiatives.
- The Applicant's Virtual Reality platform will offer Veterans a virtual flightless experience for Veterans who are unable to participate in the Honor Flight Network trip. The Honor Flight Network is a national network of independent Hubs working together to show our nation's veterans the appreciation and honor they deserve.

Quality and Patient Satisfaction Initiatives and Programming Beyond the Hospice Benefit

- 8.** The Applicant will offer a personal emergency response indicator such as Life Alert, to every patient at home.
- 9.** The Applicant will provide triage coverage 24 hours a day, 7 days a week, and physical visits to assess hospice eligibility of patients and admission regardless of ability to pay (charity patients).
- 10.** The Applicant will have a designated Quality Director to conduct quality assessments, monitoring, and report all issues to senior management.
- 11.** The Applicant will become accredited by CHAP once certified.
- 12.** The Applicant will have a confidential compliance hotline available for its employees who may have concerns with state or Medicare regulations and/or standards of conduct. The hotline, available 24 hours a day, 7 days a week, will maintain anonymity upon request.
- 13.** The Applicant will implement its Virtual Reality Program upon licensure of its program. It will be made available to all eligible Affinity Central Florida Beach patients.
- 14.** The Applicant will implement its Music Therapy Program upon licensure of its program. It will staff a minimum of one Board Certified Music Therapist. It will be made available to all eligible Affinity Central Florida patients.

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- 15.** The Applicant will implement its Equine Therapy Program upon Medicare certification of its program. It will be made available to all eligible Affinity Central Florida patients who are physically able to make the trip to the stable partner.
- 16.** The Applicant will assure each patient has 5 to 7 Home Health Aide visits per week, provided this is acceptable to the IDT, patient and family.
- 17.** The Applicant will assure each patient has a minimum of 2 RN visits per week, provided this is acceptable to the IDT, patient and family.
- 18.** Affinity Care commits to increasing visit frequency during the final weeks of life to provide support. The Applicant will utilize Muse Healthcare Analytics to assist in identifying patients who are entering their final days of life.
- 19.** The Applicant will seek to respond to all referrals within one hour, initiate the assessment process within two hours, and expedite admission to the hospice subject to having a physician order in hand and the patient/family selecting the hospice option.

Affinity's preamble states it is willing to accept any conditions based on its presentations in the application, will provide all required hospice components as required by licensure and Medicare conditions of participation, and will serve all types of patients. The applicant also included suggested condition measurements, which are not included here.

Brevard HMA Hospice, LLC (CON application #10686) also referenced as Brevard HMA or the applicant, is a for-profit entity licensed to operate Wuesthoff Health System Brevard Hospice and Palliative Care (SA 7A – Brevard County). The applicant refers to the project as Mederi Hospice.

Brevard HMA Hospice is an affiliate of/managed by LHC Group (or LHC), which it indicates operates in 35 states and the District of Columbia providing “a broad array of services, including home health, hospice, palliative care, home and community based services, long-term acute care hospitals, advanced practice providers and healthcare innovation service lines-including Imperium Health our ACO management company”.

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In this batching cycle, LHC Group also proposes to establish new hospice programs in SAs 1, 3B, 9A, and 9C.

The applicant expects issuance of license in July 2022 and initiation of service in July 2022.

Brevard HMA Hospice LLC proposes \$490,769.98 in total project costs, which include equipment, development, and start-up costs.

The applicant's proposed "measure" criteria are included when it provides clarification on reporting the condition. Brevard HMA Hospice LLC proposes to condition the award of this CON application upon the following:

Commitment to Nursing Program Support

- **COMMITMENT:** LHC Group, on behalf of Mederi Hospice, commits to offering \$35,000 to a local nursing program within District 6B to support the development of a hospice and palliative care training course, along with offering students' rotations under its new hospice program. LHC Group has experience in supporting local nursing education programs and looks forward to participating and supporting the growing workforce needs for hospice care into the future.
- **MEASURE:** LHC Group will provide an annual report to AHCA documenting its outreach to interested partners, its parameters in selecting a partner, and the ultimate disbursement of the \$35,000 in funds. LHC Group expects to identify, select, and fund a partner within 2 years of its hospice program opening - but will seek to conclude the process as soon as possible to support nursing education in District 6B. Likewise, includes details regarding the nursing student rotation program that to be developed in concert with the local nursing college partner.

Commitment to Palliative Care Program Development

- **COMMITMENT:** Mederi Hospice commits to establishing a palliative program for the service area once the program operates at an ADC of 50 – which LHC Group expects to reach by the end of its first year based on its projections. This will ensure the continuum of care is secured for patients that are often approaching a need for hospice, but have not yet qualified, are able to receive treatments they require under palliative care.

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- **MEASURE:** This will be measured through the offering of palliative care service once the designated volumes are reached by the hospice program. LHC will provide annual reports to AHCA of the hospice volumes and number of palliative care treatments to track progress until the program is operational.

Commitment to Serve Patients without Primary Caregivers

- **COMMITMENT:** Mederi Hospice commits to make funding in the amount of \$25,000 available for free room and board at inpatient facilities to support patients without a primary caregiver. These funds will provide patients with care options otherwise unavailable and alleviate undue stress at the end of life.
- **MEASURE:** Mederi Hospice will keep a log of the charity care provided to the patients without a primary caregiver and the cost of the room and board support provided to these patients. Mederi Hospice will deliver the log and any supporting documentation during its annual report to AHCA.

Commitment to Serve the Homeless Population

- **COMMITMENT:** Mederi Hospice commits to targeting and serving the homeless population of District 6B as part of our program development should we be approved to provide hospice services. We will set aside \$25,000 to specifically fund support for homeless patients and execute a program of outreach and offer care through in local churches and organizations in accord with our charity care guidelines to ensure those patients in need of care are not denied access based on their means to pay.
- **MEASURE:** Mederi Hospice will track charity care provided to the homeless population within a dedicated log of patients identified as homeless and the cost of such care at Medicare reimbursement rates. Mederi Hospice will also document its efforts to work with local organizations to identify the population in need of care and to then service this population. Mederi Hospice will deliver the log and any supporting documentation during its annual report to AHCA.

Commitment to Support Local Department of Aging Services

- **COMMITMENT:** Mederi Hospice commits to funding the Senior Connection Center, Inc. organization with \$25,000 to support their existing programs for the elderly. With most hospice patient being of advanced age, the council for aging provides support services

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that continue to benefit, educate, and serve hospice patients and their families both before and during their hospice benefit.

- **MEASURE:** Mederi Hospice will complete the donation within its first two years of operation and report on the donation to the Northwest Florida Area Agency on Aging as part of its annual report to AHCA.

Hospice Promise Foundation

- **COMMITMENT:** Beyond its above commitments. LHC Group commits to funding its Hospice Promise Foundation with \$25,000 to support local requests for support from patients. This will ensure access to charitable funding for our patients without competing with local providers for funds.
- **MEASURE:** Mederi Hospice will report on the number of requests and associated grants provided to hospice patients in its annual report to AHCA.

Community Hospice Education

- **COMMITMENT:** Mederi Hospice commits to funding and providing specific community education and outreach regarding availability of hospice services within the service area over the first two years of service implementation. Mederi Hospice commits to:
 - a. Conducting at least fifty (50) one-on-one outreach sessions with healthcare providers and community organizations.
 - b. Monthly Facebook Live presentations such as Hospice Hangout to provide end-of-life education and support to the community.
 - c. Initiate the Pet Peace of Mind Program within the first 24 months. This is a non-profit program that helps patients with terminal illness provide adequate care for their pets as well as helping with placement of pets if needed.
 - d. Initiate Grief Speak online grief support program within the first 3 months that is available for any families served by the location as well as anyone in the community needing support. Grief Speak is presented every second Tuesday of the month from 6-8pm CST. During Grief Speak, one of LHC Group's bereavement coordinators or chaplains makes an informative presentation on grief and how to navigate its sometimes very confusing journey.
 - e. Initiate Community Grief Support Program within the first six months for any families served by the location as well as anyone in the community needing support.

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- f. Initiate a Caregiver Support Program within the first 6 months for any families served by the location as well as anyone in the community needing support and caregiving education.
- g. Provide an online community resource for end-of-life education with HospiceWePromise.com.
- **MEASURE:** Mederi Hospice will report progress on each session completion and program development milestone to AHCA within the annual report.

We Honor Veterans Program

- **COMMITMENT:** Mederi Hospice will actively seek We Honor Veterans status once operational and we will progress through each level as rapidly as possible to reflect our belief in the importance and unique needs of hospice care for our veterans. Mederi Hospice will advocate for Veteran patients to participate in Honor Flight for Veterans. The provider will also actively recruit Veteran volunteers to better support Veteran patients.

Hospice Office Development

- **COMMITMENT:** Mederi Hospice commits to a principal care delivery site at 141 E. Central Ave Suite 350, Winter Haven, FL 33880 (or like site within same region pending finalization of lease terms), upon program inception and tracking completion of the proposed arrangements with AHCA.

The Joint Commission Accreditation

- **COMMITMENT:** Mederi Hospice commits to pursuing and obtaining accreditation by The Joint Commission by the end of its first year of operation.

Medicaid Enrollment

- **COMMITMENT:** LHC intends to serve the Medicaid Community and shall seek Medicaid enrollment immediately upon receiving Medicare approval.

Empath Hospice, LLC (CON application #10687) also referenced as Empath or the applicant, is a Florida limited liability company, whose parent company is Empath Health also operates licensed hospice programs in SA 5B as Suncoast Hospice and SAs 6C, 8A and 8D d/b/a TideWell Hospice Inc. Suncoast also has CON #10605 approved to serve SA 6A, which is yet to be licensed.

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Empath expects issuance of license and initiation of service during April 2022.

The applicant proposes \$744,860 in total project costs, which includes equipment, development, and start-up costs.

Empath Hospice, LLC agrees to condition the award of this CON application upon the following:

1. Development of Disease-Specific Programming

- a. Empath Hospice, LLC will deploy a heart failure program, known as Empath Cardiac CareConnections Program, for residents of Hardee, Highlands and Polk Counties who are in late stages of disease and in need of hospice care.
- b. Empath Hospice, LLC will develop disease-specific programming for three-county area patients suffering from Alzheimer's Disease, known as Empath Alzheimer's/Dementia CareConnections Program.
 - Empath Hospice, LLC will implement a Music in Caregiving program for Hardee, Highlands and Polk Counties hospice patients, including those suffering from Alzheimer's Disease and will employ a 0.5 FTE Board-Certified Music Therapist by Year 2.
- c. Empath Hospice, LLC will deploy disease-specific programming for three-county area patients suffering from end-stage pulmonary disease, known as Empath Pulmonary CareConnections Program.
 - Empath Hospice will assure a Licensed Respiratory Therapist will be part of the Interdisciplinary Care Team for patients suffering from end stage pulmonary disease.
 - Empath Hospice will recruit a contract Pulmonologist to provide oversight of the Empath Pulmonary CareConnections Program.
- d. Empath Hospice, LLC will deploy an end-stage renal disease program, known as Empath Renal CareConnections Program, for residents of Hardee, Highlands and Polk Counties who are in late stages of disease and in need of hospice care.

- e. Empath Hospice, LLC will deploy a comprehensive wound care and ostomy program for residents of Hardee, Highlands and Polk Counties who require wound care as a complementary program to their end-stage disease.

2. Development of Resources for Rural and Low-Income Populations

- a. Empath Hospice, LLC will allocate \$375,000 to purchase, equip and operate a dedicated vehicle to specifically conduct mobile outreach activities in Hardee, Highlands and Polk Counties. The mobile care unit will be known as "Empath Mobile Access to Care".
 - Empath Hospice, LLC's mobile outreach unit (referenced in condition 2(a)) will be staffed by a bilingual LPN and a bilingual BSW and will visit numerous areas (to be determined), throughout the three-county area.
 - The mobile unit will be outfitted with the required technology to facilitate telehealth and videoconferencing sessions to reach those without internet access.
 - Empath Hospice, LLC will work with Central Florida Health Care (CFHC), a Federally Qualified Health Center, to develop a collaborative program that will deploy Empath's mobile care unit to CFHC's community health centers throughout the three-county area. The goal will be to assist CFHC's patients with advanced illness navigate the health care system, link them to the right level of care at the right, time, and identify patients who are medically eligible for hospice earlier in their disease process.
- b. Empath Hospice, LLC will partner with Heartland Rural Health Network, Inc. to include their Community Health Workers within the mobile unit in an effort to better reach patients with chronic, advanced, or terminal illness in the three-county area. Empath Hospice, LLC will designate \$25,000 annually for five years to Heartland Rural Network, Inc as part of this partnership.
- c. Empath Hospice, LLC will designate \$25,000 annually to provide mobile devices with unlimited data to patients and families served by Empath Hospice, LLC.

- d. Empath Hospice, LLC will offer technical advocacy with planning commissions, economic development committees and other area organizations to advocate for bringing low-cost internet to the underserved, Heartland Rural Health Network, Inc will be one organization that will be included in this activity.
- e. Empath Hospice, LLC will implement the use of virtual reality technology, which has been shown in many studies to successfully alleviate and reduce symptoms such as pain and anxiety in addition to decreasing feelings of isolation by allowing them to engage in the outside world.

3. Development of Ethnic Community-Specific Programming

- a. Empath Hospice, LLC will deploy a mobile outreach unit ("Empath Mobile Access to Care") that will visit designated locations in three-county area on a routine basis to offer specialized programming and education seminars, Spanish-speaking care teams, Spanish language educational materials, caregiver support and Spanish language bereavement counseling and support groups.
- b. Empath Hospice, LLC will organize a Care Council that will include members from the Hispanic community to provide feedback and guidance with regards to outreach to their communities.
- c. Empath Hospice, LLC will utilize a minimum of two Community Partnership Specialists to conduct community engagement activities, facilitate education, and to cultivate trust and partnerships within the African American, Hispanic, and Migrant Agricultural, Veterans and Jewish communities.
- d. Empath Hospice will partner with various organizations such as Indigent Healthcare Plan of Polk and the Alzheimer's Association to conduct joint community educational programs about chronic illness. Advance Care Planning, grief, and hospice care. Empath Hospice, LLC will designate \$10,000 annually to these organizations to assist with the costs of printed materials as part of this partnership.

- 4. Development of Strategies to Increase Hospital Discharges to Hospice**
 - a. Empath Hospice, LLC will deploy dedicated facility teams to increase discharge from hospitals directly to hospice care. The dedicated teams will consist of a Registered Nurse, a Patient Care Concierge and a Professional Liaison.

- 5. Development of a Continuum of Care Navigation Program**
 - a. Empath Hospice, LLC will deploy telehealth technology within the proposed mobile outreach unit, in order to link the bilingual LPN and BSW staffing the unit to Empath Health's care navigators and other resources in the community and enhance the care navigation function they will provide.
 - b. Empath Hospice, LLC will recruit a minimum of two Community Partnership Specialists over the first two years of operation to provide outreach to the community and to build a network of community partners in order to enhance continuum of care navigation.
 - c. Empath Hospice, LLC will recruit a minimum of four Professional Liaisons over the first two years of operation to provide outreach to clinical partners in order to develop a network of clinical resources to enhance continuum of care navigation.
 - e. Empath Hospice, LLC will implement a “telephonic transitional care service”, in partnership with interested regional Emergency Departments, which it will run out of its Community-Based Palliative Care Program. The applicant will employ a dedicated RN or LPN Transitional Care Navigator, aside from the mobile unit care navigators detailed above.

- 6. Development of a Program to address Transportation Challenges for Rural Areas**
 - a. Empath Hospice, LLC will designate up to \$25,000 annually to VISTE for 5 years, an existing provider of transportation services to resident of the area, to expand coverage of transportation services the areas not currently served by this organization.

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- b. Empath Hospice, LLC will engage in active membership within VISTE in order to assist in strategic planning and deployment of resources within the area.
- c. Empath Hospice, LLC will collaborate with VST related to share volunteers to assist in transportation outreach in the area.
- c. Provide bilingual Mindful Meditation phone support, to allow caregivers to call and listen to a pre-recorded guided meditation, as well as a live call-in option.

7. Development of a Specialized Veterans Program

- a. Empath Hospice, LLC will develop a specialized veteran's program in Hardee, Highlands and Polk Counties. The program will focus on improving end-of-life care for veterans.
- b. Empath Hospice, LLC will pursue We Honor Veterans Level 4 Partnership Certification within the first two years of operation in Hardee, Highlands and Polk Counties. Level 5 Certification will be obtained as soon as practicable.
- c. Empath Hospice, LLC will implement veterans-specific programming through the Legacy Corps program. Legacy Corps is a community-based caregiver support program by and for veterans of all wars and veteran/military families. Legacy Corps utilizes highly trained volunteers to provide a range of caregiver support services including in-home respite care, information, and linkages to other community support systems, hospital-to-home transition services, and other related services.
- d. Empath Hospice, LLC will plan a Veterans Mental Health Day Retreat to increase awareness of grief support, community connections, knowledge of services and to honor their service.

8. Interdisciplinary Palliative Care Consult Partnerships

- a. Empath Hospice, LLC will offer hospitals, ALFs, SNFs and Physician Groups in Hardee, Highlands and Polk Counties the opportunity to partner with Empath Health in the provision of interdisciplinary palliative care consult services - both inpatient and community-based.

9. Dedicated Quality-of-Life Funds for Patients and Families

- a. The applicant commits a minimum budget of \$1,200 annually per interdisciplinary team for the provision of quality-of-life funds for hospice patients and families. These funds are designated to assist with financial needs in order to provide a safe environment for patients or to provide meaningful end-of-life experiences.

10. Development of a Community Advisory Committee

- a. Empath Hospice, LLC will develop, in year one, a Community Advisory Committee to be comprised of residents reflective of the community. The purpose of the council is to provide input, feedback and recommendations about the needs of the Polk, Hardee, and Highlands communities which will be used in future program development.

11. Development of a Physician/Provider Advisory Committee

- a. Empath Hospice, LLC will develop, in year one, a Physician/Provider Advisory Committee to be comprised of local physicians, discharge planners and other clinical partners in Hardee, Highlands and Polk Counties. The purpose of the committee is to assist in program oversight and new program development, and to develop strategies to increase awareness and utilization of hospice services for patients nearing the end-of-life.

12. Development of a Family Advisory Council

- a. Empath Hospice, LLC will develop, in year one, a Family Advisory Council to be comprised of family members of patients of Empath Hospice in Hardee, Highlands and Polk Counties who have passed away. The purpose of the committee is to provide a mechanism by which family members can provide feedback to the applicant regarding the caregiving process and assist in assessment/improvement of current programs from the patient and family standpoint, as well as development of new programs that will aid both the patient and family during the hospice care episode and beyond.

13. Development of an Interfaith Community Advisory Council

- a. Within one year, Empath Hospice, LLC will develop an Interfaith Community Advisory Council which will include clergy and lay representatives from a wide variety of religious and cultural groups. The goals of the Council will be:
- Communicate community needs
 - Offer cultural and religious perspectives
 - Promote spiritual and community engagement
 - Increase collaboration between faith communities and Empath Hospice
 - Educate the community on the programs and services offered by Empath Hospice

14. Implementation of Open Access Model of Care

- a. Empath Hospice, LLC will accept patients into hospice who are still receiving complex medical treatments, or who are still working through difficult end-of-life conversations and situations, in order to give earlier access to palliative care and hospice support. Eligible patients include:
- Patients with a terminal illness who are felt to have 6 months or less to live and who want to receive the kind of palliative and supportive care only Empath Hospice can give.
 - Patients who continue to receive medical treatments as part of their Goals of Care.
 - Patients with complex psychosocial needs who are still working through difficult end of life conversations and situations.
 - Patients on ventilator support who have made the decision to stop assisted ventilation.

15. SAGECare Platinum Level Certification

- a. Empath Hospice, LLC will achieve SAGECare Platinum Level Certification in the first year of operation. SAGE is a deeply skilled and highly trusted national organization dedicated to improving the lives of LGBTQ elders. The SAGECare Platinum Level Credential will help show in even more ways that Empath Hospice is of open minds, pioneering hearts, brave spirits, and healing presence, and shows that not only are all welcome at Empath, but that they will be provided with dignified and highly-specialized care.

16. Jewish Hospice Certification

- a. Empath Hospice, LLC will achieve Jewish Hospice Certification through the National Institute for Jewish Hospice by the end of year 1. This specialized certification program will be extended each year through a variety of training and education programs. Each year, the trainings cover a variety of topics related to Jewish heritage, Jewish bioethics, and death and dying from the Jewish perspective.

17. Joint Commission Accreditation:

- a. Empath Hospice, LLC will achieve Joint Commission Accreditation by the end of year two. The applicant's parent company, Empath Health's community-based palliative care services (those available in homes and long-term care facilities) are currently certified by the Joint Commission. Suncoast Hospice's Pinellas County program is one of only a handful of hospices nationwide to hold Joint Commission Accreditation and/or Certification for hospice, home health, community-based palliative care and pharmacy programs.

18. Provision of Value-Added Services Beyond the Medicare Hospice Benefit:

- a. Empath Hospice, LLC will provide numerous programs and services that are outside the scope of the Medicare Hospice Benefit, including:
 - Integrative Medicine Clinic
 - Palliative Arts
 - Music in Caregiving Program
 - Let There Be Music Program
 - Pet Peace of Mind
 - Pet Therapy
 - Specialized Bereavement Programs
 - Caregiver Coffee Breaks
 - Patient Tuck-In Calls
 - Transitions Volunteer Program
 - Teen Volunteer Program
 - Specialized Infusion Services
 - Clinical Pharmacy Consultations
 - Dr. Direct Program
 - Rendevers Virtual Reality
 - PARO Therapeutic Robot

19. Limited Fundraising in Hardee, Highlands and Polk Counties:

- a. Empath Hospice, LLC proposes to limit its fundraising efforts in Hardee, Highlands and Polk counties to memorial gifts on behalf of Empath patients who have died.

Florida Hospice, LLC (CON application #10688) also referenced as the applicant, is a for-profit, development stage Florida Limited Liability Company established on August 20, 2021. The Graham Healthcare Group, subsidiary of Graham Holdings Company (the ultimate parent) is:

- Residential Healthcare Group
- Allegheny Health Network Healthcare@Home
- Mary Free Bed at Home

Residential Healthcare Group parents the following:

- Residential Home Health (founded in 2001)
- Residential Palliative (founded in 2015)
- Residential Hospice (founded in 2011)

Florida Hospice is an affiliate of Residential Healthcare Group, Inc., (Residential Healthcare or RHG). Residential does not have an established hospice program in Florida. The companies that comprise Graham Healthcare Group, provide hospice services in Illinois, Michigan and Pennsylvania.

In this batching cycle, Florida Hospice, LLC also proposes to establish new hospice programs in SAs 1, 9A and 9C.

The applicant expects issuance of license on or about July 2022 and initiation of service on or about July 2022.

The applicant proposes \$533,355 in total project costs, which includes equipment, development, and start-up costs.

Pursuant to project approval, Florida Hospice, LLC offers the following Schedule C conditions:

The applicant's proposed conditions are presented below verbatim, with the exception that its suggested condition measurements are not included. Florida Hospice, LLC agrees to condition the award of this CON application upon the following:

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1. Florida Hospice will provide \$75,000 over five years (\$15,000 per year) to one or more colleges or universities within the district to provide BSN Nursing Scholarships. The following institutions are located within the district and have nursing programs: Florida Southern College in Lakeland, Southeastern University in Lakeland, Polk State College in Winter Haven, Webber International University in Babson Park and South Florida State College in Avon Park.
2. Florida Hospice will spend \$15,000 over five years (\$3,000 per year) to conduct an annual “Bereavement Summit” for local clergy and pastoral staff to provide education on bereavement issues and services. Any expenditures for this summit will be done in accordance with Florida Hospice’s compliance program, policies and procedures, applicable state and federal law and related guidance.
3. Florida Hospice will spend \$8,000 over five years (\$1,600 per year) to conduct free “Lunch & Learn” meetings to educate health care providers on hospice, hospice services and bereavement issues and services. Any expenditures for “Lunch & Learn” meetings will be done in accordance with Florida Hospice’s compliance program, policies and procedures, applicable state and federal law and related guidance.
4. Florida Hospice will offer free Open Community “Lunch & Learn” meetings to provide education to the public on hospice, hospice services, and bereavement issues and services. Any expenditures for “Lunch & Learn” meetings will be done in accordance with Florida Hospice’s compliance program, policies and procedures, applicable state and federal law and related guidance.
5. Florida Hospice will provide \$30,000 over five years (\$6,000 per year) to one or more not-for-profit organizations within the district that provides meals for seniors who do not qualify for government funded meals. The following organizations provide such services in the district: Meals and Wheels of Polk County, Nu Hope Elder Care Services, Meals and Wheels Avon Park, Meals on Wheels Sebring.

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6. Florida Hospice will provide \$30,000 over five years (\$6,000 per year) to one or more not-for-profit organizations within the district which aid to the homeless population. The following organizations provide such services in the district: Homeless Coalition of Polk County, Heartland Coalition for the Homeless, Highlands County Coalition for the Homeless.
7. Florida Hospice will spend \$18,000 over five years (\$3,600 per year) to assist families and caregivers with transportation expenses related to visiting their loved one in hospice care. Any transportation expenses related to these visits will be done in accordance with Florida Hospice's compliance program, policies and procedures, applicable state and federal law and related guidance.
8. Florida Hospice will spend \$9,000 over five years (\$1,800 per year) to conduct Grief Support Groups for family members and caregivers through a quarterly series of 3-evening meetings focused on grief support. The provision of such Grief Support services will be in addition to any bereavement counseling offered to Medicare beneficiaries and their immediate family members.
9. Florida Hospice will spend \$25,000 over five years (\$5,000 per year) to conduct an annual two-day Children's Healing Hearts Camp for children in the community who have lost a loved one.
10. Florida Hospice will begin operations no later than July 2022 if there is no appeal, or no more than 120 days following final approval and issuance of a certificate of need to establish a new hospice program in Hospice Service Area 6B.
11. Florida Hospice will comply with all licensure requirements and will file all required data and reports in a timely manner as required by the Agency.
12. Florida Hospice will participate in the Medicare and Medicaid Programs, and will collect, submit, and participate in the CMS Hospice Quality Reporting Systems (HIS and CAHPS).
13. Florida Hospice will achieve full accreditation from the Accreditation Commission for Health Care within 18 months of initial licensure.

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14. Florida Hospice will provide inpatient hospice services through collaboration with existing inpatient health care providers including hospitals and skilled nursing facilities.
15. Florida Hospice will submit its hospice training provider program and curriculum to the Department of Elder Affairs for approval.
16. Florida Hospice will develop and submit its Comprehensive Emergency Management Plan (CEMP) to the Department of Elder Affairs for approval.
17. Florida Hospice will provide the free programs and services that are not specifically covered by private insurance, Medicaid, or Medicare as described in this certificate of need application to its hospice patients and family/caregivers including, but not limited to:
 - i. The Journey Program
 - ii. My Care Central
 - iii. Music and Medication Therapy
 - iv. Message and Aromatherapy
 - v. Pet Therapy
 - vi. Residential Hospice Foundation

Any such free programs and services will be furnished in accordance with Florida Hospice's compliance program, policies and procedures, applicable state and federal law and related guidance.

18. Florida Hospice will partner with the We Honor Veterans Program and work cooperatively with the Sebring VA Clinic to coordinate hospice services and enhance the care Veterans receive while facing serious illness.
19. Florida Hospice will provide internship opportunities to qualified students in medical, nursing, gerontology, social work, music therapy, and religious and pastoral counseling training programs with the Hospice Service Area.

The applicant includes suggested condition measures that are not included here.

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MD Care Hospice Inc (CON application #10689) also referenced as MD Care or the applicant, is a for-profit development stage Florida corporation. The applicant's owner indicates she is a "business owner of several Home Health and Hospice agencies in California and Nevada". No additional information on these agencies is provided.

MD Care expects issuance of its license in December 2021 and initiation of service in January 2022. However, the appeal period for the Agency's decisions in this batch does not end until 5 pm on January 10, 2022.

The applicant proposes \$26,000 in total project costs which includes project development costs. No costs are shown for equipment or start-up for the SA 6B project.

MD Care Hospice does not propose any conditions to CON approval.

The reviewer notes that the applicant indicates its focus "is to provide a family centered approach in the delivery of hospice care" and it "will design a program to provide quick response times and focus on having above average bedside care by offering aide visits five to seven days per week". The applicant describes services to be offered as follows:

- Pain and Symptom Management
- Counseling and Support Services
- Spiritual Counseling
- Therapy Service
- Skilled Nursing Care
- Hospice Aide Services
- Volunteer Services
- Supplies, Medication and Durable Medical Equipment related to the Life Limiting Illness
- Continuous Care
- Outpatient Services
- General Inpatient Services
- Respite Care Services

Odyssey Healthcare of Marion County, LLC (CON application #10690) also referenced as Odyssey, or the applicant (reviewer notes the applicant refers to themselves as d/b/a Kindred Hospice, Kindred), is a Foreign Limited Liability Company. Odyssey Healthcare of Marion County, LLC's parent corporation is Kindred Hospice, which is a wholly-owned subsidiary of Gentiva Health Services which is based in Atlanta, Georgia and hospice operations management based in

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Mooresville, North Carolina. As of October 2021, Kindred at Home provided services in 795 sites of services 380 hospice sites, across 38 states.

Kindred Hospice programs are licensed in SAs 1, 2A, 3B, 4B, 7B, and 11. In this batching cycle, Odyssey also proposes to establish a new hospice program in SA 9C.

The applicant expects issuance of license on December 31, 2022 and initiation of service on January 1, 2023.

The applicant proposes \$612,378 in total project costs which includes equipment, development, and start-up costs.

The reviewer removes references to the applicant's exhibits in the proposed conditions. Pursuant to project approval, Odyssey offers the following Schedule C conditions:

Community-Specific Programming and Resources

Condition 1: Odyssey Healthcare commits to hiring a full-time bi-lingual (English and Spanish speaking) social worker to help develop advanced care planning and education and increase access to care to diverse populations. Odyssey Healthcare further commits to hiring workforces reflective of the communities in which they serve and providing translated forms and literature as needed.

Accreditation

Condition 2: Odyssey Healthcare commits to achieve accreditation by the Accreditation Commission for Health Care (ACHC) within the 2nd year of commencement of operations.

Community-Specific Programming and Resources

Condition 3: Odyssey Healthcare commits to implement an educational outreach program to better serve the Hispanic, African American, and other underserved population groups identified by the program personnel in conjunction with community leaders. This will include a mobile hospice education team which will travel as appropriate to many of the following: community centers, health care facilities, churches, ALF meetings to provide hospice outreach and education. The outreach program will provide pamphlets, brochures, and firsthand information about hospice services. The applicant is committing \$100,000 to this program in the first two years of operations as funding and needed going forward.

Disease-Specific programming and resources

Condition 4: Odyssey Healthcare commits to the development/use of certain specialty care programs. The Odyssey Specialty Care programs were developed with Dr. Ronald Crossno, MD Chief Medical Officer and National Medical Director for Odyssey and has worked in hospice for more than 20 years. Dr. Crossno is credentialed by the Hospice Medical Director Certification Board as a Certified Hospice Medical Director, is a Fellow with the American Academy of Hospice and Palliative Medicare, received the Lifetime Achievement award from the AAHPM in 2020 for his body of work that has contributed to the advancement of Hospice and Palliative Care, and as an active Board Member of the National Hospice and Palliative Care Organization.

Cardiopulmonary Specialty Care Program: Cardiac and respiratory disease are in the top three reasons for the death and Service Area 6B and indicate a need for the hospice provider to have a focused care program for those patients facing end of life with these chronic illnesses. The program represents specialty cardiac and respiratory end of life care education for all staff at the hospice program, focused care planning for those symptoms specific to these disease processes to provide the patient and family the tools, medications, treatments and support needed to meet their end-of-life goals.

Alzheimer's Disease/Dementia: Alzheimer's/Dementia is in the top four reasons for death in Service Area 6B. Odyssey has a program of specialized education for the hospice team and an educational booklet for patient families and caregivers used by the hospice team to provide guided education and training for the family.

Skin Health Program: The Integumentary System, a.k.a. the skin, is the largest organ of the human body and requires close observation and interventions during end of life and as a part of every hospice patients care plan. Odyssey has partnered with MedLine as a national medical supply vendor and an engaged collaborator to bring a best in class holistic approach to skin care supported with a Wound Ostomy and Continence Nurses educational program for staff, patients, families and advanced skin care/wound care and treatment products.

Soul injury®: Odyssey Hospice recognizes that the patient and family who interacts with our agencies may have a past traumatic experience. These past traumatic experiences may or may not be known to us and these past experiences can create obstacles for EOL care. A short risk assessment is conducted for each hospice patient to establish a plan of care to address any feelings that are causing them to feel disconnected

from their sense of self, with the goal of assisting the patient and family to overcome any obstacles that would prevent them from meeting their end-of-life goals.

Senior Living Standards Program: Kindred at Home's Senior Living Service Standards ensure exemplary customer service and communication standards when caring for residents of assisted living and skilled communities.

Electronic Medical Records

Condition 5: Odyssey Healthcare commits to Odyssey Healthcare commits to the implementation of Homecare Homebase electronic medical records (or equivalent) system at start-up, including the use of mobile point-of-care devices.

Population group-specific programming and resources

Condition 6: Odyssey Healthcare commits to offering We Honor Veterans, a specialized hospice program developed to honor Veterans by providing a hospice care program that recognizes and responds to the unique needs of the of the Veteran and his/her family. This commitment includes the establishment of Level Four within a reasonable timeframe.

We Honor Veterans integrates all of the holistic and specialized pieces of hospice care, like pain and symptom management, with special services designed just for veterans. Veterans are identified at the time of admission and their military service/needs are integrated into the POC. All Veterans in the We Honor Veterans Program receive special recognition of service, pinning; "Welcome Home" of Vietnam Veterans, visits from volunteers who are also Veterans; and guidance with military benefits, records recovery and burial arrangements if they choose to do so.

Odyssey Healthcare Hospice's hospice team members are end-of-life experts who have received additional education and training on identifying, assessing and meeting the unique needs of Veterans and their family from the time of referral through bereavement services. Odyssey Healthcare employees attend We Honor Veteran training and all participate in the care of the patient.

The We Honor Veterans Program enables a Veteran, and his/her family to make informed decisions, and participate in care planning when facing a life limiting illness. By gaining knowledge and expert support from Odyssey Healthcare Hospice's team, the Veteran and his/her family are better positioned to live each day to its fullest.

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The components of the We Honor Veterans program include:

- VA focused admissions process, including specific Veteran admission information packet;
- Veterans who receive care from the Odyssey Healthcare enter a new level of care that is unique among pharmacological aspects of palliative (comfort) care provided. Veterans are introduced to special programs and partners. Among the programs and care partners that Veterans and their families may also have access to include;
 - 24-hour Nursing Support;
 - Tree of life (a unique awareness program);
 - Effleurage (light touch massage);
 - Bereavement Support;
 - Flower Ministry;
 - The Final Salute program (a final act of dignity and respect as deceased veteran leaves home under the American Flag for which they dedicated their service.

Further evidence of this commitment to serve the needs of Veterans, Odyssey Healthcare has conditioned its CON application on committing to the development of its We Honor Veterans Program for Veterans upon initiation of the hospice program in Service Area 6B. This commitment includes the establishment of Level 4 within a reasonable time frame.

