

STATE AGENCY ACTION REPORT
ON APPLICATION FOR CERTIFICATE OF NEED

A. PROJECT IDENTIFICATION

1. Applicant/CON Action Number

Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland/CON application #10832

80 West Lucerne Circle
Orlando, Florida 32801

Authorized Representative: Henry T. Keith
Interim Chief Executive Officer,
Chief Financial Officer and Treasurer
(407) 839-0707, Ext. 267

Polk SNF LLC/CON application #10833

2071 Flatbush Avenue, Suite 22
Brooklyn, New York 11234

Authorized Representative: Aharon Katz, Chief Executive Officer
Lion Care Services LLC
(718) 338-2999

2. Service District/Subdistrict

District 6/Subdistrict 6-5 (Polk County)

B. PUBLIC HEARING

No public hearing was requested or held.

C. PROJECT SUMMARY

Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832), also referred to as Westminster Lakeland, Westminster or the applicant, is a continuing care retirement community (CCRC) proposing the conversion of 34 sheltered beds at its existing 68-bed nursing home beds in Subdistrict 6-5 (Polk County). The facility presently has 34 community and 34 sheltered nursing home beds.

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Total project cost is \$83,080 and includes project development costs. The bed conversion does not involve renovation or construction.

Westminster Lakeland expects issuance of license in June of 2025 and initiation of service in July of 2025.

The applicant does not propose conditions for the project's approval.

Polk SNF LLC (CON application #10833) also referenced as Polk SNF, or the applicant proposes to establish a 150-bed community nursing home in Subdistrict 6-5 (Polk County). The applicant states that it is an affiliate of Lion Care Services, an experienced operator and developer of 12 Florida skilled nursing facilities.

Total project cost is \$58,204,000 and includes land, building, equipment, project development, financing, and start-up costs.

The 150-bed project involves 102,703 gross square feet (GSF) of new construction. Total construction cost is \$38,513,600.

Polk SNF expects issuance of license in June of 2027 and initiation of service in July of 2027.

The applicant does not propose conditions for the project's approval.

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 in 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. 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 assessing the responses provided in the application and independent information gathered by the reviewer.

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

Section 59C-1.010(3)(b), Florida Administrative Code, allows no application amendment information subsequent to the application being deemed complete. The burden of proof to entitlement of a certificate rests with the applicant. As such, the applicant is responsible for the representations in the application. This is attested to as part of the application in the Certification of the applicant.

As part of the fact-finding, the consultant, Gregory Keeter, analyzed the application with consultation from Financial Analyst Derron Hillman of the Bureau of Central Services, who evaluated the financial data, and Scott Waltz of the Office of Plans and Construction, who reviewed the application for conformance with the architectural criteria.

E. CONFORMITY OF PROJECT WITH REVIEW CRITERIA

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

1. Fixed Need Pool

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

In Volume 50, Number 195 of the Florida Administrative Register dated October 4, 2024, a fixed need pool (FNP) of 184 community nursing home beds was published for Subdistrict 6-5 (Polk County) for the July 2027 planning horizon.

As of August 9, 2024, the subdistrict's 25 nursing homes have 3,132 licensed community nursing beds and Subdistrict 6-5 has 120 CON approved community nursing home beds pending licensure. The subdistrict's community nursing homes averaged 88.93 percent occupancy in the six months, and 87.27 percent occupancy during the 12 months ending June 30, 2024.

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Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832) proposes to add 34 community nursing home beds through the conversion of 34 sheltered beds at its CCRC, resulting in the facility having 68 community beds. The applicant notes that its project is in response to the FNP and that it has 34 of the subdistrict's 46 sheltered nursing homes beds. Westminster states the project is intended to enable the facility to remain a vital resource for the community while continuing to prioritize long-term care for its residents within the retirement community. Westminster Lakeland submits that the project provides the following advantages:

- Improves access to skilled nursing care by utilizing sheltered beds that can be placed into service quickly.
- Improves quality of skilled nursing care by placing community beds into service at a 5-star rated facility.
- Promotes culture change by placing the community beds into service at a facility that is operated under the close scrutiny of its members, where resident-directed care is the norm.
- Provides a financially viable project that can be implemented with minimal costs.
- Allows flexibility for admissions, serving both community and life care residents at the facility.

The applicant states conversion projects that are executed swiftly tend to be more cost-effective and can commence operations sooner than those that require new construction. Further, increasing the availability of community beds enhances access for the Polk County residents and demographic forecasts indicate that the elderly population will continue to grow, amplifying the demand for skilled nursing care. From a health planning viewpoint, the project optimally utilizes health care resources and enhances access to care.

Westminster contends its location near Lakeland Regional Medical Center is a major attraction. Further, nursing homes situated close to hospitals and other diagnostic and health care service providers create an integrated network for community support. The applicant includes an aerial image (Figure 1-1) on page 1-4, showcasing Westminster Lakeland's location in relation to Lakeland Regional Medical Center. Situated at 16 Lake Hunter Dr, Lakeland, Florida 33803, Westminster Lakeland provides convenient access across the service area via Interstate 4, which runs through central Florida.

Polk County is home to a significant senior demographic, with 173,771 residents aged 65 and older, making up 21.7 percent of the total January 2024, population of 799,398. The age 65 and older population is

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projected January 2027 to increase to 191,493 or by 17,722, reflecting a growth rate of 10.2 percent compared to a 4.2 percent increase in the population under age 65. The growth rate for seniors in Polk County slightly exceeds that of the state overall. By 2027, the second year of the project, seniors are expected to account for nearly 23 percent of the county's population. The applicant states the substantial concentration and projected increase of seniors indicates an escalating demand for residential and health care services tailored to this demographic. Westminster's table 1-1 on the application's page 1-5 provides details of Polk County and the states' population projections. The application's table 1-2 on pages 1-6 and 1-7 presents the age 65 and over population growth by Polk County Zip Codes from 2024 to 2029.

Figure 1-2 on the application's page 1-9 provides a map of Polk County illustrating the locations of hospitals and nursing homes, with many situated near Westminster Lakeland. The map also identifies Carpenter's Home Estates, Inc., whose 72 beds include the subdistrict's other 12 sheltered nursing home beds. The applicant contends that Westminster Lakeland has the potential to attract residents from beyond Polk County, as Florida continues to be a preferred retirement destination. Further, the amenities offered by a CCRC serve as an introduction for retirees to the concept of continuing care. Westminster contends that the ability to admit members of the general public to the nursing center provides several advantages to the elderly population including:

- direct experience the range of services and lifestyle choices available in retirement;
- transition from the nursing center to home care, or to a less institutional environment; and
- exploring and becoming familiar with options to maintain health and fitness through assisted living, memory care support, and on-site activity centers, learning, and building friendships.

Westminster's table 1-3 on page 1-12, provides the current beds (19) per 1,000 population 65 and over as of January 1, 2024, available in Subdistrict 6-5. However, projected population growth over the next three years indicates that this number will decrease to 17 beds per thousand seniors for Polk County, regardless of the applicant's project and the CON approved 120-beds pending licensure. Westminster does not include the additional 150 beds proposed by Polk SNF in this batching cycle. See the table below.

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Current (2024) and Projected (2027) Community Bed Availability

| | | Jan 2024 | Jan 2027 | Jan 2027* |
|-----------------|------------------|-----------------|-----------------|------------------|
| Subdistrict 6-5 | Beds | 3,252 | 3,252 | 3,286* |
| | Pop (65+) | 173,771 | 191,493 | 191,493 |
| | Beds/1000 | 19 | 17 | 17 |
| Florida | Beds | 85,811 | 85,811 | 85,849** |
| | Pop (65+) | 5,064,776 | 5,865,659** | 5,865,659** |
| | Beds/1000 | 17 | 15 | 15 |

Source: CON application #10832, page 1-12, Table 1-3, from Florida Population Estimates and Projections by AHCA District 2020 to 2030, published January 2024 & Florida Nursing Home Utilization by District and Subdistrict July 2023-June 2024 published October 4, 2024.

Notes: *Projected beds assume all approved beds are licensed by 2027.

**The applicant's projected January 2027 number of beds adds 38, with the project adding 34 beds and the applicant's Florida January 2027 population aged 65 and over is the January 2029 projection. Adding the project's 34 beds results in 85,845 beds in the State and January 2027's 5,547,274 projected Florida population age 65+, computes to 15.48 beds per 1,000 with, and 15.47 beds per 1,000 without the project.

The applicant's Table 1-4 on page 1-13 provides a summary of nursing home utilization in Polk County compared to Florida for the 12-month periods ending June 30, 2020—June 30, 2024. This table illustrates community nursing home bed utilization in Polk County is on the rise after experiencing a decline in 2020 and 2021 due to the COVID-19 pandemic. At the outset of the pandemic, Polk County had an average occupancy rate exceeding 83 percent, which was consistent with the state average. As of the most recent 12 months ending June 30, 2024, occupancy in Polk County has increased to 87 percent, while the state averaged below 85 percent.

