



Florida Agency For Health Care Administration
 Office of Medicaid Cost Reimbursement Planning and Analysis
 2727 Mahan Drive - Mailstop 23 Tallahassee, Florida 32308

0195964-00 – 07/01/20

Medicaid Reimbursement Rate Change Form

Kindred Hospitals East-SNU
 1859 Van Buren Street
 Hollywood, FL 33020

Provider Number: 0195964-00
 Date: July 1, 2020
 County: Broward

Provider Type:

HOSPITAL - SNU

<u>Current Rate</u>	<u>New Rate</u>	<u>Effective Date</u>
<u>\$240.64</u>	<u>\$243.91</u>	<u>7/1/2020</u>

BASIS: Nursing Home Prospective County Average

W. Rydell Samuel
 Medicaid Cost Reimbursement Analysis

DISTRIBUTION:
 Hospital
 AHCA
 Contract Management

_____ For Information Only
 (No Change In Rate)



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0100706-05 – 07/01/20

Medicaid Reimbursement Rate Change Form

Shands Jacksonville Medical Center-SNU
 655 W 8th Street
 Jacksonville, FL 32209


Provider Number: 0100706-05
 Date: July 1, 2020
 County: Duval

Provider Type:

HOSPITAL - SNU

<u>Current Rate</u>	<u>New Rate</u>	<u>Effective Date</u>
\$220.58	\$223.97	7/1/2020

BASIS: Nursing Home Prospective County Average


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0111341-01 – 07/01/20

Medicaid Reimbursement Rate Change Form

Lee Memorial Health System-SNU
 13960 Plantation Road
 Fort Myers, FL 33912

Provider Number: 0195964-00
 Date: July 1, 2020
 County: Lee

Provider Type:

HOSPITAL - SNU

<u>Current Rate</u>	<u>New Rate</u>	<u>Effective Date</u>
\$228.19	\$231.29	7/1/2020

BASIS: Nursing Home Prospective County Average

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