Other - Vigil Volunteer Program

Condition 7: Odyssey Healthcare will commit to expansion of Odyssey Healthcare's Vigil Volunteer Program into the service area, equipped with a team of specifically trained volunteers available to respond on short notice to provide presence during the last few hours of life to patients without family support or patients and families who need additional support. Vigil volunteers also provide support to family members who need a break from the bedside of their loved ones during the dying process.

Other - Internships

Condition 8: Odyssey Healthcare will commit to offering of internship experiences for positions such as social workers, bereavement counselors, chaplains, nursing students and medical students to help increase the pool of qualified health professionals who can serve Hospice patients. We will seek contracts with local universities, colleges and technical schools as Odyssey Healthcare has done in other markets.

Other - Fundraising

Condition 9: Odyssey Healthcare will commit to forgo fundraising solicitations as long as it serves service area residents. This will lessen the impact on existing service per area providers. Should patients and families who have benefitted from the care provided by Odyssey wish to make donations, they will be directed to other charitable organizations located within the service area.

Other - Specific Programming and Resources

Condition 10: Odyssey Healthcare will commit to the recruitment of bilingual volunteers. Patients' demographic information, including other languages spoken, is collected so that the most compatible volunteer can be assigned to fill each patient's visiting request.

Other - Alternative Therapies

Condition 11: Odyssey Healthcare will commit to the provision of alternative therapies beyond the core hospice benefit, such as massage therapy, pet therapy, music therapy, art, or other such alternative therapies when eligible and needed.

Other - Tuition reimbursement

Condition 12: Odyssey Healthcare commits to provide up to \$2,500 per employee and up to \$20,000 annually for tuition reimbursement for employees to continue education in hospice or end-of-life care. This includes tuition reimbursement for Odyssey Healthcare staff to obtain Hospice Certification, further enhancing the quality of care for hospice patients/residents, as well as supporting staff ability to advance professionally.

Population group-specific programming and resources

Condition 13: Odyssey to providing hospice care for the low-income and homeless populations in the service area. Odyssey provides hospice care to all individuals requiring hospice care regardless of ability to pay. Odyssey does and will continue to meet these licensure standards.

Hospice care for the homeless population comes is often challenged due to many homeless individuals living outside shelters or non-permanent housing. With its existing community relationships and, Odyssey Healthcare is well-positioned to overcome these challenges to provide best-in-class end-of-life care. Our clinical and business developments team work seamlessly to coordinate with the local homeless support organizations, identified below, to provide education and engage with the plans and goals of the organizations, to meet the end-of-life care needs of this vulnerable an underserved population

Local Homeless Support Organizations:

- <https://polkhomeless.org/>
- <https://www.hardeehelpcenter.org/homeless-assistance>
- <https://www.heartlandhomeless.com/>

Through engagement with local homeless support organizations, Odyssey Healthcare commits to provide orientation and education to its hospice staff.

Population group-specific programming and resources – Care for persons with HIV/AIDS

Condition 14: Odyssey Healthcare will commit to offering care to persons with HIV/AIDS. Hospice care for the HIV/AIDS population comes with many challenges the Odyssey Healthcare is well-positioned and commits to overcome these challenges to provide best-in-class end-of-life care. Our clinical and business developments team work seamlessly to coordinate with the local support organizations, and local departments of health to provide education and engage with the plans and goals of the organizations to meet the end-of-life care needs of this vulnerable and underserved population. These organizations will include the county health departments and the Counties' HIV Care Councils.

(<https://discover.pbcgov.org/carecouncil/Pages/default.aspx>).

Early hospice access to palliative care

Condition 15: Odyssey to commit to providing a palliative care program (“early hospice access program”) to persons who are still receiving complex medical care or who are still evaluating care options, providing early access to palliative care and hospice support. In general, to qualify for hospice care, a hospice doctor and your doctor (if you have one) must certify a patient is terminally ill, meaning they have a life expectancy of 6 months or less. In some situations, early initiation of palliative care, in addition to more complex treatments, provides patients and their caregivers, additional support/resources from Odyssey’s hospice service, which is coordinated with the patient, their family and the patient’s physician. Odyssey’s specially trained palliative care team includes physician medical director; nurse practitioner; palliative care coordinator; social worker; and spiritual care coordinator, as needed.

Hospice Location in Polk County

Condition 16: Odyssey will commit to locating an office in Polk County if approved for Hospice care and service area.

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As of 2020, Hardee, Highlands, and Polk counties had populations of 27,444, 105,145, and 720,688, respectively. For persons age 65 and older, 4,046 lived in Hardee, about 36,271 in Highlands, and about 150,136 in Polk. Thus, nearly 80% of 6B residents over the age of 65 live in Polk County. Likewise, about 80% of deaths in are Polk County residents. Of those deaths due to heart disease, which we identified as an area of need in Schedule B, Section 3.1, Polk County residents also account for about 80%. Thus, the majority of need in 6B exists in Polk County.

In addition to containing the majority of service area need, Polk County residents contain the highest proportion of non-English speakers, the highest proportion of minorities, the highest number of homeless individuals, and the highest number of persons living under the poverty line.

Consistent with AHCA need methodology and our analyses above, we consider all 6B counties as underserved. However, Polk County residents are identified as those in greatest need of additional hospice services. For that reason, Odyssey commits to establish a physical presence in Polk County.

The reviewer notes that Odyssey has a reference to Palm Beach County (pbcgov.org) government website. The applicant included two footnotes describing palliative care which were not included in the conditions.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) also referenced as PruittHealth or the applicant, is a for-profit development stage Florida entity. The applicant is an affiliate of PruittHealth, Inc. (also referenced as PruittHealth), founded in 1969 as the Toccoa Nursing Center in Toccoa Georgia. PruittHealth currently provides administrative-related services to all its affiliated health care providers in Florida, Georgia, North Carolina and South Carolina and proposes to provide all the administrative-related responsibilities for the proposed project. PruittHealth Hospice has been providing end-of-life services to patients and families since 1993 and operates a total of 25 hospice programs in Georgia, South Carolina and North Carolina.

The ultimate parent company is United Health Services, Inc. (United or the parent). United does not currently provide hospice services in Florida.

United's PruittHealth, Inc., also proposes to establish new hospice programs in SAs 1, 3B and 9C.

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The applicant expects issuance of license and initiation of service on January 1, 2023.

PruittHealth Hospice – Central Florida, LLC projects \$353,011 in total project costs, which consist of equipment, project development and startup costs.

Pursuant to project approval, PruittHealth offers the following Schedule C conditions - Reflective of its commitment to serve all terminally ill residents of Subdistrict 6B, the Applicant is willing to accept any such conditions on its Certificate of Need based on any representations made throughout this document. The Applicant will provide all required core components of hospice care set forth by Medicare Conditions of Participation as well as Florida hospice licensure requirements including the provision of all four levels of service (routine, continuous care, general inpatient and respite) to all types of patients without regard to race, ethnicity, gender, age, religious affiliation, diagnosis, financial status, insurance status or any other discriminating factor.

The Applicant will provide terminally ill Subdistrict 6B residents with a proficient quality hospice provider dedicated to meeting the needs of the community. It will enhance the availability, accessibility, and quality of hospice programming provided to Subdistrict 6B residents, while dually reducing readmissions to area hospital. As demonstrated throughout this Certificate of Need application, the Applicant will meet the AHCA published need as well as the need identified by the market research for this Certificate of Need application.

Specific conditions to be met by the Applicant, if awarded a Certificate of Need to provide hospice services to Subdistrict 6B residents, are highlighted on the following pages under the following seven categories:

- General Hospice Conditions
- Hospice Programming
- Programs and Services Beyond Medicare Requirements
- Recruit, Train, and Retain High-Quality Staff
- Community Outreach
- Emergency Preparedness
- Financial

General Hospice Conditions

Hospice Operations

- The Applicant conditions this application on initiating operations no later than January 2023.
- The Applicant conditions this application on not discriminating against anyone based on race, sex, religion, national origin, physical handicap, or diagnosis, payment source, and/or any other circumstance or physical condition which classify the individual as underserved.
- The Applicant conditions this application on implementing company-wide COVID-19 resources and initiatives immediately following licensure and maintain them through the end of the COVID-19 pandemic.
- The Applicant conditions this application on implementing the PruittHealth Hospice 35 Best Practices.
- The Applicant conditions this application on obtaining Joint Commission within (within) 12 months of licensure.
- The Applicant conditions this application on participating in a company-wide Annual Quality Report to demonstrate transparency in operations and make this Quality Report available to the public.
- The Applicant conditions this application on incorporating PruittHealth Hospice's QAPI Plan.

Hospice Office Location

- The Applicant conditions this application on establishing its principal hospice office in Polk County and a satellite office in Highlands County. Both offices will be open and staffed within the first year of operations.

Inpatient Hospice Services

- The Applicant conditions this application on entering into a “scatter bed” agreement with local inpatient bed providers (hospitals, skilled nursing facilities and assisted living facilities) to serve both inpatient respite and general inpatient patients.

The reviewer notes that scatter beds for inpatient hospice care are to be in a hospital or nursing home per Rule 59C-1.0355 (7) Florida Administrative Code.

Hospice Programming

Disease Specific Programming

- The Applicant conditions this application on offering disease specific programs.

Respiratory Therapy Program

- The Applicant conditions this application on offering Respiratory Therapy services by a licensed Respiratory Therapist.

Peaceful Path Program

- The Applicant conditions this application on offering the Peaceful Path program.

Palliative Care Program

- The Applicant conditions this application on offering its Palliative Care program and dedicated palliative care staff to ensure (sp. ensure) the success and viability of the program.
- The Applicant conditions this application on providing an annual education event for area healthcare practitioners. The event will provide information on palliative care including the palliative care services offered, how to identify patients who would benefit from palliative care, and how to approach the subject with patients.

On-Call Nurse Visit

- The Applicant conditions this application on having an on-call nurse available to visit a patient or family within an hour of receiving a call, if the family needs a visit.

11th Hour Vigil Program

- The Applicant conditions this application on offering its 11th Hour Vigil program.

Programming and Services Beyond Medicare Requirements

We Honor Veterans

- The Applicant conditions this application on being a member of We Honor Veterans, in good standing, and obtaining National Hospice and Palliative Care Organization Level IV within 12 months of operation.

Camp Cocoon

- The Applicant conditions this application on PruittCares Foundation funding \$40,000 annually to establish and host Camp Cocoon in Subdistrict 6B for up to 100 children on an annual basis.

PruittCares Foundation Funding: Year 1-\$40,000 Year 2-\$40,000

Companion Care

- The Applicant conditions this application on providing up to 4 hours of Companion Care for patients and their caregivers per week.

Concierge Program

- The Applicant conditions this application on developing a Concierge Program.

Second Wind Dreams

- The Applicant conditions this application on partnering with the Second Wind Dreams Program to continue efforts in realizing past dreams for its patients.

Keepsakes for Loved Ones

- The Applicant conditions this application on offering its patients the opportunity to create keepsakes for their loved ones, such as memorial books and chests with meaningful mementos. The keepsakes will be funded through PruittCares Foundation and patients and families will incur no expense for them.

PruittCares Foundation Funding: Year 1-\$2,500 Year 2-\$2,500

Recruit, Train, and Retain High-Quality Staff

Certified Nursing Assistant Career Ladder Program

- The Applicant conditions this application on offering its Certified Nursing Assistant career ladder program.

Free Continuing Education Programs

- The Applicant conditions this application on offering its customized online learning system, Pruitt University.

Resident and Intern Opportunities

- The Applicant conditions this application on offering medical and clinical residency and internship opportunities to medical, nursing, pharmacy, social work, bereavement counselor, therapy or other students.

Annual Staff Training from PruittHealth Registered Dietician

- The Applicant conditions this application on having a Registered Dietician provide annual training to all hospice partners. The training will cover ethical concerns over nutrition at end of life, common questions and concerns from dying patients and their families, and how each member of the interdisciplinary team can address them.

Educational Grant

- The Applicant conditions this application on the PruittCares Foundation establishing a scholarship totaling \$50,000 (\$25,000 annually or \$12,500 per student per year) for two years at the Polk State College's Nursing Degree Program to cover tuition and fees.

PruittCares Foundation Funding: Year 1-\$25,000 Year 2-\$25,000

Community Outreach

Senior Living Community Outreach

- The Applicant conditions this application on having at least 0.5 FTE community relations representative dedicated to senior living communities for the first three years of operations. The community relations representative will present educational events to senior living community residents, and meet with residents, administrators, and leadership to gain feedback on to best serve the residents.

Applicant Commitment to being a Healthful Community Partner

- The Applicant conditions this application on the PruittCares Foundation funding \$10,000 in each of the first two years of operations to Midwest Food Bank of Florida for the purpose of providing healthy meals to individuals in need of food assistance.

PruittCares Foundation Funding: Year 1-\$10,000 Year 2-\$10,000

Committed to Caring Campaign

- The Applicant conditions this application on PruittHealth's Committed to Caring Campaign and in doing so will host free health screenings, including blood pressure, diabetes, and hearing tests, and educational sessions.

Emergency Preparedness

COVID-19 Vaccine Compliance

- The Applicant conditions this application on all of the Applicant's staff being fully vaccinated against the COVID-19 virus and any future pandemic causing virus or communicable disease.

Highly Communicable Virus or Disease Plan

- The Applicant conditions this application on serving all patients who have contracted a highly communicable virus or disease (such as COVID-19) with no hesitation or delay.
- The Applicant conditions this application on providing care for any clinically appropriate patient in their home, even if a household member is positive for a highly communicable virus or disease.
- The Applicant conditions this application on commencing the plan of care immediately after assessment, not mandating a quarantine period before initiating the prescribed treatments as other home health providers require.
- The Applicant conditions this application on implementing and using various technologies, including iPads, to provide virtual visits for home health patients who do not want outsiders entering their homes for fear of contracting a highly communicable disease, such as COVID-19. Virtual visits have proven to be extremely useful in maintaining a plan of care even without physical visits from care providers and are not currently available in the market. It is the Applicant's belief that this initiative will go a long way to mitigating any potential spread of a virus or disease.
- The Applicant conditions this application on maintaining a user-friendly dashboard so that patients and family members will be cognizant of statistics from the regional level down to the local provider.

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- The Applicant conditions this application on continuing to utilize and adhere to its own set of stringent protocols and standards, in line CDC recommendations, and designed specifically to treat individuals with highly communicable viruses and diseases.
- The Applicant conditions this application on maintaining its ongoing training procedures for staff to ensure that all staff are kept up to date with rapidly evolving requirements and best practices.

Financial

Non-Solicitation of Donations

- The Applicant conditions this application on not soliciting charitable contributions from patients, families, or friends relating to its services or engaging in fundraising events for its program. Any unsolicited donations will be given to the PruittCares Foundation.

PruittHealth includes a letter from Dave Lescalleet, Executive Director of the PruittCares Foundation, which indicates the funding for Camp Cocoon and keepsakes for the family members are ongoing commitments and the food bank funding is for two years, which are somewhat not clearly stated in the proposed conditions. Mr. Lescalleet's letter addresses all financial conditions with the exception of the Educational Grant to Polk State College's Nursing Degree Program. The applicant also included suggested condition measures that are not included here.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) also referenced as Seasons Central Florida, Seasons, or the applicant, is a development stage for-profit Florida entity. Seasons is an affiliate of Seasons Hospice & Palliative Care, Inc., (Seasons), founded in 1997 and nationally headquartered in Rosemont, Illinois.

Seasons is wholly owned by AccentCare, Inc. (AccentCare or parent), as on December 22, 2020, AccentCare merged with Seasons, combining a national leader of post-acute health care with a national network of community-based hospice providers.

Seasons/AccentCare has hospice operations in Arizona, California, Colorado, Connecticut, Delaware, Florida, Georgia, Illinois, Indiana, Massachusetts, Maryland, Michigan, Mississippi, Missouri, New Jersey, Nevada, Oregon, Pennsylvania, Tennessee, Texas, and

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Wisconsin. The applicant indicates that combined, Seasons and AccentCare have nearly 75 years of experience and 225 sites around the country.

Seasons provides hospice services in the following SAs: 5A, 5B, 6A, 10 and 11. In this batching cycle, Seasons also proposes to establish new hospice program in SA 9C.

The applicant expects issuance of license in December 2022 an initiation of service in January 2023.

Total project cost, which includes building, equipment, project development and start-up costs, is projected to be \$1,251,516.

Seasons Hospice & Palliative Care of Brevard County, LLC's (referred to as *Seasons Central Florida*) offers an array of services to assure patients at the end of life palliative care that addresses their desires with dignity and compassion. Highlights of the programs appear in **Section 1, Need Analysis**. The integrated scope of care produces benefits for residents of Hospice Service Area 6B, comprised of Polk, Highlands, and Hardee counties. Training, education, outreach, and accessibility form the basis for extending end of life care throughout the service area.

Seasons Central Florida offers the following conditions and commitments for the hospice program, identifying a measurement for each. Funding for the services and programs appears on Schedule 8 of the application. Seasons' Schedule C conditions include:

COMMUNITY BASED CONDITIONS:

- 1. The primary office location is Polk County.** To better serve all three counties within Service Area 6B, Seasons Central Florida will establish offices in **Hardee** and **Highlands Counties** within the first year.
- 2. Seasons Central Florida establishes an ongoing Homeless Program** in Hospice Service Area 6B to offer shelter and comfort for homeless hospice patients in their final days. Seasons Central Florida commits to initial funding of \$100,000 during the first three years (\$15,000 in year 1, \$30,000 in year 2, and \$55,000 in year 3) to be divided among the **Homeless Coalition of Polk County** and the **Heartland Coalition for the Homeless**. Housing vouchers will be offered based on individual needs and resources from subsidizing rent to supporting the entire expense for monthly assisted living facility care.

3. **Seasons Central Florida commits to support of local community-based non-profit organizations to assist seniors and disadvantaged persons.** An initial, one-time investment of \$50,000 will benefit **New Hope Senior Services** that provides services such as meal delivery, respite care, custodial care, and a Senior Center for socialization activities, allowing frail and vulnerable populations to remain safely in their homes while staying connected to the community. Seasons Central Florida will partner with this organization to increase public awareness and improve access to hospice and palliative care for elderly and low-income residents of Hardee and Highlands Counties.
4. Seasons Central Florida commits to a **Caregiver Relief Program**, providing up to 6 hours custodial care for seniors living alone and are unable to afford custodial care paid for by Seasons Hospice Foundation, in addition to linking families with community based organizations to provide services such as meals and transportation.
5. Seasons Central Florida donates **\$25,000** in year 1 and **\$50,000** in year 2 to Seasons Hospice Foundation restricted to **Wish Fulfillment** (funding of wishes that enhance quality of life), **Emergency Relief** (funding basic needs such as food and shelter), **Caregiver Relief Program**, and **Camp Kangaroo** (children's grief camp) for Area 6B residents.

RECRUITMENT & RETENTION CONDITIONS:

6. Seasons Central Florida recognizes the national nursing shortage and will take proactive steps to ensure there are well-qualified nurses in its program. Seasons Central Florida conditions this application on implementing an **employee referral campaign** which will leverage the networks of existing AccentCare and Seasons employees nationwide and offer sign-on bonus to employees who refer a successful new hire to Seasons Central Florida.
7. **As a condition of this application, Seasons Central Florida will use the below-listed organizations to recruit foreign-trained, high quality workforce members.** These well-established organizations facilitate a mutually beneficial relationship between foreign-educated healthcare professionals and healthcare organizations recruiting additional staff.

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Recruiting through these organizations also allows Seasons Central Florida to establish a team of professionals who reflect the increasingly diverse population in Florida.

- O’Grady Peyton International
 - MedPro International
8. Seasons Central Florida conditions this application on its parent company attending the **National Hispanic Nurses Conference** for the first three years of operations. This conference will allow Seasons to recruit bilingual Spanish-speaking nurses and nurses that reflect the areas Seasons serves in Florida.
 9. Seasons Central Florida offers **internship experiences** within the active workforce for social workers, music therapists, art therapists, bereavement counselors, chaplains, and medical assistants. Seasons Central Florida will seek local contracts with area universities and schools and will leverage existing national contracts.
 10. Seasons Central Florida commits to provide **Continuing Education Units (CEU)** offerings for registered nurses, licensed practical nurses, and licensed social workers at no charge through their nationally accredited CEU programs by the *Association of Social Work Boards* and the *American Nurses Credentialing Center*. Offerings will include:
 - **Florida Alzheimer’s Training**
 - **Clinical Pastoral Care Education Program (CPE)**
 - **African American**
 - **Hispanic/LatinX**

DIVERSITY EQUITY INCLUSION CONDITIONS:

11. Seasons Central Florida commits to continuance of its national and Florida **Cultural Inclusion Councils** to foster Diversity Equity Inclusion (DEI) initiatives throughout the organization and the communities served by the organization.
12. Seasons Central Florida commits to continuing its DEI **Pathways Mentorship Program** to develop future diverse leaders within the organization.
13. Seasons Central Florida commits to continuing its statewide **Haitian Community Council**.

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14. Seasons Central Florida ensures **minority representation by having a minimum of one African American and one Hispanic member on the hospice program's governing board, identifying those members in the annual monitoring report.** Seasons Central Florida further commits to forming an **African American Advisory Board** to meet at least twice yearly. The Advisory Board will advise Seasons Central Florida in ensuring culturally competent care, recruiting professionals that represent communities served and educate the community about access to hospice services.
15. Seasons Central Florida commits to having a chaplain with expertise in **the African American community. In addition to serving the spiritual needs of African Americans in hospice care, a minimum of six workshops will be held in African American churches each year** to increase awareness and expand access to hospice and palliative care through public education by initiating conversations about Advanced Directives and other topics exploring the benefits of hospice care. These "Church Chats" will help inform the community of hospice care and increase access to services. Seasons ensures staff receive cultural competence training to improve the delivery of hospice care.
16. Seasons Central Florida will become **Services and Advocacy for Gay Elders (SAGE) Platinum Certified** by the end of its first year of operations.
17. Seasons Central Florida commits to bilingual staff, having 1.0 FTE who is Spanish speaking to provide outreach in the LatinX community.

CARE ENHANCEMENT CONDITIONS:

18. Seasons Central Florida commits to ongoing **Patient/Family Quality Surveys** to assess and monitor care in real time with active patients. These surveys are designed to identify issues before they escalate and to ensure all needs are being met.
19. Seasons Central Florida will provide a **Palliative Care Program.** Partnering with physicians in the community to identify patients needing pre-hospice palliative care services provides a pathway to address unmet need in the district. Seasons Central Florida commits to offering community-based palliative care through a team of physicians, nurse practitioners, and social workers.

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- 20.** Seasons Central Florida will provide a **Cardiac Care Pathway** designed to help patients with cardiac disease access hospice in a timely manner, preventing unnecessary hospitalizations and honoring patients' wishes to be at home. High-tech interventions such as cardiac drips and IVs are supported by and paid for by the hospice program.
- 21.** Seasons Central Florida will provide a **Pulmonary Care Pathway** by partnering with area pulmonologists to help identify patients in the disease process who are eligible for hospice care. Patients in this pathway will be closely monitored to prevent respiratory distress by specially-trained staff and volunteers, and pharmacological and non-pharmacological interventions will maximize such prevention.
- 22.** Seasons Central Florida will provide a **Stroke/CVA Pathway** by partnering with area physicians and long-term care facilities to help identify patients at risk of stroke or who have suffered a stroke and who are eligible for hospice care.
- 23.** Seasons Central Florida will provide an **Open Access Program** to serve patients with multiple complications or with multiple system involvement in addition to a terminal diagnosis to provide additional medical interventions.
- 24.** Seasons Central Florida commits to participating in the **We Honor Veterans program** and achieving level 4 by the end of its first year of operations and level 5 by the end of the second year.
- 25.** Seasons Central Florida will provide a **Virtual Reality Program** to enhance end of life care experiences.
- 26.** Seasons Central Florida will **offer its Namaste Care Program** to Alzheimer's patients and other through its healing touch.
- 27.** Seasons Central Florida will provide its **DOVE Center Virtual Bereavement Program** to allow family members a virtual option for accessing grief support.
- 28.** Seasons Central Florida will provide **Camp Kangaroo** to bereaved children who have experienced the death of someone close to them. (Camps are currently offered virtually.)

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- 29.** Seasons Central Florida offers therapies beyond the core hospice services. Seasons Central Florida provides one Full Time Equivalent (FTE) for music therapy per 100 patients.
- 30.** Seasons Central Florida implements its **Partners in Care** program in Hospice Service Area 6B, providing education and training to staff and volunteers regarding the importance of partnering with long-term care facility staff in care of the hospice patient. Seasons Central Florida educates facility staff through an e-learning module and in-person team building education. Seasons Central Florida commits to participating in and/or lead care plan meetings with facility and hospice staff and the patient and family to address the hospice plan of care and improve continuity of care expectations.
- 31.** Implement Seasons Central Florida' **No One Dies Alone** policy in Hospice Service Area 6B. Seasons Central Florida educates staff and volunteers to identify when the patient is approaching the final weeks of life, providing additional support. Continuous Care is available when the patient meets the eligibility requirements. Otherwise, the **Volunteer Vigil** program provides specially trained volunteers to stay with the patient throughout the dying process. When volunteers are unavailable, Seasons staff hold vigil to ensure No One Dies Alone. Seasons' **24-Hour Call Center** operations provide another level of assurance to deal with any emergencies, concerns, or fears that may arise.
- 32.** Seasons Central Florida will initiate a **Low Literacy Outreach Campaign** to provide information on the “5 Wishes” advanced directives to residents with low literacy.
- 33.** Seasons Central Florida will implement a **Bereavement Support Program for victims and families of the incarcerated,** providing outreach through local law enforcement victim services advocacy offices.

Seasons Central Florida’ commitments extend to all statements made within the application and agrees should the Agency reviewers select others to add to those in the list above. Furthermore, Seasons Central Florida understands that the applicable administrative rule requires that the CON holder furnish an annual report regarding measuring and reporting on each condition. Failure to meet a condition may result in a fine of a maximum of \$1,000 per day, with each day considered a separate violation.

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As previously stated, Seasons included brief individual descriptions of how compliance will be reported to the Agency, which we did not include here.

Serenity Hospice Care Inc. (CON application) #10693 also referenced as Serenity Care or the applicant, is a for-profit development stage Florida entity. Serenity Hospice Care Inc.'s current status with the Florida Secretary of State's Division of Corporations is inactive in that effective September 24, 2021, the applicant's last event is "Admin Dissolution For Annual Report". The applicant's owner indicates he is a "business owner of several Home Health and Hospice agencies in California and Nevada". No additional information on these agencies is provided.

The applicant expects issuance of its license in December 2021 and initiation of service in January 2022. However, the appeal period for the Agency's decisions in this batch does not end until 5 pm on January 10, 2022.

The applicant proposes \$26,000 in total project costs which includes project development costs. No costs are shown for equipment or start-up for the SA 6B project.

Serenity Hospice Care Inc. does not propose any conditions to CON approval.

The reviewer notes that the applicant indicates its focus "is to provide a family centered approach in the delivery of hospice care" and it "will design a program to provide quick response times and focus on having above average bedside care by offering aide visits five to seven days per week". Services to be offered as described by the applicant include:

- Pain and Symptom Management
- Counseling and Support Services
- Spiritual Counseling
- Therapy Service
- Skilled Nursing Care
- Hospice Aide Services
- Volunteer Services
- Supplies, Medication and Durable Medical Equipment related to the Life Limiting Illness
- Continuous Care
- Outpatient Services
- General Inpatient Services
- Respite Care Services

Transitions Intermediate Holdings, LLC (CON application #10694)

also referenced as Transitions, or the applicant, is a Foreign Limited Liability Company established in the State of Delaware on July 22, 2021 and authorized to transact business in Florida as of September 29, 2021.

Transitions states being a leading hospice and palliative care provider in the midwestern United States, with currently licensed and active hospice operations in the states of Michigan, Illinois, Indiana and Pennsylvania (with a total of five hospice agencies in 124 counties). Transitions is not hospice-licensed in Florida and no Transitions hospice affiliate is CON-approved to be hospice-licensed in Florida.

In this batching cycle, Transitions also proposes to establish new hospice programs in SAs 1, 3B and 9C.

The applicant expects both issuance of license and initiation of service in October 2022.

The applicant proposes \$642,598 in total project costs, which include equipment, project development and start-up costs.

CON application #10694, Tab C, includes a signed (by the applicant's authorized representative) and dated (10/25/21), page one of one, Schedule C (Certificate of Need Predicated on Conditions/AHCA Form 3150-0001 August 2020). The reviewer notes that on this Schedule C:

- An "X" is shown for items C.2., C.3. and C.4., indicating "Please see attached" for each of the three items – but nothing is attached
- A "3" is shown for item D to indicate how many pages follow the Schedule C/Certificate of Need Predicated on Conditions page – but no pages follow

A search of CON application #10694 in its entirety reveals no Schedule C attachment pages.

Hospice programs are required by federal and state law to provide services to everyone requesting them and therefore the Agency would not place conditions on a program to provide legally required services such as palliative radiation and chemotherapy and care to indigent and charity patients.

Should a project be approved, the applicant's proposed conditions would be reported in the annual condition compliance report as required by Rule 59C-1.013(3), Florida Administrative Code. The proposed conditions are as the applicant stated. However, Section 408.043(3)

Florida Statutes states that “Accreditation by any private organization may not be a requirement for the issuance or maintenance of a certificate of need under ss. 408.031-408.045, Florida Statutes.” Section 400.606(5), Florida Statutes states that “The agency may deny a license to an applicant that fails to meet any condition for the provision of hospice care or services imposed by the agency on a certificate of need by final agency action, unless the applicant can demonstrate that good cause exists for the applicant’s failure to meet such condition.”

Issuance of a CON is required prior to licensure of certain health care facilities and services. The review of a CON application and ultimate approval or denial of a proposed project is based upon the applicable statutory criteria in the Health Facility and Services Development Act (408.031-408.045, Florida Statutes) and criteria within Chapter 59C-1, Florida Administrative Code. An approved CON does not guarantee licensure of the proposed project. Meeting the applicable licensure requirements and licensure of the proposed project is the sole responsibility of the applicant.

D. REVIEW PROCEDURE

The evaluation process is structured by the certificate of need review criteria found in Section 408.035, Florida Statutes, rules of the State of Florida, and Chapter 59C-1, 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 provided in the application and independent information gathered by the reviewer.

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

Section 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, consultant Sarah Zimmerman analyzed the application in its entirety with consultation from financial analyst Everett “Butch” Broussard of the Bureau of Central Services who evaluated the financial data.

E. CONFORMITY OF PROJECT WITH REVIEW CRITERIA

The following indicate the level of conformity of the proposed project with the review criteria and application content requirements found in Sections 408.035 and 408.037, applicable rules of the State of Florida, and Chapter 59C-1, 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 47, Number 152, of the Florida Administrative Register, dated August 6, 2021, need for one hospice program was published in SA 6B for the January 2023 hospice planning horizon. The co-batched applicants are applying in response to published need.

SA 6B is currently served by four hospice providers whose admissions for the July 1, 2020 - June 30, 2021, reporting period are shown in the table below:

**Service Area 6B
Hospice Admissions
July 2020 – June 2021**

Provider	Admissions
Compassionate Care Hospice of Central Florida Inc	711
*Cornerstone Hospice & Palliative Care Inc	1,059
Good Shepherd Hospice	3,492
*VITAS Healthcare Corporation of Florida	1,699
Total	6,960

Source: Florida Need Projections for Hospice Programs for the January 2023 Hospice Planning Horizon, published August 2021

Note: *Also serves an adjacent service area(s)

All applicants, except MD Care Hospice Inc and Serenity Hospice Care Inc, provide detailed arguments in support of need for their respective project. Their major need justification(s) are described below.

Affinity Care of Central Florida LLC (CON application #10685)

states the following strategic initiatives to be implemented into the proposed project:

- Enhance Hospice Utilization Amongst Hispanic and Black Minority Groups
- Develop and Initiate a Community Paramedic Program with Local EMS to Reduce Unnecessary Trips to the Emergency Room
- Specialty Disease Specific Clinical Programs and outreach to Enhance Hospice Utilization for Alzheimer's Disease and Dementia, Affinity Cardiac Care and Affinity Pulmonary Care Programs

Affinity cites Florida Office of Vital Statistics (2019 death data) in providing three tables to address Service Area 6B's resident deaths on the application's pages 19 – 21:

- Ages 65+ and All Ages by County
 - Total Number of Resident Deaths
 - Age 65+ Percent of Total Deaths
- Ages 65+ and All Ages by Cause in SA 6B
 - Total Number of Resident Deaths by Cause
 - Age 65+ and All Ages as Percent of Total Deaths by Cause
- All Ages
 - Total Death Trend by Race and Ethnicity CYs 2015-2020,
 - Black Deaths
 - Percent of Total Deaths
 - Hispanic Deaths
 - Percent of Total Deaths
 - Ages 65+ and All Ages
 - Percent Change in Five Year Period (2015-2020) and Four Year (2015 to 2019)

Below is a summary of some conclusions that the applicant emphasizes from the three referenced tables:

- Seniors aged 65 and older represent 76.2 percent of all deaths in the three counties with the breakdown as Hardee at 70.0 percent (168 out of 240 total deaths), Highlands at 81.5 percent (1,358 of the 1,667 total) and Polk at 75.2 percent (5,550 out of 7,379 total deaths).
- 34.6 percent (2,449 out of 7,076 total) of all seniors (residents age 65+) in the area died from cardiovascular related illness, followed by 19.4 percent (1,372 deaths) of all seniors (residents age 65+) in the area died from cancer, 13.8 percent from respiratory diseases, and 4.1 percent (292 deaths) of all seniors (residents age 65+) in the area died from Nervous System

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Disorders of which Alzheimer's and other forms of dementia are a subset.

- From 2015 to 2020 there was a 29.4 percent increase in total resident deaths in the service area.
- From 2015 to 2019 there was a 12.2 percent increase in total resident deaths (excluding the pandemic year) in the service area.
- From 2015 to 2020 there was a 51.2 percent increase in Black deaths in the service area.
- From 2015 to 2019 there was a 15 percent increase in Black deaths (excluding the pandemic year) in the service area.
- From 2015 to 2020 there was a 112.6 percent increase in Hispanic deaths in the service area.
- From 2015 to 2019 there was a 56.7 percent increase in Hispanic deaths (excluding the pandemic year) in the service area.

The applicant explains that the combined Black and Hispanic cohorts represent more than 21 percent of the service area's total deaths compared to the 16 percent they represented in 2015. Affinity provides the CY 2020 low hospice penetration rates for Black vs. white/non-Hispanic populations (page 26).

- Black hospice admissions (596) only represent 8.9 percent of all SA 6B hospice admissions even though Black residents represent more than 11.4 percent of SA 6B deaths

Affinity indicates studies (page 27 and 28 of the application) to indicate that there are five primary reasons why African Americans are less likely to choose hospice:

1. African Americans have a deeply rooted distrust of the health care system
2. Lower economic status and resources
3. A greater willingness to spend their resources to stay alive
4. Lower care satisfaction among family members
5. End-of-Life care is in disarray

The applicant provides narrative description of prior affiliate experience with enhancing hospice penetration among minority groups, including The Oakland Program, Alameda County, California (Black) and the OLE Partnership (Hispanic), as well as other Affinity/Continuum outreach activities (pages 28-33 of the application).

