



RON DESANTIS
GOVERNOR

MARY C. MAYHEW
SECRETARY

MEMORANDUM

Date: July 13, 2020
To: Johnnie Mae Peters, SMA Supervisor, Finance and Banking
From: *ZD* Zainab Day, Regulatory Analyst Supervisor
Subject: Retroactive Nursing Facility Per Diem Rates

We have revised the following Nursing Facility Per Diem Rates. Attached are the rate change notices for HP.

	<u>Provider Name</u>	<u>Provider Number</u>	<u>Type of Action</u>	<u>Number of Rate Change Notices</u>
1.	Tamarac Rehabilitation and Health Center	0 213098-00	Covid-19 Rate Adjustment	1
			<u>TOTAL:</u>	1

If you have any questions regarding the above contact Zainab Day 412-4798.
ZD/nr



		Single Level	Level H: AIDS	Single Level	Single Level		
Provider Number	Effective Date Format YYYYMMDD	Intermediate I (IN1)	Skilled AIDS (SKA)	Intermediate II (IN2)	Skilled (SKD)	MFAO number	Audit Number
021309800	20200720	570.67	0.00	244.97	244.97	88072-20	



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

TAMARAC REHABILITATION AND HEALTH CENTER
7901 NW 88TH AVENUE
TAMARAC, FL 33321

Provider Number: 0 213098-00
Date: 7/10/2020
Fiscal Year End: 12/31/2018
Audit Status: Unaudited

Provider Type:

Nursing Home

Single Level - Bed Hold

Intermediate I - Standard Medicaid Rate

Current Rate	New Rate	Effective Date
<u>244.97</u>	<u>244.97</u>	<u>7/20/2020</u>
<u>0.00</u>	<u>570.67</u>	<u>7/20/2020</u>

Rate Type:	
<input type="checkbox"/> Interim	<input checked="" type="checkbox"/> Prospective
<input type="checkbox"/> Total Interim	<input checked="" type="checkbox"/> Total Prospective
<input type="checkbox"/> Interim Component	<input type="checkbox"/> Total Prospective with Interim Component
<input type="checkbox"/> Settlement based on cost	
<input type="checkbox"/> Prior Provider Prospective data	

Basis:	
<input type="checkbox"/> Budget	
<input checked="" type="checkbox"/> Unaudited costs	
<input type="checkbox"/> Field audited costs	
<input type="checkbox"/> Desk audited costs	

Changes:	
<input type="checkbox"/> Rate Semester Change	
<input checked="" type="checkbox"/> COVID-19 Rate Adjustment effective 7/20/2020	

Distribution:

Contract Management / Fiscal Agent

Permanent File

For Information Only

No Change in Rate

Home Office:

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5310 NW 33rd Avenue Suite
211 Ft. Lauderdale, FL 33309

Zainab Day

Medicaid Cost Reimbursement Planning and Finance