Westminster's Table 1-5 on page 1-14, compares occupancy rates for Polk County and Florida by quarter for the most recent 12 months, which shows Polk County with higher occupancy than the state. During the 2nd quarter of 2024, Polk County averaged nearly 89 percent compared to the states' 85 percent. Westminster contends the subdistrict's upward trend in occupancy highlights the increasing demand for skilled nursing beds that the project aims to address.

Westminster's table 1-6 on page 1-15 indicates Westminster Lakeland's sheltered beds are 100 percent occupied. On average, 66 percent of patient days are accounted for by life care residents and 34 percent are non-members. The total 68-bed occupancy was 76 percent in CY 2023, which Westminster indicates ensures bed availability for its CCRC residents. Tables 1-7 on page 1-15 and 1-8 on page 1-16 of the application are provided to support its projected year one and year two utilization. The applicant's forecast assumes that the first month of operation for the "bed addition" will be July 2025 (see the table below).

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Polk SNF’s narrative emphasizes the strategic importance of the new skilled nursing facility, as it would serve an elderly population that is both substantial and geographically concentrated in areas where access to health care services is essential. The applicant contends it aims to meet the growing demand for skilled nursing care in these high-population regions, ultimately enhancing the availability of crucial health services for seniors in the county and the age 65 and older population growth indicates that the new skilled nursing facility will experience high utilization once constructed. Exhibit #1 includes a list of zip codes in Polk County, along with projected population estimates for 2029. It is not user friendly in that it does not list the city/location by name as provided in CON application #10832 Table 1-2 on pages 1-6 and 1-7.

The applicant’s map appears to indicate the zip codes (areas highlighted) within the service area are anticipated to experience growth rates in the age 65 and older cohort ranging from zero percent to 34.91 percent, with an average five-year growth rate estimated at 17.66 percent. In contrast, Table 1-2 (CON application #10833, Exhibit 1) age 65+ population in each zip code is projected to see growth rates varying from zero percent to 34.91 percent, yielding an average growth rate of 17.66 percent.

Polk SNF’s Figure 1-3 on page 1-4 (CON application #10833) provides a visual representation of how the senior population is expected to grow across Subdistrict 6-5. Notably, growth is forecasted to occur predominantly in the northern part of the county, particularly around Haines City, as well as in areas where the zip codes intersect with Orange and Osceola Counties. This anticipated demographic shift underscores the urgent need for expanded residential and health care services tailored to the elderly, further reinforcing the relevance and necessity of the proposed facility.

Current (2024) and Projected (2029) Community Bed Availability

| | | Jan 2024 | Jan 2029* | Jan 2029** |
|-----------------|------------------|-----------------|------------------|-------------------|
| Subdistrict 6-5 | Beds | 3,132 | 3,252 | 3,402 |
| | Pop (65+) | 173,771 | 203,602 | 203,602 |
| | Beds/1000 | 18 | 15 | 17 |
| Florida | Beds | 84,438 | 85,811 | 85,811 |
| | Pop (65+) | 5,064,776 | 5,865,659 | 5,865,659 |
| | Beds/1000 | 16 | 14 | 15 |

Source: CON application #10833, page 1-5, Table 1-3, Florida Population Estimates and Projections by AHCA District 2020 to 2030, published January 2024 and Florida Nursing Home Utilization by District and Subdistrict, published October 2024.

Notes: *Projected beds assume all approved beds are licensed by 2029.

**Subdistrict 6-5 includes CON approved 120 beds and the project’s 150 beds, but the State total would be 85,961 with the project (the percent remains at 14.6 per 1,000).

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The reviewer notes Polk SNF's table above January 2029 state total beds per thousand (85,811 beds/5,865,659) is shown as 14 or 15, which is inconsistent as the applicant has the wrong total for January 2029 licensed and approved beds with the project. These numbers compute to 14.63 per thousand using 85,811 and 14.65 using 85,961 beds.

Polk SNF's Table 1-4 on page 1-6 displays the historical utilization for skilled nursing facilities in Polk County, District 6 and Florida from July 2019 to June 2024. During the 12-month period ending on June 30, 2020, which captured the onset of the COVID-19 pandemic, Polk County reported a total of 933,581 patient days and an average occupancy of 83.33 percent. Polk nursing homes showed a significant decline during the 12 months ending June 30, 2021, with 809,974 patient days and 71.81 percent occupancy. This downward trend was also observed in District 6 occupancy, which dropped from 84.42 percent to 74.19 percent and the state occupancy from 83.94 percent to 73.40 percent in during the 12 months ending June 2021. However, nursing home utilization has been steadily increasing since July 2021. During the 12 months ending June 30, 2024, Polk County SNFs reported 87.27 percent occupancy, higher than the District's (85.24) and Florida's 84.36 percent.

Polk SNF notes that it will leverage the extensive expertise of Lion Care Services, which offers essential administrative and operational support. This affiliation underscores the applicant's established history of delivering quality care in nursing facilities that are accredited by the Joint Commission. Lion Care's 12 facilities in Florida, nine currently hold Joint Commission Accreditation, highlighting its strong commitment to maintaining high standards of health care.

Polk SNF utilizes the subdistrict's most recent 12-month utilization to project utilization for the facility's July 2027 – June 2028 and July 2028—June 2029 (years one and two). Applying the Subdistrict 6-5 use rates yield an estimate of 1,158,003 patient days for year one, with an occupancy rate of 93.26 percent. For the district, an estimate of 3,358,969 patient days is projected at an occupancy rate of 95.7 percent. For the second year of the project, occupancy levels are expected to rise to 96.1 percent for Polk County and District 6 at 98.51 percent. Polk SNF references its details in the application's Table 1-6 on page 1-8, which are for Pasco County and District 5 - the narrative also cites Subdistrict 5-1 (CON application #10833, pages 1-7 and 1-8).

The applicant indicates the Schedule 5 of the application outlines the forecasted utilization for the new facility, with July 2026 designated as the start of operations. However, the start-up date is July 2027. The forecast indicates a gradual fill-up period over the first two years, with an expected average occupancy rate of 66.22 percent in the first year and

92.87 percent in the second year. However, the narrative does not match what Schedule 5 and the applicant's Table 1-7 (CON application #10833, page 1-9 indicate, which is expected average occupancy rate of 48.61 percent in the first year and 86.41 percent in the second year.

Overall, the analysis provided by Polk SNF supports the establishment of the new 150-bed skilled nursing facility. The applicant concludes its proposal aligns with statutory requirements and will enhance access and availability of SNF services in Polk County.

2. Agency Rule Criteria and Preferences

Does the project respond to preferences stated in Agency rules? Rule 59C-1.036, Florida Administrative Code.

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

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

Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832) is a Medicaid and Medicare-certified facility that offers both semi-private and private rooms. While the facility provides a wide array of services for short-term rehabilitation and long-term care, non-life care residents from the general population utilize it for rehabilitation services. The facility has policies and procedures in place that will be used for the project. The applicant states that Westminster Lakeland is committed to providing high-quality, comprehensive rehabilitation and nursing care to meet the needs of its residents while enhancing overall quality of life.

Westminster Lakeland offers a range of nursing and restorative care to manage various needs, including short-term rehabilitation, long-term care, and complex medical conditions. Licensed nursing staff are available 24 hours a day. Facility services include physical therapy,

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occupational therapy, speech therapy, orthopedic rehabilitation and aftercare, neurological rehabilitation, respiratory rehabilitation, medical management, wound care, and outpatient rehabilitation.

In addition to these core services, Westminster Lakeland provides various amenities including:

- IV therapy services
- Delicious and nutritious dining options
- Lakeside views and gazebo
- A full schedule of life-enriching activities
- Painting studio
- Beauty and barber salon
- A library with over 6,000 print and audio books
- Heated swimming pool and hot tub
- Welcoming visiting areas
- Activities room, fitness center and game room
- Gardens and community rooms for resident and family gatherings
- Housekeeping services
- Three dedicated transportation vans

Schedule 6A projects 65.20 FTEs in year one and 65.20 FTEs in year two. Westminster provides a review of all Major Diagnostic Categories (MDCs) to identify the types of conditions and disorders associated with nursing home admissions. The applicant illustrates the number of cases and prevalence by MDC for Polk County residents aged 65 and over discharged from acute care hospitals to skilled nursing facilities during CY 2023 (see the partially reproduced table below).

