



RON DESANTIS
GOVERNOR

JASON WEIDA
SECRETARY

August 17, 2023

John A. Moore
BAYFRONT HEALTH ST PETERSBURG
701 6th Street South
Saint Petersburg, Florida 33701-4891,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 10156700**

Dear Mr. Moore:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

The enclosed payment represents your annual amount for the 2022 - 2023 fiscal year. The method used to determine the amount of your payment is shown on the enclosed calculation sheet.

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

If you have any questions regarding the above, please call Mike Massey of my staff at (850) 412-4132.

Sincerely,

Kristin Sokoloski, Acting Budget and Planning Bureau Chief,
Medicaid Program Finance

KS:mm

Enclosure:



State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**10156700**

Hospital Name (current) : **BAYFRONT HEALTH ST PETERSBURG**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,565
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual “Family Practice Teaching Hospital” payments	(C - D) = (E)	\$1,121,565
Total of “Family Practice Teaching Hospital” payments previously paid this fiscal year	(F)	\$00.00
Annual “Family Practice Teaching Hospital” provider payment [1] [2]	(E - F) = (G)	\$1,121,565

- [1] This payment may be made by check or transferred electronically.
- [2] This amount may be explicit instead of being based on quarterly distribution calculations.
- [3] This amount may be rounded down to the next lower whole dollar.



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JASON WEIDA
SECRETARY

August 17, 2023

Jeff Feasel
HALIFAX HEALTH MEDICAL CENTER
303 North Clyde Morris Boulevard
Daytona Beach, Florida 32114-1237,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 10184200**

Dear Mr. Feasel:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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Medicaid Program Finance

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Enclosure:



State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**10184200**

Hospital Name (current) : **HALIFAX HEALTH MEDICAL CENTER**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,566
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual “Family Practice Teaching Hospital” payments	(C - D) = (E)	\$1,121,566
Total of “Family Practice Teaching Hospital” payments previously paid this fiscal year	(F)	\$00.00
“Family Practice Teaching Hospital” provider payment [1] [2]	(E - F) = (G)	\$1,121,566

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RON DESANTIS
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JASON WEIDA
SECRETARY

August 17, 2023

Glenn Davenport Waters
MORTON PLANT HOSPITAL
300 Pinellas St
Clearwater, Florida 33756-3804,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 10158300**

Dear Mr. Waters:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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Medicaid Program Finance

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Enclosure:



State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**10158300**

Hospital Name (current) : **MORTON PLANT HOSPITAL**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,567
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual “Family Practice Teaching Hospital” payments	(C - D) = (E)	\$1,121,567
Total of “Family Practice Teaching Hospital” payments previously paid this fiscal year	(F)	\$00.00
“Family Practice Teaching Hospital” provider payment [1] [2]	(E - F) = (G)	\$1,121,567

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August 17, 2023

Lisa Valentine
ORANGE PARK MEDICAL CENTER
2001 Kingsley Ave
Orange Park, Florida 32073,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 11174100**

Dear Ms. Valentine:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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Medicaid Program Finance

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Enclosure:



State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**11174100**

Hospital Name (current) : **ORANGE PARK MEDICAL CENTER**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,568
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual “Family Practice Teaching Hospital” payments	(C - D) = (E)	\$1,121,568
Total of “Family Practice Teaching Hospital” payments previously paid this fiscal year	(F)	\$00.00
“Family Practice Teaching Hospital” provider payment [1] [2]	(E - F) = (G)	\$1,121,568

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RON DESANTIS
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JASON WEIDA
SECRETARY

August 17, 2023

Tony Gomez
PALMETTO GENERAL HOSPITAL
2001 West 68th Street
Hialeah, Florida 33016-1801,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 10460400**

Dear Mr. Gomez:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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Medicaid Program Finance

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Enclosure:



State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**10460400**

Hospital Name (current) : **PALMETTO GENERAL HOSPITAL**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,569
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual “Family Practice Teaching Hospital” payments	(C - D) = (E)	\$1,121,569
Total of “Family Practice Teaching Hospital” payments previously paid this fiscal year	(F)	\$00.00
“Family Practice Teaching Hospital” provider payment [1] [2]	(E - F) = (G)	\$1,121,569

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SECRETARY

August 17, 2023

Corey Lovelace
ST LUCIE MEDICAL CENTER
1800 SE Tiffany Ave
Port Saint Lucie, Florida 34952-7521,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 11997100**

Dear Mr. Lovelace:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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Medicaid Program Finance

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Enclosure:



State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**11997100**

Hospital Name (current) : **ST LUCIE MEDICAL CENTER**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,570
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual “Family Practice Teaching Hospital” payments	(C - D) = (E)	\$1,121,570
Total of “Family Practice Teaching Hospital” payments previously paid this fiscal year	(F)	\$00.00
“Family Practice Teaching Hospital” provider payment [1] [2]	(E - F) = (G)	\$1,121,570

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SECRETARY

August 17, 2023

Sally Seymour
ST PETERSBURG GENERAL HOSPITAL
6500 38TH AVE N
St Petersburg, Florida 33710-1629,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 12010300**

Dear Ms. Seymour:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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Medicaid Program Finance

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Enclosure:



State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**12010300**

Hospital Name (current) : **ST PETERSBURG GENERAL HOSPITAL**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,571
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual “Family Practice Teaching Hospital” payments	(C - D) = (E)	\$1,121,571
Total of “Family Practice Teaching Hospital” payments previously paid this fiscal year	(F)	\$00.00
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RON DESANTIS
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JASON WEIDA
SECRETARY

August 17, 2023

Michael H. Schatzlein, MD, MBA, FACHE
ST VINCENT'S MEDICAL CENTER RIVERSIDE
1 Shircliff Way
Jacksonville, Florida 32204,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 10073100**

Dear Dr. Schatzlein:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**10073100**

Hospital Name (current) : **ST VINCENT'S MEDICAL CENTER RIVERSIDE**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
Annual payment to you as a participating Family Practice Teaching Hospital [3]	(A / B) = (C)	\$1,121,572
Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
Total of annual "Family Practice Teaching Hospital" payments	(C - D) = (E)	\$1,121,572
Total of "Family Practice Teaching Hospital" payments previously paid this fiscal year	(F)	\$00.00
"Family Practice Teaching Hospital" provider payment [1] [2]	(E - F) = (G)	\$1,121,572

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RON DESANTIS
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JASON WEIDA
SECRETARY

August 17, 2023

G. Mark O'Bryant
TALLAHASSEE MEMORIAL HOSPITAL
1300 Miccosukee Rd
Tallahassee, Florida 32308-5054,

**RE: State Fiscal Year 2022 - 2023
Family Practice Teaching Disproportionate Share Payment
Medicaid Number: 10113300**

Dear Mr. O'Bryant:

Your hospital has been deemed eligible to receive the associated payment under proviso language contained in the General Appropriations Act for state fiscal year 2022 - 2023. This proviso language directs payments to be made to hospitals meeting eligibility criteria. The amounts of such payments are calculated according to the distribution methodology defined in the proviso.

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State of Florida
 Agency for Health Care Administration
 Medicaid Program Finance
 Disproportionate Share Payments to Family Practice Teaching Hospitals
 State Fiscal Year 2022 - 2023 Payment

Medicaid Number :**10113300**

Hospital Name (current) : **TALLAHASSEE MEMORIAL HOSPITAL**

Total annual appropriation for all Family Practice Teaching Hospitals	(A)	\$10,094,092
Total number of Participating Family Practice Teaching Hospitals	(B)	9
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Amount being withheld from distribution in anticipation of funding reductions	(D)	\$00.00
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