The applicant discusses the research it has on “Hispanic Hesitation Surrounding Hospice Enrollment” concludes that overall, Hispanics are not using hospice at rates equal to non-Hispanic whites.¹ Specific attributes that may influence hospice enrollment, usually relating to a cultural tendency toward collectivism have been associated with the Hispanic ethnic category. Hispanics are more likely to engage in family decision making on the topic of end-of-life care.

Another example of a Hispanic cultural trait that relates back to hospice enrollment is the open discussion of a terminal prognosis. Hispanics are more likely to practice “prognosis secrecy”. “The rationale behind prognosis secrecy is that sharing such information with the patient or particular family members might be burdensome for them or even hasten the patient’s death.”²

The third cultural influence is the meaning of the word “hospice”. In Spanish, “hospicio” refers to a place such as an asylum related to poverty and abandonment. According to an article published by Barbara Allan, CEO of SRA Research Group, Inc., this word has a negative connotation that sends strong signals that make many Hispanic individuals reject the concept before they have invested any time or effort into learning about it. This, along with the belief that no one can take better care of your loved ones than family, at home, leaves the Hispanic family with feelings of abandonment, failure, and guilt-leaving family out of the equation.

Concerning an initiative to enhance hospice utilization, the applicant states use of a variety of sources, such as Department of Elder Affairs, Office of Vital Statistics and NHA Analysis 2020 hospice admissions data and 2020 provisional deaths in providing the following tables in the application:

- SA 6B Hospice Penetration Rate, Hispanic vs. White/Non-Hispanic (page 25)
- SA 6B Hospice Penetration Rate, Black vs. White/Non-Hispanic (page 26)

Based on the two above-referenced tables, Affinity Care emboldens the following conclusions:

¹ The 2019 literature review published by Margaret L. Rising, JD, MA, BSN, RN, BA in the Journal of Healthcare for the Poor and Underserved titled *Hispanic Hospice Utilization: Integrative Review and Meta-analysis*.

² Rising ML, Hassouneh DS, Lutz KF, Berry P, Lee CS. Hispanic Hospice Utilization: Integrative Review and Meta-Analysis. *Journal Health Care Poor Underserved*. 2019;30(2):468-494. Doi:10.1353/hpu.2019.0042. PMID:31130531

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The white/non-Hispanic cohort has a hospice penetration rate more than 27 points greater than their Hispanic counterpart in SA 6B

- Hispanics are the largest ethnic minority population in SA 6B, 26 percent of the total service area and as much as 45 percent of the population in Hardee County.
- Hispanic hospice admissions (462) only represent 6.9 percent of all SA 6B hospice admissions even though Hispanics represent more than 9.7 percent of SA 6B deaths during the same time period
- The white/non-Hispanic cohort has a hospice penetration rate more than 23 points greater than their Black counterpart in SA 6B

Affinity Care states that it has a culturally competent strategy to address disparities, acknowledgement, religiousness, and treatment preferences, in minority populations, particularly with respect to the Black and Hispanic populations.

Affinity lists in bullet points its Action Items and Conditions Relative to Hispanic and Black Minority Groups:

- The Applicant will open a second office in Highlands County during the first year of operation to enhance access and availability of end-of-life care for the growing Hispanic and Black minority cohorts in Highlands County representing 33 percent of that county's total population. The two SA 6B office locations will be geographically accessible to Hardee County.
- The Applicant will hire team members that reflect the diversity of the minority population groups. This team will include, at a minimum, a nurse, social worker, and chaplain.
- The Applicant will have a bilingual hospice care team that is representative of the minority community. This team will include, at a minimum, a nurse, social worker, and chaplain.
- The Applicant will partner with area hospitals increase awareness of hospice services. A community relations representative will regularly be on site at the area hospitals to meet with hospice appropriate patients and answer any and all questions they or their caregivers may have about hospice and Affinity Care to optimize early enrollment in hospice to enhance quality of life for terminal patients while reducing unnecessary re-hospitalizations.
- The Applicant will partner with existing community resources that service the Black and Hispanic communities such as but not limited to churches and community centers, in order to educate on the benefits of hospice.
- The Applicant will become Medicaid certified so that it may accept any hospice patients, including those on Medicaid.

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- The Applicant will provide 24/7 triage coverage, and physical visits to assess hospice eligibility of patients and admission regardless of ability to pay (charity patients).
- The Applicant will implement its Continuum Palliative Care Program to first provide patients with relief from symptoms and pain, supporting the best quality of life, before the patient terminates treatment and qualifies for hospice. This will significantly improve the perception of hospice, repair the negative image hospice historically has amongst minorities and help to develop an end-of-life care plan designed for the individual. Combined, the approach to hospice treatment, education, and outreach, staffing with culturally like personnel and providing palliative care as a pathway or bridge to hospice, the Applicant will be lifting up the lower minority penetration rates for both Blacks and Hispanics.

Concerning plans to develop and initiate a community paramedic program with local EMS to reduce unnecessary trips to the emergency room, Affinity Care indicates that this is a relatively new initiative and an emerging concept, a collaboration between EMS and the hospice provider. The applicant points out that 911 calls are often uncoordinated for hospice patients and is not beneficial for the hospice patients, the hospice provider, EMS, or the hospice if the patient is a readmission within 30 days. Affinity Care provides three diagrams (pages 35-37 of the application) to show a visual depiction of the process that takes place when a hospice patient's condition suddenly changes or deteriorates. The applicant offers four undesired consequences of this depicted pathway. Affinity proposes a collaborative partnership between hospice and EMS to support that patient and family in the home setting, averting unnecessary transports to the emergency department.

To address collaboration between the community paramedic program and the applicant, CON application #10685 bullets some of its Schedule C conditions (page 39 of the application).

- The Applicant will develop and initiate a community paramedic program in coordination with local EMS providers, during year two.
- The Applicant will provide funding to local EMS providers for community paramedics, beginning in year two.
- The Applicant will provide education and training of community paramedics on the program and criteria.

Concerning Specialty Disease Clinical Programs - Affinity states it will incorporate clinical pathways by using Homecare Homebase, which

has built in clinical pathways to ensure the care is held to acceptable standards. The applicant provides the following for greater detail on the three programs.

Concerning a detailed program and outreach to enhance utilization for dementia and Alzheimer's Disease, nationwide data concerning Alzheimer's through the 2021 Alzheimer's Disease Facts and Figures, Alzheimer's Association is addressed. Specific to race and ethnicity, Affinity Care indicates an October 2020 Alzheimer's Association study pertaining to the impact of race or ethnicity on hospice quality of care, with some (but not all) study conclusions being as follows:

- Half of Black Americans and 33 percent of Hispanic Americans report having experienced discrimination when seeking health care
- 66 percent of Black Americans and 39 percent of Hispanic Americans believe that their own race/ethnicity makes it harder to get care for Alzheimer's and other dementias
- Minorities feel they not being listened to because of their race/ethnicity

The reviewer notes that the stated survey(s) and conclusions do not appear to be necessarily specific to SA 6B area residents, per se, but broadly address minority groups nationally.

To address Alzheimer's/dementia initiatives in hospice care, Affinity bullets some of its Schedule C conditions on the application's page 44:

- The Applicant will implement the Affinity Alzheimer's and Dementia Care program which was designed to bring the latest innovations in end-of-life care to Alzheimer's and dementia patients and their caregivers.
- All staff will be required to complete 2.5 hours of Continuing Education Units (CEUs) covering evidence-based protocols for behavioral symptoms, in addition to Florida's minimum requirement.
- All patients in this program will be provided with music therapy and a textile box.
- The Applicant will offer a specifically tailored caregiver support group for those with loved ones battling Alzheimer's and dementia.
- Affinity Care will work with area facilities, such as nursing homes, who have patients with dementia, to educate their clinical staff on treatment criteria and programs.

Affinity addresses its Cardiac Care Program by stating that cardiac disease is the leading cause of death in SA 6B accounting for 22

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percent of all deaths in 2019 and 23 percent in seniors over the age of 65. The applicant contends it will increase awareness and provision of services by collaborating with community cardiologists and other cardiac professionals on an ongoing basis to assist in patient assessments, education, and provision of services. Affinity addresses its Pulmonary Care Program by stating that respiratory illness accounts for 1,136 (12.2 percent) of all SA 6B deaths in 2019 and 975 of these deaths were seniors over the age of 65. The applicant contends its program will:

- Increase the awareness among healthcare providers and SA 6B residents about hospice care for patients confronted with pulmonary diseases.
- Employ a respiratory therapist upon certification who will manage the patient’s respiratory plan of care and provide respiratory related education to the patient, their family and to the hospice team and the community.
- Will collaborate with a community Pulmonologists and other pulmonary care professionals on an ongoing basis to assist in patient assessments, education and provision of services.

Affinity Care lists the writers of its letters of support and provides excerpts of these letters on the application’s pages 73-84. The complete letters are in application’s Volume I, Tab 5.

Affinity concludes its discussion here with its Year One and Two Projected Admissions by Quarter and Projected Admissions by Terminal Illness Year One and Two. The applicant’s projected admissions by terminal illness are shown below.

**Affinity Care of Central Florida
Admissions by Terminal Illness and Under/Over Age 65**

Disease	Year One Admissions	Year Two Admissions
Cancer	27	66
Non-Cancer	154	374
Total	181	462
Under 65	19	23
Over 65	169	439
All Ages Cohort Total	188	462

Source: CON application #10685, pages 85 and 86

Brevard HMA Hospice, LLC (CON application #10686) generates a table with portions of the Agency’s January 2023 need projections specific to SA 6B. Brevard provides additional charts to show that the population growth total in 6B will increase 16.19 percent from 2020 to 2030 and 18.11 percent above the 2020 totals. The aged 65 and older population is forecasted to grow at an even more rapid pace with increases between 13 percent and over 37 percent from 2020 to 2030,

making the total districts growth 16.19 percent during this time along with a 33.61 percent increase in the 65 and older population. Brevard includes 2020 through 2027 population growth in this section to cover the immediate growth.

Brevard offers a table stating to show SA 6B's Veteran population to support the area's need for community outreach programs and specialized programming (We Honor Veterans) that the applicant is committed to providing. The applicant notes that the Veteran population accounts for a significant portion of the total population with about 55 percent being over the age of 65. The reviewer notes that the table includes District 1 counties, with 'District 6B Total' hi-lighted in bold print.

These SA 6B population growth and population demographics tables are summarized below, regarding particularly the age 65+ population:

- Page 61 of the application
 - Age Cohort Growth 2020-2030
 - Total Population Growth by Age/2020-2030
 - Age 65+ (an increase of 62,777 age 65+ residents)
 - Age 65+ (an increase of 33.61 percent age 65+ residents)
- Page 61 of the application
 - Total Population Growth by Age/2022-2027
 - Age 65+ (an increase of 14,221 age 65+ residents)
 - Age 65+ (an increase of 7.4 percent age 65+ residents)
- Page 63 of the application (2022-2025)
 - Veteran Population of Escambia, Okaloosa, Santa Rosa and Walton Counties. (Appears to have SA 6B's total)
 - Total Population by Race /2022-2025
 - A total of 131,198 Black residents (all age cohorts) – representing 15.25 percent of all Service Area 6B County residents by 2025
 - A total of 224,102 Hispanic residents (all age cohorts) – representing 24.79 percent all Service Area 6B County residents by 2025

Brevard states that (per 100,000 residents) in 2019, cancer and cardiovascular disease were SA 6B's leading causes of death. The applicant offers a table of the Hospice Projection for SA 6B providers to support its contention that the area needs another market provider with the capability to reach new patients. Brevard states that the current area providers have recently been unable to keep pace with the dramatic increase in need demonstrated in the market. Brevard

contends that none of the existing providers, or new providers, replicate LHC Group's deep post-acute care experience and expertise that complement hospice services along the care continuum. The applicant states that the LHC Group knows how to leverage its technology, clinical experiences, and market presence to drive organic growth in market penetration rates to reach patients at the right time in their care journey for hospice services.

Brevard produces a chart of new Florida hospice programs year one and two market share on page 66 of this application and states that when assessing its own projections, it has factored in its home health agencies in the present SA 6B market where it already serves over 1,800 patients annually. Brevard provides the volume and quality assessments by county of its home health agencies in 2020 showing that their average Quality Star Rating was 4.4375 and average Patient Survey Rating was 4.375.

Brevard contends that LHC Group typically converts around 15-16 percent of its home health volume to hospice where it has collocated home health and hospice and believes that this organic growth will help reduce the need gap.

Brevard assumes when estimating the need beyond the January 2023 AHCA report that:

- Assumed the death rate would remain constant as applied to the 2023 need projections
- Applied the statewide use rates for hospice as applied by AHCA for the January 2023 planning horizon

The applicant states its projections use the following factors in considering the patient admission and patient days estimates:

- 1) Uses the AHCA need forecasts as a guidepost on need within her projection time frame.
- 2) Generally, is in keeping with previous experiences for new hospices in Florida, including District 6B;
- 3) Reflects initial ramp up of operations.
- 4) Factors in the existing LHC Group presence in the region, including:
 - Annual HHA volumes and Medicare specific volumes.
 - Existing office/employee resources; and
 - Room to improve HHA patient conversion through co-located hospice services.
- 5) Considers existing provider performance and qualities.

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- 6) Considers area demographics and (Mederi) Brevard HMA Hospice, LLC’s ability to service.

The applicant provides the following table based on these factors:

Brevard HMA Hospice, LLC (Mederi Hospice)	Patient Admissions	Patient Days (ALOS 77)
Year One	294	20,038
Year Two	411	30,553

According to Brevard, this leaves a total of 103 patients in year one and 97 patients in year two to be allocated between the existing care providers beyond their existing volumes.

Area Providers	Year One	Year Two
Projected Hospice Need	7,357	7,468
Mederi Hospice	294	411
District 6B Annual Hospice Volume (Through 6/30/21)	6,960	6,960
Remaining Need Allocated to Existing Providers	103	97

Empath Hospice, LLC (CON application #10687) contends that the general need for an additional hospice in SA 6B is supported not just by the Agency’s Fixed Need Pool but by the following:

- The large and growing population in the area
- The aging population in the area
- Increasing numbers of deaths of the three-county area residents
- The deficit of service to the 65+ non-Cancer population in AHCA’s calculation of need and
- The low death service ratios for hospice services, compared to other Florida counties

Empath Hospice, LLC contends that Service Area 6B’s greatest unmet need is in the 65 and older age group with non-cancer diagnosis and provides a number of charts from the Agency’s Need Projections For Hospice Programs, August 2021, Florida Health CHARTS and Health Pivots Datalab (pages 35-48) to support the given existence of numerical need for another hospice program to serve the three-county area. The applicant indicates need is also supported by:

- The large and growing population in the area
- The aging population in the SA
- Increasing number of deaths of the SA counties residents
- The deficit of service to the 65+ non-cancer population in ACHA’s need calculation; and
- The low death service ratios for hospice compared to other Florida counties.

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Empath Hospice, LLC states that it determined what general end-of-life services and specialty programs were lacking in Hardee, Highlands and Polk Counties by developing a community needs assessment tool, key informant survey, that was completed by approximately 20 key individuals and organizational representatives throughout the service area. Several community health needs assessments that are specific to the tri-county area were reviewed including:

- Hardee County Community Health Improvement Plan, 2019 – 2023
- Florida Department of Health - Hardee County Strategic Plan, 2014 – 2017
- Community Health Assessment, Hardee County, January 2019
- Florida Health Polk County Community Health Assessment, 2021
- Florida Health Polk County Community Health Assessment, 2020
- Health Council of West Central Florida, Inc - Highlands County Community Health Assessment, 2015
- Florida Department of Health- Highlands County Community Health Assessment, 2020- 2025
- Lakeland Regional Health Community Health Needs Assessment, 2018- 2021
- Baycare Community Health Needs Assessment Implementation Plan, Polk County 2020- 2022
- Baycare 2020 Report to The Community
- Baycare Community Health Needs Assessment, 2019
- Community Report, HCA Healthcare East Florida Division
- Advent Health Lake Placid 2019 Community Health Needs Assessment
- Advent Health Wauchula 2019 Community Health Needs Assessment
- Advent Health Tampa 2019 Community Health Needs Assessment
- Advent Health Sebring 2019 Community Health Needs Assessment

Empath provides copies of the above Community Health Needs assessments in Exhibit J. The applicant states Empath’s representatives met or spoke with nearly 100 key individuals and organizations in SA 6B representing a broad range of general and special populations in the area, including representatives from:

- ✓ Florida Department of Health
- ✓ Hospitals
- ✓ Nursing Homes
- ✓ Assisted Living Facilities

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- ✓ Physician Practices
- ✓ University Representatives
- ✓ Disease-Specific Outreach and Advocacy Organizations
- ✓ Minority Population Outreach Organizations
- ✓ Veterans Outreach Organizations
- ✓ Local Businesses

Empath provides a list of Key Informants in Exhibit A of this application. The applicant states that the Key Informant Survey included the following five questions related to the continuum of care for residents with chronic and advanced illness:

1. What is your role and responsibilities within your organization?
2. What do you consider to be the strengths and assets of the Polk, Hardee or Highlands community that can help improve chronic and advanced, And terminal illness?
3. What do you believe are the three most pressing issues facing those with chronic, advanced, and terminal illness in Polk, Hardee or Highlands counties?
4. What are the strategies that could be implemented to address these barriers?
5. Are there any additional issues that should be considered for assessing the needs of people facing chronic, advanced, and terminal illness?

Below is a brief description of each Empath Hospice, LLC 's seven listed gaps in end-of-life care for SA 6B residents, followed by a brief explanation of the applicant's proposed solution(s) to meet the gap(s):

Need for Disease-Specific Programming

- i. Non-cancer 65 plus group is the greatest unmet need.
- ii. Cardiovascular diseases are the number one cause of death for residents of the three-county area.
- iii. High cardiovascular disease mortality rates, (higher than the state average).
- iv. Respiratory diseases, end stage renal disease and Alzheimer's disease/other dementia diseases were top 10 leading causes of death in SA 6B.

Lack of Available Resources for Rural and Low-Income Populations

- i. A larger percentage of the populations in the three-county area lives in poverty then the statewide average.

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- ii. Specifically, 22.1 percent of Hardee, 15.8 percent of Highlands and 14.0 percent of Polk Counties' populations live below the poverty level and has limited access to coordinated care, including hospice.
- iii. The median household income in the three county areas lower than the statewide average.
- iv. A higher percentage of the area residents are uninsured compared to the statewide average.
- v. The three-county area covers a large geographic area—3,452.24 square miles. The population density in Hardee and Highlands Counties is low, meaning the area is rural and very spread out which results in unique challenges for reaching the populations of these areas.
- vi. A large number of households do not have internet access or computers, creating challenges in information dissemination in such a large geographic area.

Need for Ethnic Community-Specific Programming

- i. Nearly 25 percent of SA 6B's population is Hispanic, 43.6 percent of Hardee, 21.18 percent of Highlands and 24.6 percent of Polk County population classified as Hispanic.
- ii. There is a large agricultural migrant population in this area
- iii. Surveys and assessments indicate a lack of knowledge in Hispanic/Latinx community regarding end-of-life care.
- iv. Hispanic population has low debt service ratio/use of hospice due to factors including lack of regular physician and medical care, lack of information and cultural barriers
- v. There are nearly 200,000 black residents in the three-county area, with a larger proportion of this population being 65 years or older as compared to the state
- vi. Hospice by black residents is very low indicating a lack of utilization of hospice services. Cultural barriers and lack of education regarding end-of-life care are likely contributors to the low hospice utilization by black residents of the three-county area.

*** Need to increase hospital discharges to Hospice**

- i. Empath contends that approximately one third of area Medicare enrollees who died within six months of an acute care hospital discharge did not receive hospice.
- ii. Just 25 percent of Medicare enrollees who died within six months of an acute care hospital discharge were discharged directly to Hospice.

*** Need for education/Absence of Continuum of Care Navigation**

- i. Navigation of the healthcare system was highlighted as a key driver that will bring positive improvements to overall continuum of care in Service area 6B.
 - ✓ Hardee, Highlands and Polk County residents are not accessing hospice services at rates consistent with the rest of the state and either access hospice programs very late in the disease process or not at all.
 - ✓ There are cultural and geographical barriers to access of a full continuum of health care services, including end of life and hospice services, given the rural nature of much of the three-county area.

*** Transportation Presents Serious Challenges in Accessing Care**

- i. Transportation challenges are a barrier to seeking medical care, particularly given the large geographic area and the largely rural populations and Hardee and Highlands counties.
- ii. Lack of widespread public transportation in much of the area compounds the problem, particularly for people with chronic, advanced, and terminal illness.

Empath Hospice, LLC includes its list of key informants and its ‘Empath Health Community Health Needs Assessment for Hardee, Highlands, and Polk Counties’ in the application’s Exhibit A.

Empath describes its solution for what it considers a gap in care for patients ages 65 and over who do not suffer from cancer and indicates it will deploy a number of disease specific programs in the service area including:

- Empath Cardiac CareConnections and Advanced Heart Failure Program
- Empath Pulmonary CareConnections Program
- Empath End Stage Renal Disease CareConnections Program
- Empath Alzheimer’s/Dementia CareConnections Program
- Comprehensive Wound Care and Ostomy Program

Per Empath, the Cardiac CareConnections and Advanced Heart Failure program aims to reduce emergency department visits and hospital readmissions, provide management of symptoms including administering and monitoring these medications such as diuretics and inotropes, crisis management, family education, spiritual and emotional support, and bereavement services. Empath’s cardiac care Team will be led by a certified heart failure Advanced Registered Nurse

Practitioner (ARNP) and includes hospice nurses who are specifically trained in the heart failure disease process and advanced in-home treatments for symptom management. The ARNP provides expert symptom management in the home setting and

- collaborates with the primary cardiologists and/or primary care physician and the hospice physician to treat heart failure symptoms expeditiously, using current evidence-based practice guidelines;
- reviews and advises care plans for hospice patients;
- makes home visits, as needed; and
- is available 24/7 to assist in for crisis symptom management.

Empath Pulmonary Care Connections Program

The applicant states that the goal of this proposed end-stage pulmonary disease programming will be to keep these patients as comfortable as possible by helping to ease symptoms. Empath states that an integrative team of specialists will focus on helping the patients breathe easier, and aims to help patients obtain relief from:

- Chronic obstructive pulmonary disorder – COPD
- Emphysema
- Bronchiectasis
- Pulmonary fibrosis
- Chronic respiratory failure
- Cystic fibrosis
- End-stage tuberculosis

Empath states that its Pulmonary Care Connections Program team includes board certified physicians, respiratory therapists, and specially trained nurses, in addition to general hospital team members such as social workers, chaplains, ancillary therapist, trained volunteers and bereavement counselors. Empath proposes to provide specialized services for patients with advanced lung disease, including:

- Pain and symptom management to reduce hospital visits
- Acute symptom management or respite in care centers
- Medication and equipment management
- 24/7 medical, emotional, and spiritual support
- Support and education for caregivers
- Integrative medicine and palliative art therapies to provide stress relief and reduce anxiety
 - Acupuncture
 - Reiki
- A plan of care based on the individualized needs and goals
- High-flow oxygen therapy - Airvo and Bipap
- Pleurex for chest drainage

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- Tracheostomy care
- Compassionate ventilator withdrawal
- Ancillary therapy services- physical, occupational, speech therapy and registered dietitians

Empath End Stage Renal Disease Care Connections Program will focus on early identification and treatment for patients who desire to continue on dialysis despite six months or less prognosis as well as those who are no longer considering dialysis as a treatment option. These patients include those with:

- A history of diabetes a creatinine clearance of 15 ml/min or less and not receiving dialysis
- A patient with a creatinine clearance of 10 ml/ min or less and not receiving dialysis
- Patient with end-stage renal disease on hemodialysis with any of the following: uncontrolled chronic comorbid conditions, advanced stage cancer, significant functional decline, requiring assistance with activities of daily living or frequent hospitalizations due to poor vascular access for dialysis

Empath assures that the interdisciplinary team will assess goals of care as well as achievement of symptom control on a regular basis. The applicant states that under hospice services the dialysis treatments will be continued contingent on:

- Goals of care
- Quality of life achievements
- Determination that the treatment continues to be reasonable and necessary to control symptoms
- Palliative performance status scores

Empath Alzheimer's/Dementia Care Connections Program

Empath shares that this program focuses on providing education and support to patients and their caregivers with the goal of improving quality of life while managing the symptoms of dementia. The applicant states the program focuses on patients with:

- Alzheimer's
- Vascular dementia
- Lewy body dementia
- Frontotemporal lobar degeneration

The applicant states its services of massage music therapy for soothing and relaxation are used to bring comfort for the dementia/Alzheimer's patient. Empath Hospice offers that it includes music in caregiving and caregiver support/coffee breaks for caregivers that may suffer

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severe burnout and depression. Empath states this program provides specialized services including:

- Medical, emotional, and spiritual support available 24 hours a day seven days a week, expert physicians, nurses, social workers, spiritual care counselors, and volunteers all with advanced dementia specialty training
- Advanced care planning, licensed clinical social workers trained to guide families through end-of-life planning,
- Caregiver support coffee breaks- educational facilitators and fellow caregivers gather monthly for advice, information and support
- Respite stays in our care centers-allowing caregivers short-term relief from their duties
- Medication management- maximizing quality of life and patient comfort
- Caregiver education through the Florida Gulf Coast chapter and the Alzheimer's Association and community resources available for caregivers
- Palliative arts including
 - Music, massage, pet and aromatherapy and reiki
- Volunteer support including companionship, errand running, respite, transportation and other special activities
- A plan of care based on individualized needs and goals

Empath states its care team includes a wide range of specialized staff including board certified physicians, specially trained nurses and other specially trained staff members as needed. The applicant assures that its care team will include certified dementia practitioners that receive special training and educational programming through the National Council of certified dementia practitioners NCCDP. The applicant notes that the goals of this specialized certification are:

- To enhance knowledge of safe and effective best practices
- To expand knowledge through training and education
- To provide better quality of care for dementia patients
- To validate Alzheimer's and dementia knowledge and skills
- To increase credibility of profession and recognition appears
- To increase caregiver self confidence

Comprehensive Wound Care and Ostomy Program

Empath contends that this program will include experienced registered nurses with a minimum of a bachelor's degree who have completed special education beyond basic nursing education and are board certified in the nursing management of patients with wound and ostomy care needs. Further, these nurses will partner with health care consumers, families/caregivers, and other health care providers and members of the health care team to coordinate an individualized

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wound, ostomy, and/or continence care across the continuum of care, and will:

- Coordinate care with the patient, Hospice case manager, caregiver, physicians, and outside wound care specialists to enhance the treatment plan or identify alternative options for wounds or other complications/complex problems that are difficult to manage
- Develop evidence based wound care assessment guidelines for staff
- Provide education on product choices to Hospice staff, caregivers, and community partners
- Provide consult visits with hospice case managers for patients with complex wounds/ostomies/drains
- Collaborate with Empath Hospice nursing staff regarding recommendations for support/pressure redistributions surfaces and specialty DME to promote optimal skin protection and healing
- Promote optimal wound management environment to prevent deterioration of existing wounds and the development of additional wounds or complications
- Partner with Empath Hospice/Empath Health Informatics Department to develop an informatics review/chart auditing process to identify and promote best practices in providing wound care

The applicant states it will make use of its sister-organization TideWell Hospice's extensive Wound Care Program by offering monthly classes to the Empath Hospice team. Further, the expansive Suncoast and TideWell Wound Care and Ostomy programs will be the basis for the development of the Wound, Ostomy and Continence Nursing and Compression Therapy Program in Hardee, Highlands, and Polk Counties. Empath states that it will partner with various organizations such as Indigent Healthcare Plan of Polk County and the Alzheimer's Association to conduct joint community educational programs about chronic illness, advanced care planning, grief, and hospice care.

Empath dedicates pages 69—76 to present the median incomes and lack of access to technology in the service area. Empath states its proposed mobile care unit and deployment of remote/virtual technology platforms will enable its care teams and outreach liaisons to reach residents and patients in a variety of ways to ensure their needs are met.

Empath offers additional excerpts relative to rural outreach on pages 75 and 76 of the application. Empath shares that it will employ a multifaceted strategy in order to help increase awareness regarding end-of-life services and advanced directives as that there is a lack of

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knowledge in the Hispanic/Latinx community in the three-county area regarding end-of-life care. Empath states that the Hispanic population has low utilization due to factors including lack of regular physician and medical care, lack of information and cultural barriers. Empath proposes to address these by:

- ✓ Recognizing that education and outreach is an important component of increasing access to end-of-life services for the Hispanic population, the applicant will utilize a mobile care unit (Empath mobile access to care) to go directly to areas where the Hispanic/Latina X population lives and works. Empath mobile access to care will provide education, outreach, caregiver support and advance directives counseling to this population where they are, which will increase the reach of these programs as they will be brought to the people rather than the people having to navigate seeking them out. The mobile unit will include staff members who speak Spanish.
- ✓ Empath Hospice will work to connect with Hispanic community organizations and participate in events where it will provide education on the grief process, advanced care planning, hospice services, tips for caregivers and legacy writing.
- ✓ Organizing a care council that will include members from the Hispanic community to provide feedback and guidance with regards to outreach to their communities.
- ✓ Providing bilingual mindful meditation phone support, to allow caregivers to call and listen to a prerecorded guided meditation, as well as a live call-in option.
- ✓ Empath Hospice will utilize two community partnership specialists (Hispanic, African American, general, and migrant agricultural) to conduct community engagement activities, facilitate education, and to cultivate trust and partnerships.

Empath Hospice states that it has extensive experience with ethnic based community engagement through the use of Suncoast Hospice programs. Empath's strong relationships include the Hispanic Outreach Center, Hispanic Leadership Council, Latinos Unidos por un-Nuevo Amanecer, and Coalition of Spanish Speaking Ministers Well help develop local relationships in Hardee, Highlands and Polk Counties.

The applicant discusses its community outreach specialists relationships with community leaders, faith-based organizations, law enforcement agencies and various community groups to connect with the African American community. Empath contends that his successfully cultivated strong partnerships with The Black Health Equity Alliance, National Council for Negro Women St. Petersburg Section, The Naomi and Titus Covenant Alliance Ministries and City of

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St. Petersburg Parks And Recreation – Enoch Davis Center. The applicant says it will seek opportunities to build stronger ties within the African American community, which will result in increased access to end-of-life care to SA 6B's African American population.

On pages 80 and 81 of the application, Empath presents three figures that speak to the Hispanic/Latino population in SA 6B. The applicant uses census data/charts showing they are expanding Latino/Hispanic population. Empath provides Figures on pages 82 through 86 from Florida Health Charts and The Agency's Inpatient Discharge Database and Health Pivots Datalab that address the increase in population in service areas 6B of African Americans. The information the applicant's data suggests there is a significant disparity in discharges to hospice based on patient racial/ethnic group differing significantly by county.

Empath states that the disparity use of hospice by racial/ethnic group is also evident in the analysis of the death service ratio and Medicare enrollee population of the area racial/ ethnic group. The applicant states that the Hospice death service ratio for Hispanics and black patients was significantly lower in 2020 than the white population which it states is indicative of a disparity in access to Hospice services. Empath states that key informant surveys and other area community health needs assessments identified several barriers to care and disparities for the Hispanic/Latinx Black populations in the area. The Florida Department of Health In Polk County's 2020 Community Health Assessment of Racial and Ethnic Minorities -The Hispanic Population and The Black Population is on page 87 of the application.

The applicant states that the Highlands County 2015 community health assessment found that black residents in that county experienced death from cancer, heart disease, diabetes, stroke, and HIV/aids at higher rates than white residents. The applicant produces a table on page 88 sourced from the Florida Department of Health, Bureau of Vital Statistics that compares 2013 Highlands County's major cause of death by race compared to the State of Florida. Additional key informant surveys and letters of support for the need for racial/ethnic specific programming. Empath states that it will work to expand its network of local community partners and identify outreach opportunities within the community to have a positive impact on local areas Hispanic/Latinxs and Black communities understanding and willingness to access hospice services.

Empath next addresses the need to increase hospital discharges to hospice offering the solution that it will employ a number of programs and outreach activities that include development of dedicated facility teams based on its program and Suncoast and TideWell's proven

services. A detailed description including figures 42 - 49 on pages 90 through 97 support the need for this intervention to increase hospice use. The applicant presents letters of support excerpts on page 97 from BayCare Health System and Winter Haven Hospital.

Need for education/Absence of Continuum of Care Navigation

Navigation of the healthcare system was highlighted as a key driver that will bring positive improvements to overall continuum of care in SA 6B.

- ✓ Hardee, Highlands, in Polk County residents are not accessing hospice services at rates consistent with the rest of the state and either access hospice programs very late in the disease process or not at all
- ✓ there are cultural and geographical barriers to access of a full continuum of health care services, including end-of-life and hospice services, given the rural nature of much of the three-county area.

Transportation Presents Serious Challenges in Accessing Care

Transportation challenges are a barrier to seeking medical care, particularly given the large geographic area and the largely rural populations and Hardy and Highlands counties. Lack of widespread public transportation in much of the area compounds the problem, particularly for people with chronic, advanced, and terminal illness.

Other Specialized Programs That Will be Implemented

- ✓ Specialized Veterans Programming -Empath will participate in We Honor Veterans and offer a Veterans Living With Service-Related Illness Support Group and will also offer its Veterans Serving Veterans Program and the Veterans History Project. The applicant will also plan a Veteran's Mental Health Day Retreat To increase awareness of grief support, community connections, knowledge of services and to honor their service
- ✓ **Specialized Pediatric Programming**
The applicant intends to build on its existing relationship with Saint Joseph's Children's Hospital which treats patients from all over central Florida including the proposed three-county area. Empath will implement its own PC: TFK program to serve the needs of pediatric patients with chronic, advanced, and terminal illness in SA 6B. This program the applicant states provides palliative care and specialized support services to children with life threatening illnesses in their families which include:
 - Pain and symptom management

- Therapeutic counseling for child and family
- Respite care
- Personal care
- Nursing care
- Bereavement counseling

✓ **Community Partnership Liaisons**

The applicant addresses community partnership liaisons and professional liaisons to provide outreach to clinical partners. The applicant states it will utilize a collaborative approach with its professional liaisons and community partnership specialists to ensure access to education about end-of-life care, advanced care planning, and grief support.

✓ **Comprehensive Integrative Medicine Approach**

Empath Hospice discusses its comprehensive integrative medicine approach that it indicates will draw on the expertise of its sister-hospices to offer integrative medicine which includes:

- Acupuncture
- Mind body practices
- Breathwork
- Guided imagery
- Acupressure
- Cupping

Palliative arts which include:

- Licensed massage therapy
- Reiki
- Music therapy
- Aromatherapy
- Horticulture
- Pet visits

✓ **Mobile Dispatch Application**

Empath Hospice states its mobile dispatch application will utilize technology to enhance response times for patient/family/community visit needs during evenings, at nights, and weekends. The applicant specifies that this will:

- Allow triage clinicians the ability to view field clinicians on a map to improve response time to the community, by sending the clinician who is closest to the patient location
- Increase responsiveness to the needs in the community by allowing the Hospice team to view where the field clinicians are located via GPS tracking

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Empath believes that having this application for the clinicians to download on his/her mobile phone will improve the following:

- Increased responsiveness to patient/family/community partners
- Increased patient/family/community satisfaction with Suncoast care and responsiveness
- Decrease travel time for clinicians
- Increased safety for staff, as triage in leadership staff are able to note if a staff member has remained idle in one area longer than expected

✓ **“Doctor Direct” Program**

The applicant states it will offer direct access to an Empath Hospice physician 24/7 for any physician in the community who has questions about a patient who might need hospice care.