**Polk County Residents Aged 65 and Over
Florida Acute Care Hospital Discharges to SNFs by MDC for
Calendar Year 2023**

| Major Diagnostic Category | Cases | Percent |
|--|--------------|---------------|
| 08 Diseases & Disorders – Musculoskeletal & Connective Tissue | 1,427 | 18.35% |
| 18 Infectious & Parasitic Diseases, Systemic or Unspecified Site | 1,147 | 14.75% |
| 05 Diseases & Disorders of the Circulatory System | 1,122 | 14.35% |
| 11 Diseases & Disorders of the Kidney & Urinary Tract | 941 | 12.10% |
| 04 Diseases & Disorders of the Respiratory System | 818 | 10.52% |
| All Others | 2,321 | 29.85% |
| Total | 7,776 | 100.0% |

Source: CON application #10832, Page 2-5, Table 2-2, AHCA Hospital Discharge, CY 2023.

Westminster uses the above MDC discharges to document the most common types of conditions it will serve noting it has developed specialized programs and states it continues to innovate to meet

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residents' diverse needs. The applicant addresses the three MDCs (MDCs 8, 18, and 5) that account for approximately half of the discharges among individuals aged 65 and over.

In reference to MDC 8, therapies emphasize weight-bearing exercises that improve mobility, flexibility, and stamina. Physical and occupational therapists guide residents through progressive exercises designed to enhance core strength and joint flexibility. MDC 18 infectious diseases, requires limiting exposure and the applicant notes its facility features 48 private rooms to accommodate patients requiring isolation. MDC 5 circulatory system issues, requires therapies that focus on improving stamina through cardio-pulmonary exercises, flexibility training, and strength-building activities.

Westminster notes its facility has a large therapy suite equipped for rehabilitation and occupational therapy for activities of daily living. The restorative services objective is to prevent hospital admissions or readmissions while enhancing residents' overall health and quality of life.

Resident admissions are addressed with the applicant stating that nursing home admission is based on a physician's recommendation. The admission process begins with facility staff providing an orientation to residents and their families or designees, outlining the nursing home's policies while conducting an initial assessment. This assessment requires orders from a physician, physician assistant, nurse practitioner, or clinical nurse specialist to address the resident's care needs.

Social Services staff review facility information and policies with each resident, covering essential topics such as referrals, advance directives, physician appointments and transportation, call light usage, medications, laundry, resident council meetings, resident rights, staff listings, therapy services, mail handling, room changes, personal items, grievances, and the beauty salon. Additionally, residents receive an Admission Packet that includes the facility-resident agreement, HIPAA form, inventory of personal effects, initial care plan, and attending physician list.

Westminster Lakeland begins a comprehensive resident assessment upon admission using the assessment instrument required by the Centers for Medicare and Medicaid Services (CMS). This includes the Minimum Data Set (MDS) and elements specific to Florida, capturing various aspects of the resident's needs, strengths, goals, life history, and preferences. The applicant lists 15 assessment criteria in the review of a resident's status. Resident participation in the assessment is mandatory, and staff document this involvement.

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Westminster Lakeland also ensures the completion of a Pre-Admission Screen and Resident Review (PASRR) to identify serious mental illnesses or intellectual disabilities that may affect skilled nursing placement. Each assessment is coordinated by a registered nurse, with input from relevant health professionals. Residents are reassessed as their conditions change, with quarterly updates if no significant changes are noted, and a full assessment completed annually. The application's Exhibit 2 includes the Presbyterian Retirement Communities, Inc. Health Center Admission Agreement.

Upon admission, care staff develop a baseline care plan within 48 hours to address the resident's immediate needs based on admission orders and assessments, including those from the physician and PASRR recommendations. This plan is summarized and shared with residents and their representatives, detailing goals, medications, dietary instructions, and planned services. A comprehensive, resident-centered care plan is created within seven days by an interdisciplinary team, including the attending physician, registered nurse, and food and nutrition staff. Residents are encouraged to participate, and if unable, the reason is documented. Each individualized care plan contains measurable objectives that address medical, nursing, and psychosocial needs, while also leveraging resident strengths and setting discharge goals.

Social Services notifies families about care plan meetings, providing updates if they cannot attend. The Care Team updates the plan as the resident's condition changes, with a minimum of quarterly reviews. All Westminster facilities utilize an electronic health record system (ECS) that integrates MDS data to ensure efficient documentation and care plan development.

A resident-specific discharge plan is initiated upon admission, focusing on the resident's care goals, treatment preferences, and strategies to reduce preventable readmissions. This plan assesses caregiver needs and ensures the resident has adequate support for post-discharge care. It outlines where the resident will reside after discharge, follow-up care arrangements, and necessary medical and non-medical services.

The interdisciplinary team develops the discharge plan with the resident's consent, involving both the resident and their representative. A key component is evaluating the resident's interest in returning to the community and documenting referrals to outside agencies essential for the resident's well-being, such as home health services, adaptive equipment, or outpatient therapies. Nursing facility staff provide information about potential transfer facilities, including resource use, assessment data, and quality measures when available. The discharge

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plan is updated as needed. As discharge approaches, the team reviews the plan with the resident and their representative and consults the attending physician.

Upon discharge, staff provide copies of the discharge plan to the resident, their responsible party, and the attending physician. This plan includes a summary of prior treatments, diagnoses, medications, and any relevant issues. Westminster staff follow up with referred agencies to ensure continuity of services. All policies and procedures related to discharge planning are reviewed and approved by the facility's leadership team.

Polk SNF LLC (CON application #10833) states that as an affiliate of Lion Care Services, it is dedicated to delivering the highest quality of care for its patients. Lion Care facilities offer a comprehensive range of services designed to meet the diverse needs of all residents. Skilled nursing services include 24/7 care from licensed nurses, wound care, medication management, and rehabilitation therapies such as physical, occupational, and speech therapy. Ongoing support is also available for individuals managing chronic conditions.

In addition to standard services, Lion Care Services provides several specialized programs tailored to address specific patient needs. These include Alzheimer's care, hip replacement rehabilitation, stroke rehabilitation, cardiac rehabilitation, on-site dialysis services, TPN therapy (total parenteral nutrition) infectious disease management, trach care/respiratory services, and wound care.

Therapy equipment interventions include electronic stimulation devices, ultrasound and heat therapy, adaptive equipment, balance training equipment, and virtual reality therapy. Lion Care's specialized equipment includes orthopedic beds for optimal support during recovery, stroke rehabilitation equipment for enhancing strength and mobility, and monitoring tools for patients with congestive heart failure (CHF) or chronic obstructive pulmonary disease (COPD).

Polk SNF states Lion Care Services is committed to providing compassionate and personalized care that aligns with the unique needs of each patient and refers to its Center of Excellence programs in the application's Exhibit 1. The application's Exhibit 2 contained the overview of Lion Care's Cardiac, Infectious Disease Management, Memory Enhanced Unit, Orthopedic, Respiratory, and Wound Care Center of Excellence programs.

The applicant indicates that admission process is coordinated to evaluate the individual with cooperation with their family to provide a baseline plan of care. This initial plan serves as a foundational roadmap, which

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may be adjusted as necessary throughout the individual's stay. The development of admission and care planning adheres to federal guidelines that dictate how these processes should occur. Staff follow medical care protocols while completing the Minimum Data Set (MDS), ensuring a comprehensive assessment that incorporates input from various professionals, including:

- Attending physician
- Director of Nursing
- Nursing Assistants responsible for the resident's care
- Dietary Manager
- Social Services Manager
- Activities Director
- Therapists, as appropriate
- Consultants, as appropriate
- Others, as necessary to meet the needs of the resident

Upon admission, each resident undergoes an evaluation to assess any special needs, and a tailored care plan is developed. The initial evaluation conducted by the admitting nurse addresses several key factors, including but not limited to:

- Medical diagnosis
- Description of skin condition
- Current level of activity/mobility
- Cognitive status
- Diet orders
- Weight
- ADL performance
- Physical impairments

Guidelines outlined in the Resident Assessment Instrument (RAI) manual emphasize several critical areas for care planning in the subacute setting. These areas include functional status, rehabilitation/restorative nursing, health maintenance, discharge potential, medications, and daily care needs. The care planning process components include problem/concern statements, goal/objective statements, approaches, responsible discipline and a review date for the care plan. The applicant provides details for the goal/objective statements and approaches in the response.

Family members or caregivers receive ongoing updates regarding the resident's progress, allowing them to comment on the care received, any reactions to services, and any necessary changes or modifications. The

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care process encourages substitution when suitable, enabling the resident to explore different options and identify which approaches yield the best outcomes.

