



Florida Agency for Health Care Administration

000640100 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Hendry County Hospital Authority
 Hendry Regional Convenient Care Center
 450 S. Main Street, Suite 1
 Labelle, FL 33935

Provider Number : 000640100
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	122.68	124.52	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
#655 / H55 Inpatient Respite Care			
#656 / H56 General Inpatient Care			
#659 Room and Board			

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Distribution:

- Fiscal Agent
- Contract Management
- Permanent File
- Program Development:

W.Rydell Samuel, Administrator 
 Medicaid Cost Reimbursement Analysis

_____ For information Only (No Change in rate)



Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Adventist Health System
 Family Practice Center of Avon Park
 1006 W. Pleasant Street
 Avon Park, FL 338252966

Provider Number : 000707900
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	83.63	84.89	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Live Oak HMA, LLC
Shands Live Oak RHC
1426 Canyon Avenue, NE, Unit B
Live Oak, FL 32064

Provider Number : 002351900
Date : 09/27/2019
Fiscal Year End : N/A
Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	140.77	142.88	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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 Medicaid Cost Reimbursement Analysis



Florida Agency for Health Care Administration

002352500 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Starke HMA, LLC
 Shands Starke RHC
 1550 S. Water Street
 Starke, FL 320914511

Provider Number : 002352500
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	173.81	176.42	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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Florida Agency for Health Care Administration

002954700 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Adventist Health Systems- FL Hosp. Heartland Med Ctr	Provider Number : 002954700
Florida Hospital Wauchula Pioneer Medical Center	Date : 09/27/2019
515 Carlton Street	Fiscal Year End : N/A
Wauchula, FL 338733407	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	118.64	120.42	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
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Florida Agency for Health Care Administration

002954704 - 2019/10

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2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers


Adventist Health System Sunbelt	Provider Number : 002954704
Florida Hospital Wauchula Frostproof Family Health	Date : 09/27/2019
200 S Scenic Highway	Fiscal Year End : N/A
Frostproof , FL 33843	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	120.58	122.39	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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005955000 - 2019/10

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2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Calhoun Liberty Hospital Assoc.
 Calhoun Liberty Hospital Primary Care Clinic
 20370 NE Burns Ave.
 Blountstown, FL 324241045

Provider Number : 005955000
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	85.47	86.75	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
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W.Rydell Samuel, Administrator 
 Medicaid Cost Reimbursement Analysis

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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Sacred Heart Medical Group on the Gulf	Provider Number : 008004300
	Date : 09/27/2019
55 Avenue E	Fiscal Year End : N/A
Apalachicola, FL 323201763	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	120.11	121.91	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
#655 / H55 Inpatient Respite Care			
#656 / H56 General Inpatient Care			
#659 Room and Board			

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Florida Agency for Health Care Administration

010834300 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Baker County Medical Services
 Baker Rural Health Clinic
 159 N 3rd Street
 Macclenny, FL 320632103

Provider Number : 010834300
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	120.10	121.90	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Jay Hospital
Century Medical Center
8401 N Century BLVD
Century, Fl 32535

Provider Number : 018056100
Date : 09/27/2019
Fiscal Year End : N/A
Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	80.22	81.42	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Hendry Family Care Ctr
Forbes Family Care Ctr
500 West Sagamore Ave
Clewiston, FL 33440

Provider Number : 253668401
Date : 09/27/2019
Fiscal Year End : N/A
Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	146.51	148.71	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
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 Medicaid Cost Reimbursement Analysis



Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Healthmark of Walton	Provider Number : 372384401
	Date : 09/27/2019
4415 US Hwy 331	Fiscal Year End : N/A
DeFuniak Springs, Fl 32435	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	152.77	155.07	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Chipley RHC
 P.O. Box 918
 Chipley, FL 32428

Provider Number : 660005100
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	108.98	110.62	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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Florida Agency for Health Care Administration