✓ **Jewish Hospice Program**

Empath states its Jewish Hospice program will offer Jewish Hospice certification and training, partnerships, and a grief support group series for people in the Jewish community.

✓ **SAGECare Platinum Level Certification**

Empath states it will work to obtain SAGECare platinum level certification which it asserts is an organization dedicated to improving the lives of LGBTQ elders.

✓ **Perinatal Loss Program**

Empath states it will offer its Perinatal Loss Program established by Suncoast Hospice for four purposes:

1. to provide supportive counseling and education while parents are deciding if they wish to continue the pregnancy.
2. to be present during the birth to support the parents and other family members no matter what the outcome of the pregnancy
3. to provide bereavement counseling to families after their loss, and
4. to provide hospice care with the delivery results in a live birth, for however long that child may live.

The applicant states that a recent addition to this program is the Miscarriage Program. This program addresses mothers who are potentially going to miscarry by providing appropriate containers to store and cremate remains and families will have access to Suncoast Hospice’s bereavement counseling post-miscarriage and it will add it in SA 6B.

✓ **“Let There Be Music” Program**

Empath Hospice states that it will seek partners to initiate its “Let There Be Music” Program in the three-county area. The program goals include:

- ✓ Provide music-based techniques for helping caregivers engage with their loved ones and facilitate caregiving
- ✓ Provide positive experiences for persons with Alzheimer’s disease and related disorders and their caregivers
- ✓ Provide opportunities for caregiver support, and
- ✓ Provide resources in the community for Alzheimer’s disease and related disorders support.

The applicant states that this music therapy-based program will be provided by board-certified music therapists and include three sessions, each with a different educational goal including:

- Session 1: Moving Through The Day; Educational goal: understand how to incorporate songs/ music into the cue tasks and provide a time structure for activities of daily living.
- Session 2: Match And Move- Educational goal: understand how to use the intensity of songs/ music to modify the mood and activity level of persons with dementia.
- Session 3: Quality Of Music-Educational goal: learn music based or music supported activities to enhance quality of life.

✓ **EverSound Program**

Empath Hospice’s EverSound Program is designed to enhance hearing for patients who have suffered hearing loss and improve their quality of life. This works:

- A transmitter is used to transmit voice or sounds to one or two headphones
- The headphone has volume control to make it louder or softer depending on the patients need
- In addition to voice, phones, tablets, an even TV’s may be connected to the headphones.

The applicant states when its typically utilized:

- The headphones are worn by the patient to better hear what is being said such as:
 - Conversation with a family member or friend
 - During TideWell team member care visits (e.g. RN, SW, chaplain, CNA, music therapist)
 - Spiritual services
 - Listening to music live or recorded.

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- Enjoying past music memories with others (wedding songs, nostalgia)
- Listening to iPad/ phone recorded music
 - Favorite TV shows/ movies
 - Family video memories with voice recordings on TV, tablets, phones
 - Two headsets can be utilized to share a hearing experience as described previously

Empath Hospice provides tables (Figures 51 and 52 on pages 116 and 117) based on the Agency’s hospice projections and projects that it will achieve a five percent market share in year one and six percent in year two. The reviewer reproduces Empath’s Figure 53 showing its projected admissions in the table below.

**Empath Hospice Projected Utilization
by Age Cohort and Disease Category
Years One-Two (2023-2024)**

	Year One	Year Two
Cancer Under 65	22	27
Cancer 65+	33	40
Non-Cancer Under 65	19	23
Non-Cancer 65+	297	361
Total Admissions	371	451

Source: CON application #10687, page 117, Figure 53.

Florida Hospice, LLC (CON application #10688) asserts that along with the Agency’s published need, there is a growing population of Medicare beneficiaries. The applicant produces a table on page 25³ showing that the national utilization of hospice Medicare beneficiaries continues to grow across each age group. The applicant contends there will be a significant increase in the age 75 years and older population extrapolating that, with the AHCA projected growth of 15 percent by 2026 (in the age group 65 and older), there is a projected growing need for additional hospice services in the SA 6B.

Florida Hospice, LLC notes that because data on race and ethnicity of hospice patient specific to SA 6B’s three counties is not available, it uses the most recent US Census (2019) estimates of percentage of population by race and ethnicity and the AHCA population estimates for 2021 for its population by race and ethnicity estimates. Florida Hospice concludes that SA 6B has a lower percentage (13.2 percent) of Black or African Americans relative to Florida’s 16.9 percent. The SA’s percentage of Hispanic or Latino populations (25.7 percent) is roughly

³ MedPac Report to Congress, Medicare Payment Policy, March 15, 2021 and Medpac analysis of data from the Common Medicare Enrollment file and hospice claims data from CMS. U.S. Census Bureau Quick Facts (V2019), July 1, 2019 *Missing other races or mixed races

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equivalent to the Florida total of 26.4 percent. However, in Hardee County, the Hispanic or Latino population is 41 percent of the County’s total.

Florida Hospice, LLC conveys its intent to serve the Black or African American, Hispanic, or Latino, disabled and chronically or terminally ill persons in need of medical, nursing, social or therapeutic treatment and assistance to relieve symptoms and comfort support patients with a life expectancy of six months or less. The applicant assures it will provide these services to its patients in the most convenient and cost-effective setting possible – at the patient’s home. It will also serve patients in free-standing hospitals, nursing homes or other long-term care facilities.

Florida Hospice notes there is an increasing gap between hospital utilization of Medicare decedents by race and ethnicity and states there is significant room to increase the overall utilization of hospice services in underserved population. The applicant states it utilize targeted outreach with case managers and social workers to identify patient needs and referrals in the underserved areas to make it easier for this population to access a full range of customized healthcare services, in the privacy of their own homes.

Florida Hospice states that with more than 17 percent of the population living in poverty, and nearly 19 percent of persons under age 65 without health insurance, a significant segment of the population is poor. The applicant presents the table below to support that SA 6B has a large population of persons living in poverty and the “medically indigent.”

Selected Socioeconomic Characteristics of the Population

County	Median Selected Monthly Owner Cost-With a Mortgage 2015-2019	Median Selected Monthly Owner Cost-Without a Mortgage 2015-2019	Median Gross Rent 2015-2019	Median Household Income (In 2019\$) 2015-2019	% Persons Living in Poverty	% Persons without Health Insurance Under Age 65 Years
Polk	\$1,251	\$423	\$978	\$50,584	14%	17.1%
Hardee	\$1,020	\$312	\$740	\$38,682	22.1%	19.9%
Highlands	\$999	\$342	\$816	\$40,942	15.8%	20.4%
Florida	\$1,503	\$505	\$1,175	\$55,660	12.7%	16.3%

Source: U.S. Census Bureau, Quick Facts (V2019), July 1, 2019.

Florida Hospice, LLC states that Residential Hospice has a proven track record in Michigan, Illinois, and Pennsylvania of providing hospice services to the socioeconomically disadvantaged. The applicant provides an endorsing excerpt from Georgia Callis, President

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of Guardian Care stated to be one of the largest Guardianship Companies in the state of Michigan.

Florida Hospice concludes by reiterating its commitment to serve the Hispanic population, Black population, aging adults, migrant workers, the uninsured, working poor, persons living in poverty, low-income elderly and the homeless.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) notes that the last hospice to be approved in the SA 6B was VITAS Healthcare Corporation of Florida in June 2014; thus, there has been no change in hospice providers for over seven years. The applicant states that since Hope Hospice and Palliative Care delicensed its 6B program in September of 2012, there has been no change in the number of service area hospice agencies in over the last 13 years. Odyssey uses AHCA projections in Tables 1 - 3 to support its assessment that the age group of 65 and older will by 2030, become one quarter of the total service area residents. The applicant notes about 45 percent of the persons over the age of 65 are in the 75 and older demographic and by 2030, this proportion is expected to increase to about 47.5 percent. Therefore, additional hospice services tailored to elderly individuals, especially those over the age of 75, will be critical to 6B residents' hospice access.

Odyssey's Tables 5 and 6 show that most of the residents in Highland and Polk speak English with less than 20 percent speaking a different language with most of this group being Spanish-speaking. The applicant notes that Hardee County has a relatively high proportion of residents that identify as Hispanic or Latino (43.6 percent) and Polk County has a higher proportion of residents that identify as Black or African American, but a relatively low proportion of persons who identify as Hispanic or Latino.

Odyssey provides Tables 7, 8 and Table 9 to address poverty, the homeless, and homeless veteran populations indicating that most homeless individuals in 6B reside in Polk County, and of those counted, most reside in shelters. The applicant notes that although the service area homeless population is less than 1000 persons, this represents a population in which hospice care is often challenging to serve primarily due to the transient nature of their living situation.

Odyssey provides four AHCA tables, one University of Florida table and one applicant created table on the application's pages 23—27 to show

that 25 percent of area patients had a cancer diagnosis, and that service area hospices serve about 92.5 percent of cancer-related deaths while the non-cancer-related deaths account about 65 percent of the service area deaths. Odyssey then applies AHCA estimates to show there will be a 98.9 percent service area need will be for non-cancer diagnosis. The applicant states that 6B residents have a higher rate of pulmonary disease deaths, but lower rate of heart disease deaths than Florida and that most admissions in the service area occurred with cancer diagnosis, accounting for nearly 22 percent of admissions for agencies serving 6B residents. End-stage heart disease accounted for about 18 percent of admissions end-stage pulmonary disease accounted for about 11 percent, end stage renal disease about 3.3 percent and HIV/Aids about 0.03 percent of admissions.

Odyssey concludes that SA 6B has a high proportion of deaths due to cancer diagnosis that is over 80 percent, but lower than Florida overall which is about 88 percent, and a high hospice use rate among 6B residents with pulmonary or renal disease diagnosis. Further, most of the additional hospice need among SA 6B residents will occur for individuals with heart disease and other associated diseases such as stroke.

PruittHealth Hospice – Central Florida, LLC (CON application #10691): A review of CON application #10691's Book 1 master table of contents and the table of contents regarding each of the remaining two books reveals that:

- The Book 1 two-page master table of contents indicates a total of five sections. The applicant's Book 1 and Book 2 indicates 35 exhibits, with the Exhibit 35-Audited Financial Statement/Funding Letter/Bank Account Report, however:
 - Book 3 ends with Exhibit 34-Letters of Support (which there was one) and there is no Exhibit 35
- The Book 2 should have 15 exhibits but only contains 11
- The above is not an exhaustive listing of similar discrepancies

PruittHealth discusses and offers tables addressing the fixed need pool, hospice penetration rates in SA 6B and statewide (pages 55-57 of the application). PruittHealth contends that it is best positioned of the competing applicants to fill the gap in hospice services to indigent residents, rural population, veterans and particularly those residing in rural areas of the subdistrict, and patients with specific terminally ill diseases and diagnoses. Concerning population growth and aging in SA 6B, PruittHealth states the use of the University of Florida Bureau of Economic and Research (UF BEBR), Bulletin 190, to indicate that, in SA 6B (page 59 and 60 of the application) that the 85+ population

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grew by 35.9 percent from 2010 to 2020 representing 2.7 percent of the subdistrict population, and this same age cohort is expected to increase from 2020 to 2030 to 3.3 percent of the subdistrict total population. The 85+ age group is projected to have the highest growth rate in every subdistrict county in SA 6B from 2020 to 2030 with Polk at 51.3 percent and Highlands at 31.6 percent. The reviewer notes that Polk County is listed twice and Hardee is not listed. However, the applicant's Figure 39 on page 59 shows Hardee County's age 85+ population is increased by 21.7 percent from 460 persons in 2020 to 630 in 2030.

PruittHealth provides that the 65-84 population grew by 30.6 percent from 2010 to 2020 representing 19.6 percent of the subdistrict population, with this same age cohort expected to increase by 35.2 percent from 2020 to 2030 to become 22.3 percent of the subdistrict total population with Polk at 34.7 percent, Hardee at 12.9 percent and Polk is included twice again and Highlands County is not shown. However, the applicant's Figure 39 on page 59 shows Highlands County's age '65-85' population is to increase by 18.6 percent from 30,696 persons in 2020 to 36,414 in 2030.

Concerning population demographics in SA 6B, PruittHealth again states use of the same source (UF BEBR, Bulletin 190), to indicate that in SA 6B (pages 61 and 62 of the application) with a discrepancy in that the narrative states several times that the following applies to SA 3B rather than 6B, which is a typographical error:

- White residents make up 55.5 percent of the total having the largest population in Highlands County
- Black residents make up 14.8 percent of the total having the largest population in Polk County
- Hispanic residents make up 27.4 percent of the total having the largest population in Polk County

PruittHealth states that most residents of the service area's Medicare population were white, according to <https://www.flhealthcharts.com/>, the following is the SA 6B Age 65+ deaths and percentage of death by race (provisionally in 2021 – there is a question as to whether this is another typographical error):

County	White	Black	Other	Total
Polk	4,788	525	105	5,418
Hardee	165	13	2	180
Highlands	1,222	85	25	1,332
Total	6,175	623	132	6,930
<i>Percent of Deaths</i>	<i>89.1%</i>	<i>9.0%</i>	<i>1.9%</i>	<i>100.0%</i>

Source: CON application #10691, page 62, Figure 46

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The applicant commits that it will serve all patients and families who need hospice care regardless of payer source and understands that racial and ethnic minorities face barriers to hospice care.

Regarding indigent-related demographics and homelessness in SA 6B, PruittHealth identified the following need exists according to the Florida Council on Homelessness, Annual Report 2021, June 30, 2021, as:

- The Homeless Point-in-Time Counts
 - From 2017 to 2020 declined in Hardee and Highlands Counties yet remained consistent for the last two years. Polk County's count increased marginally.
- County Identified Homeless Students
 - The homeless student count (2015-2020, page 65, Figure 48 of the application) has fluctuated over the last five years.
- Population Living under <185 percent of Federal Poverty Level
 - Regarding those residents living under 185 percent of the Federal Poverty Level, PruittHealth offers tables (page 66, Figures 49 and 50 of the application) to reflect the 2019 family/household income thresholds that represent 100 percent and 185 percent of the Federal Poverty Level (by number of family members/households), according to the U.S. Department of Health and Human Services, Assistant Secretary for Planning and Evaluation website (the reviewer notes that the actual website is not indicated). The applicant indicates that per the website www.flhealthcharts.com/chartsreport, from 2015-2019
 - 52.2 percent of Hardee County
 - 39.6 percent of Highlands County and
 - 35.9 percent of Polk County residents were living under 185 percent of the Federal Poverty Level, compared to 31.1 percent of Florida's population overallThe applicant notes that Hardee County's percent of residents in this category is greater than one in two residents. The applicant offers that it conditions this application for funding \$10,000 in each of its first two years to Midwest Food Bank of Florida through its foundation and adopting its Committed to Caring Campaign.
- Residents Experiencing Food Insecurity
 - PruittHealth offers Feeding America as its 2019 source to confirm its stated percentages that:
 - percent of Polk County residents and 19.3 percent of children and

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- 15.2 percent of Hardee County residents and 21.9 percent of children and
- 15.2 percent of Highlands County residents and 24.3 percent of children were food insecure during this period.

Per PruittHealth, since the onset of COVID-19, financial and food insecurity have increased significantly.

- Rural Counties
 - PruittHealth offers a map (Florida’s Rural Counties, per 2010 Census, Figure 53 on page 67) that SA 6B identifies that Hardee and Highlands Counties make up 15.6 percent of the service area’s population.
- Elderly Residents Living Alone
 - PruittHealth maintains that (Figure 53, page 68 of the application labeled District 1 County Population Lack of Insurance may be a typographical error,) according to the Department of Elder Affairs (DOEA):
 - 18.3 percent of Polk County and
 - 19.3 percent of Hardee County
 - 19.1 percent of Highlands County residents 60 and over live alone and that this population has special care needs at end of life
 - One goal of the 2022-2025 Florida State Plan on Aging is to “increase the resources and support available to caregivers of older adults.”

The applicant offers that it conditions this application for four hours of Companion Care for eligible patients and their caregivers per week.

PruittHealth discusses its commitment to serve the indigent population of SA 3B (page 68) which is a typographical error. The applicant states its plan that includes support, planning and arranging for care.

- PruittHealth provides Figure 54 on page 69 to show the area’s Senior Living Communities that are made up of over 10,000 homes and apartments. The applicant conditions this application on having at least 0.5 FTE community relations representative dedicated to senior living communities for the first three years of operations. The community relations representative will present educational events to senior living community residents, and meet with residents, administrators, and leadership to gain feedback on to best serve the residents.

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PruittHealth offers Figure 55, page 70 to assure that it will follow specific disease programs (PruittHealth Care Pathways) currently deployed at PruittHealth hospice programs and Figure 56, page 71 to discuss the four existing hospice programs and the utilization data stating it has projected reasonable and achievable volume in its first two years.

Regarding veterans in SA 6B, PruittHealth indicates the total number of veterans in the area projected for each year from 2021-2030, with the expected veteran total population in 2030 to be 47,977 (page 72, Figure 57 of the application). PruittHealth explains that though 2020 data is still considered provisional, per FLHealthCHARTS.com, in 2020, of the total deaths in SA 6B (10,704), a total of 2,386 of those deaths (22.3 percent) were veterans, which is a significant number of the service area's deaths.

PruittHealth next offers narratives and other descriptions of PruittHealth's hospice services targeted to veterans (pages 73-76 of the application):

- History Serving Veterans
- Recognition Program
- We Honor Veterans
- Last Patrol
- Management Contracts (in the states of Georgia and North Carolina)

Regarding PruittHealth's enhancement of access to disease-specific programs in consideration of deaths by type of illness in SA 6B, PruittHealth provides tables (page 77, Figure 62 of the application) to indicate that, in 2019, per FLHealthCHARTS-Death County Query System, the following were the eight leading causes of deaths: Heart, Cancer, Stroke, Injury, COPD, Diabetes, Alzheimer's, Nephritis and Other. The reviewer notes that the applicant's same figure also indicates death rates per 100,000 residents. Of these, heart disease, cancer, and stroke, are the top three leading causes of deaths in the service area.

- Heart and cancer rates in Highlands County are both 1.6 times above Florida rate
- Stroke-every county's rate is above Florida rate and the 3rd leading cause of death in Polk County, Highlands County is 2.1 times above Florida rate
- Chronic Lower Respiratory- Highlands County is 2.8 times above Florida rate
- Alzheimer's- Highlands County is 2.8 times above Florida rate

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Highlands County has higher death rates in every cause except nephritis when compared to Florida death rates per 100,000 residents.

PruittHealth explains that the following specific disease programs (Care Pathways) (PruittHealth Pathways) are currently deployed at PruittHealth hospice programs (described in detail on pages 78-81 of the application):

- Oncology Program
- Cardiac Program
- Pulmonary Disease Program (including a respiratory therapy program)
- Stroke Program
- Alzheimer’s/Dementia Program
- End Stage Liver Disease
- End Stage Renal Disease

The applicant also offers dialog on its Respiratory Therapy program on page 82 of this application.

PruittHealth estimates the following admissions, average length of stay (ALOS) and patient days for year one and year two, as shown below.

Projected Admissions/Utilization		
	Year One	Year Two
Admissions	136	375
ALOS	60.7	64.8
Patient Days	8,260	24,297
Under 65	41	113
Over 65	95	262

Source: CON application #10691, page 83, Figure 63 and 64 (reviewer summarized)

Seasons Hospice & Palliative Care of Central Florida, LLC (CON #10692) maintains that through its parent corporation, AccentCare, Inc., it is affiliated with five separately licensed hospice programs and four home health agencies throughout the state. Seasons states the existing relationships with its affiliate Seasons Hospice and Palliative Care of Pasco County, which is directly adjacent to the 6B service area, affirms that adding a hospice to the service area completes a continuum of care at home that creates efficiency and builds upon existing relationships that foster hospice enrollment and improves access.

Seasons states that with the announcement of need for an additional hospice program in SA 6B, it conducted a community-based needs assessment to identify specific unmet needs throughout the service

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area. Below is the applicant's stated summary of the six major findings of the need assessment (CON application #10692 page 1-2 of the application). Seasons offers corresponding solutions for these findings.

- There is widespread need throughout the three counties, but Polk County has the majority of unmet hospice need.
- The greatest need is among the elderly (65+) including those with Alzheimer's Disease.
- The underserved Minority populations are: African American, Hispanic/Latinos, Lesbian, Gay, Bisexual, Transgender (LGBT) Community, and Veterans.
- Rural populations, the isolated individuals and the homeless.
- Of the terminally ill, the greatest unmet need is among those with heart disease and pulmonary disease.
- The Quality of care in the service area which the applicant discusses in Section 4, (Quality).
- Staffing needs which the applicant discusses in Section 5, (Resources).

Seasons contends that should it be approved, SA 6B will gain a new, dedicated hospice program that focuses on the needs of the community to address the underlying challenges to improve hospice access and service.

Regarding population demographics and dynamics, Seasons utilizes the Agency's Florida Population Estimates and Projections by AHCA District publication, issued September 2020 (CON application #10692 Table 1-1, page 1-4) to reflect the number of projected admissions and cause of death by age cohort, from July 1, 2020, to July 1, 2025, for SA 6B.

- Overall, the service area projects 7,500 deaths are expected to occur among those over the age of 65 (76.2 percent) of the total 9,842 deaths and 2,342 among those under age 65.
- The number of deaths for those over 65 are expected to represent 87.9 percent of all hospice admissions due to the greater number of deaths attributed to illness compared to those under 65, which has a greater number of unexpected deaths for which hospice is not possible.
- The number of projected deaths due to cancer is 1,953 (19.8 percent) and 7,889 (80.2 percent) for other diagnosis.
- Cancer diagnosis is expected to represent 24.5 percent of all admissions with all other diagnosis representing 75.5 percent.

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Seasons provides a map of the SA 6B 2021 total population estimate by ZIP Code (CON application #10692 page 1-5, Figure 1-1).

The applicant utilizes the Agency's Florida Population Estimates and Projections by AHCA District publication, issued September 2020 (CON application #10692 Table 1-2, page 1-6) to reflect population growth, from July 1, 2021, to July 1, 2026, for each county in Service Area 6B, Service Area 6B total and for Florida overall by age cohorts – those 0-64, 65+ and the total population (CON application #10692, page 1-4, Table 1-1). The reviewer provides the following summary of the applicant's Table 1-1 as follows:

- Overall, the service area has proportionately more seniors (22.6 percent) for residents age 65+ than the rest of the state (20.9 percent)
- Over the next five years (to July 1, 2026), Service Area 6B's:
 - Overall population is expected to increase by 7.4 percent compared to a statewide overall population growth rate of 6.8 percent.
 - Age 65 and over population is expected to increase by 15.9 percent compared to a statewide age 65 and over population growth rate of 17.4 percent.
 - Polk County elderly is on par with the state population increase at 17.5 percent, as well.
 - Because Polk County contains the majority of the population and Highlands has the largest concentration of seniors 65 and over, Seasons will establish physical locations in each of the three counties.
 - Seasons provides a map of the Claritas based 2021 population age 65 and over, estimate by ZIP Code (CON application #10692, page 1-7, Figure 1-2).

Seasons utilizes the Agency's Florida Population Estimates and Projections by AHCA District publication, issued September 2020 and www.FloridaHealthFinder.gov (CON application #10692, Table 1-3, page 1-8) to reflect the 2021 age 65+ population and the number of available beds per thousand population age 65 and over by SA 6B County, SA 6B total and for Florida overall. Hospice SA 6B has 53 assisted living facilities (ALFs) with a capacity of 3,820 and 33 nursing homes with a capacity of 3,940 beds.

Seasons notes that SA 6B's age 65 and over population is expected to increase by 15.9 percent compared to a statewide growth rate of 17.4 percent. The applicant contends that through Seasons' Partners in Care program which provides education and training to long-term

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cares staff and volunteers, the SA's ALFs and nursing homes will benefit.

Seasons states it excels at reaching the elderly who have a variety of illnesses through a strong outreach campaign meeting the needs with programs such as Namaste Care and services provided under Open Access, that are specifically geared towards them. The applicant states it will work with New Home Senior to provide services to seniors. New Home Senior serves disadvantaged persons in Hardee and Highlands Counties, including meal delivery, respite care, custodial care, and a Senior Center for the socialization activities, allowing frail and vulnerable populations to remain safely in their homes while staying connected to the community.

Seasons utilizes Office of Economic and Demographic Research, 2019 Income Levels (CON application #10692 page 1-9) to support that all three counties have need:

- Polk County has the greatest need for improving hospice availability
- Highlands County has a largest elderly population
- Hardee County has the higher poverty rate and more rural population also exhibits health care access.

Seasons' Tables 1-4A, 1-4B, and 1-5 (CON application #10692 pages 1-12 through 1-13) uses 'Claritas 2021 update' data to show population estimates in 2021 and projected 2026 estimates by racial/ethnic groups and growth by racial/ethnic composition and the distribution of these groups by percentage for each SA county and total SA 6B. The Hispanic population is projected to increase by 20.9 percent, African Americans by 9.0 percent, and Asians by 12.8 percent over the next five years. Hardee County presents the largest Hispanic population as a percent of the county's total. Seasons notes this indicates diversity and that ethnic minorities have long been identified as experiencing health care disparity in terms of access and quality of life. Seasons cites two articles found in Exhibit 3 (CON application #10692), to support the assertion that much of the minority's lack of use of hospice services is due to

- Lack of trust
- Language barriers
- Latin and Asian cultures do not discuss death openly
- Failure to plan
- Poverty
- Tendency to delay treatment
- Threat of deportation

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The applicant provides to support the racial and ethnic disparities in hospice care in SA 6B by providing Tables 1-6, Table 1-7, and Table 1-8 (CON application #10692). The 2019 data shows that minorities, especially African Americans (59.2 percent) and Hispanics (21.2 percent) do not receive hospice care proportionate to the services to Caucasians (70.7 percent). Season contends that this is also evident in minority discharges to hospice with Caucasians experiencing a 25 percent in-hospital death rate compared to African Americans at 32.5 percent.

Seasons comments that its Diversity Council taps into the growth trend and prepares to engage minorities to know how to best address concerns and meet their needs. Seasons discusses its U.S. based service to Hispanics (South Florida) to African Americans (Baltimore) and with regards to Asians its West Coast and mainland China operations. The applicant states it “is the only Western Hospice operating in Mainland China.”. Seasons contends that because it is an industry leader in serving minority populations, it is well positioned to meet the needs of SA 6B.

Seasons addresses its commitment to serving the growing LGBT community in the service area by seeking the SAGE Care Platinum Level Credential. SAGE is a deeply skilled and highly trusted national organization dedicated to improving the lives of LGBTQ elders. Seasons notes additional support in Exhibit 4 (CON application #10692).

Regarding veterans in the service area, Seasons states it utilized the Agency’s Florida Population Estimates and Projections and the U.S. Department of Veterans Affairs website at http://www.va.gov/vetdata/veteran_population.asp to indicate that all three counties have a total veteran percentage of total population higher than the state overall (CON application #10692 Table 1-9, page 1-15). Seasons states that it participates in the “We Honor Veterans Program” emphasizing that all its affiliate programs strive to achieve the highest level and that its newest program (in Pasco County) has achieved Level 4 after being licensed for only one year.

Regarding the homeless population, Seasons utilizes the Agency’s Florida Population Estimates and Projections by AHCA District publication, issued September 2020 and The Florida Council on Homelessness 2020 Annual Report (CON application #10692 Table 1-10) to reflect total homeless data in the three counties. The Florida Council on Homelessness shows 75.7 percent are over age 24, 14.8 percent are Hispanic, 38.1 percent are African American, 10.1 percent are veterans and 14.4 percent have chronic substance misuse, 12.7 percent are severely mentally ill, and 1.1 percent have HIV/AIDS. The

applicant discusses the risks and facts that face the homeless population and commits to serving them by assisting with housing and hospice care for the terminally ill.

Seasons states that ongoing training and partnerships within the service area will help identify, educate, and serve those in need. Further, it will work with the Homeless Coalition of Polk County and the Heartland Coalition for the Homeless to carry out this commitment. Seasons states it will donate funds each year beginning with \$15,000 the first year of operations (\$30,000 in year two and \$55,000 in year three) through Seasons Hospice Foundation restricted to SA 6B programs that directly serve homeless persons.

Seasons states that in 2019 the top five causes of death in the service area were heart disease, cancer, respiratory diseases, external causes, and nutritional/metabolic diseases. The applicant notes that SA 6B's hospice use rate is lower than the states for cancer, infectious diseases and digestive diseases in 2019 and 2020. The SA's 2019 hospice rate was lower for respiratory diseases and specific to 2020, the SA's hospice use rate for COVID-19 was lower than the states per the applicant's Table 1-12 which is based on Florida Charts Resident Deaths 2020 Provisional Deaths, accessed October 3, 2021 and CMS Standards Analysis File, Hospice, 2019 and 2020 (CON application #10692, page 1-20). The applicant's Table 1-11 "2019 Cause of Death, Florida Residents" on the application's page 1-19 shows SA 6B has a proportionately higher percentage of deaths due to cardiovascular disease and respiratory diseases than the state for both 2019 and 2020. The source referenced for this table is www.FLHealthCharts.com Resident Deaths by 113 Causes of Death by Category by Year.

Seasons cites its Cardiac Care Pathway program which uses an Advanced Registered Nurse Practitioner (ARNP) Cardiac Specialist to help identify ways to treat patients in hospice that traditionally go without hospice earlier in the disease trajectory. Seasons provides more information on this in the application's Exhibit 5 of this application and provides more information in Section 2, Rule Preferences on its programs such as Open Access, Cardiac Care, Music Therapy, and Namaste Care.

Seasons asserts that it has the largest presence and ability to make a difference in improving access and availability of hospice care to residents to SA 6B because it serves the adjacent areas 5A and 6A. It also has a non-hospice Palliative Care program in Sebring (Highlands County), which was initiated at the request of AventHealth after experiencing success with the Seasons Palliative Care program in Tampa. Seasons believes that having existing hospice and home

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health locations in surrounding counties, the proposed hospice program will benefit from existing relationships with providers that lead to referrals and increased hospice admissions from area residents. A map of the facilities that border SA 6B are on page 1-22. Seasons contends that AHCA's approvals of prior programs exemplify its ability to exceed projections and meet forecasted need.

The Florida Legislature's Office of Economic and Demographic Research data and AHCA Hospital Discharge Data Calendar Year 2019 and 2020 providing Tables 1-13, 1-14, and 1-15 (CON application #10692, pages 1-23 and 1-24) is cited to reflect the percent of workers that travel outside of county residence and work times to show that residents in this area also seek health care services in adjacent counties and outside the service area. Seasons cites the large number of SA 6B resident hospital discharges from Hillsborough hospitals and contends that because SA 6B is bordered by Seasons' hospice and home health locations, Seasons Central Florida can coordinate care with providers already familiar with their hospice and services through Seasons Tampa's established relationships.

Seasons offers Table 1-16 (CON application #10692, page 1-25) to show that all counties fall below the statewide ratio of hospice discharges to deaths and in 2020 more patients died in hospitals in Polk County than were discharged to hospice.

The applicant presents Table 1-17 on CON application #10692's page 1-26 which shows Medicare hospice patients, death and hospice penetration rates for CYs 2019 and 2020. Seasons contends that the hospice penetration rates indicate a widespread need with 2020 rates at 63.2 percent which is below the statewide average of 64.2 percent. The applicant shows that Polk County has the lowest rate at 61.7 percent. However, Highlands at 69.1 percent and Hardee at 70.3 percent exceed the State average of 64.2 percent. Seasons contends its proposal for having physical locations in each of the counties (a conditioned response) along with community outreach, education, use of technology, and programs designed to care for the most vulnerable provides the best opportunity for improving hospice penetration.

The applicant reiterates the request of Avent Health for an establishment of a similar non-hospice Palliative Care program in Highlands County after experiencing success with the Seasons Palliative Care program in Tampa.

Seasons presents its National Hospice Program Experience in Table 1-19 and Table 1-20 and the experience of Seasons' Hospice Programs in Florida for the first two years to support that it has experience and

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growth in its Florida market. The applicant forecasts 223 and 414 admissions for SA 6B in years one and two, respectively.

Seasons provides an impact analysis and expects to have no negative consequence on other existing hospice providers in SA 6B with Figure 1-4 (CON application #10692, pages 1-31 of the application).

The applicant states it will focus outreach efforts on educating institutional providers, the medical community, community and faith-based organizations, and the general public through educational seminars and partnerships. Seasons states its education and established protocols and materials will help physicians and nursing staff how to identify potential hospice patients to ensure understanding of the benefits and providing continuous care where a currently disjointed system exists. The applicant contends that this will result in increased access and availability to hospice care. Seasons offers an excerpt from Debi Martoccio, VP, COO, AdventHealth Connerton that supports an additional Seasons Hospice program in Service Area 6B based on its prior relationship in Pasco County (CON application #10692, pages 1-33 of the application).

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) provides brief discussion of the fixed need pool. Additionally, the applicant contends that CON application #10694 is submitted in response to the special circumstances provision of the applicable hospice rules in order to demonstrate additional grounds for approval of a new hospice program (page 55 of the application). The applicant directs the Agency to its response to item E.2. (Rule Preferences) in this report.

Transitions contends that this proposed hospice program should be approved for the following reasons (page 50 of the application):

- Above and beyond clinical care model including:
 - 24/7/365 availability
 - Comprehensive IDG care team
 - Extensive ancillary services including but not limited to End-of-Life Doula support, music and massage therapy, animal visits, and more
 - Vigil sitting commitments
 - Palliative-to-hospice connection
 - Extensive software integration
 - Remote patient monitoring

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- Exceeding national standards, receiving a 4.5 Star Rating
- Hospice and palliative operations in MI, IL, IN, and PA
- Access to Routine, Respite, Continuous and Inpatient care in either the home or a care facility

Transitions **does not provide a source** but offers exhibits regarding data from 2014 to 2018 as follows (pages 56-58 of the application):

- Exhibit 19-Hardee County Medicare and Hospice Usage:
 - 10 percent increases in Medicare beneficiaries (from 3,933 in 2014 to 4,316 in 2018) and a three percent decrease in hospice users (from 115 in 2014 to 112 in 2018) and notes that the poverty rate in this county is over 24 percent of the population indicating that the residents may not have the same access to high quality hospice services as other counties in SA 6B.
 - Exhibit 20-Highlands County Medicare and Hospice Usage: eight percent increases in Medicare beneficiaries (from 29,841 in 2014 to 32,254 in 2018) and a 17 percent growth in hospice usage rate (from 712 in 2014 to 830 in 2018). The applicant states this illustrates that as services become more accessible hospice services are in higher demand and that Transitions is positioned to meet the specific needs of the district.
 - Exhibit 21-Polk County Medicare and Hospice Usage: 14 percent increases in Medicare beneficiaries from 128,991 in 2014 to 146,808 in 2018 coinciding with the 10 percent growth in hospice usage rate from 2,217 in 2014 to 2,434 in 2018
 - Exhibit 22-SA 6B addresses the “skyrocketing costs for hospital care related to cancers”:
 - SA 6B Medicare Beneficiaries 162,765 in 2014 to 183,378 in 2018
 - SA 6B Hospice users 3,044 in 2014 to 3,376 in 2018
 - In the service area, cancer related deaths have increased three percent while the total hospital days related to cancer have decreased by four percent. CON application #10694 states that, “The total spend on cancer related hospital stays has increased by 28% over that time frame” (Exhibit 24, page 61 of this application) coinciding with the 24 percent increase in the median charge per hospitalization indicating that most if not all cancer patients are facing increased costs of care.