Discharge planning starts with the initial assessment and change throughout the resident's stay. These plans outline medical services, appointments, prescriptions, and engagement with health and social systems. Key elements include securing adaptive equipment, arranging for home health or community services, scheduling follow-up appointments, prescriptions for medications, outpatient therapy and labs, home evaluation for therapy, discharge meeting with family, patient and/or caregivers and accessing home health guidelines for eligibility. The applicant lists seven home health eligibility guidelines.

Upon discharge, the case manager presents the finalized discharge plan, which has been reviewed by the resident and family. The plan includes the resident's care record with an appropriate discharge summary of prior treatment, diagnosis, rehabilitation potential, physician orders and other pertinent information. If requested by the patient, copies of the discharge plan are provided to the primary care physician and other caregivers.

Polk SNF's Schedule 6 shows 93.1 year one and 149.2 year two FTEs. The applicant's table below shows its projected utilization for years one and two of operation.

**Polk SNF LLC (CON application #10833)
First Two Years of Operation of the 150-Bed Facility**

| | Year One | Year Two |
|--------------|-----------------|-----------------|
| Admissions | 843 | 1,493 |
| Patient Days | 26,686 | 47,311 |
| ALOS | 31.7 | 31.7 |
| ADC | 73 | 129 |

Source: CON application #10833, Page 2-7, Table 2-1

Polk SNF's projected patient days—26,686 in year one (ending June 30, 2028) and 47,311 in year two (ending June 30, 2029), result in 48.61 percent and 86.41 percent occupancy, respectively.

To assess the specific services needed by nursing home residents, the applicant analyzed hospital discharges of Polk County patients aged 65 and older. See the partially reproduced table below.

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**Polk County Residents Aged 65 and Over
Florida Acute Care Hospital Discharges to SNFs by MDC for
Calendar Year 2023**

| Major Diagnostic Category | Cases | Percent |
|--|--------------|----------------|
| 08 Diseases & Disorders – Musculoskeletal & Connective Tissue | 1,427 | 18.35% |
| 18 Infectious & Parasitic Diseases, Systemic or Unspecified Site | 1,147 | 14.75% |
| 05 Diseases & Disorders of the Circulatory System | 1,122 | 14.35% |
| 11 Diseases & Disorders of the Kidney & Urinary Tract | 941 | 12.10% |
| 04 Diseases & Disorders of the Respiratory System | 818 | 10.52% |
| All Others | 2,321 | 29.85% |
| Total | 7,776 | 100.0% |

Source: CON application #10833, Page 2-8, Table 2-2, AHCA Hospital Discharge, CY 2023, excludes psychiatric and rehabilitation hospitals.

Polk SNF states that Lion Care’s focus on the top Major Diagnostic Categories (MDCs)—MDC 8 (Musculoskeletal System), MDC 18 (Infectious & Parasitic Diseases), MDC 5 (Circulatory System), and MDC 4 (Respiratory System)—enables it to provide targeted interventions and specialized services. The applicant provides detailed discussions of its programs for the four MDC’s above. Specific to MDC 18—infectious and parasitic diseases, the applicant states the facility design features 31 semi-private rooms and 64 private rooms for residents. The facility design also includes a large therapy suite designed for rehabilitation and daily living activities. Contracted personnel deliver therapies, and innovative technologies support individualized treatment plans. The overall objective of the restorative programs focuses on avoiding hospital admission/readmission. The applicant states its protocols ensure healing and promote higher functional levels to improve resident health and quality of life.

b. Quality of Care. In assessing the applicant’s ability to provide quality of care pursuant to 408.035(3), Florida Statutes, the Agency shall evaluate the following facts and circumstances:

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

Both applicants have not had a nursing facility licensed denied, revoked, or suspended within the past 36 months.

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

Both applicants have not had a nursing facility placed into receivership within the past 36 months.

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

This item does not apply.

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

This item does not apply.

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

This item does not apply.

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

Both applicants state they will submit the required data to the Health Council of West Central Florida, serving Health Planning District 6, and to the Agency for Health Care Administration. This data includes utilization reports, licensure, and financial information necessary for operating a licensed nursing facility.

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? Section 408.035(1)(2)(5), Florida Statutes.**

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Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832) states that "Availability" refers to the amount of a resource that exists within a given area. According to the fixed need pool published on October 4, 2024, there is a documented need for 184 community nursing home beds in Nursing Home Subdistrict 6-5. In response to this identified need, Westminster Lakeland is seeking a certificate of need to convert 34 of its sheltered beds into community nursing home beds. The applicant states its CCRC provides an opportunity for retirees to experience the lifestyle and amenities available within the community and this project aims to address the current shortage of available beds in the planning area and enhance access to skilled nursing care for the general public.

As of August 9, 2024, there are 25 skilled nursing facilities operating within Subdistrict 6-5, with 3,132 community beds. Subdistrict 6-5 community nursing homes averaged 88.93 percent occupancy during the six months and 87.27 percent occupancy during the 12 months ending June 30, 2024, which is higher than the state average.

Westminster notes that the current bed supply as of January 1, 2024, show there are 19 beds per thousand seniors available in Subdistrict 6-5, Polk County. However, due to projected population growth over the next three years, the number of beds per thousand seniors in Polk County is expected to decrease to 17. The total number of licensed beds within the subdistrict will remain unchanged; the only difference will be the permanent access granted to the general public for an additional 34 beds and these beds will increase the facility's capacity to admit residents from the general population, thereby enhancing access to care.

While the availability of the facility's beds is primarily targeted toward the CCRC campus, the applicant notes direct admissions to its ALF and SNF are often sought. Further, utilization is notably high within Subdistrict 6-5, with an occupancy rate of 87.27 percent, which exceeds the district rate of 85.24 percent and the statewide rate of 81.01 percent. Westminster concludes that the high demand emphasizes the critical need for available beds when required, as it is a concern for discharge planners and residents throughout the planning area.

Quality is achieved through the efforts of well-trained and dedicated individuals who operate with a high level of integrity. Westminster Lakeland recognizes the necessity of developing and consistently meeting higher standards across all operations and its leadership is committed to excellence in every area, focusing on the well-being of older adults, financial security, and a wide range of support services.

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The applicant states the mission of Westminster Lakeland is to serve individuals—residents, team members, and neighbors in the broader community and its sole purpose is to provide high-quality environments to enhance the lifestyles varying levels of independence. Further, Westminster Lakeland is dedicated to delivering the highest quality of care to its residents, as evidenced by its 5-star rating from the Agency and its accreditation from The Joint Commission.

"Access" refers to the ability of potential users to obtain services or enter facilities providing those services, which is crucial in health care settings. Key components include geographic barriers, such as the distance to a facility and the time needed to travel there, both of which can deter potential users. Eligibility requirements, financial costs, and reimbursement methods can further limit access, highlighting the need to address these factors to improve service utilization.

Westminster lists the Polk County acute care hospitals and bed capacity and notes these hospitals are all within 30 miles of its facility and except AdventHealth Heart of Florida are within a 35-minute drive time contour. The applicant's Figure 3.1 on page 3-4 is a map identifying the hospitals within the 35-minute drive contour and 30-mile radius of Westminster Lakeland. The applicant contends that access issues are particularly noticeable in short-term rehabilitative care. Hospitals primarily refer patients to skilled nursing facilities, and non-life care residents frequently face diversion to other facilities to secure a rehabilitation bed post-hospitalization. Expanding access involves providing a broad spectrum of services, ensuring that diverse needs are met. Therefore, offering short-term rehabilitation, complex care, and long-term care will improve access for those in the area.

Economic barriers to receiving care are addressed with the applicant concluding that approving this CON to convert the remaining 34 sheltered beds to community nursing home status, will enhance access for the general public and address the needs of life care residents. The facility offers a comprehensive range of services, with distinct areas for short-term rehabilitation and long-term care. Westminster Lakeland is committed to eliminating financial obstacles that could hinder access to nursing home care, as the health center participates in both Medicaid and Medicare, ensuring residents can access their entitled benefits. For private-pay residents, the facility aids in submitting claims for insurance reimbursement.

During the 12 months ending June 30, 2024, Subdistrict 6-5 SNFs recorded a total of 1,018,460 community patient days, resulting in an average occupancy rate of 87.27 percent. Based on the need methodology outlined in section 59C-1.036, Florida Administrative Code,

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there is need for an additional 184 beds. Notably, nine out of the 25 community nursing homes in the subdistrict have occupancy rates exceeding 95 percent, highlighting that many facilities are operating at full capacity. Westminster contends that this underscores the pressing need for additional beds. The applicant's Table 3-1 on page 3-6 that shows the utilization of community nursing homes within Subdistrict 6-5 from July 2023 through June 2024. Westminster Lakeland's community beds currently had 60 percent occupancy and the applicant contends that the project will allow greater flexibility in admissions and the public will gain access to a highly rated nursing home.

