



RON DESANTIS  
GOVERNOR

MARY C. MAYHEW  
SECRETARY

**MEMORANDUM**

**Date:** July 17, 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.	Avante at Orlando Inc.	0 223808-00	Covid-19 Rate Adjustment	1
			<b><u>TOTAL:</u></b>	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
022380800	20200716	573.86	0.00	248.16	248.16	88097-20	



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**

AVANTE AT ORLANDO INC.	Provider Number:	0 223808-00
2000 NORTH SEMORAN BOULEVARD	Date:	7/16/2020
ORLANDO, FL 32807	Fiscal Year End:	12/31/2017
	Audit Status:	Unaudited

**Provider Type:**

	Current Rate	New Rate	Effective Date
<b>Nursing Home     Single Level - Bed Hold</b>	<b><u>248.16</u></b>	<b><u>248.16</u></b>	<b><u>7/16/2020</u></b>
<b>Intermediate I - Standard Medicaid Rate</b>	<b><u>0.00</u></b>	<b><u>573.86</u></b>	<b><u>7/16/2020</u></b>

<b>Rate Type:</b>	
<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	

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

<b>Changes:</b>	
<input type="checkbox"/> Rate Semester Change	
<input checked="" type="checkbox"/> COVID-19 Rate Adjustment effective 7/16/2020	

**Distribution:**

Contract Management / Fiscal Agent

Permanent File

For Information Only

No Change in Rate

Home Office:

Avante Group Inc. 4601 Sheridan Street Suite 500 Hollywood, FL 33021
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**Zainab Day**

Medicaid Cost Reimbursement Planning and Finance