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- The applicant states that this data shows that the three counties in the service area are in need of not only end of life care solutions but care solutions that allow patients to stay at home and not in the hospital.
- Transitions provides that it has the capacity to provide the patient from discovery through passing from cancer thus reducing the economic burden of cancer on patients, their families and their communities, but allow them to receive care at their place of residence, not the hospital.
- Exhibit 23-Service Area 6B addresses the Cost vs. Length of Stay: The applicant contends that the costs of care that far outpace the number of cases, and days in the hospital illustrate a strong demand for a care solution program that can reduce hospitalizations which will relieve financial pressure from patients, their families, and the communities at large.
 - Total Cost from \$239,644 in 2014 to \$306,333 in 2018
 - Total Days from 20,221 in 2014 to 19,498 in 2018
- Exhibits 24 shows the Total Charges for All Cancer Hospitalizations being from \$239,644 in 2014 to \$306,333 in 2018
- Exhibits 25, 26 and 27 show the “Total Spend” for:
 - Hardee from \$4,601 in 2014 to \$7,629 in 2018
 - Polk a from \$206,338 in 2014 to \$254,123 in 2018
 - Highlands Counties from \$28,705 in 2014 to \$44,581 in 2018

2. Agency Rule Criteria and Preferences

The **applicants** listed below discussed hospice licensure standards in Rule 59A-38 Florida Administrative Code, demonstrating their understanding of these standards:

Affinity Care of Central Florida LLC
Empath Hospice, LLC
Florida Hospice, LLC
PruittHealth Hospice – Central Florida, LLC
Seasons Hospice & Palliative Care of Central Florida
Transitions Intermediate Holdings, LLC

- a. **Rule 59C-1.0355(4)(e) Preferences for a New Hospice Program. The Agency shall give preference to an applicant meeting one or more of the criteria specified in the below listed subparagraphs:**

- (1) **Preference shall be given to an applicant who has a commitment to serve populations with unmet needs.**

The applicants are responding to published need for an additional hospice program for the January 2023 planning horizon and all (except MD Care Hospice Inc and Serenity Hospice Care Inc), discuss serving populations they believe to be underserved or otherwise in need of target population hospice services.

Affinity Care of Central Florida LLC (CON application #10685) states it is committed to meeting the needs of all patients and their families in need of end-of-life care in SA 6B.

Brevard HMA Hospice, LLC (CON application #10686) states it will target the following services and/or populations currently realizing unmet need in hospice care (pages 74-79 of the application):

- Palliative care
- Patients without primary care givers
- Homeless
- Veterans
- Minority populations (Black residents and the Latino/Hispanic community)

Empath Hospice, LLC (CON application #10687) identifies the following six key areas where services are lacking or there is a gap in care for a specific population, including:

1. Need for disease-specific programming
2. Lack of Available Resources for Rural and Low-Income Populations
3. Need for Ethnic Community-Specific Programming
4. Need for Education/Absence of Continuum of Care Navigation
5. Lack of Transportation Presents Serious Challenges in Accessing Care

The applicant states that and reviewer confirms that “Empath Hospice Solutions” to these stated gaps are identified on pages 52 - 117 of CON application #10687.

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Florida Hospice, LLC (CON application #10688) answers this by noting Florida Department of Health studies within SA 6B of the Hispanic, Black, Aging Adults, and Migrant Worker populations.

Florida Hospice commits to serve these populations with unmet needs by:

- Enhancing Health Care Provider Hospice Education
- Community Outreach
- The Journey Program (with greater detail in Appendix C of this application)
- Hospice Foundation

MD Care Hospice Inc (CON application #10689) does not respond to this rule preference.

Odyssey Healthcare of Marion County, LLC (CON application #10690) commits to serve these populations with unmet needs:

- Residents with end stage heart disease
- The growing population and in residents over the age of 75
- Minority populations, especially Spanish speaking individuals
- Individual is below or near the poverty line and homeless individuals

PruittHealth Hospice – Central Florida, LLC (CON application #10691) states being committed to serving the needs of the following underserved groups in addition to all other hospice eligible terminally ill residents in SA 6B:

- Indigent population
- Veteran population
- Terminally ill with several specific diseases

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) commits to serve these populations with unmet needs:

- Seniors and Disadvantaged Persons
- African American
- Hispanic/Latino
- Lesbian, Gay, Bisexual, Transgender (LGBT) Community
- Homeless Population

Serenity Hospice Care Inc (CON application #10693) does not respond to this rule preference.

Transitions Intermediate Holdings, LLC (CON application #10694) states a commitment to serving the following populations with unmet needs (persons with/persons who are):

- Cancer
- End Stage Renal Disease
- End Stage Dementia and Alzheimer’s Disease
- End Stage Pulmonary Disease
- End Stage Vascular Disease
- Veterans

The reviewer notes that in item E.3.a. of this report, the applicant does not include the above as being populations unmet hospice needs.

- (2) Preference shall be given to an applicant who proposes to provide the inpatient care component of the hospice program through contractual arrangements with existing health care facilities, unless the applicant demonstrates a more cost-efficient alternative.**

Affinity Care of Central Florida LLC (CON application #10685) Affinity states intent to have contractual agreements with area nursing homes and hospitals. The applicant indicates the following nursing home providers have offered “early stage of development” support in the service area:

- Haines City Rehabilitation (120 beds, Polk County)
- Lakeland Nursing and Rehabilitation (185 beds, Polk County)
- Oak Haven Rehab and Nursing Center (120 beds, Polk County)
- The Palms of Sebring (120 beds, Highlands County)
- Lake Wales Wellness and Rehabilitation Center (100 beds, Polk County)
- Highlands Lake Center (179 beds, Polk County)

Brevard HMA Hospice, LLC (CON application #10686), indicates it will use contractual arrangements with existing providers for inpatient hospice care.

Empath Hospice, LLC (CON application #10687) states that and reviewer it will seek contracts within local nursing facilities/assisted living facilities. BayCare hospitals in the three-county area including Winter Haven Hospital and Winter Haven Women’s Hospital have given letters of support as evidenced in Exhibit K.

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Florida Hospice, LLC (CON application #10688) states that it will provide inpatient hospice care through contractual arrangements with existing health care facilities and will ensure ready and convenient inpatient access to care when necessary.

MD Care Hospice Inc (CON application #10689) does not respond to this rule preference.

Odyssey Healthcare of Marion County, LLC (CON application #10690) indicates it will use contractual arrangements with existing providers for inpatient hospice care.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) maintains that the applicant will contract “scatter beds” in a local skilled nursing facility and/or hospital to provide routine and inpatient hospice care. The reviewer notes that the applicant does not affirmatively state in this response any letters of support from area nursing homes and/or hospitals that indicate a willingness to contract for the provision of the inpatient care component.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) indicates it will use contractual arrangements with existing providers for inpatient hospice care.

Serenity Hospice Care Inc (CON application #10693) does not respond to this rule preference.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this rule preference. The reviewer notes that after CON application #10694 responds to Rule 59C-1.0355(4)(e)1., Florida Administrative Code (pages 63-69 of the application), the applicant next includes letters of support and then responds to ss 408.035(1), (2) and (5), Florida Statutes (beginning on page 77 of the application).

- (3) Preference shall be given to an applicant who has a commitment to serve patients who do not have primary caregivers at home; the homeless; and patients with AIDS**

Section 400.6095 (1) Florida Statutes requires hospice programs to make its services available to all terminally ill persons and their families without regard to... diagnosis, cost of therapy, ability to pay or life circumstances. Section 400.6095 (5) (a) Florida Statutes requires the hospice to identify the patient's primary care

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giver, or an alternative plan of care in the absence of the primary care giver, to ensure the patient's needs will be met. Section 400.6095(5) (c) Florida Statutes requires the hospice to assess patient and family needs, identify the services required to meet those needs, and plans for providing those services through the hospice care team, volunteers, contractual providers, and community resources.

Affinity Care of Central Florida LLC (CON application #10685) maintains it is committed to serving all SA 6B patients including those who do not have primary caregivers at home, the homeless and patients with AIDS.

Brevard HMA Hospice, LLC (CON application #10686), states that it is committed to serving and will provide Hospice service to patients who do not have primary caregivers at home, the homeless, and patients with aids.

Empath Hospice, LLC (CON application #10687) indicates that it has developed a comprehensive HIV/AIDS program and services and the homeless on pages 128 and 129 and maintains it is committed to serving all SA 6B patients.

Florida Hospice, LLC (CON application #10688) states its commitment to serve patients who do not have primary caregivers at home, the homeless and patients with AIDS.

MD Care Hospice Inc (CON application #10689) does not respond to this rule preference.

Odyssey Healthcare of Marion County, LLC (CON application #10690) states that it is committed to serving and will provide Hospice service to patients who do not have primary caregivers at home, the homeless, and patients with AIDS.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) responds to this rule preference and states being committed to serving all residents, including the homeless, patients who do not have primary caregivers at home and patients with AIDS.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) states its commitment to serve patients who do not have primary caregivers at home, the homeless and patients with AIDS.

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Serenity Hospice Care Inc (CON application #10693) does not respond to this rule preference.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this rule preference.

- (4) In the case of proposals for a hospice service area comprised of three or more counties; preference shall be given to an applicant who has a commitment to establish a physical presence in an underserved county or counties.**

SA 6B includes Hardee, Highlands, and Polk Counties. SA 6B's existing providers have two main and two satellite offices located in Lakeland, Polk County. There are additional satellite offices in Polk County in the cities of Bartow (2), Auburndale (1), Davenport (1) Haines City (1), and two inpatient facilities located in Auburndale and Lakeland. One satellite office in Hardee County in the city of Wauchula

There are four additional satellite offices in Highlands County in the city of Sebring and one inpatient facility also located in Sebring.

Affinity Care of Central Florida LLC (CON application #10685) indicates it will have established its first office in Polk County and upon approval it will open a second office in Highlands County during the first year of operation.

Brevard HMA Hospice, LLC (CON application #10686) commits to establish a physical presence in Polk County and establish a complementary physical presence within Highlands County as dictated by volumes/demands on employees.

Empath Hospice, LLC (CON application #10687) states it will develop multiple offices in the service area including at least one in the first year, and in addition a mobile unit.

Florida Hospice, LLC (CON application #10688) indicates it will establish an office in Highlands or Hardee County that it contends are both the most underserved by the existing hospice providers.

MD Care Hospice Inc (CON application #10689) does not respond to this rule preference.

Odyssey Healthcare of Marion County, LLC (CON application #10690) stated that it considers all 6B counties as underserved; however, Polk County residents are identified as those in greatest need of additional hospice services and for that reason, the applicant commits to establish a physical presence in Polk County.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) indicates it will establish an office in Polk County with a satellite office in Highlands County that it will open during its first year of operation.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) indicates it will establish an office in Polk County, with additional office locations within Hardee and Highlands Counties.

Serenity Hospice Care Inc (CON application #10693) does not respond to this rule preference.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this rule preference.

- (5) **Preference shall be given to an applicant who proposes to provide services that are not specifically covered by private insurance, Medicaid, or Medicare.**

Affinity Care of Central Florida LLC (CON application #10685) reiterates portions of its service intensity approach and some of its specialty clinical programs, Continuum Palliative Resources and minority outreach that were addressed in item E.1.a. of this report.

Brevard HMA Hospice, LLC (CON application #10686) indicates it will provide services that are not specifically covered by private insurance, Medicaid or Medicare, bulleting 11 items or services that are covered by the Medicare Hospice Benefit and then discusses some costs not covered. The applicant reiterates its commitment to provide services to those without primary caregivers and the homeless and that it will continue to provide required services to patients without means for payment.

Empath Hospice, LLC (CON application #10687) indicates it will provide the following: Empath Home Health (Palliative and skilled home health) including visits from nurses and certified home health nurse aides. Pain and symptom management,

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wound care, physical, occupational and speech therapy, disease-related education and management, mental health RN, personal care, visits from social workers and spiritual care coordinators. Caregiver training on transferring patients, creating a safe environment, personal care assistance and more., trained volunteers for companionship, specialized therapies (art, music, massage, Reiki, acupuncture, pet visits and errands, 24/7 support. The applicant also offers HIV/AIDS-EPIC (Empath Partners in Care) which is a comprehensive medical home model for persons affected by HIV/AIDS which includes Case management, testing, mental health and substance abuse counseling, risk counseling and services, prevention and education, food and personal needs pantry, children's program, emergency financial assistance, pharmacy services, housing and rental assistance. Empath offers Advanced Care planning with its My Choice My Life program.

Florida Hospice, LLC (CON application #10688) indicates it will provide the following: The Journey Program, Journey Counselors, My Care Central, Bereavement Services, Bereavement Risk Assessment, Grief Workshops, Virtual Teens-Teen Grief Support Groups, An Evening With Elves, Healing Heart Children's Camp, Passages- A Bereavement Newsletter, Music And Meditation Therapy, Massage And Aromatherapy, We Honor Veterans Program, Pet Therapy, Drumming Circle, Nibble And Stitch, Legacy Projects, And Residential Hospice Foundation. Descriptions of these services that it will provide are included in appendices C, D, E, and F of the application.

MD Care Hospice Inc (CON application #10689) does not respond to this rule preference.

Odyssey Healthcare of Marion County, LLC (CON application #10690) indicates it will provide

- Alzheimer's dementia program
- Bereavement program
- Pet service support program
- Volunteers-The applicant will hire a part time volunteer coordinator for the first two months prior to the Hospice opening and increasing it to a full-time position within the first two years of operation. The volunteers will be responsible for commonly provided Hospice services such as pet therapy, music therapy, aroma theory therapy etc.

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- Services which become more difficult as the patient becomes increasingly homebound examples given licensed hairdressers, beauticians and barbers and licensed cosmetologist
- Vigil support

PruittHealth Hospice – Central Florida, LLC (CON application #10691) states that it will provide the following in SA 6B not covered by private insurance, Medicaid, or Medicare:

- Veterans Recognition Program
- Tuck-In Program and 11th Hour Vigil Program
- Second Wind Dreams Program
- Caring Hands Program
- Camp Cocoon for Grieving Children
- Concierge Program

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) indicates it will provide:

- Bereavement program
- Leaving a Legacy
- Cardiac Care and AICD Deactivation Program
- Compassionate Ventilator Removals and Education
- Cultural Inclusion Council
- Music Therapy
- Namaste Care
- No One Dies Alone
- Open Access for patients on ventilators, palliative radiation, chemotherapy
- Palliative Care Program
- Patient and Families Resource
- Pharmacy Consultation
- Virtual Reality
- We Honor Veterans

Serenity Hospice Care Inc (CON application #10693) does not respond to this rule preference.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this rule preference. The applicant previously addressed this in response to Fixed Need (page 50 of the application):

- 24/7/365 availability
- Comprehensive IDG care team

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- Extensive ancillary services including but not limited to End-of-Life Doula support, music and massage therapy, animal visits, and more
- Vigil sitting commitments
- Palliative-to-hospice connection
- Extensive software integration
- Remote patient monitoring

b. Chapter 59C-1.0355, Florida Administrative Code contains the following general provisions and review criteria to be considered in reviewing hospice programs.

(1) Required Program Description (Rule 59C-1.0355(6), Florida Administrative Code): An applicant for a new hospice program shall provide a detailed program description in its certificate of need application, including:

(a) Proposed staffing, including use of volunteers.

Affinity Care of Central Florida LLC (CON application #10685) addresses its staffing in detail on page 104 of this application but does not include details or totals for volunteers. The applicant projects year one ending April 30, 2023, total FTEs of 17.4 and a total year two ending April 30, 2024, of 56.3 FTE.

Brevard HMA Hospice, LLC (CON application #10686) indicates it will have 21.47 total FTEs in year one ending 2023 and 32.19 total FTEs in year two ending June 2024.

Empath Hospice, LLC (CON application #10687) addresses its staff and volunteer's roles and duties in detail on the application's pages 138-144. Empath indicates it will have 25.05 total FTEs in year one and 34.13 total FTEs in year two. Further, volunteers will be used for hospice patient and family support, palliative arts support, bereavement support, children's community programs support, community counselling program, special events support and veterans service programs.

Florida Hospice, LLC (CON application #10688) addresses its staff and volunteer's roles and duties in detail on page 54 of this application. Florida Hospice indicates it will have 24.20 total FTEs in year one ending 2023 and 40.30 total FTEs in year two ending June 2024.

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The applicant indicates it will have 30 volunteers in 2023 and 75 volunteers in 2024. Florida Hospice states that it will bring in a paid Volunteer Coordinator.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) indicates it will have a total of 17.0 FTEs in year one (2023) and 31.1 in year two (2024). The applicant states it will have 30 volunteers in year one and 75 volunteers in year two. Odyssey will hire a part time volunteer coordinator for the first two months prior to the hospice opening and increasing it to a full-time position within the first two years of operation.

The applicant notes that the greatest demands for volunteers would be for haircuts licensed beautician, respite care, patient companionship, manicures, grocery shopping, errands assistance, pick up meds, meal preparation is needed, pet therapy, music therapy, support during final hours (vigil volunteers). Further, the maximum time at a patient's home for a volunteer is four hours, but two to three hours is preferred, and no volunteers will be scheduled in the home after 6:00 p.m. Odyssey notes that the volunteers in general will function in two capacities administrative and direct care.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) provides a Schedule 6A total FTE count of 17.83 in year one (ending June 30, 2023) and 37.05 in year two (ending June 30, 2024). Notes to Schedule 6A indicate that the local operations will be supported by PruittHealth corporate staff via a management fee and a clinical fee. PruittHealth states that it intends to employ a Volunteer Coordinator. The reviewer notes that the year one and year two ending dates (June 30, 2023, and June 30, 2024, respectively) are inconsistent with PruittHealth's Schedule 10, which indicates that year one licensure and initiation of service would commence on January 1, 2023.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) projects 19.3 total FTEs in year one (2023) and 32.5 in year two (2024). Services stated to be provided by volunteers include Direct Patient

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Care Volunteer, Spiritual Presence, Volunteer Vigil Program, Circle of Care Volunteers, Loyal Friends Pet Team, and Indirect Patient Care Volunteers.

Seasons Hospice & Palliative Care of Central Florida does not include totals for volunteers but provides a detailed description of the expected duties and services on pages 2-35 through 2-40 of this application. The applicant states that it will bring in a paid Volunteer Coordinator.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) provides a Schedule 6 total FTE count of 27.7 FTEs in year one (2022) and 43.8 in year two (2023). The reviewer notes that: the total FTE for year two is inconsistent when adding the morning, evening, and night FTEs (reviewer totals 44.1 FTE)

The reviewer notes that:

- The applicant's year one ending date (2022) and year two ending date (2023) are both inconsistent with CON application #10708's Schedule 10, which indicates that both initiation of license and initiation of service are to occur in October 2022
- Schedule 6 (bullet 5 of 8) notes indicate plans to initially hire three Regional Hospice Coordinators (community liaisons). However, Schedule 6 lists no Regional Hospice Coordinator/community liaison FTEs.

(b) Expected sources of patient referrals.

Affinity Care of Central Florida LLC (CON application #10685) expects referrals from area hospitals, physicians, assisted living facilities, nursing homes, other health care providers, family members and the patients themselves. Affinity reiterates its letters of support from existing skilled nursing facilities, home health agencies, clinicians and physicians. In response to this item, Affinity Care lists, by category and by name, the entities/individuals in Tab V of the application.

Brevard HMA Hospice, LLC (CON application #10686) anticipates referrals from a variety of sources, including:

- Area Physicians

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- Hospitals
- Nursing Homes
- Assisted Living Facilities
Home health agencies
- Family members and friends of patients
- Patients themselves
- Faith communities
- Insurers
- Community health centers and organizations
- Detention Centers
- Area Agencies on Aging, etc.

Empath Hospice, LLC (CON application #10687)

indicates that patient referrals will come from a variety of sources, including:

- ✓Physicians
- ✓Nursing homes
- ✓ALFs
- ✓Hospitals
- ✓Home health agencies
- ✓Families and friends
- ✓Patient self-referral
- ✓Insurers
- ✓Faith communities
- ✓Community social services organizations
- ✓Other Empath services/programs

Florida Hospice, LLC (CON application #10688) states it will not discriminate against any person based on age, sex, race, color, ethnicity, origin, religion, disability, sexual orientation, or ability to pay. The applicant bullets 15 expected sources of potential patient referrals including:

- Physicians
- Hospitals
- Home health agencies
- Skilled nursing facilities
- Assisted living facilities
- Independent living facilities
- Continuing care retirement communities
- Personal care and companion services
- Managed care organizations
- Social workers
- Social health agencies

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- Community health programs
- Communities of faith
- Family and friends
- Patient self-referrals

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) indicates it expects referrals from physicians, hospitals, assisted living facilities, nursing homes, home care agencies, family, aging services, clinic, and other facilities such as independent living, rehabilitation facility, dialysis center, caregivers, etc.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) states that referrals will not be difficult, originating from area physicians, hospitals, SNFs, other health care providers, family members and the patients themselves.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) indicates that based on its Florida affiliate experience, it expects referrals from physicians, other care providers, or patients and caregivers. Seasons states it will engage in outreach and education efforts and refers the reviewer to the application's Exhibit 6 for its referral materials. The applicant provides 14 expected sources of potential patient referrals in bullet format.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this criterion.

- (c) **Projected number of admissions, by payer type, including Medicare, Medicaid, private insurance, self-pay, and indigent care patients for the first two years of operation.**

Affinity Care of Central Florida LLC (CON application #10685):

Admissions by Payer Source

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Years One and Two

	Year One	Year Two
Medicare	167	405
Medicaid	4	9
Charity	6	15
Self-Pay	1	2
Insurance	4	9
Total Admissions	181*	440

Source: CON application #10685, page 106.

Note: * Year One admissions total 182.

Brevard HMA Hospice, LLC (CON application #10686):

**Admissions by Payer Source
Years One and Two**

CY	Medicare	Medicaid	Commercial Ins.	Self-Pay/Charity	Indigent	Total
2023	235	44	12	0	3	294
2024	329	62	16	0	4	411

Source: CON application #10686, page 87.

Empath Hospice, LLC (CON application #10687):

**Admissions by Payer Source
Years One and Two**

Payer Source	Year One Admissions	Year Two Admissions
Medicare	338	410
Medicaid	13	16
Commercial	15	18
Self-Pay	6	7
Total Admissions	*371	451

Source /CON application #10687 page 145, Figure 58.

Note: *Empath's year one admissions total 372.

Florida Hospice, LLC (CON application #10688):

**Admissions by Payer Source
Years One and Two**

	Medicare	Medicaid	Commercial Ins.	Self-Pay/Charity	Total
CY 2023	231	7	13	1	252
CY 2024	412	13	24	1	450

Source: CON application #10688, page 55.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

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Odyssey Healthcare of Marion County, LLC (CON application #10690):

**Admissions by Payer Source
Years One and Two**

	Medicare	Medicaid	Commercial Ins.	Self-Pay/Charity	Total
CY 2023	202	9	3	8	222
CY 2024	410	18	6	16	450

Source: CON application #10689, page 37

PruittHealth Hospice – Central Florida, LLC (CON application #10691):

**Admissions by Payer Source
Years One and Two**

Payor	Year One	Year Two
Medicare	124	343
Medicaid	4	11
Commercial	3	9
Self-Pay/Indigent	4	11
*Total	136	375

Source: CON application #10691, page 97, Figure 71

Note: *Years one and two totals to 135 and 374, respectively.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692):

**Admissions by Payer Source
Years One and Two**

	Medicare	Medicaid	Commercial Ins.	Self-Pay/Charity	Total
CY 2023	204	9	4	6	223
CY 2024	379	17	8	10	414

Source: CON application #10692, page 2-41

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this criterion.

- (d) **Projected number of admissions, by type of terminal illness, for the first two years of operation.**

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Affinity Care of Central Florida LLC (CON application #10685):

**Admissions by Terminal Illness
Years One and Two**

Disease	Year One Admissions	Year Two Admissions
Cancer	27	66
Non-Cancer	154	374
Total	181	440

Source: CON application #10685, page 86

Brevard HMA Hospice, LLC (CON application #10686):

**Admissions by Terminal Illness
Years One and Two**

	Year One Admissions			Year Two Admissions		
	Under 65	65+	Total	Under 65	65+	Total
Cancer	15	43	58	21	61	82
Other	55	181	236	77	252	329
Total	70	324	294	98	313	411

Source: CON application #10686, page 87

Empath Hospice, LLC (CON application #10687):

**Year One and Year Two
Admissions by Terminal Illness**

	Year One Admissions	Year Two Admissions
Cancer Under 65	22	27
Cancer 65+	33	40
Non-Cancer Under 65	19	23
Non-Cancer 65+	297	361
Total Admissions	371	451

Source: CON application #10687, page 117, Figure 53,

Florida Hospice, LLC (CON application #10688):

**Admissions by Terminal Illness
Years One and Two**

	Year One Admissions			Year Two Admissions		
	Under 65	65+	Total	Under 65	65+	Total
Cancer	12	53	65	22	95	117
Other	13	174	187	22	311	*450
Total	25	227	252	44	406	*567

Source: CON application #10688, page 56

Note: *Year two has a math error as these add to 333 and 450.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

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Odyssey Healthcare of Marion County, LLC (CON application #10689):

**Admissions by Terminal Illness
Years One and Two**

	Year One Admissions	Year Two Admissions
Cancer	49	99
Other	173	351
Total	222	450

Source: CON application #10689, page 38

PruittHealth Hospice – Central Florida, LLC (CON application #10691):

**Admissions by Terminal Illness
Years One and Two**

Disease	Year One Admissions	Year Two Admissions
Cancer	42	115
Non-Cancer	94	260
Total	136	375

Source: CON application #10691, page 97, Figure 72

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692):

**Admissions by Terminal Illness
Years One and Two**

	Year One Admissions	Year Two Admissions
Cancer	61	114
Other	162	300
Total	223	414

Source: CON application #10692, page 2-42

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this rule preference.

- (e) **Projected number of admissions, by two age groups, under 65 and 65 or older, for the first two years of operations.**

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Affinity Care of Central Florida LLC (CON application #10685):

Age Group	Year One Admissions	Year Two Admissions
Under 65	9	22
65 and Older	172	418
Total	181	440

Source: CON application #10685, page 107.

Brevard HMA Hospice, LLC (CON application #10686):

Age Group	Year One Admissions	Year Two Admissions
Under 65	70	98
65 and Older	224	313
Total	294	411

Source: CON application #10686, page 87

Empath Hospice, LLC (CON application #10687):

Age Group	Year One Admissions (2023)	Year Two Admissions (2024)
Under 65	41	50
65+	330	401
Total Admissions	371	451

Source: CON application #10605, page 146, Figure 60

Florida Hospice, LLC (CON application #10688):

Age Group	Year One Admissions	Year Two Admissions
Under 65	25	45
65 and Older	227	417
Total Admissions	252	462

Source: CON application #10688, page 56.

Note: Year two admissions by terminal illness and by payer source both add up to 450.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690)

	0 to 64	65 and Older	Total Admissions
Year One	30	192	222
Year Two	60	390	450

Source: CON application #10689, page 39

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PruittHealth Hospice – Central Florida, LLC (CON application #10691):

Age Group	Year One Admissions	Year Two Admissions
Under 65	41	113
65 and Older	95	262
Total	136	375

Source: CON application #10691, page 98

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692):

	0 to 64	65 and Older	Total Admissions
Year One	27	196	223
Year Two	50	364	414

Source: CON application #10692, page 2-43

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this criterion.

- (f) **Identification of the services that will be provided directly by hospice staff and volunteers and those that will be provided through contractual arrangements.**

Affinity Care of Central Florida LLC (CON application #10685) states that staff and volunteers will directly provide all core services, including physician services, nursing services, social work services, pastoral/counseling, and dietary counseling. Affinity will contract for and purchase certain services as needed by the patients. These include durable medical equipment, medical supplies, pharmaceuticals, physical therapy, speech therapy and occupational therapy.

Affinity Care indicates that non-core services including music therapy and virtual reality will be provided by Affinity Care staff and will not be a contract service. Equine therapy will be provided by a therapist at the contracted stable, supported by Affinity staff “who are always present during these sessions”.

Brevard HMA Hospice, LLC (CON application #10686) contends it will provide the following services through contractual arrangements such as inpatient general and

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inpatient respite care; physical, occupational, respiratory and speech therapy; Medical Director, Durable Medical Equipment, pharmaceuticals, finance/accounting, communication, compliance (clinical, governmental audits, privacy, and sales), education and leadership development, training, facilities management, financial services, human resources, managed care, payroll, procurement, project management, quality (clinical resources and informants, patient/family satisfaction, and quality charts) revenue cycle, risk operations, infection control, care transition coordination, talent acquisition, telecommunications, staffing, recruitment, IT, legal services, etc.

Empath Hospice, LLC (CON application #10687) lists 24 core services that Empath indicates are required to be delivered by the applicant's hospice staff and lists another 24 administrative services that the applicant indicates are provided in-house, by the parent – Empath Health (pages 146 and 147 of the application).

According to the applicant, the availability of the parent's owned and operated in-house services set Empath apart from other providers of hospice services in the area and from the other co-batched applicants. Review notes the applicant does not list contracted service, if any exist.

Florida Hospice, LLC (CON application #10688) states the hospice services will be provided by members of the hospice care team: Individualized case management, Routine Care, Continuous care, Physician medical services, Nursing services, Hospice aide, Counseling and social services, Bereavement grief and spiritual counseling services, Patient, family, and caregiver education, Volunteer services, Community outreach and education. Hospice staff training and continuing education, Quality assurance and utilization review. Florida Hospice contends it will provide the following services through contractual arrangements and volunteers, except for General Inpatient Care, Respite Care, Physical, Occupational, and Speech Therapy, Nutritional and Dietary Services, Durable Medical Equipment Through (StateServ DME Solutions) Medical Supplies (McKesson Medical-Surgical), Pharmaceuticals (One Point Patient Care), Patient transportation services, and other services deemed necessary to maintain quality hospice care and services.

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MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) notes that it will provide the following core services: Physician Services, Nursing Services, Social Work Services, Pastoral or Counseling Services, Dietary Counseling, Home Health Aide Services, and Bereavement Counseling Services. Further, to provide these core services it will hire Full-Time, Part Time or PRN Staff Paid by the hospice including Administrator, Clinical Manger, Chaplain, Social Worker, Hospice Care Consultant, Office Manager, Clerical Staff, Billing Clerk, Bereavement Counselor, Continuous Care- RN's, LPN's, HHA's, Hospice Liaison Patient Care, RN's, Hospice Aides/Homemakers, Volunteer Coordinator, Volunteers.

Odyssey notes that it will contract for a Medical Director, Alternate Medical Director, Physical Therapy, Occupational Therapy, Speech Therapy, Alternative Integrative Therapies, Dietary Counselor, and "FNP".

PruittHealth Hospice – Central Florida, LLC (CON application #10691) will directly provide all core services and complementary services such as massage, pet, and aroma therapies, etc. will be provided by volunteers

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) states that Seasons employees deliver most hospice services with assistance of volunteers with contracts for physical, respiratory, speech, massage, art, and occupational therapists. The applicant states that other contracted services include acupuncturists and other palliative care services.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not directly respond to this criterion. However, the applicant states it will hire a Volunteer Coordinator (page 66 of the application) and that volunteers will be used (on page 19) for its Vigil Sitting Program, Companionship, Family Support, Internships, Assisted Animal Volunteers, Veteran Support,

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Grief and Bereavement Support. Transitions states it will contract for DME (p.25), Medical Director (p. 64) and Nutritional Services (p.66).

(g) Proposed arrangements for providing inpatient care.

Affinity Care of Central Florida LLC (CON application #10685) states that no inpatient beds are proposed in this CON application. The applicant contends it will arrange for inpatient care through contractual arrangements with SA 6B nursing homes, hospitals, and other facilities to meet the needs of its patients. The applicant states that it did garner support from six area facilities.

Brevard HMA Hospice, LLC (CON application #10686) will execute contracts with existing inpatient hospice care resources within SA 6B.

Empath Hospice, LLC (CON application #10687) does not propose to construct an inpatient hospice facility for the proposal but intends to have contractual arrangements with nursing homes and hospitals to meet patient needs. The applicant provides sample inpatient agreements in this application, Exhibit E.

Empath states that it will pursue a contract for the provision of general inpatient hospice care with BayCare hospitals in the three-county area including Winter Haven Hospital and Winter Haven Women's Hospital that have given letters of support and references Exhibit K.

Florida Hospice, LLC (CON application #10688) states it will contract with hospitals and skilled nursing facilities, or hospice inpatient care for hospice patients as needed within the service area with the expectation that it will be able to successfully establish formal written contractual arrangements upon approval of this application.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) will provide inpatient care by contracting with hospitals and nursing homes to utilize their beds to provide the needed inpatient services. The applicant reiterates that because it is an existing hospice

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provider with seven hospice sites in Florida, it anticipates not having any difficulty in developing contracts with existing health care facilities.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) reiterates arrangements for “scatter beds” with local service area hospitals and SNFs with an intent that residents will be able to have their inpatient and respite hospice care needs met closer to home.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) will provide inpatient care by contracting with hospitals and nursing homes to utilize their beds to provide the needed inpatient services. The applicant cites its letters of support from two area nursing homes – St. Amaro Post-Acute and Rehabilitation Center (Hardee County) and Valencia Hills Health & Rehabilitation Center (Polk County). Seasons lists current GIP contracts in other service areas and includes a sample SNF contract for GIP in the application’s Exhibit 7.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not directly respond to this rule preference. Transitions states on the applications page 66 that it will serve its patients in residential facilities including hospitals and skilled nursing homes, assisted living facilities, and the home and that it has no intention of constructing a residential facility but will contract with them as appropriate.

- (h) Proposed number of inpatient beds that will be located in a freestanding inpatient facility, in hospitals, and in nursing homes.**

Affinity Care of Central Florida LLC (CON application #10685) states it will develop relationships with existing ALFs, SNFs and hospitals to use their existing infrastructure to provide the residential and inpatient component of hospice care and intends to have contractual arrangements with six existing SNFs.

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Brevard HMA Hospice, LLC (CON application #10686) states that it is not requesting any new inpatient beds at this time.

Empath Hospice, LLC (CON application #10687) states it will contract with existing health care facilities for inpatient beds when needed.