Westminster Lakeland addresses Rule 59C-1.030 Florida Administrative Code. Health Care Access Criteria on the application's pages 3-8 through 3-11.

Polk SNF LLC (CON application #10833) states that "Availability" refers to the amount of a resource that exists. The fixed need pool published on October 4, 2024, indicates that Nursing Home Subdistrict 6-5 in Polk County requires 184 community nursing home beds and Polk SNF LLC is seeking a certificate of need to construct a new 150-bed community nursing home. The applicant contends that given the existing need for additional beds in the area, current availability is insufficient, and its project aims to address that gap.

Polk SNF notes that as of August 9, 2024, Polk County has 25 facilities and 3,132 licensed community nursing home beds. HSP Polk County, LLC holds CON #10799 for 120 beds and the subdistrict's 87.27 percent occupancy during the 12 months ending June 30, 2024.

Currently, Polk County has 18 beds per one thousand seniors, compared to the state average of 16 beds. By January 1, 2029, due to an increase in the population aged 65 and older, and assuming all approved beds are licensed, the availability rate in Polk County is projected to decrease to just 16 beds per one thousand seniors. Comparatively, Florida's rate is expected to decline to 15 beds per one thousand seniors. This data clearly demonstrates the need for the proposed 150 beds in Subdistrict 6-5 to accommodate the growing demand.

The proposed facility benefits from the expertise of Lion Care Services, which will provide administrative and operational support. The applicant is part of a distinguished network of skilled nursing facilities in Florida. Among Lion Care Services' twelve facilities, eleven are accredited by the Joint Commission. The new physical plant, designed and constructed according to today's standards and codes, ensures a safe and efficient care environment that promotes quality and resident-centered care.

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The analysis presented in Need Analysis, includes maps and demographic data showing that the facility will be situated in a densely populated area, particularly with significant elderly population growth projected over the next five years.

Proximity to acute care hospitals is a critical factor for geographic access. Hospital discharges to nursing homes included 7,776 residents of Polk County aged 65 and older during calendar year 2023. The applicant notes that potential sites are still being evaluated and its map assesses geographic access from Lakeland Regional Medical Center (with 910 beds) and Winter Haven Hospital (with 447 beds) as these hospitals combined accounted for 69.75 percent of all acute care hospital discharges of Polk County residents 65 and over to nursing homes. The map (Figure 3-1 on page 3-3) illustrates the areas within a 30-minute drive time of each facility. The applicant states that the zip codes for each hospital encompass the zip codes in the county with the highest senior population and these areas are also projected to experience the most 65 and over population growth.

Another important aspect of access is the potential economic barriers to obtaining care. The proposal for this project aims to establish a new 150-bed community nursing home that will be Medicare certified, thereby ensuring access for elderly residents in need of rehabilitation services. Although not mentioned in this response, the reviewer notes the applicant projects Medicaid/Medicaid HMO will comprise 35 percent of the facility's year one and year two annual patient days. Medicare covers only the first 100 days after hospital discharge to the SNF and many residents will then qualify for Medicaid.

Polk SNF's Table 3-2 on page 3-5 illustrates the payer mix for Polk County residents aged 65 and older who were discharged from acute care hospitals to nursing homes in 2023. The data demonstrates that the majority of discharges to skilled nursing facilities are covered by Medicare and Medicare Managed Care, with Medicare Managed Care and Medicare representing 7,280 discharges, or nearly 94 percent of the total 7,776 discharges to nursing homes in Polk County. Veterans Affairs and Commercial Health Insurance each account for approximately two percent of total skilled nursing facility discharges. This data highlights the strong reliance on Medicare programs, ensuring that economic barriers to care are minimized for eligible residents.

Polk SNF cites the most recent nursing home utilization data for the twelve-month period ending on June 30 indicates that Polk County facilities average occupancy was 87.27 percent, compared to Florida's average of 84.36 percent. This reflects a rebound following an approximate two-year decline in utilization due to the COVID-19

pandemic from 2020 to 2021. Utilization trends for the most recent five years are detailed below for Polk County and Florida are provided in Table 3-3 on page 3-6. The applicant contends that utilization patterns are returning to pre-pandemic levels and are expected to continue rising in line with the growth rates of the senior population which will increase the demand for nursing home services. Therefore, the applicant concludes that the 150 beds will ensure that there is adequate nursing home capacity in a new, quality facility, meeting the needs of elderly residents requiring skilled nursing care.

Polk SNF LLC addresses Rule 59C-1.030 Florida Administrative Code Health Care Access Criteria on the application's pages 3-7 through 3-9.

- b. Does the applicant have a history of providing quality of care? Has the applicant demonstrated the ability to provide quality care? Is the applicant a Gold Seal program nursing facility that is proposing to add beds to an existing nursing home? Section 408.035(3)(10), Florida Statutes.**

Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832) is one of eleven CCRCs within the Westminster family of communities. Westminster Services manages a total of 800 nursing home beds in its Florida affiliated facilities. In addition to the applicant's facility consisting of 34 sheltered and 34 community nursing home beds, Westminster facilities and bed totals include:

- Westminster Oaks (Leon) — 60 community beds; 60 sheltered beds
- Westminster Woods on Julington Creek (St. Johns) — 55 community beds; five sheltered beds
- Westminster St. Augustine (St. Johns) — 24 community beds; six sheltered beds
- Westminster Palms (Pinellas) — 42 community beds
- Westminster Suncoast (Pinellas) — 120 community beds
- Westminster Point Pleasant (Manatee) — 110 community beds; 10 sheltered beds
- Westminster Towers (Orange) 115 community beds; five sheltered beds
- Westminster Winter Park (Orange) — 80 community beds
- Westminster Baldwin Park (Orange) — 40 community beds

This network of CCRCs provides a range of options for residents, ensuring access to both community and sheltered care tailored to individual needs. Seven Westminster facilities have received five stars, which is the highest rating on their Agency Overall Inspection, while two

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facilities have been awarded four stars. The skilled nursing facilities with lower star ratings are actively engaging in additional quality improvement initiatives to enhance their ratings.

Westminster Lakeland is a five-star rate facility and also has Joint Commission Accreditation. The facility has been recognized by U.S. News & World Report as one of the Best Nursing Homes in Florida, earning an overall rating of four out of five, as well as a perfect short-term rehabilitation rating of three out of three. Westminster Lakeland information on its quality is also contained in the application's Exhibit 4.

Westminster Lakeland employs an electronic health record (EHR) system designed specifically for long-term care facilities, provided by American Health Tech. This electronic system facilitates various important functions, including e-prescribing, documentation of care plans, tracking Minimum Data Set (MDS) measures, and enhancing quality initiatives. The facility is committed to utilizing this EHR to effectively document and manage the care of nursing home residents.

The Quality Assurance and Performance Improvement (QAPI) Plan at Westminster Lakeland is structured to create and sustain a comprehensive, data-driven program that proactively enhances the quality of care and services across the facility. This dynamic document will be continuously updated and refined, aligning with the organization's vision and mission. The primary objectives of the QAPI plan include:

1. Establishing a facility-wide process to identify opportunities for improvement, with a focus on quality of care, quality of life, and resident safety.
2. Addressing gaps within systems or processes to enhance performance.
3. Ensuring sufficient staffing, time, equipment, and technical training resources are available for optimal care delivery.
4. Establishing clear expectations related to safety, quality, resident rights, choice, and respect.
5. Continually improving the quality of care and services provided to all residents.

The QAPI plan is anchored by a set of guiding principles that reflect the organization's beliefs and philosophy regarding quality assurance and performance improvement. These principles inform the overall approach to the QAPI process:

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- **Guiding Principle #1:** QAPI is integrated into management and board functions and is given equal importance to monitoring reimbursement and maximizing revenue.
- **Guiding Principle #2:** The organization employs quality assurance and performance improvement as key elements in decision-making and guiding daily operations.
- **Guiding Principle #3:** The ultimate goal of QAPI is to enhance both the quality of care and the quality of life for residents.
- **Guiding Principle #4:** QAPI encompasses all employees, departments, and services throughout the organization.
- **Guiding Principle #5:** Decisions are grounded in data, incorporating insights and experiences from caregivers, residents, health care practitioners, families, and other stakeholders.
- **Guiding Principle #6:** [This principle is missing in the application.]
- **Guiding Principle #7:** The organization sets performance goals and measures progress toward achieving these goals.
- **Guiding Principle #8:** The organization promotes performance improvement by fostering a culture of mutual support among employees and encouraging accountability for their professional practices.
- **Guiding Principle #9:** There is a culture within the organization that promotes the identification of errors or system breakdowns without penalty, focusing instead on improvement.