660037900 - 2019/10

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2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Blountstown Family Practice	Provider Number : 660037900
	Date : 09/27/2019
17808 NE Charley Johns St	Fiscal Year End : N/A
Blountstown, FL 32424	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	83.37	84.62	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
#655 / H55 Inpatient Respite Care			
#656 / H56 General Inpatient Care			
#659 Room and Board			

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Distribution:

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 Medicaid Cost Reimbursement Analysis

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Florida Agency for Health Care Administration

660037901 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Monticello Family Medicine	Provider Number : 660037901
	Date : 09/27/2019
1549. S. Jefferson St	Fiscal Year End : N/A
Monticello, FL 32344	Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	83.37	84.62	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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660037902 - 2019/10

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Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Quincy Medical Group
178 LaSalle Dr
Quincy, FL 32351

Provider Number : 660037902
Date : 09/27/2019
Fiscal Year End : N/A
Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	83.37	84.62	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
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Florida Agency for Health Care Administration

660037903 - 2019/10

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Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Wakulla Family Medicine
15 Council Moore Rd
Crawfordville, Fl 32327

Provider Number : 660037903
Date : 09/27/2019
Fiscal Year End : N/A
Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	83.37	84.62	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
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660049201 - 2019/10

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Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Gateway Medical Clinic - Crestview	Provider Number : 660049201
	Date : 09/27/2019
127-C Redstone Ave	Fiscal Year End : N/A
Crestview, FL 32539	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	84.40	85.66	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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 Medicaid Cost Reimbursement Analysis



Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

N. Okaloosa Medical Center
 1045 US Hwy 331, Ste D
 DeFuniak, FL 32435

Provider Number : 660058100
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	84.40	85.66	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
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Florida Agency for Health Care Administration

660083200 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Lake Butler Hospital RHC
 850 E Main St
 Lake Butler, FL 32054

Provider Number : 660083200
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	165.65	168.14	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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W.Rydell Samuel, Administrator 
 Medicaid Cost Reimbursement Analysis



Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Doctor's Memorial Hospital
Steinhatchee Family Center
1209 First Ave S.
Steinhatchee, Fl 32359

Provider Number : 660092100
Date : 09/27/2019
Fiscal Year End : N/A
Audit Status : N/A


Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	290.41	294.76	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
#655 / H55 Inpatient Respite Care			
#656 / H56 General Inpatient Care			
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Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Northwest Florida Community Hospital
 3250 Main Street
 Vernon, FL 32462

Provider Number : 660122700
 Date : 09/27/2019
 Fiscal Year End : N/A
 Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	122.05	123.88	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
#655 / H55 Inpatient Respite Care			
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Florida Agency for Health Care Administration

660123500 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers


Doctor's Memorial Family Medicine	Provider Number : 660123500
DMH Mayo Family Medicine	Date : 09/27/2019
P.O. Box 228	Fiscal Year End : N/A
Mayo, Fl 32066	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	161.02	163.44	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
#0551 / 0561 Continuous Home Care - SIA			
#655 / H55 Inpatient Respite Care			
#656 / H56 General Inpatient Care			
#659 Room and Board			

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Florida Agency for Health Care Administration

660124300 - 2019/10

State of Florida Office of Medicaid Cost Reimbursement planning and Finance

2727 Mahan Drive - Mail Stop 23

Tallahassee, Florida 32308

Medicaid Reimbursement Per Diem Rates for Non-Institutional Providers

Doctor's Memorial Family Practice	Provider Number : 660124300
	Date : 09/27/2019
1702 S. Jefferson St	Fiscal Year End : N/A
Perry, FL 32348	Audit Status : N/A

Provider Type:	Current Rate	New Rate	Effective Date
Rural Health Clinic	108.98	110.62	10/01/2019
Swing-Bed Provider			
Federally Qualified Health Centers			
Hospice Provider			
#651 / H51 Routine Home Care (1-60)			
#651a / H5L Routine Home Care (61 +)			
#652 / H52 Continuous Home Care			
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