Florida Hospice, LLC (CON application #10688) states it will contract with existing facilities, or hospice inpatient units to provide inpatient beds as needed for residents of its service area.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) states that it will contract to provide inpatient services within several existing hospitals and skilled nursing facilities. The applicant projects 64 patient days (0.18 average daily census) in year one and 148 patient days (0.41 average daily census) in year two will be provided in an inpatient setting.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) states it will contract with existing skilled nursing facilities with not be constructing hospice beds.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) states it will contract with existing hospitals and skilled nursing facilities, or hospice inpatient units to provide inpatient beds as needed for residents of its service area. The applicant states it will also contract for “scatter beds” within nursing homes and hospitals throughout the service area.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not directly respond to this rule preference. As previously stated, Transitions indicates on page 66 of its application that it will serve its patients in residential facilities including: hospitals and skilled nursing homes, assisted living facilities, and the home.

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The applicant states it has no intention of constructing a residential facility but will contract with them as appropriate.

(i) Circumstances under which a patient would be admitted to an inpatient bed.

The following applicants (CON application numbers) detail their understanding of the criteria that needs to be met to admit a patient for inpatient care.

Affinity Care of Central Florida LLC (#10685)
Brevard HMA Hospice, LLC (#10686)
Empath Hospice, LLC (#10687)
Florida Hospice, LLC (#10688)
Odyssey Healthcare of Marion County, LLC (#10690)
PruittHealth Hospice – Central Florida, LLC (#10691)
Seasons Hospice & Palliative Care of Central Florida, LLC (#10692)

The following applicants (CON application numbers) do not respond to this criterion.

MD Care Hospice Inc (#10689)
Serenity Hospice Care Inc (#10693)
Transitions Intermediate Holdings, LLC (#10694)

(j) Provisions for serving persons without primary caregivers at home.

Affinity Care of Central Florida LLC (CON application #10685) states it is committed to serving all patients including those who do not have primary caregivers at home.

Brevard HMA Hospice, LLC (CON application #10686) states that patients remain in the most supportive environment possible and that as an existing hospice provider, operating nearly 120 hospice locations, it understands very well the challenges faced by patients without a primary caregiver at home. Further, every patient admitted to hospice care has a detailed plan of care that accounts for the status of their primary caregiver. According to Brevard, as needed and subject to patient choice, it may assist the patient in being placed within an assisted living, nursing home, or hospice house,

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as their plan of care dictates, when no patient caregiver is available. Such placements would occur when the patient is no longer independent in their activities of daily living (ADL) and an effective caregiver at home is unavailable.

Empath Hospice, LLC (CON application #10687) states that some patients are unable to develop a caregiver network (to maintain in-home hospice care) and/or that some hospice patients may not be physically or mentally able to remain at home and receive hospice services. The applicant states that if a patient is unable to care for him/herself and has no caregiver support, Empath may recommend that the patient enter an ALF, nursing home, or inpatient hospice facility and that hospice staff and volunteers will continue to provide hospice care in these settings. Empath explains that to serve patients that require inpatient hospice services, it will work to establish and expand relationships with various nursing homes, ALFs and hospitals within the area.

Florida Hospice, LLC (CON application #10688) states it will not provide primary family/caregiver or 24-hour coverage for its patients but develop a plan with the hospice social worker to provide care in the event the patient's condition dictates the need for additional care. This care may be arranged through friends, volunteers and/or private pay attendant services.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) states that it will provide care to all individuals eligible for care who meet the criteria of terminal illness and reside within SA 6B regardless of their living status or diagnosis. The applicant notes that its interdisciplinary team will ensure provision of this care with the proper resources and appropriate team members so that the patient receives safe, high-quality care and services regardless of their financial and social circumstances. Odyssey details its procedure first

- The Case Manager (or admitting registered nurse) will identify the patient's functional capabilities on the initial assessment visit.

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- The Case Manager will then determine if the patient is unable to manage independently and/or does not have adequate caregivers. The Case Manager will explain that the hospice does not provide 24-hour family/caregiver or take 24-hour responsibility for the patient.
- If that patient needs assistance and planning for a family caregiver a hospice social worker/designee will visit the patient and address this problem.
- If a problem or potential problem is identified, the hospice social worker/designee will present the patient and family/caregiver with information regarding possible solutions.
- The social worker/designee will assist the patient and the family/caregiver in planning and arranging for additional assistance.
- If the patient and family/caregiver refuse or are unable (due to financial considerations) to accept the plan for necessary caregiving assistance, the situation will be discussed by the interdisciplinary group.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) provides a brief narrative (page 102 of the application) detailing the applicant’s provisions for serving persons without a primary caregiver at home.

- Develop a plan of care
- Assist the patient in being placed within an assisted living, nursing home or hospice provider
- Assist those without financial resources

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) states that it will appropriately arrange hospice care for a person without a primary caregiver at home.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC/CON #10694 does not respond to this criterion.

(k) Arrangements for the provision of bereavement services.

Affinity Care of Central Florida LLC (CON application #10685) states that it will have a social worker and spiritual counselor available to assist families during the emotionally difficult time of loss, as well as provide information on common aspects of anticipatory grief. Affinity Care indicates it plans to employ a bereavement coordinator to be responsible for the planning, implementation, and maintenance of the bereavement program. Affinity Care will continue to provide bereavement support to grieving families for up to 13 months.

Brevard HMA Hospice, LLC (CON application #10686) comments that it will provide a full complement of bereavement services to hospice patients, their families, and caregivers, both before and after the patient's death, in accordance with the interdisciplinary group's plan of care. The applicant further comments that a purpose of this service is to prepare the individual to function independently of hospice and to identify a support system. Bereavement counseling will be extended to residents and staff of assisted living, skilled nursing, and inpatient nursing facilities, when appropriate.

Bereavement is also to be provided in coordination with a spiritual advisor, if any, as well as any other community resources judged to be useful and beneficial to the family/caregiver. Brevard indicates that due to the pandemic, LHC Group has implemented state-of-the-art virtual bereavement services.

Further, bereavement services include at least 13 months of follow-up by specifically trained staff and volunteers by:

- Mailings/phone calls
- Educational offerings
- Individual and group counseling
- Referral to community resources
- Crisis intervention counseling
- Grief support groups, Grief Speak online grief support program
- Memorial service(s)

Empath Hospice, LLC (CON application #10687)

indicates that through Empath Health it has a wide variety of bereavement service options for specific populations within the communities that it serves.

Empath points out that Empath Health's bereavement services include social workers, counselors, bereavement specialists and trained volunteers, as well as Community Counseling Program counselors and that among these are:

- Licensed clinical social workers (LCWS)
- Licensed mental health counselors (LMHC)
- Master-prepared social workers and counselors who are license-eligible.

The applicant contends that its bereavement services are comprised of four areas of support:

1. Telephone calls to the bereaved caregiver throughout the year
2. Mailings - a letter with support material is sent to everyone identified in the family system that may benefit and desire to receive these mailings
3. One-on-one counseling throughout the 13-month post-death period with an LCSW or LMHC
4. Grief support groups throughout the year that address the grieving needs of the variety of bereaved individuals and circumstances each has, such as (spouse loss retirement age, spouse loss working age, sudden loss, general grief, specialty loss groups around the holidays, etc.)

Empath points out that grief support groups are provided for Spanish-speaking persons by qualified social workers and counselors. The applicant also provides:

- Community Service Memorials-recent materials
- Community Counseling Center-Suncoast/Empath Information Brochures, Program Descriptions & Calendars

Empath offers brief narratives and descriptions regarding (pages 151 - 154 of the application):

- Illness support and grief counseling
- Individual and group counseling
- Traumatic, sudden loss counseling
- Crisis intervention counseling
- Perinatal loss counseling and support

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- School-based support groups for bereavement training and education
- Child and family support groups/presentations/retreats, including but not limited to:
 - Coping with the holidays for families raising minor children workshop
 - Parenting the grieving child bereavement workshop
 - Loss of a child bereavement group
 - Perinatal Loss bereavement group
 - Community conversations about gun violence
 - Facebook Live assisting children coping with random violence
 - Presentations regarding developmental understanding of a childbirth-adolescence who experienced the loss of a loved one
 - Kidshop (day retreat for healthy children with a sick loved one)
 - Camp LOL (day retreat for children grieving the loss of a loved one)
 - Camp HOPE (day retreat for families with minor children who are grieving the loss of a loved one)

The applicant emphasizes that bereavement programs are not one size fits all and the exact types of programs to be offered in Hillsborough County are based on the identified needs of the following communities/groups:

- Latinx/Hispanics
- Veterans
- Pediatric patients/families

Florida Hospice, LLC (CON application #10688) states that it will have an interdisciplinary group team to determine need and monitor the client throughout the end-of-life process. Services are offered up to 13 months after a patient's death but can be extended as needed. Details are provided in the application's pages 58 and 59 and Appendix E.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) states that it provides this service for caregivers, families and friends including faculty and staff,

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roommates, and friends of hospice patients for up to 13 months following the patient's death. Further, some services provided are to be coordinated with the family's clergy along with any other community resources deemed useful by the family caregiver and/or friends of the patient and the interdisciplinary team. Odyssey states these include but are not limited to mailings, phone calls, visits in or our office or outside, invitation to support groups, invitations to the annual memorial services, and referrals. The applicant states that a bereavement risk assessment is done at the patient's admission and updated throughout the course of the hospice care. Further, an updated bereavement risk assessment is completed within 30 days of the death of a patient.

Odyssey does not provide intensive counseling or therapy services, stating it must operate within the scope of practice, but will make a referral if requested. Odyssey states it assesses and monitors the grief process from admission until 13 months after the death of a patient but will continue past that 13-month mark if there is a need.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) provides a brief narrative (page 100 of the application) detailing its understanding of the criteria that needs to be met to make or have arrangements for the provision of bereavement services. According to PruittHealth, bereavement counseling will be provided by the chaplain or medical social worker with an emphasis on patient and family support with maximum utilization of community resources. PruittHealth's core bereavement services and its Camp Cocoon (bereavement targeted for children) are discussed and conditioned in CON application #10691, Schedule C.

The applicant provides bereavement services for a minimum period of 13 months after the death of a patient.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) offers brief discussion of its Camp Kangaroo and Friendly Visitors Bereavement Programs and that it will continue to offer virtual and online bereavement support as it has done during the pandemic. The applicant offers that it, in general, provides these services up to a year.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this criterion.

(1) Proposed community education activities concerning hospice programs.

Affinity Care of Central Florida LLC (CON application #10685) indicates it will provide extensive community education activities surrounding the benefits of hospice to increase hospice awareness and utilization. The applicant maintains professionals will be responsible for leading the outreach for specific disease focused programming, further developing relationships throughout the community, and coordinating educational sessions, presentations, and other outreach activities throughout the Manatee County community. Additionally, Affinity Care comments its minority team will be involved in educating NH and ALF constituents on the myths and benefits to hospice. Affinity Care indicates that it will host hospice educational events at senior organizations, religious affiliated groups, Hispanic organizations, Veterans organizations and health fairs, all to educate the community at large on the benefits of holistic end-of-life care through hospice.

The applicant again directs particular interest regarding this rule preference toward minorities, Black and Hispanic residents of the area and those suffering from Alzheimer's/ dementia (and their caregivers). The reviewer notes that these populations were discussed in the applicant's response to item E.1.a. of this report.

Brevard HMA Hospice, LLC (CON application #10686) states that community outreach will include educational materials, online tutorials to hospice care for patients/family members and physicians and provide clear admission guidelines online to communicate eligibility and provide education on when hospice is appropriate for patients and family members. Among other materials and documents, Brevard specifically refers to its:

- Hospice Guide to Effective Communication
- Hospice Diagnosis Booklet

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Brevard refers to CON application #10686's Appendix II for examples.

Brevard states constantly looking at how patients and providers can be educated about hospice and putting significant investment behind this effort to provide real-time analysis on when hospice benefits would be appropriate. Brevard contends that reaching patients earlier in the process and providing education allows patients to take full advantage of hospice benefits, including:

- Pain management and symptom control
- Caregiver support
- Medications, equipment and supplies related to the hospice diagnosis
- Help with understanding physiological changes and what to expect
- Emotional counseling for stresses of a serious illness
- Spiritual and grief support
- Volunteer support
- 24 hours/7 days a week on-call RN

Brevard provides it is committed to:

- Conducting at least fifty (50) one-on-one outreach sessions with health care providers and community organizations.
- Monthly Facebook Live presentations such as Hospice Hangout to provide end-of-life education and support to the community.
- Initiate the Pet Peace of Mind Program within the first 24 months. This is a non-profit program that helps patients with terminal illness provide adequate care for their pets as well as helping with placement of pets if needed.
- Initiate Grief Speak online grief support program within the first six months that is available for any families served by the location as well as anyone in the community needing support and caregiver education.
- Provide an online community resource for end-of-life education with HospiceWePromise.com.

Empath Hospice, LLC (CON application #10687)

contends that as a comprehensive model of hospice, Empath Hospice will provide community, consumer, and

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professional education services as an integral part of its mission to serve everyone in the community affected by life-limiting illness, caregiving, and bereavement. The applicant states that specific to SA 6B, it has developed a comprehensive strategy to provide outreach and education regarding hospice services, advance directives, care navigation and bereavement services. Empath reiterates its use of the Empath Mobile Access to Care to “take education right into the communities.”

Florida Hospice, LLC (CON application #10688)

proposes to utilize its experience in supporting community education and hospice outreach activities at its existing hospice operations to develop similar community education and hospice outreach activities at its proposed new hospice program. The applicant states it will leverage its experience in presenting and facilitating discussions regarding The Journey Program, the benefits of hospice, pain management concerns, end-of-life issues, grief and bereavement, additional services provided by hospice (music therapy, massage therapy, etc.). Further, hospice staff will reach out and offer community education and outreach to churches, mosques, synagogues, temples, and other places of worship, senior community centers, assisted living facilities, skilled nursing facilities, continuing care retirement communities, active senior living communities, physicians and physician groups, hospitals, home health agencies, health care training programs, business groups and Chamber of Commerce, and civic groups.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) notes that it will provide a minimum of two educational programs per year intended to increase the awareness of hospice value stating that along with educational programs intended for the public it will develop educational programs both internally and externally through community colleges, university programs and other educational resources to increase the employees education and awareness of how to assist members of the community assessing hospice services. The applicant offers continuing education for health care professionals and whenever possible presents and has

workshops for CME and CEU credits, encouraging the education of its employees by providing a reimbursement for tuition and or certifications committing up to \$2500 per employee and up to \$20,000 annually for tuition reimbursement for employees to continue education in hospice or end-of-life care. The applicant assures it will continue to offer its high level of educational services as it believes an education for the physician, the identified patient and their family, and the community at large and will continue to offer its services in this community.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) responds to this rule preference on pages 100 and 101 of the application and briefly discusses the community education responsibilities/functions of the Community Relations Representative.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) indicates it will have Radio Programs in English (Hospice 101) and Spanish Cada Dia es un Regalo (Every Day is a Gift) and educational events at public libraries. Seasons' education events at long-term care facilities include topics such as:

- Namaste Care
- Hospice Services
- Veteran's Day Celebrations

Seasons proposes to have programming and volunteer recruitment at higher education institutions, food drives, meetings with area LGBTQ+ groups and local Military Affairs committees, Mother's Day Events, and educational events at area houses of worship.

Seasons discusses its website as a community education resource and having a toll-free phone number available 24 hours a day, seven days a week showing that hospice is there for each person who seeks it. Seasons also points out that management publishes education guides and brochures that are available free of charge, and some can be downloaded or reviewed on computers or other devices.

The applicant offers a detailed table on page 2-51 of this application giving example of the continuing education they intend to provide and that it will adapt this type of outreach in SA 6B.

Serenity Hospice Care Inc (CON application #10693) does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not directly respond to this criterion. Transitions does have a brief narrative training on the application's page 67.

(m) Fundraising activities.

Affinity Care of Central Florida LLC (CON application #10685) comments that the Continuum Care Hospice Foundation (the Foundation) is a 501(c)(3) charitable organization and that the Foundation is run entirely by a team of volunteers and knowledgeable staff. The applicant points out that most funds that the Foundation has is from generous gifts from former patients/families and that the applicant will not actively raise funds from the community but that if an individual desires to make a charitable donation, the applicant will direct such individuals to the Foundation.

Brevard HMA Hospice, LLC (CON application #10686) states that it will build upon the existing fundraising activities of LHC Group, mostly notably the Hospice Promise Foundation. Brevard contends that as part of the same operating entity, it will benefit from the LHC Group's donations and while it will be open to donations from area residents and corporations, it is committed to supporting the needs of the hospice through corporate funds.

Empath Hospice, LLC (CON application #10687) states that fundraising activities in SA 6B will be coordinated by the existing Suncoast Hospice Foundation and will be limited to the organization receiving memorial gifts on behalf of patients who have been served by the applicant. stresses that Suncoast Hospice Foundation serves those in need of financial assistance, family members affected by a patient's health condition, and those that need assistance with needs outside or additional expenses associated with their diagnosis.

Empath also states the TideWell Foundation has a long and trusted track record of serving the community.

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Florida Hospice, LLC (CON application #10688) states it will be supported by the Residential Hospice Foundation which is a nonprofit separate entity established in 2012 by its parent organization Graham, whose purpose is to provide support and financial assistance to patients and families impacted by a family member facing a terminal illness. Further, the Residential Hospice Foundation provides funding for community events that are in line with its mission, focus on hospice issues, grief and bereavement, end of life issues, pain management, benefits hospice care, charitable non-profit events, and are open to the public. Florida Hospice cites its past funding for Healing Hearts Children's Grief Camps, An Evening with Elves, Skyline Camp, Variety, Living and Learning Enrichment Center, and First Step.

MD Care Hospice Inc (CON application #10689) does not respond to this criterion.

Odyssey Healthcare of Marion County, LLC (CON application #10690) states it will not actively solicit donations but will provide a list of charitable giving options. Whenever their patient or family indicates a desire to donate reflecting their satisfaction, they will be directed to nonprofit foundations. The applicant does not wish to adversely impact existing nonprofit hospices who depend on community donations to save their programs therefore it will commit to forgo fund raising solicitations for as long as it serves the service area.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) points out that PruittHealth Hospice does not actively raise funds from the community and that therefore, it does not compete with non-profit hospice organizations or other groups in obtaining funds from the community. PruittHealth contends that as a result, the applicant will not dilute potential contributions available in the community or adversely impact existing hospice program fundraising efforts.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) states it will not engage in fundraising activities and any donations received will go to the Seasons Foundation.

Serenity Hospice Care Inc (CON application #10693)
does not respond to this criterion.

Transitions Intermediate Holdings, LLC (CON application #10694) does not respond to this criterion.

- b. **Rule 59-1.0355(8) Florida Administrative Code: Semi-Annual Utilization Reports. Each hospice program shall report utilization information to the Agency or its designee on or before July 20th of each year and January 20th of the following year.**

Affinity Care of Central Florida LLC (CON application #10685) states it will comply with all reporting requirements, reporting results to the Agency or its designee, by the required timeframes.

Brevard HMA Hospice, LLC (CON application #10686) commits to operating as approved under State and Federal rule and regulations.

Empath Hospice, LLC (CON application #10687) indicates that the applicant will timely file its semi-annual utilization reports including all the applicable data elements, as required.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) commits to meeting requirements for reporting services.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) commits to meeting requirements for reporting services.

The following applicants do not directly respond to this question.

Florida Hospice, LLC (CON application #10688)

MD Care Hospice Inc (CON application #10689)

Odyssey Healthcare of Marion County, LLC (CON application #10690)

Serenity Hospice Care Inc (CON application #10693)

Transitions Intermediate Holdings, LLC (CON application #10694) does not directly respond to this criterion. However, the applicant offers on page 64 of this application that it commits to meeting requirements for reporting services.

The reviewer notes that **ALL applicants** completed Schedule D-1 of the application in which it is certified that the applicant “will provide utilization reports to the agency”.

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 applicant’s service area? ss. 408.035(1), (2) and (5), Florida Statutes.**

In Volume 47, Number 152, of the Florida Administrative Register, dated August 6, 2021, need for one hospice program was published in SA 6B for the January 2023 hospice planning horizon. Therefore, the co-batched applicants are applying in response to published need.

SA 6B is currently served by Compassionate Care Hospice of Central Florida, Cornerstone Hospice & Palliative Care Inc, Good Shepherd Hospice and VITAS Healthcare Corporation of Florida. Cornerstone and VITAS also serve an adjacent service area(s).

As shown below, SA 6B’s total admissions increased every year from the 12 months ending June 30, 2017 (5,819 admissions) to the 12 months ending June 30, 2021 (6,960 admissions).

**Service Area 6B Admissions
Five Years Ending June 30, 2021**

12 Months Ending:	Admissions
June 30, 2021	6,960
June 30, 2020*	6,923*
June 30, 2019	6,628
June 30, 2018	6,319
June 30, 2017	5,819

Source: Agency for Health Care Administration Florida Need Projections for Hospice Programs, issued September (2017 and 2018), October 2019 and August 2021

Note: * The 12 months ending June 30, 2020, include 683 admissions as reported to the Agency for the months of July – December 2019, that were not published due to cancellation of the July 2020 batch.

Affinity Care of Central Florida LLC (CON application #10685)

indicates that regarding availability and accessibility, it is:

- The most appropriate co-batched applicant for a variety of reasons, such as having:
 - Successful start-up experience in both Broward County and Sarasota County
 - Identified underserved population groups in the SA and has developed strategies to penetrate these population groups
 - The experience to lift-up minority and other population groups
 - Unique programming initiatives well-received by patients and referral sources

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- Service intensity that is meaningful and additional resources not currently available
 - Being a medium-sized, privately held hospice with vastly different services than those currently offered in the area
- Plans to increase hospice awareness, enhance accessibility to hospice and ensure availability to hospice services for area residents
- Promote hospice services to the Black and Hispanic populations in the area.
- The Applicant will develop and initiate a community paramedic program in coordination with local EMS providers
- Provide unique clinical programs such as
 - Affinity Cardiac Care
 - Affinity Pulmonary Care
 - Continuum Palliative Resources (including care for those with Alzheimer's Disease)

Regarding extent of utilization, Affinity Care points out that the greatest need or gap in hospice service is among the age 65+ population and particularly the age 65+ non-cancer group. Affinity Care further emphasizes minority population hospice need for the Black and Hispanic populations in the area. Affinity reiterates its discussion previously shown in item E.1.a. of this report.

The applicant discusses its 'Affinity HomeCare HomeBase', which it indicates is utilized by all Affinity/Continuum hospice programs. Affinity Care also briefly discusses quality of care - see quality of care in item E.3.b. of this report.

Affinity Care also responds to the Health Care Access Criteria (page 118 of the application). The applicant states that Affinity Care will admit any eligible patient without regard to their ability to pay.

Brevard HMA Hospice, LLC (CON application #10686) reiterates the applicant's first two tables described in item E.1.a. of this report. Brevard contends that the existing providers have been unable to keep pace with the "dramatic increase in need" and that 6B needs another market provider with the capability to reach new patients. The applicant cites its projected 294 admissions for year one and 411 year two admissions and concludes that this allows a total of 103 patients in year one and 97 patients in year two to be allocated between the existing providers.

Empath Hospice, LLC (CON application #10687) reiterates the portions of its response in item E.1.a. which were included on the application's pages 35-48.

Florida Hospice, LLC (CON application #10688) reiterates previous responses, but includes the following underserved needs that it had not previously addressed: the large population of U.S. military veterans as well as the growing population of Black and Hispanics, the need for hospice services that are spoken in Spanish, the increase of the number of deaths, the age-adjusted death rates being higher in 6B than in the State of Florida, the reduction of utilization of hospice services in 2020, particularly in Polk county residents, the applicants extensive experience in treating respiratory issues of which is a leading cause of death in SA 6B. Florida Hospice indicates that it will draw from its culturally diverse existing hospice staff to recruit, screen, train its staff and will utilize the organization's operational experience for efficiency. Further, its preferred office location would be in Hardee County as Hardee is the poorest and most poorly served SA 6B county.

Florida Hospice proposes to be geographically accessible and provide the following specialty services: Cancer Specialty Program, Heart Failure Patients, Dementia Patients. These services are detailed on the application's pages 74-76.

MD Care Hospice Inc (CON application #10689) states "yes" in response to this criterion. The applicant's response to quality of care is addressed in item E.3.b. of this report.

Odyssey Healthcare of Marion County, LLC (CON application #10690) reiterates its discussion provided in Schedule B, Section E.1, E.2 and its Conditions in Schedule C for how it will address these needs. Odyssey contends it has received numerous letters to support for its project including private individuals, long term care facilities and other elderly care providers and that, in total, they have received 12 letters of support as listed in Exhibit 4.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) reiterates discussion of penetration rates among existing hospice programs in SA 6B, as well as statewide penetration rates.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) reiterates that regarding access, the proposal improves availability of hospice care through outreach and education of gatekeepers and through building a strong workforce. Further, establishing Chaplain with expertise in the African American Community, Minority representation on the Governing Board

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(conditioned response), SAGE Certification, Cultural Inclusion Council, Hattian Community Council and establishing a main office within Polk County with additional offices in Hardee and Highlands Counties will promote staffing and service geared toward the target population of greatest need.

Concerning access, Seasons restates that establishing partnerships throughout the service area with churches, senior centers, community health departments, and other community centers.

Serenity Hospice Care Inc (CON application #10693) states “yes” in response to this criterion. The applicant’s response to quality of care is addressed in item E.3.b. of this report.

Transitions Intermediate Holdings, LLC (CON application #10694) contends that due to programmatic accessibility challenges in the area, the following five groups are underserved and have unmet hospice needs:

- Individuals with End-Stage Cardiac Disease
- Individuals with End-Stage Pulmonary Disease
- Individuals with Dementia Disease
- Individuals with Alzheimer’s Disease
- Veterans

The reviewer notes that in addition to the above, in item E.2.a.(1) of this report, Transitions combined dementia/Alzheimer’s into a single category of unmet hospice need in the area and also included two categories not stated here - persons with cancer and persons with renal disease.

Regarding geographic accessibility, CON application #10694 states it has taken into consideration the needs of each county and its residents and will provide personalized services in each geographic area (page 80 of the application).

The applicant also briefly discusses financial accessibility and extent of utilization. Particularly regarding financial accessibility, the reviewer notes that Transitions agrees to the provision of at least five percent annually of total patient days to patients who are reimbursed under traditional Medicaid, Managed Medicaid, or uncompensated care. As previously stated, the Agency we will not impose a Medicaid or charity care condition on a hospice program.

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- b. Does the applicant have a history of providing quality of care? Has the applicant demonstrated the ability to provide quality care? ss. 408.035(3), Florida Statutes.**

The Agency maintains a Hospice Quality Reporting Program (HQRP) website at <https://www.floridahealthfinder.gov/Hospice/Hospice.aspx>. In this website, the Agency shares hospice quality characteristics through the following Centers for Medicare and Medicaid Services' reporting requirements found in the assessment sources and survey instruments of:

- CAHPS® (Patients and Family Experience Measures-Consumer Assessment of Healthcare Provider and Systems)
- HIS (Quality of Patient Care Measures-Hospice Item Set)

The timeframes for CAHPS® and for HIS are as follows:

- CAHPS® - January 1, 2018 through December 31, 2019
- HIS – January 1, 2019 through December 31, 2019

Below is the publicly available HQRP information, as presented in the referenced website for each of the co-batched applicants (or the parent/manager and corresponding affiliates), with current licensed Florida hospices that had ratings as of December 31, 2019.

**CAHPS Data
January 1, 2018 through December 31, 2019
for the Co-Batched Hospice Providers**

Co-Batched Applicant Hospice Provider	Measures								
	Communication With Family	Getting Timely Help	Treating Patient with Respect	Emotional and Spiritual Support	Help for Pain and Symptoms	Training Family to Care for Patient	Caregiver Rated the Hospice 9 or 10	Willing to Recommend this' Hospice	AVG Score
Brevard	81%	79%	90%	92%	72%	72%	86%	90%	83%
Empath	79%	78%	90%	91%	71%	69%	83%	88%	81%
ODY/Kindred	77%	75%	88%	90%	72%	70%	79%	79%	79%
Seasons	72%	70%	83%	84%	72%	65%	69%	74%	74%
State Average	78%	75%	88%	89%	73%	70%	80%	84%	80%

Source: <https://www.floridahealthfinder.gov/Hospice/Hospice.aspx>, as of October 5, 2021
Note: See the HIS table below for the applicants' service areas included in these ratings.

The co-batched applicants with licensed Florida hospices Quality of Patient Care Measures-Hospice Item Set's rating on patients who got an assessment on all seven HIS quality measures are shown below.

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Hospice Provider/SA Facility/City	Patients Who Got an Assessment of All 7 HIS Quality Measures
Brevard (Wuesthoff) SA 7A/Rockledge	98.2%
Empath Hospice LLC Suncoast/SA 5B	99.8%
Odyssey/Kindred at Home Affiliates SA 1/Pensacola SA 2A/Panama City SA 7B/Orlando SAs 3B, 4B, 11/Miami Average	98.3%
Seasons SA 5A/Wesley Chapel (N/R) SA 5B/Clearwater SA 6A/Tampa SA 10/Dania Beach SA 11/Miami-Dade Average	92.7%
State Average	96.4%

Source: <https://www.floridahealthfinder.gov/Hospice/Hospice.aspx>

Affinity Care of Central Florida LLC (CON application #10685)

begins by reiterating that the entity is a development stage corporation, established for the purpose of initiated hospice service in SA 6B and further states having no operational history. However, Affinity Care comments that Affinity/Continuum, through its existing and past affiliate agencies, has been providing quality hospice care since 2015. Affinity also discusses beginning licensure dates and Community Health Accreditation Partner (CHAP) accreditation for its two affiliate Florida hospices - Continuum Care of Broward LLC and Continuum Care of Sarasota LLC.

The applicant provides two bar charts (pages 120 and 121) to indicate that based on its previous CON application estimates:

- Continuum Care of Broward LLC (in its first 10 months of operation) has met its CON forecasted admissions/average daily census (16.35 actual compared to 16.39 forecasted) and patient days (4,970 actual compared to 4,982 forecasted)
- Continuum Care of Sarasota LLC (in its first three months of operation) has surpassed expectations year to date both in CON forecasted admissions/average daily census (604 actual compared to 2.45 forecasted) and patient days (556 actual compared to 225 forecasted)

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Affinity Care emphasizes that meeting or exceeding the CON projections in both of the above operations is particularly commendable, considering that the forecasts were completed prior to the COVID-19 pandemic or even knowledge or recognition of it.

Affinity Care maintains that its Florida hospice affiliates (Continuum Care of Broward LLC and Continuum Care of Sarasota LLC) have robust quality assurance and performance improvement (QAPI) Plans in place and its SA 6B program will develop and maintain a QAPI program that will be similar to its affiliates.

The QAPI Plan, services intensity and unique/specialty programming to enhance quality is further discussed in detail (pages 122-126 of the application). Continuing education/in-service training and CHAP accreditation are further described on pages 126 and 127 of the application. See the applicant's response in item E.1.a. of this report.

Agency records indicate that as of October 25, 2021, Affinity Care's affiliated Florida hospices, have had no substantiated complaints since their licensed operations began.

Brevard HMA Hospice, LLC (CON application #10686) states that LHC Group's history, licensure, quality, and accreditation are discussed at length in Sections (V) and (C) are incorporated here by reference, adding it has included letters of support within Appendix I as a testament to the organization's quality and reputation. Brevard states it is committed to obtaining Joint Commission accreditation.

Agency records indicate that during the 36 months ending October 25, 2021, Brevard HMA Hospice LLC d/b/a Wuesthoff Health System Brevard Hospice and Palliative Care, had no substantiated complaints.

Empath Hospice, LLC (CON application #10687) maintains that the parent, Empath Health, is one of only a handful of organizations nationwide to hold Joint Commission Accreditation and/or Certification inclusive of hospice, home health, community-based palliative care, and pharmacy programs.

TideWell Hospice holds accreditation by the Community Health Accreditation Program with deemed status, and its affiliated entities hold a variety of accreditations including Joint Commission Accreditation, Accreditation Commission for Health Care (ACHC) and CHAP. Empath states that the comprehensive and inclusive Quality and Safety Strategy reflects all programs and aligns the commitment to becoming a High Reliability Organization (HRO), avoiding areas of

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duplication, overlap and inefficiencies that would undoubtedly occur if these plans were addressed separately. The applicant maintains that Empath Health Quality and Safety Strategy meets the Quality Assessment Process Improvement and Quality Management/Utilization Review ("QM/UR") requirements of all regulatory and funding bodies including but not limited to:

- Suncoast Hospice
- Empath Home Health
- Suncoast PACE
- Empath Partners in Care
- Empath Community Health Services

Empath discusses Suncoast Hospice and TideWell's state and national scores for CAHPS Survey and provides a table to account for results of CAHPS measures for January 1, 2018, through December 31, 2019. Empath provides these results, Florida averages and the existing SA 6B hospice scores on the application's page 172, Figure 80.

Empath indicates its "Willing to Recommend This Hospice" was higher than the state average of 84 with a score of 88 percent (Suncoast). Further, it offers a hospice sponsored by a large, stable community provider with Suncoast and TideWell having consistently higher scores than state and national averages on both the HIS and CHAPs scores. Empath discusses its management commitment to quality and provides an extensive list of awards and recognitions for Suncoast Hospice/ Empath Health dating from the 1980s to 2019 on the application's pages 173 -178.

Agency records indicate that during the 36 months ending October 25, 2021, Empath Hospice LLC's affiliated Florida hospices, had one substantiated complaint citing the Administration/Personnel category.

Florida Hospice, LLC (CON application #10688) reports that all seven of Graham's, the parent company, hospice agencies exceeded CMS National Benchmarks on Quality Scores for each of the eight Hospice Item Set (HIS). The applicant provides the overall CAHPS Scores, as well. Graham Healthcare Group's seven hospices were stated to have the following CAHPS for the "most recent data December 2019" on page 81 of its application.

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Hospice	Willing to recommend this hospice	Commun . with family	Getting timely help	Treating patient with respect	Emotional & spiritual support	Help for pain & symptoms	Training family to care for patient	Caregivers rated the hospice a 9 or 10
Graham Healthcare Group (Florida Hospice, Inc.)	83%	84%	77%	92%	93%	78%	75%	Not provided

MD Care Hospice Inc (CON application #10689) response is “yes”. No additional narrative is provided.

Odyssey Healthcare of Marion County, LLC (CON application #10690) reiterates that as an existing hospice provider with seven hospice sites in Florida it is committed to providing quality care. The applicant’s table 24 on page 51 of the application shows its averages for the seven HIS quality measures. The applicant provides a new CMS data response, the Hospice Care Index (HCI) that provides more information to better reflect several processes of care during a hospice stay and better empower patients and family care givers to make informed health care decisions (Table 25, page 52 of this application). Odyssey’s QAPI plan is included as the application’s Exhibit 8.

Agency records indicate that during the 36 months ending October 25, 2021, Odyssey Healthcare’s affiliated Florida hospices, had two substantiated complaints both citing the Administration/Personnel category.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) previously indicated to be a development-stage entity with no licensed hospice programs in Florida, states that PruittHealth has a total of 25 hospice programs spread among three states (Georgia, North Carolina, and South Carolina), with an aggregative of 4,527 hospice admissions in 2019 (page 11, Figure 6 of the application).

PruittHealth lists a total a 35 “Best Practices” at PruittHealth hospice (pages 13-15 of the application) and provides a table to describe where hospice and palliative care differ or are the same (page 19, Figure 7 of the application). Additionally, the applicant provides the PruittHealth Model of Care (CON application #10691, page 38, Figure 30) and offers a brief narrative of the model’s five components. Further, PruittHealth offers a diagram of the PruittHealth Continuum of Care (page 107, Figure 76 of the application).