Through this QAPI framework, Westminster Lakeland aims to ensure a high standard of care and a positive living environment for all its residents. Westminster Lakeland has developed its QAPI program to be ongoing and comprehensive, ensuring that the scope of services includes all systems of care and services provided. This encompasses the complexities and unique care needs that impact clinical care, quality of life, resident choice, and care transitions, with active participation from all departments within the facility.

Westminster's QAPI program primary focus is to achieve safety and high quality in all clinical interventions while prioritizing autonomy and choice for residents and their representatives in their daily lives. The program leverages the best available evidence to guide its efforts, utilizing data, national benchmarks, published best practices, and clinical guidelines. This evidence-based approach enables the facility to determine appropriate care and effectively define and measure goals related to quality improvement. By fostering a collaborative environment that includes input from various departments and disciplines, Westminster Lakeland aims to create a holistic framework for enhancing the overall

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quality of care and life for its residents. Westminster provides quotes on several aspects of its QAPI facility plan on the application's pages 4-3 and 4-4.

Westminster Lakeland employs a systematic approach to assess when in-depth analysis is necessary to fully understand the underlying issues, their causes, and the implications of any changes. This structured methodology allows the facility to conduct thorough investigations aimed at identifying the root causes of problems that have been identified within the care processes. A range of tools are utilized to map out the current procedures and pinpoint any breakdowns or weaknesses present. The Performance Improvement Project (PIP) subcommittees play a crucial role in identifying specific areas for improvement. PIP subcommittees are responsible for compiling summary reports and analyses of their activities, which they will then present to the Quality Assurance and Assessment (QAA) Committee. These reports will also include recommendations based on the findings.

Root Cause Analysis (RCA) serves as a key problem-solving method within this framework. RCA allows the facility to dissect existing processes and highlight areas that require improvement. The tools available for identifying the causes of problems include the Five Whys, Fishbone Diagram, Flowcharting, and Failure Mode and Effect Analysis (FMEA). Westminster Lakeland's QAPI Plan is included in Exhibit 5 of the application.

Upon admission to Westminster Lakeland, each resident receives a comprehensive Resident Handbook designed to provide essential information about the facility and its services. This handbook includes details such as the facility's mission, important contact numbers, operational hours for amenities like the beauty shop, barber shop, and thrift shop, and information related to Medicare and Medicaid. It also covers topics regarding discharge and transfer procedures, the privacy act statement, and other pertinent information that contributes to a resident's understanding of their new environment.

A critical element of the Resident Handbook is the section dedicated to resident rights. To ensure that residents are fully informed, everyone receives a copy of the Resident's Rights brochure at the time of admission. This brochure outlines the specific rights that residents are entitled to, fostering a culture of respect and dignity within the facility.

For the staff at Westminster Lakeland, training on resident rights is a crucial part of their onboarding process. All employees receive training on these rights when they are hired, and they participate in annual refresher training to reinforce their understanding and commitment.

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Additionally, each employee is provided with their own copy of the resident rights information, ensuring that they are equipped to uphold and advocate for the rights of residents in their daily interactions.

The facility also takes measures to promote awareness of resident rights by publicly displaying a statement that clearly outlines the rights and responsibilities of residents. This display serves as a reminder of the facility's commitment to treating all residents in accordance with these principles, contributing to a safe and supportive environment that prioritizes the well-being and autonomy of each resident. The applicant lists the rights each resident has.

At Westminster Lakeland, activities are thoughtfully designed to enhance treatments outlined in residents' care plans while fulfilling key objectives. These activities reflect residents' interests and skills, providing them with meaningful engagement, enjoyment, and a sense of purpose. They also promote the restoration and adaptation of physical and cognitive functions, allowing residents to maintain and improve their abilities. By encouraging individuals to pursue their hobbies and interests, these activities foster creativity and mastery. Additionally, they maximize personal expression through group involvement, family engagement, and opportunities for independence.

Residents enjoy a wide range of activities, both within the facility and in the surrounding community, including afternoon walks, shopping trips, and various excursions. Overall, Westminster Lakeland is committed to offering engaging activities that enhance health, well-being, and a vibrant community atmosphere.

In summary, Westminster Lakeland's responses showcase its capability to implement a quality assurance program that fosters continuous quality improvement. The applicant has consistently achieved high ratings in federal and state systems, alongside receiving national recognition for its commitment to quality enhancement.

The reviewer notes that Westminster Lakeland had two substantiated complaints citing resident/patient/client rights and administration/personnel. Westminster affiliated nursing homes had 12 substantiated complaints during the 36 months ending December 19, 2024. A substantiated complaint can encompass multiple complaint categories. See the table below.

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**Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland
(CON application #10832) – Westminster Affiliates
Substantiated Complaint Categories
December 19, 2021 – December 19, 2024**

| Complaint Category | Number Substantiated |
|--|-----------------------------|
| Administration/Personnel | 5 |
| Admission, Transfer & Discharge Rights | 2 |
| Elopement | 1 |
| Falsification of Records/Reports | 1 |
| Quality of Care/Treatment | 6 |
| Resident/Patient/Client Abuse | 1 |
| Resident/Patient/Client Neglect | 1 |
| Resident/Patient/Client Rights | 4 |
| Total | 21 |

Source: Agency for Health Care Administration complaint data.

Polk SNF LLC (CON application #10833) is a newly established entity, formed on April 10, 2024, with the purpose of constructing and operating a new nursing home in Subdistrict 6-5, Polk County. The applicant proposes the development of a new 150-bed skilled nursing facility, which will be situated adjacent to a planned assisted living facility.

Polk SNF LLC is affiliated with Lion Care Services, an established long-term care provider that operates 12 Florida skilled nursing facilities. Polk SNF states its affiliation with Lion Care Services underscores a commitment to delivering high-quality care in nursing facilities, as evidenced by Lion Care's history of maintaining Joint Commission Accreditation. Among Lion Care's twelve facilities in Florida, nine currently hold Joint Commission Accreditation (Polk SNF lists eight of these on page 4-2 of the application), showcasing their dedication to quality standards in health care. The Bristol Care Center in Tampa was ranked 38th in Newsweek's Best Nursing Homes in 2022, highlighting its excellence in resident care. Further, the staff at Alhambra Healthcare and Rehabilitation Center in St. Petersburg received recognition as a Quality Improvement Champion by the Health Services Advisory Group, further illustrating the high standards upheld across various facilities.

Research indicates that a limited number of nursing homes achieve Joint Commission Accreditation, with only 1,059 out of over 15,000 community nursing homes nationally accredited as reported in a 2021 McKnight's Long-Term Care News article. This article emphasizes a correlation between Joint Commission status and reduced inspection deficiencies, improved five-star rating components, and enhanced corporate efficiency and quality initiatives. The accreditation process not only aids facilities in managing quality and infection control challenges but is also often a prerequisite for participation in certain health plan networks. Polk SNF LLC contends that it stands to benefit significantly

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from Lion Care's approach to achieving Joint Commission Accreditation, ensuring ongoing quality improvement and exceptional nursing care within the community and resident satisfaction.

The applicant states Lion Care Services mission is dedicated to ensuring that every resident receives the highest quality of care possible and to create a safe, supportive, and compassionate environment where residents can thrive physically, emotionally, and socially. Lion Care Services vision is to be a leading provider of exceptional nursing home care, enhancing residents quality of life and striving to foster an inclusive environment where residents can thrive, and commitment to compassion, integrity, excellence, and innovation.

Lion Care core values include residents being treated with respect, dignity, and compassion, commitment to fostering a culture of empathy and understanding, building strong relationships with residents based on trust and mutual respect, and commitment to providing high-quality care tailored to the unique needs of each resident. Lion Care staff is highly trained and experienced, using evidence-based practices to ensure the best possible care. Collaboration and communication with residents and families, continuous improvement to enhance services, teamwork, an accountability are discussed in detail. Overall, Lion Care Services reflects a commitment to providing compassionate, respectful, and high-quality care in a safe and supportive environment, striving to create a home away from home for our residents and ensure their comfort, safety, and happiness.

Lion Care management emphasizes continuous quality improvement through uniform standards, specific quality improvement goals, and evidence-based clinical pathways to enhance patient outcomes. The Quality Assurance Performance Improvement Plan and the Quality Assurance and Assessment Program ensure that the facility meets and exceeds resident needs and expectations while promoting person-centered care. Residents are actively involved in their own care planning, and their individual needs are prioritized.

Guidance from the American Health Care Association provides resources that support a consistent approach to quality measurement in nursing homes. The Risk Management/Quality Assurance Committee convenes monthly to review performance indicators, addressing any quality

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metrics that fall outside established thresholds. When issues are identified, plans of correction are developed to prevent failures in core care processes, maintaining high standards of care and regulatory compliance. Lion Care Services' QAPI policy and procedures are included in the application's Exhibit 6. Polk SNF has a comprehensive Emergency Management Plan that is detailed for all natural disasters including hurricanes.

Upon admission, each resident receives a Residents' Rights brochure from Florida's Long-Term Care Ombudsman Program. All employees obtain a personal copy of the Residents' Rights and receive training on this material during their first day of orientation, with annual refreshers thereafter. Ensuring residents' rights is a priority for the facility, which coordinates closely with the Ombudsman to ensure that all interactions align with established policies. As part of the quality assurance review, aspects of residents' rights are regularly evaluated, and any breaches or concerns are addressed through the continuous quality improvement process.

Emphasizing activities is essential for meeting the social, psychological, and functional needs of residents. Normalization involves providing meaningful activities that enable each resident to explore their interests, engage in leisure, and enhance participation. These activities encompass both physical and mental exercises, offered in groups and individually. Polk SNF's Exhibit 3 includes its admissions policies, transfer or discharge, resident rights, comprehensive assessments, and care planning – interdisciplinary team policy. The applicant concludes its response highlights its ability to implement a comprehensive quality assurance program that incorporates elements promoting continuous quality improvement and Lion Care facilities have successfully demonstrated the effectiveness of its approach, actively pursuing national recognition and Joint Commission Accreditation to ensure high standards of care and management.

The reviewer notes that Lion Care affiliated nursing homes had 32 substantiated complaints during the period of 36 months ending December 19, 2024. A substantiated complaint can encompass multiple complaint categories. See the table below.

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**Polk SNF LLC (CON application #10833) – Lion Care Affiliates
Substantiated Complaint Categories
December 19, 2021 – December 19, 2024**

| Complaint Category | Number Substantiated |
|--|-----------------------------|
| Administration/Personnel | 3 |
| Admission, Transfer & Discharge Rights | 1 |
| Dietary Services | 1 |
| Elopement | 3 |
| Falsification of Records/Reports | 2 |
| Infection Control | 1 |
| Life Safety Code | 1 |
| Physical Environment | 2 |
| Quality of Care/Treatment | 26 |
| Quality of Life | 2 |
| Resident/Patient/Client Abuse | 1 |
| Resident/Patient/Client Rights | 6 |
| Total | 49 |

Source: Agency for Health Care Administration complaint data.

- c. What resources, including health personnel, management personnel and funds for capital and operating expenditures are available for project accomplishments and operations? 408.035(4), Florida Statutes.**

Applies to both 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.

Florida Presbyterian Homes, Inc. (CON application #10832)

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. Below is our analysis:

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| CON application #10832 Florida Presbyterian Homes, Inc. | | |
|--|----------------------------|----------------------|
| | Most Recent Quarter | Previous Year |
| Current Assets | \$4,865,389 | \$4,912,470 |
| Total Assets | \$58,778,557 | \$57,608,924 |
| Current Liabilities | \$2,627,681 | \$1,721,112 |
| Total Liabilities | \$31,737,924 | \$31,115,583 |
| Net Assets | \$27,040,633 | \$26,493,341 |
| Total Revenues | \$3,925,630 | \$17,383,465 |
| Excess of Revenues Over Expenses | (\$477,057) | (\$213,842) |
| Cash Flow from Operations | (\$138,683) | \$2,580,184 |
| Short-Term Analysis | | |
| Current Ratio (CA/CL) | 1.9 | 2.9 |
| Cash Flow to Current Liabilities (CFO/CL) | -5.28% | 149.91% |
| Long-Term Analysis | | |
| Long-Term Debt to Net Assets (TL-CL/NA) | 107.7% | 111.0% |
| Total Margin (ER/TR) | -12.15% | -1.23% |
| Measure of Available Funding | | |
| Working Capital | \$2,237,708 | \$3,191,358 |

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

Capital Requirements and Funding:

The applicant indicates on Schedule 2 capital projects totaling \$243,252 which includes this project (\$83,080). Schedule 2 also listed amount in hand of 243,252.

The applicant indicates on Schedule 3 of its application that funding for the project will be provided by cash on hand. The applicant's overall financial position is weak; however, it has more than enough working capital to fund the capital budget.

Conclusion:

Funding for this project should be available as needed.

Polk SNF LLC (CON application #10833) - The applicant is a development stage company with only \$250,000 in cash, with no operations. The applicant indicated that funding will be provided by cash on hand and a third-party interest. In the case of a development stage company with no historic operations in which to evaluate short- and long-term financial positions, we will evaluate the applicants' access to capital on a standalone basis for this project and any others cited in the application.

Capital Requirements and Funding:

The applicant indicates on Schedule 2 capital projects totaling \$58,204,000, which consists solely of this project.

The applicant indicates in Schedule 3 of its application that funding for the project will be provided by cash on hand (\$250,000) & non-related company financing (\$57,954,000). The applicant provided a letter of interest, dated December 11, 2024, from Renasant Bank stating their interest in providing construction financing.

A letter of interest is not considered a firm commitment to lend. Since this is a development stage company with no historic financial position to evaluate, we cannot make a determination on the likelihood of acquiring the debt funding necessary.

Conclusion:

Funding for this project is in question.

d. What is the immediate and long-term financial feasibility of the proposal? Section 408.035(6), Florida Statutes.

Applies to both applicants - The immediate and long-term financial feasibility of the project is tied to expected profitability. The purpose of our analysis for this section is to evaluate the reasonableness of the applicant's profitability projections and, ultimately, whether profitability is achievable for this project. Our analysis includes an evaluation of net revenue per patient day (NRPD), cost per patient day (CPD), nurse staffing ratios, and profitability. We compared the NRPD, CPD, and profitability to actual operating results from skilled nursing facilities as reported in the Florida Nursing Home Uniform Reporting System. For our comparison group, we selected skilled nursing facilities within the district removing any outliers that were the result of low occupancy or unusual payer mix relative to the other skilled nursing facilities in the district. Comparison group data was adjusted for inflation to match the second-year projection (inflation factor was based on the New CMS Market Basket Price Index as published in the 2nd Quarter 2024, Health Care Cost Review).

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

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Florida Presbyterian Homes, Inc. (CON application #10832)

| | PROJECTIONS PER APPLICANT | | COMPARATIVE GROUP VALUES PPD | | |
|------------------|---------------------------|---------|---------------------------------|--------|--------|
| | Total | PPD | Highest | Median | Lowest |
| Net Revenues | 9,220,700 | 487 | 456 | 373 | 302 |
| Total Expenses | 9,079,200 | 479 | 461 | 394 | 293 |
| Operating Income | 141,500 | 7 | 35 | -8 | -67 |
| Operating Margin | 1.53% | | Comparative Group Values | | |
| | Days | Percent | Highest | Median | Lowest |
| Occupancy | 18,942 | 76.32% | 94.90% | 90.21% | 69.46% |
| Medicaid | 7,009 | 37.00% | 84.04% | 60.94% | 34.68% |
| Medicare | 5,114 | 27.00% | 56.74% | 19.99% | 8.50% |

Staffing:

Section 400.23(3)(b)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.0 hours of direct care per resident per day, a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day, and 3.6 hours of total direct care staffing. Based on the information provided in Schedule 6, the applicant's projected staffing meets this requirement.

The projected NRPD and CPD are above the group range with profit falling within the group range. This applicant is part of a continuing care retirement community, and both its services and revenue would be expected on the high end of the range. In addition, occupancy would be expected on the low end of the range further boosting the NRPD and CPD higher relative to the group. Although both NRPD and CPD are above the group range the profit is not unreasonable. In addition, the total cost appears to include at least the minimum staffing required. Therefore, the overall profitability appears achievable.

Operating profits from this project are expected to increase from \$2,900 in year one to \$141,500 in year two.

Conclusion:

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

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Polk SNF LLC (CON application #10833)

| | PROJECTIONS PER APPLICANT | | COMPARATIVE GROUP VALUES PPD | | |
|------------------|---------------------------|---------|---------------------------------|--------|--------|
| | Total | PPD | Highest | Median | Lowest |
| Net Revenues | 22,274,400 | 471 | 483 | 395 | 320 |
| Total Expenses | 21,320,800 | 451 | 488 | 417 | 310 |
| Operating Income | 953,600 | 20 | 35 | -8 | -67 |
| Operating Margin | 4.28% | | Comparative Group Values | | |
| | Days | Percent | Highest | Median | Lowest |
| Occupancy | 47,311 | 86.41% | 94.90% | 90.21% | 69.46% |
| Medicaid | 16,559 | 35.00% | 84.04% | 60.94% | 34.68% |
| Medicare | 26,021 | 55.00% | 56.74% | 19.99% | 8.50% |

Staffing:

Section 400.23(3)(b)(1), Florida Statutes, specifies a minimum certified nursing assistant staffing of 2.0 hours of direct care per resident per day, a minimum licensed nursing staffing of 1.0 hour of direct resident care per resident day, and 3.6 hours of total direct care staffing. Based on the information provided in Schedule 6, the applicant’s projected staffing meets this requirement.