PruittHealth indicates participation in (and can track and trend) quality outcome measures to assess clinical and performance indicators, through the Strategic Healthcare Programs data analysis system. PruittHealth also states its hospices participate in CAHPS and

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HIS and that for the 12 months ending June 30, 2020 (most recently available data), PruittHealth Hospice exceeded the national average in 13 of 16 quality-related metrics, some of which (page 111 of the application) include:

- Overall Rating of Hospice
 - PruittHealth 2019 (85.0 percent) and 2020 (83.0 percent)
 - National average of 81 percent
- Comprehensive Assessment
 - PruittHealth 2019 (90.8 percent) and 2020 (93.5 percent)
 - National average of 88.7 percent
- Visits in the Last 3 Days by an RN
 - PruittHealth 2019 (90.8 percent) and 2020 (92.1 percent)
 - National average of 82.6 percent
- Getting Timely Care
 - PruittHealth 2019 (77.0 percent) and 2020 (79.0 percent)
 - National average of 78.0 percent
- Getting Help for Symptoms
 - PruittHealth 2019 (78.0 percent) and 2020 (76.0 percent)
 - National average of 75.0 percent

The five bulleted measures above were expressly listed in narrative by PruittHealth, in its response to item E.3.b. of this report.

The Agency notes that upon further review of CON application #10691, page 108, Figure 77, the following is of note:

- Would Recommend Hospice
 - PruittHealth 2019 (82.0 percent) and 2020 (81.0 percent)
 - National average of 84.0 percent

PruittHealth maintains that in 2002, PruittHealth began its “Committed to Caring” campaign which is in its 19th year, and the applicant provides its Mission, Vision and Commitment to Caring Pledge on 109 of the application. PruittHealth offers discussion of the following quality of care characteristics on pages 113-119 of the application:

- Corporate Standards
- Memberships
- PruittHealth
 - Consulting Services
 - Pharmacy
- CMS Quality Improvement Organization
- Satisfaction Surveys (with benchmarks purchased from *My InnerView*)
- The Joint Commission

- PruittHealth
 - Quality Report
 - Quality Assurance and Performance Improvement (QAPI) and various QAPI staff and their responsibilities
 - Staffing, Training and Career Development
 - Pruitt University
 - CNA Career Ladder
 - Leadership Mirroring
 - Bi-Annual Leadership Conference
 - Orientation for Professional Nurses
 - CPR Instructor Training
 - The Green Sweep Program

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) reported that its most recent CAHPS data that is currently available is from January 2018 through December 2019. The applicant notes that it is making additional efforts because it stated “the HIS and CAHPS data for November 2020 showed Seasons’ quality scores did not reflect the feedback” it had been receiving from its patients and families.

Specific to CAHPS improvement initiative, Seasons explains that when HIS and CAHPS data for November 2020 showed Seasons quality scores did not reflect the feedback local hospice teams were receiving from patients and families, it did not wait until another CAHPS or HIS survey publication. According to the applicant, Seasons engaged Hospice Advisors to conduct an additional 10-questions telephone survey (page 146 of the application). According to Seasons, some characteristics about the 10-question telephone survey are:

- 1,472 phone numbers of active Florida hospice patients/families
- Interviews between September 8 and October 13, 2021
- Questions 1-9 (closed-ended) had 599 respondents
- Question 10 (open-ended) had 576 respondents

Seasons provides a table regarding the tabulated results (page 147 of the application). The applicant explains that Seasons is using the responses and comments to improve procedures, training and supervision for Seasons Florida hospice staff.

However, Seasons survey result (question 10 - If you had a friend who was facing the death of a loved one as you are now, would you tell them about Seasons?” had zero yes and zero no and 57 not sure responses, with 519 ‘comments’. Comments were stated to indicate that they respondent gave comments but did not give a yes or no response. While the applicant indicates this is an open-ended

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question, Seasons 'willing to recommend this hospice' CAHPS score is 74 percent compared to the Florida and national hospices average of 84 percent. The survey question does not indicate an upgrade in Seasons' low 'willing to recommend this hospice' score.

Seasons reiterates its proposals for Quality in this application or conditions adding it will seek Joint Commission (JC) accreditation or CHAP, provide electronic medical records, the Compassionate Allies Program, obtain membership in the National Hospice and Palliative Care Organization (NHPCO) and the Florida Hospice and Palliative Care Association (FHPCA) and adhere to the CMS quality reporting requirements- Consumer Assessment of Healthcare Providers and Systems and the Hospice Item Set. Seasons also discusses its TRUE HOPE corporate culture, its National Ethics Committee, its Seasons Circle of Care, Make a Difference Calls, and managerial Compliance Committee.

Agency records indicate that during the 36 months ending October 25, 2021, Seasons' affiliated Florida hospices had one substantiated complaint citing two categories – Quality of Care/Treatment and Resident/Patient/Client Rights.

Serenity Hospice Care Inc (CON application #10693) response is "yes". No additional narrative is provided.

Transitions Intermediate Holdings, LLC (CON application #10694) was previously indicated to be a development stage entity with no hospice operating history in Florida. Transitions and affiliates bullet a total of eight reasons that according to the applicant set Transition apart from the rest through its staffing capabilities (duplicated on page 50 of this application).

Transitions discusses the following on pages 7-9 of the application:

- Transition Mission
- Transition Hospice Commandments (three fundamental principles)
 - Commit to Hospice
 - Each Patient is Unique
 - Always Do the Right Thing
- Tenets (Acceptance, Empowerment, Peace and Freedom)

Transitions emphasizes the profound belief that no individual should die alone – ever.

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The applicant describes the interdisciplinary care team structure, support and cadence (pages 13-15 of the application).

The applicant provides a Palliative Care Program Model (page 34, Exhibit 6 of the application). The reviewer notes that through CON application #10694 does not offer a source and does not offer a time frame or issuance date, Transitions provides diagrams to reflect Transitions palliative care outcomes pertaining to the following end-stage/terminal illnesses (pages 36-41 of the application):

- COPD (Exhibit 7)
- Heart Failure (Exhibit 8)
- Neuro-Cognitive (Exhibit 9)
- Oncology (Exhibit 10)
- Renal (Exhibit 11)

Per the applicant, Transitions Hospice has continuously received CHAP's "Excellence" award in all of its active areas of care. The applicant explains that this level of care will continue to be put forward in Florida if the project is approved. Exhibit 13 of the application includes a copy of a July 27, 2020, CHAP 2020 Accreditation Letter indicating that Transitions Hospice, LLC d/b/a Transitions Hospice (in the State of Illinois) was found to be in compliance with the CHAP Standards of Excellence (review dates of June 8 -12, 2020).

The reviewer notes that the Exhibits 14-16 on pages 43-46, indicate a CHAPS rating for various quality measures. Particularly regarding CON application #10694, page 44, Exhibit 14-Overall Rating of Hospice Care, the diagram indicates that Transitions Hospice of Central Illinois received the following ratings:

- 85 percent-overall rating of hospice care compared to
 - National rating of 85 percent
 - State of Illinois rating of 82 percent
- Would You Recommend This Hospice?
 - 85 percent (definitely yes)
 - 15 percent (probably yes)

Concerning diversity, Transitions explains that Transitions and all its subsidiaries are committed to creating an inclusive work environment the welcomes the ideas of all cultures and backgrounds. The applicant points out that Transition Hospice employees are (page 53 of the application):

- 39.3 percent minority
- 90.3 percent female
- 43.7 percent millennial

Transitions states a recognition and an understanding that there is no place like home and offers the full spectrum of services of care for every patient wherever they reside.

Transitions discusses continuity of care and provides Exhibit 2-Care Team Organization (pages 22 and 83 of the application). The application's pages 83-96 address other quality topics under the following headings:

- Extended Care Team
- End-of-Life Doulas
- Grief and Bereavement Support
- Medical Equipment and Supplies
- Volunteer Services
 - Companionship
 - Family Support
 - Internships
 - Animal Assisted (therapy pets)
- Veterans
 - Veteran Pinning Ceremonies
- Emergency Preparedness

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(4), Florida Statutes.

Applies to all applicants - 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 benchmarks established from financial ratios collected from Florida acute care hospitals. While not always a perfect match to a

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particular CON project it is a reasonable proxy for health care related entities.

Below is an analysis of the audited financial statements for the applicant, where the short-term and long-term measures fall on the scale (highlighted in gray) for the most recent year.

Affinity Care of Central Florida LLC (CON application #10685):

10685 - Affinity Care of Central Florida, LLC	
	Sep-21
Current Assets	\$500,000
Total Assets	\$500,000
Current Liabilities	\$0
Total Liabilities	\$0
Net Assets	\$500,000
Total Revenues	\$0
Excess of Revenues Over Expenses	\$0
Cash Flow from Operations	\$0
Short-Term Analysis	
Current Ratio (CA/CL)	N/A
Cash Flow to Current Liabilities (CFO/CL)	N/A
Long-Term Analysis	
Long-Term Debt to Net Assets (TL-CL/NA)	0.0%
Total Margin (ER/TR)	N/A
Measure of Available Funding	
Working Capital	\$500,000

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	N/A	N/A	N/A	N/A	N/A
N/A = The analysis is based on a development stage entity, with no operations. As such, the Total Margin Metric does not apply.					

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Capital Requirements and Funding:

On Schedule 2, the applicant indicates capital projects totaling \$374,825, which includes the CON currently under review, and other capital expenditures. The applicant indicates on Schedule 3 of its application that funding for the project will be by cash from operations. With \$500,000 in cash on hand and an available 17 million from the Stern Family trust, the applicant has sufficient resources to fund this project and all capital expenditures.

Conclusion:

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

Brevard HMA Hospice, LLC (CON application #10686) submitted its parent company – LHC Group, Inc’s audited financial statements.

10699 - LHC Group, Inc. & Subs		
	Dec-20	Dec-19
Current Assets	\$647,022,000	\$380,274,000
Total Assets	\$2,483,354,000	\$2,140,295,000
Current Liabilities	\$681,436,000	\$230,972,000
Total Liabilities	\$870,000,000	\$633,044,000
Net Assets	\$1,613,354,000	\$1,507,251,000
Total Revenues	\$2,063,204,000	\$2,080,241,000
Excess of Revenues Over Expenses	\$137,933,000	\$113,852,000
Cash Flow from Operations	\$529,247,000	\$130,462,000
Short-Term Analysis		
Current Ratio (CA/CL)	0.9	1.6
Cash Flow to Current Liabilities (CFO/CL)	77.67%	56.48%
Long-Term Analysis		
Long-Term Debt to Net Assets (TL-CL/NA)	11.7%	26.7%
Total Margin (ER/TR)	6.69%	5.47%
Measure of Available Funding		
Working Capital	(\$34,414,000)	\$149,302,000

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%

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Capital Requirements and Funding:

On Schedule 2, the applicant indicates capital projects totaling \$13,969,743, which includes the nationwide capital expenditures and hospice applications in other Florida service areas.

The applicant indicates on Schedule 3 of its application that funding for the project will be provided by related company financing. The most recent audit showed \$286.5 million in cash on hand and \$529.2 million in cash from operating activities.

Conclusion: Funding for this project and the entire capital budget should be available as needed.

Empath Hospice, LLC (CON application #10687):

10687 - Empath Health, Inc., and Affiliates		
	Sep-20	Dec-19
Current Assets	\$60,899,089	\$42,980,160
Total Assets	\$153,563,537	\$132,583,258
Current Liabilities	\$25,032,594	\$19,613,595
Total Liabilities	\$32,793,507	\$28,561,196
Net Assets	\$120,770,030	\$104,022,062
Total Revenues	\$177,837,926	\$159,178,261
Excess of Revenues Over Expenses	\$15,900,472	\$8,173,178
Cash Flow from Operations	\$19,123,191	\$10,379,397
Short-Term Analysis		
Current Ratio (CA/CL)	2.4	2.2
Cash Flow to Current Liabilities (CFO/CL)	76.39%	52.92%
Long-Term Analysis		
Long-Term Debt to Net Assets (TL-CL/NA)	6.4%	8.6%
Total Margin (ER/TR)	8.94%	5.13%
Measure of Available Funding		
Working Capital	\$35,866,495	\$23,366,565

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%

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Capital Requirements and Funding:

On Schedule 2, the applicant indicates capital projects totaling \$744,860, which includes the CON currently under review, and other capital expenditures.

The applicant indicates on Schedule 3 of its application that funding for the project will be by parent company cash and investment. With \$40.5 million in parent company cash on hand, the applicant has sufficient resources to fund this project and all capital expenditures.

Conclusion:

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

Florida Hospice, LLC (CON application #10688) submitted its ultimate parent, Graham Holding Company’s audited financial statements.

10688 - Graham Holdings Company		
	Dec-20	Dec-19
Current Assets	\$1,774,192,000	\$1,663,485,000
Total Assets	\$6,444,119,000	\$5,931,236,000
Current Liabilities	\$949,646,000	\$1,041,871,000
Total Liabilities	\$2,677,726,000	\$2,604,440,000
Net Assets	\$3,766,393,000	\$3,326,796,000
Total Revenues	\$2,889,121,000	\$2,932,099,000
Excess of Revenues Over Expenses	\$100,407,000	\$144,546,000
Cash Flow from Operations	\$210,663,000	\$165,164,000
Short-Term Analysis		
Current Ratio (CA/CL)	1.9	1.6
Cash Flow to Current Liabilities (CFO/CL)	22.18%	15.85%
Long-Term Analysis		
Long-Term Debt to Net Assets (TL-CL/NA)	45.9%	47.0%
Total Margin (ER/TR)	3.48%	4.93%
Measure of Available Funding		
Working Capital	\$824,546,000	\$621,614,000

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:

On Schedule 2, the applicant indicates capital projects totaling \$1,489,227, which includes the CON currently under review, and two other CONs.

While the applicant indicates on Schedule 3, line 4 that funding will come from non-related company financing. However, written statements attached to the schedule from both the applicant and the parent company state that funding for project will be provided by Graham Holding Company, the ultimate parent of the applicant.

Staff further notes that the parent company provided a signed letter of financial commitment from its CFO and senior vice president of the company acknowledging the project along with its commitment to provide funding for it.

With \$414 million in cash and cash equivalents, the investor has sufficient resources to fund this project and all capital expenditures.

Conclusion: Funding for this project and the entire capital budget should be available as needed.

MD Care Hospice Inc (CON application #10689): In its filing, the applicant did not provide the required audited financial statements of itself or its parent company (if there were one) for review and analysis by the Agency. In addition, the applicant did not provide any form of proof of financing for the project.

Capital Requirements and Funding:

On Schedule 1, the applicant claims total projected project costs of \$26,000, while on Schedule 2, the applicant anticipates total capital projects of only \$6,300 for furnishings and equipment presumably for this CON, but not labeled as such (there were no capital costs specifically identified for CON application #10689).

In sum, the project totals claimed on Schedules 1 and 2 appear to be contradictory and as such, the total amount of capital projects to be funded cannot be determined.

Schedule 3 of the application identifies the make-up of applicants' funding for the project along with substantive evidence of the existence and availability of the financing claimed, including, but not limited to required audited financial statement of the applicant and parent company, substantiated loan commitments, etc. As noted above, the applicant did not provide any required or other proof of financing. As

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such, the applicant failed to prove its ability to finance any amount of project costs.

Conclusion: The total project costs to be funded cannot be determined and the applicant failed to prove its ability to fund any amount of project costs or initial operating losses.

Odyssey Healthcare of Marion County, LLC (CON application #10690) submitted its parent company, Kindred at Home, Inc.'s audited financial statements.

10690 - Kindred at Home		
	Dec-20	Dec-19
Current Assets	\$843,437,000	\$561,465,000
Total Assets	\$5,696,604,000	\$5,519,407,000
Current Liabilities	\$553,090,000	\$403,870,000
Total Liabilities	\$2,997,959,000	\$3,040,510,000
Net Assets	\$2,698,645,000	\$2,478,897,000
Total Revenues	\$2,965,400,000	\$3,100,296,000
Excess of Revenues Over Expenses	\$422,872,000	\$265,813,000
Cash Flow from Operations	\$515,460,000	\$168,384,000
Short-Term Analysis		
Current Ratio (CA/CL)	1.5	1.4
Cash Flow to Current Liabilities (CFO/CL)	93.20%	41.69%
Long-Term Analysis		
Long-Term Debt to Net Assets (TL-CL/NA)	90.6%	106.4%
Total Margin (ER/TR)	14.26%	8.57%
Measure of Available Funding		
Working Capital	\$290,347,000	\$157,595,000

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:

On Schedule 2, the applicant indicates capital projects totaling \$2,002,695, which includes the CON currently under review, another CON, and other capital expenditures.

The applicant indicates on Schedule 3 of its application that funding for the project will be by related company financing. With \$379 million in cash and cash equivalents, the parent has sufficient resources to fund this project and all capital expenditures.

Conclusion: Funding for this project and the entire capital budget should be available as needed.

PruittHealth Hospice – Central Florida, LLC (CON application #10691): The applicant provided a development stage audit showing \$0 assets, \$0 liabilities and \$0 revenues and expenses. The applicant submitted a letter stating that the ultimate parent, United Health Services, would be supplying the funding. The parent submitted a bank printout showing an available cash balance of \$6,293,187.55.

Capital Requirements and Funding:

The applicant failed to complete Schedule 2. Schedule 1 shows the total project cost to be \$270,320. On Schedule 3, the applicant indicates related company financing of \$270,320. With \$6.3 million in cash on hand, the parent has sufficient resources to fund this project and all capital expenditures.

Conclusion: Funding for this project and the entire capital budget should be available as needed.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) submitted its parent company, Horizon Acquisition Co., Inc.'s audited financial statements.

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10692 - Horizon Acquisition Co., Inc. & Subs		
	Dec-20	Dec-19
Current Assets	\$315,401,000	\$131,526,000
Total Assets	\$2,304,843,000	\$1,132,090,000
Current Liabilities	\$206,044,000	\$101,194,000
Total Liabilities	\$1,436,979,000	\$647,102,000
Net Assets	\$867,864,000	\$484,988,000
Total Revenues	\$949,710,000	\$885,524,000
Excess of Revenues Over Expenses	\$46,692,000	(\$22,221,000)
Cash Flow from Operations	\$15,554,000	(\$17,116,000)
Short-Term Analysis		
Current Ratio (CA/CL)	1.5	1.3
Cash Flow to Current Liabilities (CFO/CL)	7.55%	-16.91%
Long-Term Analysis		
Long-Term Debt to Net Assets (TL-CL/NA)	141.8%	112.6%
Total Margin (ER/TR)	4.92%	-2.51%
Measure of Available Funding		
Working Capital	\$109,357,000	\$30,332,000

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:

On Schedule 2, the applicant indicates capital projects totaling \$1,251,516, which includes only the CON currently under review. Staff notes that the applicant has one other CON application being considered in this application batch, number 10706, which the parent company is also committing to fund. Neither those project costs or any capital project costs were included on Schedule 2.

The applicant indicates on Schedule 3 of its application that funding for the project will come from its parent company, Horizon Acquisition Co., Inc., through cash on hand. In support of that claim, the

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applicant provided a letter of financial commitment from the CFO of Horizon Acquisition Co., Inc., acknowledging the project and committing to its funding.

With \$56.3 million in cash and cash equivalents, the applicant has sufficient resources to fund this project and all capital expenditures.

Conclusion: Funding for this project and the entire capital budget should be available as needed.

Serenity Hospice Care Inc (CON application #10693): In its filing, the applicant did not provide the required audited financial statements of itself or its parent company (if there were one) for review and analysis by the Agency. In addition, the applicant did not provide any form of proof of financing for the project.

Capital Requirements and Funding:

On Schedule 1, the applicant claims total projected project costs of \$26,000, while on Schedule 2, the applicant anticipates total capital projects of only \$6,300 for furnishings and equipment presumably for this CON, but not labeled as such (there were no capital costs specifically identified for CON application #10693).

In sum, the project totals claimed on Schedules 1 and 2 appear to be contradictory and as such, the total amount of capital projects to be funding cannot be determined.

Schedule 3 of the application identifies the make-up of applicants' funding for the project along with substantive evidence of the existence and availability of the financing claimed, including, but not limited to required audited financial statement of the applicant and parent company, substantiated loan commitments, etc. As noted above, the applicant did not provide any required or other proof of financing. As such, the applicant failed to prove its ability to finance any amount of project costs.

Conclusion: The total project costs to be funded cannot be determined and the applicant failed to prove its ability to fund any amount of project costs or initial operating losses.

Transitions Intermediate Holdings, LLC (CON application #10694):

On Schedule 2, the applicant indicates capital projects totaling \$642,598, which includes the CON currently under review. The applicant indicates on Schedule 3 of its application that funding for the project will be by cash on hand.

The applicant did not submit audited financial statements as required. The applicant instead submitted an internal statement showing their financial position. However, since the statement is not part of audited financial statements they cannot be relied upon as proof of funds.

Conclusion: Funding for this project and the entire capital budget is in question.

d. What is the immediate and long-term financial feasibility of the proposal? ss. 408.035(6), Florida Statutes

The following applies to **all** applicants: The immediate and long-term financial feasibility of the project is tied to expected profitability. Profitability for hospice is driven by two factors, volume of patients and length of stay/condition of the patient. A new hospice program in a service area with published need is more likely than not to be financially feasible since patient volume and mix is presumed to be available in sufficient amounts to sustain a new program. The focus of our review will be on the reasonableness of projections, specifically the revenue.

The vast majority of hospice days are paid by Medicare (Medicaid is the next largest payer with similar reimbursement rates). As such, revenue is predictable by day and service type. Schedule 7 includes revenue by service type. We have divided the applicant's projected revenues by the estimated Medicare reimbursement rates for each level of service in year two to estimate the total patient days that would be generated by that level of revenue. The results were then compared to the applicant's estimated number of patient days. Calculated patient days that approximate the applicant's projected patient days are considered reasonable and support the applicant's assumptions of feasibility. Calculated patient days that vary widely from the applicant's projected patient days call into question the applicant's profitability assumptions and feasibility. Staff notes that the filing involves three Counties: Polk, Hardee, and Highlands. Staff calculated an average rate for the wage component of the calculation. While there was no wage index for Hardee County, staff estimates the difference would be immaterial on the calculation. The results of the calculations are summarized below.

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Affinity Care of Central Florida LLC (CON application #10685):

CON 10685	Affinity Care of Central Florida, LLC Year Two: April 2024				
Polk, Hardee and Highlands	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Base Rate Calculation					
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.037	\$181.10	\$2,902,131		16,025
Routine Home Care 61+ days	1.037	\$143.11	\$2,902,131		20,278
Continuous Home Care	1.037	\$1,276.48	\$52,261	24	41
Inpatient Respite	1.037	\$426.35	\$55,965		131
General Inpatient	1.037	\$956.29	\$125,376		131
		Total	\$6,037,863		36,606
			Days from Schedule 7		32,560
			Difference		-4,046
			Percentage Difference		-12.43%

As such, the applicant’s projected patient days are 12.43 percent or 4,046 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from a negative \$545,503 in year one to \$101,551 in year two.

Conclusion: This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

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Brevard HMA Hospice, LLC (CON application #10686):

CON 10686	Brevard HMA Hospice, LLC d/b/a Mederi Hospice Year Two: June 2023				
Polk, Hardee and Highlands	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Base Rate Calculation					
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.014	\$177.01	\$1,697,910		9,592
Routine Home Care 61+ days	1.014	\$139.88	\$2,851,311		20,384
Continuous Home Care	1.014	\$1,247.64		24	0
Inpatient Respite	1.014	\$416.72	\$130,095		312
General Inpatient	1.014	\$934.68	\$973,048		1,041
		Total	\$5,652,364		31,329
				Days from Schedule 7	30,553
				Difference	-776
				Percentage Difference	-2.54%

As such, the applicant’s projected patient days are 2.54 percent or 776 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from \$35,434 in year one to \$718,272 in year two.

Conclusion: This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

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Empath Hospice, LLC (CON application #10687):

HOSPICE REVENUE (Year 2) TABLE 1 CON 10687 Empath Hospice, LLC County: Polk, Hardee, and Highlands Year Two: Mar-23					
CON 10687	Empath Hospice, LLC				
Polk, Hardee, and Highlands	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Base Rate Calculation					
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.037	\$181.10	\$1,842,975		10,176
Routine Home Care 61+ days	1.037	\$143.11	\$2,824,579		19,737
Continuous Home Care	1.037	\$1,276.48	\$147,427	24	115
Inpatient Respite	1.037	\$426.35	\$65,782		154
General Inpatient	1.037	\$956.29	\$604,024		632
		Total	\$5,484,787		30,814
				Days from Schedule 7	27,962
				Difference	-2,852
				Percentage Difference	-10.20%

As such, the applicant’s projected patient days are 10.2 percent or 2,852 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from a loss of \$679,455 in year one to \$132,797 in year two.

Conclusion:

This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

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Florida Hospice, LLC (CON application #10688):

HOSPICE REVENUE (Year 2) TABLE 1 CON 10688 Florida Hospice, LLC County: Polk, Hardee, and Highlands Year Two: Jun-24					
CON 10688	Florida Hospice, LLC				
Polk, Hardee and Highlands Base Rate Calculation	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23

Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.037	\$181.10	\$2,597,711		14,344
Routine Home Care 61+ days	1.037	\$143.11	\$2,769,479		19,352
Continuous Home Care	1.037	\$1,276.48		24	0
Inpatient Respite	1.037	\$426.35	\$52,259		123
General Inpatient	1.037	\$956.29	\$310,980		325
		Total	\$5,730,429		34,143
			Days from Schedule 7		31,187
			Difference		-2,956
			Percentage Difference		-9.48%

As such, the applicant’s projected patient days are 9.48 percent or 2,956 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from an operating loss of \$120,056 in year one to \$622,985 in year two.

Conclusion:

This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

MD Care Hospice Inc (CON application #10689): Staff notes that the applicant offered contradictory patient day projections with Schedule 5 projecting 3,820 and 15,718 total patient days in in years one and two respectively, respectively, while projecting 105 and 630 total patient days in years one and two respectively, on Schedule 7.

Calculated patient days that approximate the applicant’s projected patient days are considered reasonable and support the applicant’s assumptions of feasibility. Calculated patient days that vary widely

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from the applicant’s projected patient days call into question the applicant’s profitability assumptions and feasibility.

Taking a conservative approach and using what is both the lowest number of patient days from the above as to not overstate revenues and what is the year two value from Schedule 8, year two, staff used 630 patient days in its recalculation.

MD Care Hospice Inc (CON application #10689):

CON 10689	MD Care Hospice Inc Year Two: December 2023				
Polk, Hardee and Highlands Base Rate Calculation	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.027	\$179.37	\$50,000		279
Routine Home Care 61+ days	1.027	\$141.74	\$100,000		705
Continuous Home Care	1.027	\$1,264.26	\$0	0	0
Inpatient Respite	1.027	\$422.27	\$0		0
General Inpatient	1.027	\$947.13	\$0		0
		Total	\$150,000		984
			Days from Schedule 7		630
			Difference		-354
			Percentage Difference		-56.23%

As such, the applicant’s projected patient days are 56.23 percent or 354 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from a loss of \$900 in year one to \$85,900 in year two.

Conclusion:

The project feasibility cannot be determined due to material understatement of patient days and/or overstatement of revenues.

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Odyssey Healthcare of Marion County, LLC (CON application #10690):

CON 10690	Odyssey Healthcare of Marion County, LLC Year Two: December 2024				
Polk, Hardee and Highlands Base Rate Calculation	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison					
	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.057	\$184.57	\$1,612,403		8,736
Routine Home Care 61+ days	1.057	\$145.85	\$4,410,857		30,241
Continuous Home Care	1.057	\$1,300.92	\$196,687	15.4	97
Inpatient Respite	1.057	\$434.51	\$27,484		63
General Inpatient	1.057	\$974.60	\$107,597		110
		Total	\$6,355,027		39,248
		Days from Schedule 7			33,446
		Difference			-5,802
		Percentage Difference			-17.35%

As such, the applicant’s projected patient days are 17.35 percent or 5,802 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from \$386,679 in year one to \$1,799,372 in year two.

Conclusion:

This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

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PruittHealth Hospice – Central Florida, LLC (CON application #10691):

CON 10691	PruittHealth Hospice - Central Florida, LLC Year Two: June 2021				
Polk, Hardee and Highlands Base Rate Calculation	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.037	\$181.10	\$2,579,235		14,242
Routine Home Care 61+ days	1.037	\$143.11	\$1,388,819		9,704
Continuous Home Care	1.037	\$1,276.48	\$283,310	24	222
Inpatient Respite	1.037	\$426.35	\$31,426		74
General Inpatient	1.037	\$956.29	\$487,828		510
		Total	\$4,770,618		24,752
			Days from Schedule 7		24,297
			Difference		-455
			Percentage Difference		-1.87%

As such, the applicant’s projected patient days are 1.87 percent or 455 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from an operating loss of \$541,928 in year one to \$203,816 in year two.

Conclusion: This project appears to be financially feasible, although patient days may be slightly understated and/or revenues slightly overstated.

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Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692):

CON 10692	Seasons Hospice & Palliative Care of Brevard County, LLC – Year Two: December 2024				
Polk, Hardee and Highlands	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Base Rate Calculation					
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.057	\$184.57	\$1,582,782		8,575
Routine Home Care 61+ days	1.057	\$145.85	\$3,693,157		25,321
Continuous Home Care	1.057	\$1,300.92	\$1,255,462	24	965
Inpatient Respite	1.057	\$434.51	\$24,423		56
General Inpatient	1.057	\$974.60	\$542,572		557
		Total	\$7,098,396		35,474
				Days from Schedule 7	27,738
				Difference	-7,736
				Percentage Difference	-27.89%

As such, the applicant’s projected patient days are 27.89 percent or 7,736 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from an operating loss of \$702,902 in year one to \$224,258 in year two.

Conclusion: This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

Serenity Hospice Care Inc (CON application #10693): Staff notes that the applicant offered contradictory patient day projections with Schedule 5 projecting 3,820 and 15,718 total patient days in in years one and two respectively, respectively, while projecting 105 and 630 total patient days in years one and two respectively, on Schedule 7.

Calculated patient days that approximate the applicant’s projected patient days are considered reasonable and support the applicant’s assumptions of feasibility. Calculated patient days that vary widely from the applicant’s projected patient days call into question the applicant’s profitability assumptions and feasibility.

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Taking a conservative approach and using what is both the lowest number of patient days from the above as to not overstate revenues and what is the year two value from Schedule 8, year two, staff used 630 patient days in its recalculation.

Serenity Hospice Care Inc (CON application #10693):

Polk, Hardee and Highlands					
Base Rate Calculation	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.027	\$179.37	\$50,000		279
Routine Home Care 61+ days	1.027	\$141.74	\$100,000		705
Continuous Home Care	1.027	\$1,264.26	\$0	0	0
Inpatient Respite	1.027	\$422.27	\$0		0
General Inpatient	1.027	\$947.13	\$0		0
Total			\$150,000		984
			Days from Schedule 7		630
			Difference		-354
			Percentage Difference		-56.23%

As such, the applicant’s projected patient days are 56.23 percent or 354 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from a loss of \$900 in year one to \$85,900 in year two.

Conclusion: The project feasibility cannot be determined due to material understatement of patient days and/or overstatement of revenues.

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Transitions Intermediate Holdings, LLC (CON application #10694):

CON 10694	Transitions Intermediate Holdings LLC				
Polk, Hardee and Highlands	Wage Component	Wage Index	Adjusted Wage Amount	Unadjusted Component	Payment Rate
Base Rate Calculation					
Routine Home Care 1-60 days	\$131.61	0.8119	\$106.85	\$67.80	\$174.65
Routine Home Care 61+ days	\$104.00	0.8119	\$84.44	\$53.58	\$138.02
Continuous Home Care	\$1,078.25	0.8119	\$875.43	\$355.59	\$1,231.02
Inpatient Respite	\$283.32	0.8119	\$230.03	\$181.14	\$411.17
General Inpatient	\$665.05	0.8119	\$539.95	\$382.28	\$922.23
Year Two Comparison	Inflation Factor Year Two	Inflation Adjusted Payment Rate	Schedule 7 Revenue Year 2	Continuous Service Hours Provided	Calculated Patient Days
Routine Home Care 1-60 days	1.037	\$181.10	\$1,485,711		8,204
Routine Home Care 61+ days	1.037	\$143.11	\$2,725,913		19,047
Continuous Home Care	1.037	\$1,276.48	\$351,545	24	275
Inpatient Respite	1.037	\$426.35	\$53,898		126
General Inpatient	1.037	\$956.29	\$241,839		253
Total			\$4,858,906		27,905
			Days from Schedule 7		27,021
			Difference		-884
			Percentage Difference		-3.27%

As such, the applicant’s projected patient days are 3.27 percent or 884 days less than the number of patient days calculated by staff. Operating profits from this project are expected to increase from a loss of \$434,337 in year one to \$377,628 in year two.

Conclusion: This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

e. Will the proposed project foster competition to promote quality and cost-effectiveness? ss. 408.035(7), Florida Statutes.

All applicants: Strictly, from a financial perspective, the type of price-based competition that would result in increased efficiencies, service, and quality is limited in health care in general and in hospice specifically. 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 hospice, price-based

competition is almost non-existent. With the revenue stream essentially fixed on a per patient basis, the available margin to increase quality and offer additional services is limited.

Conclusion:

Strictly, from a financial perspective, this project will not have a material impact on price-based competition.

- f. Are the proposed costs and methods of construction reasonable? Do they comply with statutory and rule requirements? ss. 408.035 (8), Florida Statutes; Ch. 59A-4, Florida Administrative Code.**

There are no construction costs and methods subject to CON application review for the proposed hospice programs.

- g. Does the applicant have a history of providing 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(9), Florida Statutes.**

Hospice programs are required by federal and state law to provide hospice patients with inpatient care when needed (42 Code of Federal Regulations 418.108). Hospice care also must be provided regardless of ability to pay and regardless of age, race, religion, sexual orientation, diagnosis, payer source or financial status. Therefore, the Agency will not impose a charity care or Medicaid patient day condition on an applicant.

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**Service Area 6B Applicants
Medicaid and Charity Care
History & Projections**

Applicant/CON #	Discusses Applicant/Parent History	Year One Medicaid Proposed	Year Two Medicaid Proposed	Year One Charity Care	Year Two Charity Care
Affinity/10698	Yes	2.0%	2.0%	3.5%	3.5%
Brevard HMA/10686	Yes	5.0%	5.0%	1.0%	1.0%
Empath Hospice, LLC/10687	Yes	3.5%	3.5%	1.5%	1.5%
Florida Hospice/10688	Yes	2.8%	2.8%	.3%	.3%
MD Care Hospice Inc/10689	Yes	Not provided	Not Provided	Not Provided	Not Provided
Odyssey Marion/10673	Yes	3.1%	3.1%	2.0%	2.0%
PruittHealth/10691	Yes	3.0%	3.0%	3.0%	3.0%
Seasons/10676	Yes	4.0%	4.0%	2.0%	2.0 %
Serenity Hospice Care Inc/10693	Yes	Not provided	Not Provided	Not Provided	Not Provided
Transitions/10694	Yes	* 6.5%	*2.46%	*Applicant's percentages are the combination of Medicaid, Self-Pay and Charity	

Source: Applicant's responses to Item E. 3. g. and/or Schedule 7A.