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

Operating profits from this project are expected to increase from a net loss of \$2,535,200 in year one to a net profit of \$953,600 in year two.

Conclusion:

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

e. Will the proposed project foster competition to promote quality and cost-effectiveness? Section 408.035(7), Florida Statutes.

Both applicants - Strictly from a financial perspective, the type of competition that would result in increased efficiencies, service, and quality is limited in health care. Cost-effectiveness through competition is typically achieved via a combination of competitive pricing that forces more efficient cost to remain profitable and offering higher quality and additional services to attract patients from competitors. Since Medicare and Medicaid are the primary payers in the nursing home industry, price-based competition is limited. With a large portion of the revenue stream essentially fixed on a per patient basis, the available margin to increase quality and offer additional services is limited. In addition, competitive forces truly do not begin to take shape until existing business’ market share is threatened. The existing health care system’s

barrier to price based competition via fixed price payers limits any significant gains in cost-effectiveness and quality that would be generated from competition.

Conclusion:

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

- f. Are the proposed costs and methods of construction reasonable? Do they comply with statutory and rule requirements? Section 408.035(8), Florida Statutes; Chapter 59A-4, Florida Administrative Code.**

Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832) - The codes and standards regulating the design and construction of skilled nursing facilities are the same for beds licensed as sheltered beds and community beds. The proposed license conversions do not alter the use or function of the resident rooms or support spaces. It is the position of the Office of Plans and Construction that a review of the architectural submissions is unnecessary since the existing beds have already been reviewed and approved by the Agency for use as skilled nursing beds in accordance with Florida Statutes 400.232 and Florida Administrative Code 59A-4.133.

The applicant is advised to contact the Agency's Office of Plans and Construction if the conversion involves any modifications or alteration of the physical plant.

Polk SNF LLC (CON application #10833) - The applicant has submitted all information and documentation necessary to demonstrate compliance with the architectural review criteria. The cost estimate for the proposed project provided in Schedule 9, Table A and the project completion forecast provided in Schedule 10 appear to be reasonable. A review of the architectural plans, narratives and other supporting documents did not reveal any deficiencies that are likely to have significant impact on either construction costs or the proposed completion schedule.

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

- g. **Does the applicant have a history of and propose the provision of health services to Medicaid patients and the medically indigent? Does the applicant propose to provide health services to Medicaid patients and the medically indigent? Section 408.035(9), Florida Statutes.**

Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832) notes its facility is an active participant in both Medicare and Medicaid programs, providing benefits to eligible residents. While the applicant's table lists "Fleet Landing", Westminster's narrative indicates that the percentage of Medicaid days relative to total patient days has increased from 26.4 percent in 2021 to 38.7 percent in 2023. The Agency's data shows the facility provided 7,489 community patient days and 6,042 Medicaid days (80.68 percent of community days total) during the 12 months ending June 30, 2024.

The applicant projects Medicaid Managed Care will comprise 24.8 percent of the project's and 37.0 percent of the 68-bed facility's total annual year one and year two patient days.

The applicant notes that charity care does not exist in nursing homes because qualification for Medicaid enrollment is based on a means test, which means that individuals with little or no assets qualify to be Medicaid recipients.

Polk SNF LLC (CON application #10833) provides Lion Care's 12 affiliated facilities Medicaid history for the 12-month periods beginning July 2021 and ending June 2024 - 36.54 percent of the total patient days during the 12 months ending June 2022 were Medicaid days, which increased to 66.37 percent for the 12 months ending June 2024.

Medicaid Managed Care is expected to account for 35 percent of total facility's year one and year two annual patient days.

F. SUMMARY

Florida Presbyterian Homes, Inc. d/b/a Westminster Lakeland (CON application #10832) proposes to add 34 community nursing home beds to Westminster Lakeland through the conversion of 34 sheltered beds in Subdistrict 6-5 (Polk County). The facility's 68 beds will all be community nursing home beds upon completion of the project.

Total project cost is \$83,080. The bed conversion project does not involve construction or renovation.

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The applicant expects issuance of license in June of 2025 and initiation of service in July of 2025.

Westminster does not propose any conditions to project approval.

Polk SNF LLC (CON application #10833) proposes to establish a 150-bed community nursing home in Subdistrict 6-5 (Polk County). The applicant is an affiliate of Lion Care Services, which operates 12 skilled nursing facilities in Florida.

Total project cost is \$58,204,000. The 150-bed project involves 102,703 GSF of new construction and a total construction cost of \$38,513,600.

Polk SNF expects issuance of license in June of 2027 and initiation of service in July of 2027.

The applicant does not propose any conditions to project approval.

Need:

- **Both** applications were filed in response to the 184-bed published need – Westminster for 34 beds and Polk SNF LLC for 150 beds.
- **Westminster Lakeland** major need justifications include:
 - The 65 and over Polk County population of 173,771 (21.7 percent of the total) in January 2024, which is projected to increase to 191,493 or 22.7 percent of the total January 2027 population
 - CY 2023 Polk County MDC hospital discharges to nursing homes support need for Westminster’s rehabilitation services
 - Polk County presently has 19 nursing home beds per 1,000 persons aged 65 and older, which is projected to decrease to 17 beds per 1,000 seniors with or without the project
 - The facility’s location will enhance access within the area that has the strongest growth and largest portion of Polk County seniors and improve access to Westminster’s quality rehabilitation services which focus on rehab therapies to return patients home.
 - Westminster projects the total 68-bed facility will have 18,936 patient days in year one (76.29 percent occupancy) and 18,942 days (76.32 percent occupancy) in year two
- **Polk SNF LLC** presents population and dynamics for the age 65 and over population indicating these clearly support need for its project. This includes:

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- The 65 and over Polk County population growth from 173,771 in January 2024, to 203,602 in January 2029 resulting in a five-year growth rate of 17.17 percent
- Polk County MDC discharges from hospital to nursing homes for CY 2023 support need for Lion Care's programs
- Polk County presently has 18 nursing home beds per 1,000 persons aged 65 and older, which is projected to decrease to 15 beds per thousand without the project and 17 beds per thousand with the project
- Polk SNF projects the 150-bed facility will have 26,686 patient days in year one (48.61 percent occupancy) and 47,311 days (86.41 percent occupancy) in year two

Quality of Care:

- **Both** applicants provided detailed descriptions of the ability to provide quality care
- **Florida Presbyterian Homes, Inc** affiliates had 12 substantiated complaints with 21 categories cited during the 36 months ending December 19, 2024, and within those, Westminster Lakeland had two complaints in two categories
- **Polk SNF** - Lion Care's 12 affiliates had 32 substantiated complaints with 49 categories cited

Financial Feasibility/Availability of Funds:

Florida Presbyterian Homes, Inc. (CON application #10832)

- Funding for this project should be available as needed.

Polk SNF LLC (CON application #10833)

- Funding for this project is in question.

Both applicants

- The project appears to be financially feasible based on the projections provided by the applicant.
- The project is not likely to have a material impact on competition to promote quality and cost-effectiveness.

Architectural:

Florida Presbyterian Homes, Inc. (CON application #10832)

- The codes and standards regulating the design and construction of skilled nursing facilities are the same for beds licensed as sheltered beds and community beds. The proposed license

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conversions do not alter the use or function of the resident rooms or support spaces.

- The applicant is advised to contact the Agency's Office of Plans and Construction if the conversion involves any modifications or alteration of the physical plant.

Polk SNF LLC (CON application #10833)

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

Medicaid/Indigent Care:

- **Florida Presbyterian Homes, Inc.** provides Westminster Lakeland's CYs 2011-2013 Medicaid history and projects Medicaid Managed Care will be 24.8 percent of the 34 bed project's and 37.0 percent of the 68-bed facility's year one and year two total annual patient days
- **Polk SNF LLC** provides Lion Care affiliates most recent three-year Medicaid history and projects Medicaid Managed Care will be 35 percent of year one and year two total annual patient days

G. RECOMMENDATION

Approve CON #10832 to add 34 community nursing home beds through the conversion of 34 sheltered nursing home beds in District 6, Subdistrict 5, Polk County. The total project cost is \$83,080.

Approve CON #10833 to establish a new 150-bed community nursing home in District 6, Subdistrict 5, Polk County. The total project cost is \$58,204,000. The project involves 102,703 GSF of new construction and a total construction cost of \$38,513,600.

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: February 14, 2025



James B. McLemore
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Certificate of Need



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