The reviewer notes that MD Care and Serenity Hospice indicate they will “provide services to Medicaid patients as well as the medically indigent” but do not provide additional details.

F. SUMMARY

The applicants propose to establish a new SA 6B hospice program.

Affinity Care of Central Florida LLC (CON application #10685), a Florida Limited Liability Company, states that Continuum Care Hospice and Affinity Health Management have the same leadership team. The applicant states that Continuum Care Hospice was founded in 2013 and includes seven affiliated hospice programs in five states: Florida, New Jersey, Ohio, Virginia, and Washington.

Affinity has two Florida operational hospice affiliates - Continuum Care of Sarasota LLC (SA 8D - licensed 6/18/21) and Continuum Care of Broward LLC (SA 10 - licensed 11/5/20) and two CON-approved programs pending licensure - Affinity Care of Manatee County (CON #10651) and Continuum Care of Miami-Dade LLC (CON #10658).

In this batching cycle, Affinity Care also proposes to establish a new hospice program in SA 9C.

Total project cost \$362,825. The applicant expects issuance of license in April 2022 and initiation of service in May 2022.

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Pursuant to project approval, Affinity Care of Central Florida LLC offers 19 Schedule C conditions.

Brevard HMA Hospice, LLC (CON application #10686) is a Florida for-profit Limited Liability Company and an affiliate of/managed by LHC Group, which has hospice operations in Alabama, Arizona, Arkansas, Florida, Georgia, Idaho, Illinois, Michigan, Missouri, Nevada, New Jersey, North Carolina, Oklahoma, Pennsylvania, South Carolina, Tennessee, Texas, Virginia, Washington, and West Virginia. The applicant provides hospice services in SA 7A d/b/a Wuesthoff Health System Brevard Hospice and Palliative Care.

In this batching cycle, LHC Group also proposes to establish new hospice programs in SAs 1, 3B, 9A, and 9C.

Total project cost \$490,769.98. The applicant expects issuance of license and initiation of service in July 2022.

Pursuant to project approval, Brevard offers a total of 11 Schedule C conditions.

Empath Hospice, LLC (CON application #10687) is a Florida limited liability company, whose parent company Empath Health operates licensed hospice programs in SA 5B d/b/a Suncoast Hospice and SAs 6C, 8A and 8D d/b/a TideWell Hospice. Suncoast Hospice also has CON #10605 approved yet to be licensed to serve SA 6A.

Total project cost \$744,860. The applicant expects issuance of license and initiation of service during April 2022.

Pursuant to project approval, Empath offers a total of 19 Schedule C conditions.

Florida Hospice, LLC (CON application #10688) is a for-profit, development stage Florida Limited Liability Company and is an affiliate of Residential Healthcare Group, Inc. The companies that comprise Graham Healthcare Group, provide hospice services in Illinois, Michigan and Pennsylvania. Florida Hospice, LLC also proposes to establish new hospice programs in SA 9A and 9C in this batching cycle.

Total project cost \$533,355. The applicant expects issuance of license and initiation of service on or about July 2022.

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Pursuant to project approval, Florida Hospice, LLC offers 19 Schedule C conditions.

MD Care Hospice Inc (CON application #10689) is a for-profit development stage Florida corporation, whose owner indicates she is a “business owner of several Home Health and Hospice agencies in California and Nevada”. No additional information on these agencies is provided.

MD Care expects issuance of its license in December 2021 and initiation of service in January 2022. The license cannot be issued in December 2021 as the appeal period will not end until 5 p.m. on January 10, 2022.

The applicant proposes \$26,000 in total project costs which includes project development costs. No costs are shown for equipment or start-up for the SA 6B project.

MD Care Hospice does not propose any conditions to CON approval.

Odyssey Healthcare of Marion County, LLC (CON application #10690) is a for-profit Foreign Limited Liability Company established in Delaware on April 19, 2007, authorized to transact business in Florida since October 31, 2012. Odyssey is an affiliate of the Kindred at Home Hospice Division, which operates hospices in 34 states. Kindred at Home Hospice/Curo Health Services is the owner/licensee, with controlling interest for hospice programs in SAs 1, 2A, 3B, 4B, 7B, and 11.

In this batching cycle, Odyssey Healthcare of Marion County, LLC also proposes to establish new hospice program in SA 9C.

Total project cost \$612,378. The applicant expects issuance of license on December 31, 2022 and initiation of service on January 1, 2023

Pursuant to project approval, Odyssey Healthcare of Marion County, LLC offers a total of 16 Schedule C conditions.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) is a for-profit development stage Florida entity and an affiliate of PruittHealth, Inc. PruittHealth currently provides administrative-related services to its affiliated health care providers in Florida, Georgia, North Carolina, and South Carolina and proposes to provide all the administrative-related responsibilities for the proposed project. PruittHealth’s ultimate parent company United Health Services, Inc., does not currently provide hospice services in Florida.

CON Action Numbers: 10685 through 10694

PruittHealth also proposes to establish new hospice programs in SAs 1, 3B and 9C.

Total project cost \$353,011. The applicant expects issuance of license and initiation of service on January 1, 2023.

Pursuant to project approval, PruittHealth offers Schedule C conditions which are divided under seven categories as listed in the 'Project Summary' portion of this review.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) is a development stage for-profit Florida entity and an affiliate of Seasons Hospice & Palliative Care, Inc. Seasons is wholly owned by AccentCare, Inc. as of December 22, 2020, when the entities merged. Seasons/AccentCare has hospice operations in Arizona, California, Colorado, Connecticut, Delaware, Florida, Georgia, Illinois, Indiana, Massachusetts, Maryland, Michigan, Mississippi, Missouri, New Jersey, Nevada, Oregon, Pennsylvania, Tennessee, Texas, and Wisconsin.

Seasons provides hospice services in Florida SAs 5A, 5B, 6A, 10, and 11. In this batching cycle, Seasons also proposes to establish new hospice program in SA 9C.

Total project cost \$1,251,516. The applicant expects issuance of license in December 2022 and initiation of service in January 2023.

Pursuant to project approval, Seasons offers 30 Schedule C conditions.

Serenity Hospice Care Inc (CON application #10693) is a for-profit development stage Florida entity, whose current status with the Florida Secretary of State's Division of Corporations is inactive in that effective September 24, 2021, the applicant's last event is "Admin Dissolution For Annual Report". The applicant's owner indicates he is a "business owner of several Home Health and Hospice agencies in California and Nevada". No additional information on these agencies is provided.

Serenity Hospice Care Inc expects issuance of its license in December 2021 and initiation of service in January 2022. However, a license cannot be issued in December 2021 as the appeal period will not end until 5 p.m. on January 10, 2022.

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The applicant proposes \$26,000 in total project costs which includes project development costs. No costs are shown for equipment or start-up for the SA 6B project.

Serenity Hospice Care Inc does not propose any conditions to CON approval.

Transitions Intermediate Holdings, LLC (CON application #10694)

is a for profit Foreign Limited Liability Company established in the State of Delaware on July 22, 2021 and authorized to transact business in Florida as of September 29, 2021. Transitions states it currently has licensed and active hospice operations in Michigan, Illinois, Indiana and Pennsylvania, but has no licensed or CON-approved yet to be licensed Florida hospices. In this batching cycle, Transitions also proposes to establish new hospice programs in SAs 1, 3B and 9C.

Total project cost is \$642,598. The applicant expects issuance of license and initiation of service in October 2022.

Transitions did not provide a complete Schedule C with proposed conditions.

Need/Access:

The proposed projects are in response to the fixed need pool for a new hospice in SA 6B.

Affinity Care of Central Florida LLC (CON application #10685)

states the following strategic initiatives to be implemented into the proposed project:

- Enhance Hospice Utilization Amongst Hispanic and Black Minority Groups
- Develop and Initiate a Community Paramedic Program with Local EMS to Reduce Unnecessary Trips to the Emergency Room
- Specialty Disease Specific Clinical Programs and outreach to Enhance Hospice Utilization for Alzheimer's Disease and Dementia, Affinity Cardiac Care and Affinity Pulmonary Care Programs

The applicant estimates year one total admissions of 181 and year two total admissions of 440.

Brevard HMA Hospice, LLC (CON application #10686) states a commitment to serve the following populations with unmet hospice needs in the area:

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- Those in need of palliative care
- Patients without primary caregivers
- The homeless population
- Veterans
- The increasing growth of the 65 and older population

Brevard contends that:

- None of the existing providers, or new providers, replicate LHC Group's deep post-acute care experience and expertise that complement hospice services along the care continuum
- Current area providers have recently been unable to keep pace with the dramatic increase in need demonstrated in the market
- LHC Group knows how to leverage its technology, clinical experiences, and market presence to drive organic growth in market penetration rates to reach patients at the right time in their care journey for hospice services

Brevard projects to have 294 year one and 411 year two admissions.

Empath Hospice, LLC (CON application #10687) states it will target the 65 and older population without a cancer diagnosis, implement special programs, address the racial and ethnic disparities and increase outreach to the rural areas. The applicant contends that SA 6B is supported not just by the Agency's Fixed Need Pool but by the following:

- The large and growing population in the area
- The aging population in the area
- Increasing numbers of deaths of the three-county area residents
- The deficit of service to the 65+ non-Cancer population in AHCA's calculation of need and
- The low death service ratios for hospice services, compared to other Florida counties

The applicant provides detailed population data, health care assessments and its own survey data in support of its need analysis.

Empath projects it will have 371 year one and 451 year two admissions.

Florida Hospice, LLC (CON application #10688) contends there will be a significant increase in the 75 years and older population extrapolating that, with the AHCA projected 15 percent growth in the age 65 and older population by 2026, there is a projected growing need for additional hospice services in SA 6B. Florida Hospice states that with more than 17 percent of the population living in poverty, and

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nearly 19 percent of persons under age 65 without health insurance, a significant segment of the population is poor, and that it has a proven track record in Michigan, Illinois, and Pennsylvania as Residential Hospice of providing hospice services to the socioeconomically disadvantaged.

The applicant estimates year one total admissions of 252 and estimates year two total admissions of 450 (462 if by age groups).

MD Care Hospice Inc (CON application #10689) indicates its focus “is to provide a family centered approach in the delivery of hospice care” and it “will design a program to provide quick response times and focus on having above average bedside care by offering aide visits five to seven days per week”. The applicant describes services to be offered include:

- Pain and Symptom Management
- Counseling and Support Services
- Spiritual Counseling
- Therapy Service
- Skilled Nursing Care
- Hospice Aide Services
- Volunteer Services
- Supplies, Medication and Durable Medical Equipment related to the Life Limiting Illness
- Continuous Care
- Outpatient Services
- General Inpatient Services
- Respite Care Services.

MD Care Hospice Inc does not provide projected admissions. Schedule 7A indicates it will have 105 year one (CY 2022) patient days and 630 in year two (CY 2023) patient days while its Schedule 5 indicates it will have 3,820 and 15,718 total patient days in years one and two.

Odyssey Healthcare of Marion County, LLC (CON application #10690) conveys that along with a shift towards older ages about 45 percent of the persons over the age of 65 will be in the 75 and older demographic and by 2030, this proportion is expected to equal about 47.5 percent. The applicant believes additional hospice services tailored to elderly individuals, especially those over the age 75, will be critical to 6B resident hospice access. Further, Hardee County has a relatively high proportion of residents that identify as Hispanic, or Latino (43.6 percent) and Polk County has a higher proportion of residents that identify as Black or African American.

Odyssey addresses the homeless populations stating most homeless individuals in 6B reside in Polk County, and of those counted, most reside in shelters. While the service area homeless population is less than 1,000 persons, this represents a population in which hospice care is often challenging to serve primarily due to the transient nature of their living situation. The concludes that most of the additional 6B hospice need will occur for individuals with heart disease and other associated diseases such as stroke. Odyssey states it will locate its office in Polk County.

Odyssey projects 222 year one and 450 year two admissions.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) states a commitment to serve the following underserved groups with unmet hospice needs in the area:

- Indigent residents and particularly
 - The homeless
 - The population living under 185 percent of the Federal Poverty Level
 - Residents experiencing food insecurity
 - Elderly residents living alone
- Veterans
 - Particularly veterans residing in rural areas of SA 6B
- Patients with specific terminally ill diseases and diagnoses who can benefit from PruittHealth’s Pathways Programs

The applicant estimates year one total admissions of 136 and estimates year two total admissions of 375.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) addresses these main issues within the service area:

- There is widespread need throughout the three counties, but Polk County has the majority of unmet hospice need.
- The greatest need is among the elderly (65+) including those with Alzheimer’s Disease.
- The underserved Minority populations are: African American, Hispanic/Latino, Lesbian, Gay, Bisexual, Transgender (LGBT) Community, and Veterans.
- Rural populations, the isolated individuals and the homeless.
- Of the terminally ill, the greatest unmet need is among those with heart disease and pulmonary disease.

The applicant estimates year one total admissions of 223 and estimates year two total admissions of 414.

Serenity Hospice Care Inc. (CON application #10693) indicates its focus “is to provide a family centered approach in the delivery of hospice care” and it “will design a program to provide quick response times and focus on having above average bedside care by offering aide visits five to seven days per week”. Services to be offered as described by the applicant include:

- Pain and Symptom Management
- Counseling and Support Services
- Spiritual Counseling
- Therapy Service
- Skilled Nursing Care
- Hospice Aide Services
- Volunteer Services
- Supplies, Medication and Durable Medical Equipment related to the Life Limiting Illness
- Continuous Care
- Outpatient Services
- General Inpatient Services
- Respite Care Services.

Serenity Care does not provide projected admissions. Schedule 7A indicates it will have 105 year one (CY 2022) patient days and 630 in year two (CY 2023) patient days. However, the applicant’s Schedule 5 projects 3,820 and 15,718 total patient days in years one and two.

Transitions Intermediate Holdings, LLC (CON application #10694) contends that this proposed hospice program should be approved for the following reasons:

- Above and beyond clinical care model including:
 - 24/7/365 availability
 - Comprehensive IDG care team
 - Extensive ancillary services including but not limited to End-of-Life Doula support, music and massage therapy, animal visits, and more
 - Vigil sitting commitments
 - Palliative-to-hospice connection
 - Extensive software integration
 - Remote patient monitoring
- Exceeding national standards, receiving a 4.5 Star Rating
- Hospice and palliative operations in MI, IL, IN, and PA
- Access to Routine, Respite, Continuous and In-Patient care in either the home or a care facility
- Staffing capabilities

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Transitions states a commitment to serving the following populations with unmet needs:

- Cancer
- End Stage Renal Disease
- End Stage Dementia and Alzheimer’s Disease
- End Stage Pulmonary Disease
- End Stage Vascular Disease and
- Veterans

The applicant estimates 62 total year one admissions and 66 total year two admissions.

CON application # 10687 Empath Hospice, LLC, on balance, best satisfied the statutory and rule criteria for a new hospice provider in SA 6B pursuant to published need—this included identifying:

- *The proposed populations that are being underserved for hospice*
- *Services/programs proposed to make hospice more accessible and available to underserved populations*
- *Being a high quality provider serving adjoining service areas, with strong local community support from SA 6B health organizations, social services organizations, and other entities*

Quality of Care:

Each co-batched applicant offered evidence of its ability to provide quality care.

Affinity Care of Central Florida LLC (CON application #10685) is a development stage entity with no licensed operations or history. The applicant commits to develop and maintain a Quality Assurance Performance Improvement Plan like those that are already utilized by its affiliated programs. The two affiliated Florida hospice programs Continuum Care of Broward LLC and Continuum Care of Sarasota LLC have no substantiated complaints for the three-year period ending October 26, 2021. They do not have CHAP and HIS quality scores because the programs were not operational as of December 31, 2019.

Brevard HMA Hospice, LLC (CON application #10686) commits to develop and maintain a Quality Assurance Performance Improvement Plan like those that are already utilized by its affiliated programs. The one affiliated Florida hospice program Wuesthoff Health System

LHC Group’s “Willing to Recommend This Hospice” CHAPS score was higher than the state average of 84 with a score of 88 percent. LHC

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Group's HIS - Patients who got an assessment of all 7 HIS quality measures was 96.5 - slightly higher than the state average of 96.3 percent

Brevard Hospice and Palliative Care had no substantiated complaints for the three-year period ending October 26, 2021.

Empath Hospice, LLC (CON application #10687) commits to develop and maintain a Quality Assurance Performance Improvement Plan like those that are already utilized by its affiliated programs.

Empath's "Willing to Recommend This Hospice" CHAPS score was higher than the state average of 84 with a score of 88 percent (Suncoast). Suncoast's HIS - Patients who got an assessment of all 7 HIS quality measures was 99.8 - higher than the state average of 96.4 percent.

Empath's Florida hospice programs had one substantiated complaint citing the Administration/Personnel category for the three-year period ending October 26, 2021.

Florida Hospice, LLC (CON application #10688) commits to develop and maintain a Quality Assurance Performance Improvement Plan like those that are already utilized by its affiliated programs.

Graham Healthcare Group's seven hospices average "Willing to Recommend This Hospice" CHAPS score was 83 percent slightly lower than the state average of 84 percent.

MD Care Hospice Inc (CON application #10689) has no licensed Florida hospices and is not CON-approved to have a Florida hospice.

Odyssey Healthcare of Marion County, LLC (CON application #10690) commits to develop and maintain a Quality Assurance Performance Improvement Plan like those that are already utilized by its affiliated programs.

Odyssey's "Willing to Recommend This Hospice" CHAPS score 84 percent same as the state average. Odyssey's HIS - Patients who got an assessment of all 7 HIS quality measures score was 98.3 percent, which is higher than the state average of 96.4 percent.

During the 36 months ending October 25, 2021, Odyssey Healthcare affiliated Florida hospices had two substantiated complaints both citing the Administration/Personnel category.

PruittHealth Hospice – Central Florida, LLC (CON application #10691) is a development stage Florida entity with no licensed and no CONs approved pending licensure in Florida. However, PruittHealth has exceeded 13 of 16 quality measures when compared to national averages, pursuant to HQRP and CAHPS data results (for the 12 months ending June 30, 2020). The first five bullets below are results narratively highlighted by PruittHealth and the sixth bullet is noted by the Agency:

- Overall Rating of Hospice
 - PruittHealth 2019 (85.0 percent) and 2020 (83.0 percent)
 - National average of 81 percent
- Comprehensive Assessment
 - PruittHealth 2019 (90.8 percent) and 2020 (93.5 percent)
 - National average of 88.7 percent
- Visits in the Last 3 Days by an RN
 - PruittHealth 2019 (90.8 percent) and 2020 (92.1 percent)
 - National average of 82.6 percent
- Getting Timely Care
 - PruittHealth 2019 (77.0 percent) and 2020 (79.0 percent)
 - National average of 78.0 percent
- Getting Help for Symptoms
 - PruittHealth 2019 (78.0 percent) and 2020 (76.0 percent)
 - National average of 75.0 percent
- Would Recommend Hospice
 - PruittHealth 2019 (82.0 percent) and 2020 (81.0 percent)
 - National average of 84.0 percent

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692) commits to develop and maintain a Quality Assurance Performance Improvement Plan like those that are already utilized by its affiliated programs.

Seasons Florida hospices average “Willing to Recommend This Hospice” CHAPS score was 74 percent, which is lower than the state average of 84 percent. Seasons HIS - Patients who got an assessment of all 7 HIS quality measures was 92.7, also lower than the state average of 96.4 percent.

Of the five affiliated Florida hospice programs, Seasons Hospice and Palliative Care of Southern Florida LLC has one substantiated complaint in two separate categories Quality of Care/Treatment and Resident/Patient/Client Rights for the three-year period ending October 26, 2021.

Serenity Hospice Care Inc (CON application #10693) has no licensed Florida hospices and is not CON-approved to have a Florida hospice.

Transitions Intermediate Holdings, LLC (CON application #10694) is a development stage Florida entity with no licensed and no CONs approved pending licensure hospices in Florida. Transitions contends that compliance with the CHAP Standards of Excellence will continue to be put forward in Florida if the project is approved. Affiliated Transitions Hospice, LLC d/b/a Transitions Hospice (in the State of Illinois):

- Received a July 27, 2020, CHAP 2020 Accreditation Letter indicating that it is in compliance with the CHAP Standards of Excellence (site review of June 8-12, 2020)
- Transitions Hospice of Central Illinois received the following CHAP scores/ratings:
 - 85 percent-overall rating of hospice care compared to
 - National rating of 85 percent
 - State of Illinois rating of 82 percent
- Would You Recommend This Hospice?
 - 85 percent (definitely yes)

Financial Feasibility/Availability of Funds:

Affinity Care of Central Florida LLC (CON application #10685):

- Funding for this project and the entire capital budget should be available as needed.
- This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

Brevard HMA Hospice, LLC (CON application #10686):

- Funding for this project and the entire capital budget should be available as needed.
- This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

Empath Hospice, LLC (CON application #10687):

- Funding for this project and the entire capital budget should be available as needed.
- This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

Florida Hospice, LLC (CON application #10688):

- Funding for this project and the entire capital budget should be available as needed.

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- This project appears to be financially feasible, although patient days, and thus revenue, may be overstated.

MD Care Hospice Inc (CON application #10689):

- The total project costs to be funded cannot be determined and the applicant failed to prove its ability to fund any amount of project costs or initial operating losses.
- The project feasibility cannot be determined due to material understatement of patient days and/or overstatement of revenues.

Odyssey Healthcare of Marion County, LLC (CON application #10690):

- Funding for this project and the entire capital budget should be available as needed.
- This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

PruittHealth Hospice – Central Florida, LLC (CON application #10691):

- Funding for this project and the entire capital budget should be available as needed.
- This project appears to be financially feasible, although patient days may be slightly understated and/or revenues slightly overstated.

Seasons Hospice & Palliative Care of Central Florida, LLC (CON application #10692):

- Funding for this project and the entire capital budget should be available as needed.
- This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

Serenity Hospice Care Inc (CON application #10693):

- The total project costs to be funded cannot be determined and the applicant failed to prove its ability to fund any amount of project costs or initial operating losses.
- The project feasibility cannot be determined due to material understatement of patient days and/or overstatement of revenues.

Transitions Intermediate Holdings, LLC (CON application #10694):

- Funding for this project and the entire capital budget is in question.
- This project appears to be financially feasible, although patient days may be understated and/or revenues overstated.

Medicaid/Indigent/Charity Care:

Hospice programs are required by federal and state law to provide hospice patients with inpatient care when needed (42 Code of Federal Regulations 418.108). Hospice care also must be provided regardless of ability to pay and regardless of age, race, religion, sexual orientation, diagnosis, payer source or financial status.

All applicants provide their or the parent's history and state they will serve Medicaid and medically indigent patients. Two applicants – MD Care Hospice Inc and Serenity Hospice Care Inc do not provide the percentage of projected care to these patients.

G. RECOMMENDATION:

Approve CON #10687 to Empath Hospice, LLC to establish a new hospice program in SA 6B. The total project cost is \$744,860.

CONDITIONS:

1. Development of Disease-Specific Programming

- a. Empath Hospice, LLC will deploy a heart failure program, known as Empath Cardiac CareConnections Program, for residents of Hardee, Highlands and Polk Counties who are in late stages of disease and in need of hospice care.
- b. Empath Hospice, LLC will develop disease-specific programming for three-county area patients suffering from Alzheimer's Disease, known as Empath Alzheimer's/Dementia CareConnections Program.
 - Empath Hospice, LLC will implement a Music in Caregiving program for Hardee, Highlands and Polk Counties hospice patients, including those suffering from Alzheimer's Disease and will employ a 0.5 FTE Board-Certified Music Therapist by Year 2.

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- c. Empath Hospice, LLC will deploy disease-specific programming for three-county area patients suffering from end-stage pulmonary disease, known as Empath Pulmonary CareConnections Program.
 - Empath Hospice will assure a Licensed Respiratory Therapist will be part of the Interdisciplinary Care Team for patients suffering from end stage pulmonary disease.
 - Empath Hospice will recruit a contract Pulmonologist to provide oversight of the Empath Pulmonary CareConnections Program.
- d. Empath Hospice, LLC will deploy an end-stage renal disease program, known as Empath Renal CareConnections Program, for residents of Hardee, Highlands and Polk Counties who are in late stages of disease and in need of hospice care.
- e. Empath Hospice, LLC will deploy a comprehensive wound care and ostomy program for residents of Hardee, Highlands and Polk Counties who require wound care as a complementary program to their end-stage disease.

2. Development of Resources for Rural and Low-Income Populations

- a. Empath Hospice, LLC will allocate \$375,000 to purchase, equip and operate a dedicated vehicle to specifically conduct mobile outreach activities in Hardee, Highlands and Polk Counties. The mobile care unit will be known as "Empath Mobile Access to Care".
 - Empath Hospice, LLC's mobile outreach unit (referenced in condition 2(a)) will be staffed by a bilingual LPN and a bilingual BSW and will visit numerous areas (to be determined), throughout the three-county area.
 - The mobile unit will be outfitted with the required technology to facilitate telehealth and videoconferencing sessions to reach those without internet access.
- Empath Hospice, LLC will work with Central Florida Health Care (CFHC), a Federally Qualified Health Center, to develop a collaborative program that will deploy Empath's mobile care unit to CFHC's community health centers throughout

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the three-county area. The goal will be to assist CFHC's patients with advanced illness navigate the health care system, link them to the right level of care at the right, time, and identify patients who are medically eligible for hospice earlier in their disease process.

- b. Empath Hospice, LLC will partner with Heartland Rural Health Network, Inc. to include their Community Health Workers within the mobile unit in an effort to better reach patients with chronic, advanced, or terminal illness in the three-county area. Empath Hospice, LLC will designate \$25,000 annually for five years to Heartland Rural Network, Inc as part of this partnership.
- c. Empath Hospice, LLC will designate \$25,000 annually to provide mobile devices with unlimited data to patients and families served by Empath Hospice, LLC.
- d. Empath Hospice, LLC will offer technical advocacy with planning commissions, economic development committees and other area organizations to advocate for bringing low-cost internet to the underserved, Heartland Rural Health Network, Inc will be one organization that will be included in this activity.
- e. Empath Hospice, LLC will implement the use of virtual reality technology, which has been shown in many studies to successfully alleviate and reduce symptoms such as pain and anxiety in addition to decreasing feelings of isolation by allowing them to engage in the outside world.

3. Development of Ethnic Community-Specific Programming

- a. Empath Hospice, LLC will deploy a mobile outreach unit ("Empath Mobile Access to Care") that will visit designated locations in three-county area on a routine basis to offer specialized programming and education seminars, Spanish-speaking care teams, Spanish language educational materials, caregiver support and Spanish language bereavement counseling and support groups.
- b. Empath Hospice, LLC will organize a Care Council that will include members from the Hispanic community to provide feedback and guidance with regards to outreach to their communities.

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- c. Empath Hospice, LLC will utilize a minimum of two Community Partnership Specialists to conduct community engagement activities, facilitate education, and to cultivate trust and partnerships within the African American, Hispanic, and Migrant Agricultural, Veterans and Jewish communities.
- d. Empath Hospice will partner with various organizations such as Indigent Healthcare Plan of Polk and the Alzheimer's Association to conduct joint community educational programs about chronic illness. Advance Care Planning, grief, and hospice care. Empath Hospice, LLC will designate \$10,000 annually to these organizations to assist with the costs of printed materials as part of this partnership.

4. Development of Strategies to Increase Hospital Discharges to Hospice

- a. Empath Hospice, LLC will deploy dedicated facility teams to increase discharge from hospitals directly to hospice care. The dedicated teams will consist of a Registered Nurse, a Patient Care Concierge and a Professional Liaison.

5. Development of a Continuum of Care Navigation Program

- a. Empath Hospice, LLC will deploy telehealth technology within the proposed mobile outreach unit, in order to link the bilingual LPN and BSW staffing the unit to Empath Health's care navigators and other resources in the community and enhance the care navigation function they will provide.
- b. Empath Hospice, LLC will recruit a minimum of two Community Partnership Specialists over the first two years of operation to provide outreach to the community and to build a network of community partners in order to enhance continuum of care navigation.
- c. Empath Hospice, LLC will recruit a minimum of four Professional Liaisons over the first two years of operation to provide outreach to clinical partners in order to develop a network of clinical resources to enhance continuum of care navigation.

- d. Empath Hospice, LLC will implement a “telephonic transitional care service”, in partnership with interested regional Emergency Departments, which it will run out of its Community-Based Palliative Care Program. The applicant will employ a dedicated RN or LPN Transitional Care Navigator, aside from the mobile unit care navigators detailed above.

6. Development of a Program to address Transportation Challenges for Rural Areas

- a. Empath Hospice, LLC will designate up to \$25,000 annually to VISTE for 5 years, an existing provider of transportation services to resident of the area, to expand coverage of transportation services the areas not currently served by this organization.
- b. Empath Hospice, LLC will engage in active membership within VISTE in order to assist in strategic planning and deployment of resources within the area.
- c. Empath Hospice, LLC will collaborate with VST related to share volunteers to assist in transportation outreach in the area.
- d. Provide bilingual Mindful Meditation phone support, to allow caregivers to call and listen to a pre-recorded guided meditation, as well as a live call-in option.

7. Development of a Specialized Veterans Program

- a. Empath Hospice, LLC will develop a specialized veteran’s program in Hardee, Highlands and Polk Counties. The program will focus on improving end-of-life care for veterans.
- b. Empath Hospice, LLC will pursue We Honor Veterans Level 4 Partnership Certification within the first two years of operation in Hardee, Highlands and Polk Counties. Level 5 Certification will be obtained as soon as practicable.
- c. Empath Hospice, LLC will implement veterans-specific programming through the Legacy Corps program. Legacy Corps is a community-based caregiver support program by and for veterans of all wars and veteran/military families. Legacy Corps utilizes highly trained volunteers to provide a

range of caregiver support services including in-home respite care, information, and linkages to other community support systems, hospital-to-home transition services, and other related services.

- d. Empath Hospice, LLC will plan a Veterans Mental Health Day Retreat to increase awareness of grief support, community connections, knowledge of services and to honor their service.

8. Interdisciplinary Palliative Care Consult Partnerships

- a. Empath Hospice, LLC will offer hospitals, ALFs, SNFs and Physician Groups in Hardee, Highlands and Polk Counties the opportunity to partner with Empath Health in the provision of interdisciplinary palliative care consult services - both inpatient and community-based.

9. Dedicated Quality-of-Life Funds for Patients and Families

- a. The applicant commits a minimum budget of \$1,200 annually per interdisciplinary team for the provision of quality-of-life funds for hospice patients and families. These funds are designated to assist with financial needs in order to provide a safe environment for patients or to provide meaningful end-of-life experiences.

10. Development of a Community Advisory Committee

- a. Empath Hospice, LLC will develop, in year one, a Community Advisory Committee to be comprised of residents reflective of the community. The purpose of the council is to provide input, feedback and recommendations about the needs of the Polk, Hardee, and Highlands communities which will be used in future program development.

11. Development of a Physician/Provider Advisory Committee

- a. Empath Hospice, LLC will develop, in year one, a Physician/Provider Advisory Committee to be comprised of local physicians, discharge planners and other clinical partners in Hardee, Highlands and Polk Counties. The purpose of the committee is to assist in program oversight

new program development, and to develop strategies to increase awareness and utilization of hospice services for patients nearing the end-of-life.

12. Development of a Family Advisory Council

- a. Empath Hospice, LLC will develop, in year one, a Family Advisory Council to be comprised of family members of patients of Empath Hospice in Hardee, Highlands and Polk Counties who have passed away. The purpose of the committee is to provide a mechanism by which family members can provide feedback to the applicant regarding the caregiving process and assist in assessment/ improvement of current programs from the patient and family standpoint, as well as development of new programs that will aid both the patient and family during the hospice care episode and beyond.

13. Development of an Interfaith Community Advisory Council

- a. Within one year, Empath Hospice, LLC will develop an Interfaith Community Advisory Council which will include clergy and lay representatives from a wide variety of religious and cultural groups. The goals of the Council will be:
 - Communicate community needs
 - Offer cultural and religious perspectives
 - Promote spiritual and community engagement
 - Increase collaboration between faith communities and Empath Hospice
 - Educate the community on the programs and services offered by Empath Hospice

14. Implementation of Open Access Model of Care

- a. Empath Hospice, LLC will accept patients into hospice who are still receiving complex medical treatments, or who are still working through difficult end-of-life conversations and situations, in order to give earlier access to palliative care and hospice support. Eligible patients include:
 - Patients with a terminal illness who are felt to have 6 months or less to live and who want to receive the kind of palliative and supportive care only Empath Hospice can give.

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- Patients who continue to receive medical treatments as part of their Goals of Care.
- Patients with complex psychosocial needs who are still working through difficult end of life conversations and situations.
- Patients on ventilator support who have made the decision to stop assisted ventilation.

15. SAGECare Platinum Level Certification

- a. Empath Hospice, LLC will achieve SAGECare Platinum Level Certification in the first year of operation. SAGE is a deeply skilled and highly trusted national organization dedicated to improving the lives of LGBTQ elders. The SAGECare Platinum Level Credential will help show in even more ways that Empath Hospice is of open minds, pioneering hearts, brave spirits, and healing presence, and shows that not only are all welcome at Empath, but that they will be provided with dignified and highly-specialized care.

16. Jewish Hospice Certification

- a. Empath Hospice, LLC will achieve Jewish Hospice Certification through the National Institute for Jewish Hospice by the end of year 1. This specialized certification program will be extended each year through a variety of training and education programs. Each year, the trainings cover a variety of topics related to Jewish heritage, Jewish bioethics, and death and dying from the Jewish perspective.

17. Joint Commission Accreditation:

- a. Empath Hospice, LLC will achieve Joint Commission Accreditation by the end of year two. The applicant's parent company, Empath Health's community-based palliative care services (those available in homes and long-term care facilities) are currently certified by the Joint Commission. Suncoast Hospice's Pinellas County program is one of only a handful of hospices nationwide to hold Joint Commission Accreditation and/or Certification for hospice, home health, community-based palliative care and pharmacy programs.

18. Provision of Value-Added Services Beyond the Medicare Hospice Benefit:

- a. Empath Hospice, LLC will provide numerous programs and services that are outside the scope of the Medicare Hospice Benefit, including:
- Integrative Medicine Clinic
 - Palliative Arts
 - Music in Caregiving Program
 - Let There Be Music Program
 - Pet Peace of Mind
 - Pet Therapy
 - Specialized Bereavement Programs
 - Caregiver Coffee Breaks
 - Patient Tuck-In Calls
 - Transitions Volunteer Program
 - Teen Volunteer Program
 - Specialized Infusion Services
 - Clinical Pharmacy Consultations
 - Dr. Direct Program
 - Rendeever Virtual Reality
 - PARO Therapeutic Robot

19. Limited Fundraising in Hardee, Highlands and Polk Counties:

- a. Empath Hospice, LLC proposes to limit its fundraising efforts in Hardee, Highlands and Polk counties to memorial gifts on behalf of Empath patients who have died.

Deny CON #'s 10685, 10686, 10688, 10689, 10690, 10691, 10692, 10693 and 10694.

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: December 17, 2021



James B. McLemore

**Operations and Management Consultant Manager
Certificate of Need**